



The Society of Thoracic Surgeons

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March 30, 2015

Henry N. Wixon
Chief Counsel
National Institute of Standards and Technology
100 Bureau Drive, Mail Stop 1052
Gaithersburg, MD 20899

RE: Certification Program for Access to the Death Master File

Dear Mr. Wixon,

On behalf of The Society of Thoracic Surgeons (STS), I appreciate the opportunity to provide comments on a proposed rule relating to the establishment of a certification program for access to the Social Security Death Master File (DMF). Founded in 1964, STS is an international not-for-profit organization representing more than 6,900 cardiothoracic surgeons, researchers, and allied health care professionals in 90 countries who are dedicated to ensuring the best surgical care for patients with diseases of the heart, lungs, and other organs in the chest. The mission of the Society is to enhance the ability of cardiothoracic surgeons to provide the highest quality patient care through education, research, and advocacy.

The Society developed the STS National Database in 1989 as an initiative for quality improvement and patient safety. The STS National Database has three components – Adult Cardiac, General Thoracic, and Congenital Heart Surgery. STS has also been able to develop a data repository to track patient safety and real-world outcomes related to transcatheter aortic valve replacements as part of a partnership with the American College of Cardiology (ACC) through the STS/ACC TVT Registry. The TVT Registry and STS National Database do not collect long-term clinical data, but the ability to link these registries with a full DMF file prior to 2011 permitted confirmation of patient life status. Research based on this information improves surgical outcomes, helps with patient decision-making on treatment options, and enhances the quality of patient care.

In March 2014, STS submitted comments in response to a request for information in which we outlined how our quality improvement activities demonstrate legitimate use and reflect our central mission mentioned above. We also detailed our rigorous privacy protocols and the extent to which our system protects data while also complying with the Health Insurance Portability and Accountability Act standards, the Federal Information Security Management Act, and other privacy and security regulations.

STS has not yet applied to become a certified entity primarily because, as of 2011, the DMF content available under “limited access” no longer includes

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crucial death information. Verifying the life status of patients is paramount to generating clinical and longitudinal comparative effectiveness research to enhance patient outcomes and evaluate alternative treatments. STS acknowledges the impetus behind the decision to limit access to the DMF is to ensure the protection and appropriate use of personal information. However, the incomplete data contained in the limited access DMF – a result of the rescinded policy to share death reports from states – cripples our ability to advance our quality and research initiatives that are designed to improve the delivery of, and access to, quality care.

While a certification program to access the DMF is a key element to preventing fraud and abuse, achieving certification would not help the STS regain access to a full comprehensive set of data that is needed to catalogue outcomes, improve care, and potentially lower health care costs by identifying the most efficient and effective procedures. The Society has consistently commented on DMF activity because of the valuable quality improvement opportunities a full DMF file has previously facilitated. STS would be interested in applying for a certification process should access to the full DMF be reinstated. A comprehensive DMF would enable the Society to once again utilize clinical data combined with claims information to provide long-term information on patient treatments as well as increase awareness of mortality and morbidity indicators.

Thank you for considering our comments regarding access to the DMF. Should you have any further questions or if you would like to discuss this issue further, please contact Courtney Yohe, Director of STS Government Relations at 202-787-1222 or by e-mail cyohe@sts.org.

Sincerely,



Mark S. Allen, MD

President