![Texas Health and Human Services | Texas Department of State Health Services]

TEXAS DSHS

FAQ

FREQUENTLY ASKED QUESTIONS

Rev: 4/2022

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Please note that the directives offered here are regarding fulfilling your state reporting obligations to the Texas Department of State Health Services (DSHS). Be sure to reference your local health authority for any local reporting directives.

Registration

My facility is already submitting COVID-19 results to the local health department. Do I still have to submit to DSHS?

Yes, the State of Texas is a dual reporting state. Facilities must follow both local *and* state mandates for reporting.

My facility is already submitting COVID-19 results to the National Healthcare Safety Network (NHSN). Do I still have to submit to DSHS?

If you are reporting your results to NHSN, you do not need to report to DSHS, as NHSN will report your results to the state.

My facility is already submitting COVID-19 results to the Centers for Disease Control and Prevention (CDC)'s Simple Report. Do I still have to submit to DSHS?

If you are reporting your results via SimpleReport, you do not need to report to DSHS, as USDS will report your results to the state

How do I begin the process of submitting COVID-19 results to the state?

The first step is to register your site(s) here. After registration, we will send you the necessary documents and instructions for reporting your results to DSHS.

I have registered my facility(s); how do we proceed?

Texas DSHS will reach out to you with instructions for next steps after receiving your registration form and confirming that your CLIA is valid.

Can I fax email, mail, or phone you my facility's results?

Per the Federal CARES Act, sites are required to report results submitting HL7 or CSV files via sFTP.

Can I email DSHS my facility's results in a spreadsheet?

E-mail is not a secure method for protected health information (PHI) transfer or patient identifying information (PII), Texas DSHS will not accept reports via this method.

My facility is conducting point-of-care antigen tests. We are not a traditional lab facility. Does our facility still have to report test results to the state?

Yes. You are required to submit all COVID-19 test results to the state. The Facility Onboarding User Guide details how non-traditional facilities can register to report to the state.

How often do I have to report COVID results to Texas DSHS? Do I have to report over the weekend?

Each facility is responsible for accurately reporting COVID results to the state within 24hrs of receiving results. If your facility is not open on a weekend or holiday, reports must be submitted on the next business day.

Can our facility submit weekly reports instead of daily?

Reports **MUST** be submitted daily. Timely reporting is extremely important and necessary as our public health agency personnel has to take action to mitigate the spread of infectious disease within the communities.

Testing

I registered, submitted my IP, and connected successfully to the sFTP client. Can our facility start submitting test results?

Before sending reports, your facility must first submit a test file to ensure your facility is compliant with the submission template guidelines and data dictionary. Only if the test file passes validation without any issues, will we approve your facility to submit actual test results.

How should facility test files be structured?

Test files <u>MUST</u> be a .csv file and records <u>MUST</u> resemble real data. Utilize the CSV template and enter test records in accordance with the data dictionary. Please reference the example file naming convention to replace with *Test_Your site's full legal name_the site's legal CLIA number_ current submitted date (e.g., YYYYMMDD)* prior to submitting your file.

Does our facility only submit positive test results?

Facilities are required to submit **ALL** test results, including positive, negative and indeterminates, to DSHS. Contact your local health authority for their requirements for reporting.

Which COVID-19 tests should our facility report to DSHS?

Results for all COVID-19 **tests** must be reported:

- Antigen
- PCR
- Antibody
- Genetic sequencing (contact COVID-19ELR@dshs.texas.gov if your facility is performing genetic sequencing tests)
- POC - Point of Care (can be antigen, PCR, or antibody)
- SARS-CoV-2 component of panel tests that includes additional tests (e.g., flu A, + flu B, RSV)

How does our facility report panel tests?

If the panel test your facility conducts includes tests for COVID-19, please report **ONLY** the

results for the SARS-CoV-2 component of the panel. Ensure that you are reporting the LOINC code corresponding to the SARS-CoV-2 component. Do not use the LOINC order code of panel tests.

One-time Backlog

Do I include the time range that I wasn't submitting results in the file name of my backlog?
Yes, the file name should include the start date and end date. *Backlog_Your site's full legal name_ site's legal CLIA number_start date_end date (e.g., YYYYMMDD)*

When did Texas DSHS stop accepting paper submissions?
The backlog would be from 2022 to present if you have never reported to us electronically before. Since 3/2020, we required facilities to submit results electronically. If facilities were not reporting the results to us via HL7 or CSV, the facility has been out of compliance.

How far back does my facility have to backlog?
The backlog file should only contain labs from 1/1/2022 to present.

Production

What is the LOINC? What LOINC code should the facility utilize?
Logical Observation Identifiers Names and Codes (LOINC) is a common language (set of identifiers, names, and codes) for identifying health measurements, observations, and documents. The **LOINC** website provides current codes for all reporting.

- **Instructions for finding the correct LOINC_Code**
    - Please visit this link https://www.cdc.gov/csels/dls/sars-cov-2-livd-codes.html and download Mapping tool: LIVD SARS-CoV-2 Test Codes.xlsx
    - Once downloaded, open the document and click on the LOINC Mapping tab.
    - Search for the manufacturer and model of the instrument/test kit you are using. You can do this by clicking "Find and Select" or using the Ctrl+F command to search.
    - Scroll to the corresponding column "Test Performed LOINC Code" and use the code for the test you are performing.

What is the Device_Identifier and where can the facility locate the ID? Is this a required field to report?
The combination of Manufacturer and Model name of the device, as listed in the CDC LIVD Mapping Tool is adequate for device identifiers (remove any commas, if present). Your facility may also use primary DI number, as listed in the Access GUDID website. This is a required field and the data dictionary lists each field which is required to report.
- **Instructions for finding the correct Primary DI Number:**

- Please go to Access GUDID website to look up the "Primary DI Number" for the device you are using to report in the "Device_Identifier" field. Make sure the "Primary DI Number" is preserved correctly prior to saving the CSV file.
- To check if the "Primary DI number" is saved correctly (*meaning, the "Primary DI Number" should not have trailing zeros or trailing zeros after the decimal*), open the file in "notepad" to see if the "Primary DI number" is preserved.
- If you make any corrections to the file after that, you will have to repeat the process by making sure the "Primary DI Number" is preserved correctly prior to saving the file again.
- NOTE: If the test you are performing is not listed, use the combination of Manufacturer and Model name of the device, as listed in the CDC LIVD Mapping Tool

Our facility cannot locate the value for a required field. How do we proceed?
Refer to the data dictionary for guidance. Only the format in the data dictionary is permitted.

I am a new staff member replacing the staff member responsible for reporting. The previous staff member is no longer responsible for reporting. What do I do?
Email your question to **COVID-19ELR@dshs.texas.gov** detailing your situation. Make sure to include your facility's CLIA number in the email. We can work to revise and/or correct our contact information for your facility.

Validation
Please refer to the data dictionary for guidance to correct all failed validations.

Can we schedule a call to review validation issues?
The preferred method of communication is through email since multiple individuals monitor the COVID-19 mailbox and we can provide timely, detailed responses to your questions. Please email the specific issues you are experiencing to **COVID-19ELR@dshs.texas.gov** .

Why are all the facility's date fields causing errors?
.csv files accept **ONLY** MM/DD/YYYY formatted fields and must not have timestamps. If dates are not reported in this format, they **WILL** fail validation. If the date field failed validation but it looks correct in Excel, check the underlying text of the file by reviewing the data in Notepad. If the date is not in MM/DD/YYYY format when reviewing the file in Notepad, then the data is not formatted properly.

The CSV looks correct in Excel with no data entry issues. Why is our facility's file submission still failing?
Open the CSV file in Notepad and check for any extra commas at the end of each line, as those

represent extra columns. Remove the extra columns before resubmission.

How can our facility report missing date of birth (DOB)?
If a Date_of_Birth is not known, the field can be left blank. Filling this field with any other information like "Unknown" or "99" will cause file failure. Facilities may also leave the Patient_Age field blank if DOB is unknown. However, if you have the patients DOB and missing age or vice versa, the record will not pass validation.

Our facility changed device Id/instrument's; how do I report this?
Email the device ID, ordered test name, LOINC code, and LOINC text. Facilities may instead submit a test file with 2-3 results for review. Facilities will still need to use the correct naming convention used for test files if the facility decides to send a test file.