ImmTrac2 COVID-19 Reporting Tips

Updated 12/2/21
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Disaster vs. Non-Disaster Requirements

**Non-Disaster**
Administration of AIMS must be entered into the Texas Immunization Registry (Immtrac2), and the “data elements” **must be reported within 30 days** of that medical treatment.

**Disaster**
Doses for new disaster clients **must be entered the same day** into the Immtrac2 system. All new disaster client records without an AIM added to their records will be automatically deleted. Find information on How to Report Disaster Immunizations to ImmTrac2 [here](#).
Immtrac2 Client Types

IA – ImmTrac2 Adult
IC – ImmTrac2 Child
DC – Disaster Consented
DU – Disaster Unconsented
Deceased (null client type) – Reported from vital statistics as deceased. Not searchable/viewable by standard users.
Two Ways to Report in ImmTrac2

Data Exchange

Electronic data exchange with the registry allows organizations to electronically import patient and immunization data into ImmTrac2 without the burden of manual data entry into both an electronic health records (EHR) system and ImmTrac2.


Online Entry (Manual)

If you are not registered for data exchange, you will have to manually enter each patient into ImmTrac2. There is no provision for a mass upload of client data to ImmTrac2.
Disaster AIMS:
Must be reported regardless of Immtrac2 consent status.

If client did sign a “Disaster Information Retention Consent”:
Disaster AIM can be held longer than 5 years

If client did not sign:
Disaster AIM is deleted after 5 years after the end of the disaster

Only adult or legal guardians of the minor client can sign the DIR Consent Form. If no consent, will be reported as a Disaster Unconsented Client
Data Exchange

To find information about Data Exchange go the URL below and find the “Data Exchange Resources:” under the “Providers & Organizations” section.

https://www.dshs.texas.gov/immunize/immtrac/forms.shtm

Naming Convention COVID-19 HL7 File

Example: ABCDOC20301.COVID.hl7

Scenarios requiring an update without deletion of data:

Situations where RXA-21 would be valued as D and Org would resubmit the original data for deletion due to reported incorrect:

- Administering organization (TX IIS ID) in RXA-11.4
- Age or date of birth that changes the patient from a minor to adult or vice-versa
- Vaccine administration date in RXA-3 and RXA-4
- Patient demographics (all data element were incorrect)

Once processed and deleted by ImmTrac2, the corrected data would be reported.

- Processing of the deletions can typically take a minimum of 24 hours (1 business day).
- Correct data should be submitted after the deletion has processed.
Data Exchange

Scenarios requiring existing records to be deleted from ImmTrac2

Situations where RXA-21 would be valued as U for update and the corrected data submitted for correction due to reported:

- Incorrect
  - Lot number in RXA-15
  - Manufacturer code in RXA-17
  - Vaccine code (CVX/NDC) in RXA-5
  - Patient demographics such as misspelled name fields, wrong gender, misspelled street name, missing apartment number, wrong city etc.
    - If a patient’s demographics need to be updated, but the associated immunization was already successfully reported to ImmTrac2, an HL7 message containing only the MSH and PID segments may be sent with the corrected demographics.
- Missing patient demographics such as race or ethnicity
- HL7 data exchange errors, specifically IEE errors

Any record that returned an HL7 data exchange error of CLR, IMR or MER must be corrected and resubmitted with RXA-21 valued as A for add
COVID-19 Vaccine Reporting Example

**CRA Event Information (1)**

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Begin Date</th>
<th>End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novel Coronavirus Pandemic Event</td>
<td>03/01/2020</td>
<td>06/01/2022</td>
</tr>
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</table>

**Priority Group:**
- GPT3 - Children 3-18 years without high risk conditions
- Age will be calculated at the time of Vaccination and included in aggregate reporting.

**Enter New Immunization**

<table>
<thead>
<tr>
<th>Remove</th>
<th>Immunization</th>
<th>^ Trade Name</th>
<th>^ Lot #</th>
<th>Vaccine Eligibility</th>
<th>Prescribed By</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>SARS-COV2</td>
<td>COMIRNATY TS, 10mcg/0.2mL</td>
<td>123ABC</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Reporting for additional doses follows the same steps as reporting for the primary series.
COVID-19 Vaccine Reporting

1 - Priority Group – [Table]
2 - Date Administered --
3 - Immunization –
4 - Trade Name –
5 - Lot # – User Entry
6 - Manufacturer –
7 - Dose – Full, Half. A full dose is one dose, even for 2-series vaccines like Pfizer or Moderna.

Note: Reporting the pediatric vaccine (for ages 5-11) is the same as reporting for the adult vaccine, except the trade names are different, as shown on the right.

4. Pfizer Tradename Guidance

**Ages 5-11**
- **Trade Name:** Comirnaty
- **Manufacturer:** PFR-Pfizer-Wyeth

**Ages 12+**
- **Trade Name:** Pfizer COVID-19 Vaccine
- **Manufacturer:** PFR-Pfizer-Wyeth
For data exchange, Moderna booster dose reporting will be entered the same way as Moderna primary doses. The only difference is that to enter the Moderna booster, you should select “half” to indicate that the dose was a booster.
## GPT Codes

<table>
<thead>
<tr>
<th>Priority Group</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPT1</td>
<td>Pregnant women and infants and toddlers (6 – 35 months old)</td>
</tr>
<tr>
<td>GPT2</td>
<td>Household contacts of infants &lt; 6 months and Children 3 – 18 years old with high-risk conditions</td>
</tr>
<tr>
<td>GPT3</td>
<td>Children 3-18 years without high-risk conditions</td>
</tr>
<tr>
<td>GPT4</td>
<td>Persons 19 - 64 with high-risk conditions and Persons &gt; 65 years old.</td>
</tr>
<tr>
<td>GPT5</td>
<td>Healthy adults 19 - 64 years old.</td>
</tr>
</tbody>
</table>
Replacing Lost Vaccination Cards

Clients will need to fill out the **Authorization to Release Official Immunization History** form and either an:

- Immunization Registry Adult Consent Form/the Minor Consent form or Disaster Information Retention Consent Form

We will accept these forms via email, fax, and mail.

Email: ImmTrac2@dshs.Texas.gov

Forms can be found on our public facing website ImmTrac Forms and Documents (texas.gov)
Resources

**Immtrac2 DSHS webpage:**
https://www.dshs.texas.gov/immunize/ImmTrac/

**User Trainings:**
https://www.dshs.texas.gov/immunize/immtrac/User-Training/

**Forms:**
https://www.dshs.texas.gov/immunize/immtrac/forms.shtm

**Immtrac2 Login Page:**
https://immtrac.dshs.texas.gov/TXPRD/portalInfoManager.do

**Rapid Entry Tool Job Aid:**
https://www.dshs.texas.gov/immunize/covid19/COVID-19-Vaccine-ImmTrac2-Rapid-Entry-Job-Aid.pdf
ImmTrac2 Contact Information

ImmTrac2 Customer Support:
- Email: ImmTrac2@dshs.texas.gov
- Phone: 833-832-7068, option 3 or 800-348-9158, option 1

ImmTrac2 Data Exchange Support:
- Email: ImmTracMU@dshs.texas.gov
- Phone: 800-348-9158, option 3