



TEXAS
Health and Human
Services

Texas Department of State
Health Services

Texas Immunization Registry:

**FAQ for Bidirectional
Data Exchange Testing
Given on
March 8 and 12, 2021**



Resources:

- ImmTrac2 Forms & Documents Page:
<https://www.dshs.texas.gov/immunize/immtrac/forms.shtm>
- ImmTrac2 Training Page:
<https://www.dshs.texas.gov/immunize/immtrac/User-Training/>
- ImmTrac2 website:
<https://immtrac.dshs.texas.gov/TXPRD/portalInfoManager.do>
- ImmTrac2 User, Access, Registration and Renewal Support:
ImmTrac2@dshs.texas.gov
- Data Exchange and Promoting Interoperability Support:
ImmTracMU@dshs.texas.gov

Questions

Q: Is consent required in order for ImmTrac2 to accept non-COVID immunization data?

A: Yes, consent is required for non-COVID immunization data in order for the Texas Immunization Registry to store immunization.

Q: How does an organization initiate a request to have a bidirectional data exchange created between their EHR vendor and ImmTrac2?

A: Organizations should refer to the information and guidance on our [Electronic Data Exchange - Promoting Interoperability](#) page, specifically under Promoting Interoperability: Stage 3, as it has the knowledge, resources, and website an organization will need to review and complete to prepare.

A: Organizations must ensure that their organization meets all criteria before contacting the Registry for information on the Registration of Intent for bidirectional data exchange.

Q: How can we get copies of the slide show?

A: The PP presentation will be posted on our [DSHS website](#) under User Training – Recorded ImmTrac2 Webinars soon.

Q: Once an organization begins the onboarding process, how long does it usually take to start testing?

A: Currently the registry is prioritizing onboarding COVID organizations who are manually submitting data to the registry via ImmTrac2 who are transitioning over to bidirectional data exchange. Organizations who already have an established data exchange account (FTP) will need to continue to report through FTP as this allows the registry to focus on those who need more urgent assistance.



Q: How long does testing/validation take?

A: Testing can take anywhere from four to six weeks.

Q: How many staff will be needed for UAT testing?

A: The team must consist of a mix of staff from both your organization and your EHR vendor. The team should include a subject matter expert, clinical staff, EHR vendor representative, and the POC of the organization.

Q: If a provider is live with ImmTrac2 via batch, can this be fast-tracked at all?

A: Once an organization begins onboarding, it can take anywhere from four to six weeks to complete testing and promoted into production. The length of testing will depend on the readiness of the organization.

Q: Will test patients be used during testing?

A: Yes. Test patients will be needed for Query testing as well as VXU test validations.

Q: Is there a test scenario before affirmation testing?

A: Before beginning testing, your organization will have to complete a simple connection test. It would just be a simple ping message to say, are we connected, and the system would reply, you're connected.

Q: If an organization is looking to only report COVID data, will they still need to test for affirmations?

A: If your organization will only be submitting COVID data without consent, then affirmation testing is not needed.

Q: Can organizations send from non-EHR vendors?

A: The registry works with non-EHR vendors, so long as they are able send HL7 2.5.1 version 1.5 messages and establish a bidirectional SOAP interface.

Q: Who should an organization contact regarding duplicate ImmTrac account for the same organization?

A: Please have the organization's point-of-contact email immtracmu@dshs.texas.gov and request the org codes be merged.

Q: Is web services the only option of queries?

A: Yes, the registry does not support querying through any other method.

Q: Is the bidirectional ROI different than the unidirectional ROI?

A: Yes, the bidirectional ROI is not available on our front-facing website. The Registry will email it directly to the organization's POC once the organization has met all of the requirements listed in the [Bidirectional Readiness Checklist](#).

Q: Where can organizations obtain the WSDL needed to establish a Bidirectional interface?

A: The web service connection uses the CDC WSDL. Please review the Informational Guide on Bidirectional Data Exchange(11-15957) on our [DSHS website](#).

Q: When is the deadline to go live for BiDX?

A: Only organization who are participating in Promoting Interoperability (formerly known as Meaningful Use Stage 3) have a deadline. Please speak with your Promoting Interoperability coordinator to learn more about bidirectional data exchange deadlines that may apply to your organization.

Q: Is the consent affirmation portion of testing a requirement?

A:It's not a requirement but strongly recommended.

Q: If there are different entities under one organization, would each one need to complete their own ROI?

A:If they're under a parent/child hierarchy, only the parent site will need to submit the ROI.

Q: Can we use bidirectional for requesting historical data only and use flat files to report new immunizations?

A:No, once your organization moves to BiDX, your organization must do both queries/VXU via web services.

Q: Is there a sandbox area that organizations can connect to and start testing with before the initial start of testing?

A:No, organizations only gains access to our testing enviroment once they are approved for testing.

Q: Can vendors complete system testing, or do each of their customers need to do their round of testing?

A:In general, yes, each one of an EHR customers would have to do their testing. But we understand that some EHR vendors are set up differently where you have a cloud-based solution where all customers have the same built. If that's the case, please notify the Registry.

Q: Can the bidirectional exchange happen for school districts that are not inputting vaccines?

A:Yes, school districts can utilize bidirectional for query only.

Q: Is there a CSV file upload option available for organization?

A:No, the Registry does not support any CSV file submissions.

Q: Is bidirectional exchange replacing the requirement to report data to ImmTrac2 manually?

A:No, bidirectional is another option to electronically report to ImmTrac2. An organization will have the opportunity to report online, unidirectional, or bidirectional.

Q: Are IHQ files going away?

A:Yes, IHQ files will be faced away; we encourage your organization to transfer over to bidirectional using HL7.

Q: Who would be the person to provide the log-in information for our data exchange account?

A:Once your organization is approved to begin testing, the webservice credentials will be emailed to the organization's point of contact.

Q: Once testing is complete, organizations still have access to the test environment for EHR upgrades and software changes?

A:Once testing is complete, the training environment is disabled. However, the registry can enable it, to allow your organization to perform the required testing.

Q: Do patients still need to be registered manually in ImmTrac2 when using bidirectional data exchange?

A:No, as long as your organization is doing electronic consent affirmations. If your organization decides to skip that requirement, you would still need to add patients manually.



Q: If an organization uses web service for affirmation, would that mean that the vaccine data will reach ImmTrac2 ahead of consent?

A: If an organization uses flat file affirmation via webservice, those affirmations will have to be sent prior to the VXU message. Organization sending affirmation via HL7, PD1-12, may send the affirmation together and immunization record together.