



FAQ for Batch FTP Testing given on Feb. 22 & 26, 2021

Resources

ImmTrac2 Forms & Documents Page:

<https://www.dshs.texas.gov/immunizations/providers/materials>

ImmTrac2 User Training Page:

<https://www.dshs.texas.gov/immunizations/providers/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 registry consent required when uploading data to the registry to prevent it from being rejected?

A: Since the Texas Immunization Registry is a “opt in” registry, a consent is required if the patient wants their immunizations to be stored within the registry.

Q: Do registry consent forms need to be sent or faxed to DSHS?

A: No, the registry consent form remains with the organization that consented the patient.

Q: When submitting test files, is there a recommended number of patient’s or immunizations that need to be included in the files?

A: Your organizations test files should contain an amount of data that mimics your normal patient and immunization population receiving immunizations in a week.

Q: Are there resources for how to submit files or completing testing?

A: We have a few resources available on our DSHS [website](#) that explain the steps and overall processes for establishing and maintaining a data exchange account with the registry, with the most through resource being the Electronic Data Exchange Resource Guide (Stock #11-15231).

Q: What does PID stand for?

A: PID stands for Patient Identification Segment which is an HL7 segment containing the information is that of your patient’s demographic information.

Q: Should data be submitted one file per each patient or is it one file with multiple patients?

A: Organizations should send one file containing multiple patients and their respective immunizations for the week.



Q: If an organization has multiple sites, do we use one data exchange account or does each site have their own data exchange account?

A: A parent organization with multiple sites takes the lead in setting up and managing the data exchange account with the registry and uses it to submit data for itself and all its subsites via the same data exchange account.

Q: What are the HL7 specifications or requirements for submitting a batch file?

A: The HL7 specification and requirements are detailed in our Texas Immunization Registry HL7 2.5.1 Implementation Guide and include the state specific requirements along with the national standards. This is available on our DSHS [website](#).

Q: What does ROI stand for?

A: ROI stands for Registration of Intent. The ROI allows organizations to notify the registry of their intent to establish a data exchange account.

Q: What does the following error mean in the registry's FTP website: "Error - File upload failed. You do not have permission. Please check with the Administrator."

A: This error is notifying the user that they are attempting to upload a file in a folder that doesn't allow uploading of files. To upload files, the user must first click on the "hl7-dropoff" folder then upload the file.

Q: Does the resubmission of corrected patient or immunization data cause a duplicate file?

A: If corrected data is resubmitted in a file with the exact same file name as a previously submitted file then our system will flag that file as a duplicate and not process it. Each file uploaded must be uniquely named so we recommend for you to resubmit the file by adding a "A", "B", "C" etc., to the end of the file so the file name is unique. Here is an example where the original file was

Importcodeyyddd.hl7 but the corrected file is named ImportcodeyydddA.hl7.

Q: Is there a resource for understanding and resolving the data exchange errors that result from electronic reporting?

A: Yes, we strongly recommend using the Texas Immunization Registry HL7 2.5.1 Error Guide (Stock #11-15703) which explains the HL7 errors our system produces and how to resolve them. This is available on our DSHS [website](#).

Q: Are affirmation files different from HL7 files?

A: Yes, affirmation files contain the patient demographic information and the registry consent information to create a registry record for the patient. The HL7 files contain only mainly patient and immunization records to report vaccine administration information to the registry.

Q: Does the state accept .CSV files for electronic reporting?

A: Texas Immunization Registry does not accept .CSV files. The national and state standards are for patient and immunization data to reported using HL7 files.

Q: What is the normal time it takes for an organization to go from test to production?

A: The time frame to move from test to production is dependent on the organization and their EHR vendor to meet the testing requirements. The registry requires an organization to have error free submissions in their test data to qualify for being promoted to production.

Q: How often are error reports generated for files?

A: The system generates error and data quality reports for every file submitted, typically within three to five days after a file is submitted to the registry.



Q: What is the web address or URL for the registry's FTP website?

A: The registry's Secure FTP Thin Client is located at <https://immtrac-fts1.dshs.state.tx.us/ThinClient>.

Q: Does electronic reporting via data exchange replace manual reporting of immunizations in ImmTrac2?

A: Yes. Electronic reporting replaces the need for clinical or provider staff to manually report patient and immunization data directly into ImmTrac2.

Q: Can organizations use test or real patients while they are testing?

A: During the testing phase, we strongly recommend you use test patients that mimic your patient population in age, demographics and immunization data. If test patients are not available, then real patient data can be used. Please keep in mind that during testing, no immunization data is uploaded to the registry.

Q: Do the error or data quality reports go away once a corrected file is resubmitted?

A: No. The system archives all files in the FTP account for up to a year then they are purged. Organizations receive new error and data quality reports for every valid file submitted.

Q: Can organizations create a HL7 file without an EHR vendor?

A: Yes, if the organization has technical and HL7 experts who work internally for them that can convert the patient and immunization data into the required HL7 file.



Q: What is considered a “hard” error vs “informational” error?

A: A hard error prevents patient or immunization data from being uploaded to the registry because key information is missing or invalid pertaining to the organization submitting the data, the patient who received an immunization or the immunization the patient received. Hard errors are identified as client, immunization or message level errors. Informational errors do not prevent patient or immunization data from being uploaded to the registry as they identify information that could be improved but isn't key information.

Q: Can an organization continue to enter patient and immunization data manually into ImmTrac2 if their EHR is unable to support electronic data exchange?

A: Yes, if an EHR vendor does not have the ability to support electronic data exchange to the registry, then providers must continue to report manually via ImmTrac2.

Q: How does an organization get their FTP account password reset?

A: The Point of Contact (POC) listed in ImmTrac2 for the parent organization must request via email for the FTP password to be reset. The POC must send an email containing their TX IIS ID, Org Code or Import Code to ImmTracMU@dshs.texas.gov and request the FTP account be reset.