

# Script for Bidirectional Readiness Webinar

December 7, 2020

## **Bidirectional Pre-requisites/Readiness Script**

Closed captioning for this presentation is available at the following link: <https://tcc.1capapp.com/event/dshs/>. The link will also be provided in the chat.

## **HHSC slide**

This webinar content will be uploaded to the DSHS website in the future.

## **Bidirectional Prerequisites/Readiness**

Today, we will be discussing Bidirectional pre-requisites and readiness for the Texas Immunization Registry.

## **Introductions**

Hello everyone. My name is Suzanne Murphy. I am the main presenter today. I am a Technical Support Specialist with the Texas Immunization Registry.

Today, joining us for the question and answer portion after our main presentation is Jonathan Patterson, an interface analyst and Angela Herrera, Interoperability Coordinator.

At the bottom of the screen, you see an option for submitting questions. Please submit your questions there, so we can address and answer those questions once the presentation is complete.

## **Overview**

The topics covered in today's presentation include:

- The Bidirectional Readiness Checklist
- Requirements for all organizations for bidirectional data exchange
- Requirements for existing data exchange participants for bidirectional data exchange, and
- Testing qualifications for bidirectional data exchange.

## Terminology

We use abbreviations and acronyms for some of the terminology in this presentation, so let's review what these mean:

- Bi-D-X is the short term for Bidirectional Data Exchange.
- Registry is the short term for the Texas Immunization Registry.
- Orgs refers to any provider, healthcare entity, or other organization that participates with the registry.
- And EHR stands for Electronic Health Records systems

Alright, let's get started.

## The Bidirectional Readiness Checklist

The bulk of this presentation focuses on the bidirectional readiness checklist.

### Contents of the Bidirectional Readiness Checklist Summary

The Bidirectional Readiness Checklist contains all the requirements that must be met by Orgs and their EHR vendor to participate in bidirectional data exchange with the registry.

The document is available on the registry's Department of State Health Services (DSHS) website, [www.immtrac.com](http://www.immtrac.com), under the Forms and Documents information.

Orgs must review the checklist with their EHR vendor to ensure all requirements are met before contacting the registry about bidirectional data exchange.

All requirements must be met before your organization is provided with the Registration of Intent for Bi-D-X.

The checklist assists you to make sure your organization is in a good position to begin and streamlines the onboarding for Bi-D-X with the registry.

### Requirements for all organizations (1 of 3)

Now let's discuss the requirements included in the checklist, beginning with requirements that apply to all organizations.

You must have an EHR or similar records software that meets these requirements:

It must send bidirectional messages using a webservice connection which allow sending of patient and immunization data from your systems to the registry in real-time (as they occur).

It must send messages using HL7 version two-point-five-point-one release one-point-five.

HL7 is the gold standard for electronic health records messaging and is overseen by the Centers for Disease Control and Prevention (CDC).

Your EHR must be up-to-date with all relevant system and hardware upgrades. This is particularly important because Bi-D-X testing is time sensitive and all upgrades must be in place before approved for onboarding for Bi-D-X. If your EHR is not ready during the Bi-D-X testing you may be removed from onboarding with the registry and must wait for a later opportunity to onboard.

Do note, the registry staff do ask the org if all these items are met prior to approving an Org for onboarding to mitigate/identify any barriers.

Because these requirements all depend on the status of your EHR, you must speak with your EHR vendor or similar IT support to make sure you meet each requirement.

### **Requirements for all organizations (2 of 3)**

Continuing with requirements that apply to all organizations:

Your organization must have a data exchange method of reporting registry consent electronically via a process called electronic affirmation of registry consent.

This means you must have some way of collecting and/or documenting that patients did sign an official registry consent form in your EHR or another similar software, and

Send the required registry consent elements via affirmation messages through data exchange to the registry.

There are two methods of sending affirmation messages via bidirectional data exchange. Due to the significance of this requirement we have dedicated an entire and separate presentation where we explore the topic in depth.

Affirmation of consent for bidirectional data exchange will be covered in the Electronic Consent webinar which is currently scheduled for January 25 and January 29th from 1 - 2pm.

### **Requirements for all organizations (3 of 3)**

Finishing up the requirements that apply to all organizations, Your organization must be registered with ImmTrac2. If you have multiple sites, each site must be registered separately.

All of your sites must also have up-to-date site agreements. Remember that site agreements must be renewed at least once every two years. The site agreements allow your organization to maintain access to its data exchange account.

If you have multiple sites, your parent/child (or headquarters/sub-site) relationships must all be up to date and accurate in ImmTrac2.

If you have any questions about registrations or renewals, we offer comprehensive guides for both on our DSHS website.

## **Requirements for Existing Data Exchange Participants**

Let's discuss the requirement if you're an existing data exchange partner using FTP batch files.

There is an additional requirement you must meet to be prepared for Bi-D-X.

Your current data exchange messages must contain no significant data quality errors.

This means you must be sending the registry good quality data. For example, you should not be sending placeholder names such as "baby", "girl", or missing immunization information.

And you must not have any recurring formatting errors.

To identify if you have data quality issues or errors, you should review your Data Quality Assurance (DOA) reports that are returned to you by the registry regularly.

Data quality issues and recurring errors are indications to the registry that you are not ready for Bi-D-X.

Organizations with no errors and high data quality are prioritized over other organizations.

## **Additional Preparation**

Now let's go over additional preparation you should begin as soon as you consider engaging in Bi-D-X.

### **Additional Preparation (1 of 2)**

Please be aware that once approved for onboarding for Bi-D-X, the Bi-D-X testing is time-limited.

For this reason, you should begin planning for and preparing as many of your resources in advance as possible.

Designate a Subject Matter Expert who will oversee the Bi-D-X project for your organization now.

Begin identifying any additional testing participants you need.

Testing participants must be able to dedicate at least one full week to the testing.

Be sure your EHR (or similar software) has technical resources identified and available.

Again, the idea behind the checklist and the prerequisites is to streamline your organization's onboarding.

### **Additional Preparation (2 of 2)**

You should begin to analyze your organization's workflows and plan for how things will change from your current operation/reporting of patient and immunization data to the future with bidirectional data exchange.

Internally and with your EHR Vendor, ask:

- How will we monitor the Bi-D-X connection and address any data quality errors?
- Who will be responsible for identifying and resolving any data quality errors?
- How will we train and prepare staff for the change?

### **Resources**

Now let's finish by reviewing some of the resources that are available to you from the registry.

### **Registry Websites**

The ImmTrac2 website is where you can submit and check the status of your site registrations and renewals.

The DSHS website is where you can find all our latest announcements, our contact information, and a wide variety of documents and training materials to assist you with using our system.

### **Guides, Training Videos, & Webinars**

As stated previously, our DSHS website offers guides, training videos, and webinars covering the following topics:

- How to complete a site registration or renewal in ImmTrac2
- How to run or retrieve reports in ImmTrac2
- How to add and manage clients and immunizations in ImmTrac2
- Identifying or addressing data quality issues in ImmTrac2, and
- Identifying or addressing data quality errors in HL7 messages.

Please always check our website regularly as we have more resources on the way.

### **Publications**

Also available on our DSHS website, are publications that include:

- Registry consent forms

- Registry posters and brochures for patients and providers, and
- Vaccine related publications.

Many items can be ordered and delivered from DSHS to your organization at no cost to you.

### **Registry Customer Support**

The registry offers customer support by phone and email:

Phone support is available at 800-348-9158

Unfortunately, our phone line is unavailable at the time of this recording due to remote work safety measures.

Email support is available via:

- [ImmTrac2@dshs.Texas.gov](mailto:ImmTrac2@dshs.Texas.gov) for all registration/renewal or ImmTrac2 access questions
- [ImmTracMU@dshs.Texas.gov](mailto:ImmTracMU@dshs.Texas.gov) for all data exchange related questions

### **Thank You!**

This concludes our presentation on Bidirectional Readiness.

Thank you, from the Texas Immunization Registry.

### **Q & A**

Please submit any additional questions at the bottom of the screen. We will begin by answering questions made during the presentation.