The Texas Immunization Registry

Texas Immunization Provider Summary (TIPS) Guide

Contents

Section 1: Description of the TIPS Report

The TIPS report provides each registered organization in ImmTrac2 an overall summary of the user activity, online activity, and data exchange activity for the previous month.

Organization Details

See Figure 1: Organization Details.

[1] **Texas Immunization Provider**
[2] **Texas Immunization Registry,**

Provider Name

TVFC: 123456

[4] **Org Code: ABCD1234**
[5] TX IIS ID: 1234567879
[6] Point of Contact (POC): First Name Last Name
POC Email: blank@blank.com **[7]**
[8] Site Agreement Expiration: June 23, 2024

[3] **Exceeds Expectations**

Monthly Reporting Period: 02/2024 **[9]**

Figure 1: Organization Details

1. Facility/Organization Name as displayed in ImmTrac

2. TVFC/ASN provider identification number (if applicable).

3. Each organization will be rated based on the user activity, online activity, and data exchange activity (if applicable) for the previous month. Organizations will receive one of the following ratings: Exceeds Expectations, Meets Expectations, or Not Rated.

4. Org Code – Unique identifier for each organization.

5. TX IIS ID – Unique identifier for each organization.

6. Name of the Organization Point of Contact.

7. Email address of the Organization Point of Contact.

8. Expiration date of the ImmTrac2 site agreement.

9. Reporting period for the previous month and displayed as MM/YYYY.

User Activity Details

See Figure 2: User Activity Details.

User Activity Summary:

Displays the user activity for the reporting period and compares the total users versus the active users.

Total User Logins:	1,012 **10**	
Online Client Searches:	2,401 **11**	
Clients Served:	10,680 **12**	

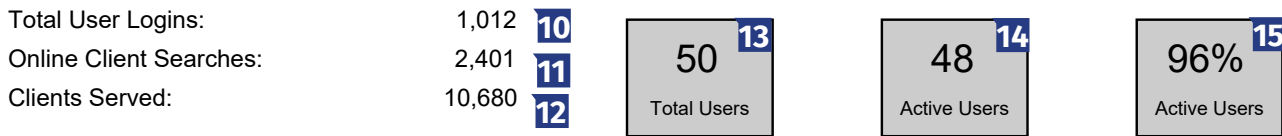| 50 **13**	48 **14**	96% **15**
Total Users	Active Users	Active Users

Figure 2: User Activity Details

10. Number of logins during the reporting period by active users (14).

11. Number of online clients searched during the reporting period.

12. Number of active clients associated to the organization.

13. Total number of users associated to the organization.

14. Number of active users associated to the organization.

15. Percentage of active users.

Online Activity Details

See Figure 3: Online Activity Details.

Online Activity:

Displays counts of clients, immunizations added, and reporting latency for online activity.

Clients Added:	16 **16**	
Immunizations Added:	45 **17**	
Adult:	36 **18**	
Child:	9 **19**	

16 **20**	4 **21**	3* **22**
Child Clients	Adult Clients	Average Entry Latency

Figure 3: Online Activity Details

16. Total number of clients added online.

17. Total number of immunizations added online.

18. Number of immunizations added online to minors.

19. Number of immunizations added online to adults.

20. Number of minor consents added online.

21. Number of adult consents added online.

22. Average number of days between when an immunization was administered and added online in ImmTrac

Data Exchange Activity Details

See Figure 4: Data Exchange Activity Details.

Data Exchange Activity:

Displays counts of clients, immunizations added, and reporting latency for data exchange activity.

Total Files Submitted:	15 **23**
Clients Submitted:	**24** 74
Clients Accepted:	71 **25**
Clients Rejected:	**26** 3
Immunizations Submitted:	115 **27**
Imms Accepted:	**28** 95
Imms Rejected:	20 **29**

96% **30**	83% **31**	9** **32**
Client Accept Rate	Immunizations Accept Rate	Average Entry Latency

** Average Entry Latency: In days, the amount of time taken to report immunizations via Data Exchange.

Data Exchange Details:

EHR Vendor:	Oracle Cerner **33**
EHR Software:	Oracle Health **34**

Figure 4: Data Exchange Activity Details

23. Number of data exchange files submitted during the reporting period.

24. Number of client records submitted.

25. Number of client records accepted.

26. Number of client records rejected.

27. Number of immunizations submitted.

28. Number of immunizations accepted.

29. Number of immunizations rejected.

30. Percentage of client records accepted.

31. Percentage of immunizations accepted.

32. Average number of days between when an immunization was administered and added through data exchange.

33. Electronic Health Record (EHR) Vendor as indicated on the Registration of Intent.

34. EHR Software as indicated on the Registration of Intent.

NOTE: Regarding items 24, 25, 26, and 30, if a patient's data is submitted multiple times within a file they will be counted as unique patients, not the same patient. Example: Patient John Smith is reported three times in a file, the system will count John Smith as three clients not as one.

Section 2: How to Generate the TIPS

Report To generate the TIPS report, follow these steps:

1. Log into the appropriate organization in ImmTrac

2. On the left side of the screen, on the menu panel look for "Reports" and click on "generate report". See Figure 5: Generate Report.

Figure 5: Generate Report

3. In the list of reports available, click on "Texas Immunization Provider Summary (TIPS)". See Figure 6: Link for Texas Immunization Provider Summary (mockup).

Generate Report	Description	Output
Ad Hoc Count Report	The Ad Hoc Count Report offers a user-defined report and counts results. User can select the fields to include and can define filters and choose the sort order.	Status
Ad Hoc List Report	The Ad Hoc List Report offers a user-defined report and lists results. User can select the fields to include and can define filters and choose the sort order.	Status
Check Reminder List	The Check Reminder List allows Provider Organizations to be able to view their clients for statewide reminder/recalls prior to the state reminder recall process being ran.	
Client Benchmark Report	The Client Benchmark Report allows users to retrieve a list and count of clients who have met an immunization benchmark or predefined series of benchmarks.	Status
Clients and Immunization Count by Organization	Clients and Immunization Count by Organization report displays the number of unique clients that received a dose and total number of doses administered by an organization in a specified time period.	Status
CoCASA Extract	The CoCASA Extract will allow users to create an extract for their provider organization that can be used for CoCASA reporting. This extract will be a tab delimited text file that can be imported into the CoCASA application.	Status
Immunization Coverage Rate Report	The Immunization Coverage Rate Report provides an analysis of an organization's immunization coverage rates. The coverage rate is defined as the percent of provider's clients whose recommended vaccine series are completed.	Status
Immunization History Report	The Immunization History Report allows users to compile the immunization history for a group of selected clients.	Status
Manage Ad hoc Template	The Manage Ad hoc Template allows the capability to generate, run, and save ad-hoc user reports to a user profile.	Status
Reminder/Recall Custom Letters	The Reminder/Recall Custom Letters allow ImmTrac2 users to create and store up to three custom letters to be used for reminder and recall notices.	
Reminder/Recall Report	The Reminder/Recall Report generates reminder and recall notices, which include letters, mailing labels, and client listings.	Status
Texas Immunization Provider Summary	The Texas Immunization Provider Summary (TIPS) allows a user to view a summary of the organization's activity for the previous month.	
Vaccine Eligibility Report	The Vaccine Eligibility Report details the number of clients that were vaccinated by the organization for each vaccine eligibility type for a specified date range.	Status

Figure 6: Link for Texas Immunization Provider Summary (mockup)

NOTE: The TIPS report is generated on the first day of each month and overwrites the previous month's report.

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Section 3: Strategies to Optimize Your TIPS

Rating The following are focus areas to improve your organization's TIPS rating and to ensure that the data in ImmTrac2 is more complete, accurate, and reported in a timely manner.

⚑ Focus 1: Number of Active Users

🎯 **Target:** At least 75% active users

User Activity Summary:

Displays the user activity for the reporting period and compares the total users versus the active users.

Total User Logins:	1,012	**50** Total Users	**48** Active Users
Online Client Searches:	2,401		
Clients Served:	10,680		

96% Active Users 🎯 1

- **Calculation:** The number of Active Users divided by the number of Total Users. An active user is one who has logged into ImmTrac2 within the past 90 days.

- **Target:** Greater than 75% active users.

- **Suggestions:**
    - Disassociate inactive users in your organization. Refer to Section 4: Instructions to Request Adding or Disassociating Users.
    - If adding or disassociating more than five users, please complete a Renewal of your Site Agreement in ImmTrac

- **Note:** Having a high percentage of inactive users is a security risk and asks the question, "Why do these users need access to ImmTrac2?". The Number of Active Users is the starting point for the remaining focus points.

🚩 Focus 2: Number of Logins per Active User

🎯 **Target:** Each user logs in at least twice per month

User Activity Summary:

Displays the user activity for the reporting period and compares the total users versus the active users.

Total User Logins:	**2** 1,012	🎯 **2**		
Online Client Searches:	2,401			
Clients Served:	10,680			

50	48	96%
Total Users	Active Users	Active Users

- **Calculation:** The number of Total User Logins divided by the number of Active Users.

- **Target:** Each active user should log into ImmTrac2 twice per month.

- **Suggestions:** Before each patient encounter, users should log into ImmTrac2 to ensure:
  - The client has previously consented and been added to ImmTrac If the client is not found after performing a "smart" search, educate the client on the benefits of the Texas Immunization Registry and give them an opportunity to complete the ImmTrac2 consent form.
  - That client immunization records are up-to-date.

- **Which shots are coming due and/or are past due.**
  - All ImmTrac2 users log in at least twice, including Data Exchange organizations.

Focus 3: Number of Online Client Searches per Active User

Target: Minimum 50 client searches per active user per month

🚩
🎯

- **Calculation:** The number of Online Client Searches divided by the number of Active Clients Served.

- **Target:** Having a minimum of 50 client searches per active user per month.

User Activity Summary:

Displays the user activity for the reporting period and compares the total users versus the active users.

Total User Logins:	1,012			
Online Client Searches:	**3** 2,401	🎯		
Clients Served:	10,680			

50	48 🎯 **3**	96%
Total Users	Active Users	Active Users

- **Suggestions:**
  - Look up client immunization records before each visit. Client searches are preliminary to accessing a client's immunization record. Searches are also prerequisite to adding a new client online.
  - Review the "Benefits of Utilizing TIR Guide".

Focus 4: Number of Immunizations Added per Client

Target: Maximize online immunizations added and data exchange immunizations accepted and number of active clients.

- **Calculation:** The sum of Online Immunizations Added and Data Exchange Immunizations Accepted, divided by the number of Active Clients Served.
- **Target:** Maximize this number.

User Activity Summary:

Displays the user activity for the reporting period and compares the total users versus the active users.

Total User Logins:	1,012	**50**	**48**	**96%**
Online Client Searches:	2,401	Total Users	Active Users	Active Users
Clients Served: 🎯 4	10,680			

Online Activity:

Displays counts of clients, immunizations added, and reporting latency for online activity.

Clients Added:	16	**16**	**4**	**3***
Immunizations Added: 🎯 4	45	Child Clients	Adult Clients	Average Entry Latency
Adult:	36			
Child:	9			

* Average Entry Latency: In days, the amount of time taken to enter an online immunization.

Data Exchange Activity:

Displays counts of clients, immunizations added, and reporting latency for data exchange activity.

Total Files Submitted:	15	**96%**	**83%**	**9****
Clients Submitted:	74	Client Accept Rate	Immunizations Accept Rate	Average Entry Latency
Clients Accepted:	71			
Clients Rejected:	3			
Immunizations Submitted:	115			
Imms Accepted: 🎯 4	95			
Imms Rejected:	20			

- **Suggestions:**
  - Use the Creating a List of Active Clients to generate a List of Active Clients.
  - Using the Active Client list to update clients who are no longer under your care:
  - If clients have moved elsewhere or have not been seen for a long time, change their status to "inactive" in the Organization Information tab of the client record. See Figure 7: Organization Information – Inactive Status.

Figure 7: Organization Information – Inactive Status

Focus 5: Average Latency

Target: No more than two days on average between administering an immunization and reporting it,[11] either online or electronically through data exchange.

- **Calculation:** The average of Online Average Entry Latency and Data Exchange Average Entry Latency.

- **Target:** No more than two days on average between administering an immunization and

Online Activity:

Displays counts of clients, immunizations added, and reporting latency for online activity.

Clients Added:	16
Immunizations Added:	45
Adult:	36
Child:	9

16	4	3*
Child Clients	Adult Clients	Average Entry Latency

* Average Entry Latency: In days, the amount of time taken to enter an online immunization.

Data Exchange Activity:

Displays counts of clients, immunizations added, and reporting latency for data exchange activity.

Total Files Submitted:	15
Clients Submitted:	74
Clients Accepted:	71
Clients Rejected:	3
Immunizations Submitted:	115
Imms Accepted:	95
Imms Rejected:	20

96%	83%	9**
Client Accept Rate	Immunizations Accept Rate	Average Entry Latency

** Average Entry Latency: In days, the amount of time taken to report immunizations via Data Exchange.

reporting it, either online through the user interface or electronically through data exchange.

- **Suggestions:**
    - Review your organizations procedures for entering immunizations to see what could help get immunizations entered more quickly after they are administered.

Focus 6: Acceptance Rate of Clients and Immunizations Submitted through Data Exchange

Target: 90% or more of the client records and immunization records sent through data exchange are

accepted.

- **Calculation:** The average of the Client Accept Rate and the Immunizations Accept Rate, both from data exchange.

Online Activity:

Displays counts of clients, immunizations added, and reporting latency for online activity.

Clients Added: 16

Immunizations Added: 45

    Adult: 36

    Child: 9

16	4	3*
Child Clients	Adult Clients	Average Entry Latency

* Average Entry Latency: In days, the amount of time taken to enter an online immunization.

Data Exchange Activity:

Displays counts of clients, immunizations added, and reporting latency for data exchange activity.

Total Files Submitted: 15

Clients Submitted: 74

    Clients Accepted: 71

    Clients Rejected: 3

Immunizations Submitted: 115

    Imms Accepted: 95

    Imms Rejected: 20

96%	83%	9**
Client Accept Rate	Immunizations Accept Rate	Average Entry Latency

** Average Entry Latency: In days, the amount of time taken to report immunizations via Data Exchange.

- **Target:** Greater than 90% of client records and immunizations sent through data exchange are accepted.

- **Suggestions:**
  - Contact the Texas Immunization Registry's Interoperability Team at 800-348-9158, option 3, to receive help with your data exchange.
  - Contact your EHR vendor to correct issues resulting in errors.

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Section 4: Instructions to Request Adding or Disassociating Users

Requests

All requests to ADD a new user or DISASSOCIATE a user must be requested by one of the following at the registered organization:

- Organization Point of Contact (POC)
- Primary Registry Point of Contact
- Primary Vaccine Coordinator (listed in ImmTrac2)
- Secondary Vaccine Coordinator (listed in ImmTrac2)

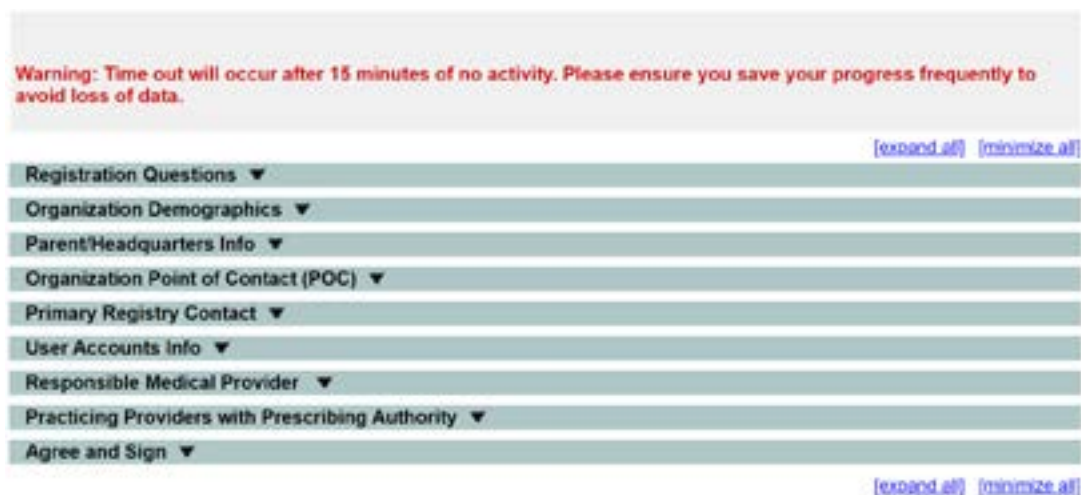If you aren't sure who these contacts are at your organization, then:

1. Log into the appropriate organization in ImmTrac
2. Click on the "registration/renewal" tab at the top of the ImmTrac2 screen.
3. Click on "Access previously approved Registration or Renewal". See Figure 8: Access Previously Approved Registration or Renewal.

Figure 8: Access Previously Approved Registration or Renewal
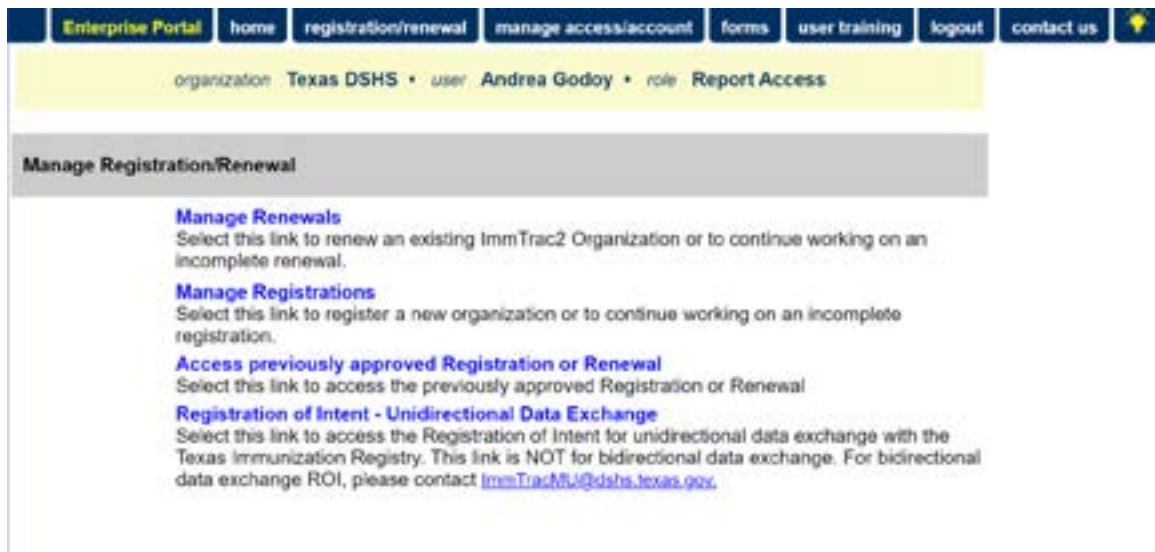
4. Then click on the small black triangles to open the "Organization Point of Contact (POC)"

tab and the "Primary Registry Contact" tab. This provides you the names of the individuals serving in these roles. See Figure 9: POC and Primary Registry Contact Tabs.

5. Email requests to ImmTrac2@dshs.texas.gov using the Email Request Instructions and Email Request Template provided below.

More Than Five Users

If you have more than five users to add or disassociate, please submit a renewal of your site agreement and make the updates to the users through the renewal process.

Security Notes

- ImmTrac2 login credentials are assigned to an individual person and must not be shared. Repeated violations may result in loss of access privileges for the individual and/or the organization.

- Each ImmTrac2 user account requires a unique e-mail address so that ImmTrac2 users can reset their own passwords when needed.

- Organization Point of Contacts should carefully consider who needs ImmTrac2 access. Access requests should only be for individuals on a need-to-know and a need-to-have basis. Please do not add more users than what is needed. The more users requested, the longer the user creation process may take.

- Please instruct users at your organization to login as soon as possible. If new user accounts are not accessed within 30 days of creation, the account will be locked. If new user accounts are never accessed within 120 days of creation, they will be deleted.

Email Request Instructions to Add or Disassociate Up to Five Users

- Copy and paste the Email Request Template into an email.
- Add the missing information
    - Organization and Point of Contact Information
    - List of users to be added or disassociated
    - Put an "X" next to the Action Required of either adding or disassociating user.
- Add the subject line: Add-Disassociate Users for [Enter your Organization's Name].
- Send email to ImmTrac2@dshs.texas.gov.

Email Request Template

Organization and Point of Contact Information
ORGANIZATION NAME:
STREET ADDRESS:
POINT OF CONTACT (POC) FULL NAME:
PHONE NUMBER:
POINT OF CONTACT EMAIL ADDRESS:
ORGANIZATION'S ORG CODE, TX IIS IDnumber (aka PFS IDnumber): (if known)

List of Users to be Added or Disassociated

First User Action Required: Add This User___   Disassociate This User ___
USER FIRST NAME:
USER LAST NAME:
UNIQUE USER EMAIL ADDRESS:
USER JOB TITLE: CLINICIAN / NURSES LICENSE number:
PHONE NUMBER:

Second User Action Required: Add This User___   Disassociate This User ___
USER FIRST NAME:
USER LAST NAME:
UNIQUE USER EMAIL ADDRESS:
USER JOB TITLE:
CLINICIAN / NURSES LICENSE number:
PHONE NUMBER:

Third User Action Required: Add This User___   Disassociate This User ___
USER FIRST NAME:
USER LAST NAME:
UNIQUE USER EMAIL ADDRESS:
USER JOB TITLE:
CLINICIAN / NURSES LICENSE number:
PHONE NUMBER:

Fourth User Action Required: Add This User___   Disassociate This User ___
USER FIRST NAME:
USER LAST NAME:
UNIQUE USER EMAIL ADDRESS:
USER JOB TITLE:
CLINICIAN / NURSES LICENSE number:
PHONE NUMBER:

Fifth User Action Required: Add This User___   Disassociate This User ___
USER FIRST NAME:
USER LAST NAME:
UNIQUE USER EMAIL ADDRESS:
USER JOB TITLE:
CLINICIAN / NURSES LICENSE number:
PHONE NUMBER:

Section 5: Data Exchange Related Information

Focus 1: If Data Exchange Activity is blank

If the TIPS Report shows no data under the Data Exchange Activity, then the organization should review and complete the below qualifications to determine if they are ready to establish a data exchange connection with the registry (i.e., completing the registration of intent).

Registry Status Qualifications

1. Ensure the organization's information is up to date with the registry.
   a. The main headquarters or stand-alone facility is renewed with the registry.

      i. Renewal of location information is required every two years.

   b. All associated facilities are registered as sub-sites of the main organization (i.e., not as a separate or stand-alone facility) with the registry.

      i. If the organization has multiple facilities, each facility that administers immunizations must be registered with the registry. Additionally, they must be properly linked as a sub-site to the main organization.

   c. Organization's staff have active ImmTrac2 user accounts to login to the registry.

      i. Each facility within the organization must have designated staff who have an ImmTrac2 user account.

2. Identify staff at the organization who will be the lead contacts and/or team for establishing and overseeing the data exchange connection with the registry.

   a. Identified staff will collaborate with the registry throughout and after the data exchange connection is established.

   b. Suggested staff include, but not limited to, staff who oversee other types of data exchange for the organization, senior or lead clinical staff, subject matter experts, trainers, or IT support staff. For assistance with ImmTrac2 registrations, renewals or user accounts, contact the Texas Immunization Registry Customer Service at 800-348-915

DATA EXCHANGE QUALIFICATIONS

1. To engage in electronic data exchange, the organization must have an EHR system that meets the registry standards and requirements.

- The organization, through their EHR system, must submit patient and immunization information in Health Level Seven (HL7) 1 Release 5 files to the registry.

    i. Speak with the EHR vendor to confirm the organization's systems are upgraded to send data in this format.

    b. The organization, through their EHR system, must be able to submit batch immunization files to the registry.

    i. Batch files means data is combined into one file that is submitted on a weekly basis. Speak with the EHR vendor to confirm batch HL7 files can be configured.

    c. The organization's patient and immunization data does not have data quality issues or errors. The organization must take and own responsibility of the patient and immunization data it submits as part of establishing a data exchange connection with the registry.

    i. To ensure the organization is submitting great data quality it must identify any data quality errors and correct them timely.

    ii. Speak with the EHR vendor to confirm the organization's systems are configured to the federal and state requirements for data exchange to decrease the likelihood of data quality errors.

Note: The registry verifies that the pre-requisite qualifications have been completed prior to establishing a data exchange connection with the organization (i.e., completing the registration of intent).

Focus 2: Establishing a Data Exchange Connection with the Registry

The following are the steps that must be completed for establishing a data exchange connection with the registry. For data exchange support, contact the Texas Immunization Registry at 800-348-9158, option 3 or email at ImmTrac2@dshs.texas.gov.

STEP 1: IMMTRAC2 REGISTRATION/RENEWAL INFORMATION ORGANIZATIONS MUST:

- Have up to date ImmTrac2 renewal agreements for all facilities registered with ImmTrac2 within their organization.

- Register all facilities not currently registered with ImmTrac2 by completing an ImmTrac2 Site Agreement.

NOTE: Organizations with expired ImmTrac2 site agreements will not be able to proceed with Step 2: Registration of Intent until the agreements are renewed.

HOW TO REGISTER/RENEW INFORMATION

REGISTRATIONS

If the organization is not currently registered with ImmTrac2:

1. Go to the ImmTrac2 website https://immtrac.dshs.texas.gov.
2. Click the 'Registration' tab on the top menu of the site.
3. Click the 'Register' link in the middle of the site to register.
4. Fill in the initial information requested: email address; and Texas Vaccines for Children (TVFC) Pin – if applicable.
5. Complete the registration form.
6. Sign and submit for approval.

RENEWALS

If the organization is currently registered with ImmTrac2 and the information on file is outdated or expired:

1. Login to ImmTrac2
2. Click the 'registration/renewal' tab from the top menu.
3. Click the 'Manage Renewals' link on the page.
4. Complete the renewal form.
5. Sign and submit for approval.

STEP 2: REGISTRATION OF INTENT (ROI)

THE ROI:

- Allows health care entities to inform the registry of their readiness to begin to data exchange;
- Is accessible through ImmTrac2, once logged into the system;
- Can only be submitted by ImmTrac2 users associated to the main headquarters (aka parent organization) or stand-alone facility; and Is processed within two to five business days after it is submitted, the organization receives an Invitation to Onboard (via email) with instructions for establishing connectivity and testing requirements with the registry.

HOW TO COMPLETE THE ROI

1. Login to ImmTrac
2. Click the 'registration/renewal' tab from the top menu.
3. Click the 'Registration of Intent' link from the options listed under the Manage Registration/Renewal information.
4. Respond to the questions.
   - Once the initial two questions have been responded to additional questions will appear.
   - Select the method the organization will report data to the registry.
   - Select the EHR vendor and software used by the organization.
   - Add staff who will be the lead contacts and/or team for establishing and overseeing the data exchange connection with the registry.
   - Select how often the organization will submit data to the registry.
   - Review the organization information that is on file with the registry to ensure all the facilities are listed and accounted for.
5. Complete the registration of intent by clicking the 'Submit' button.

STEP 3: GAINING ACCESS TO DATA EXCHANGE METHODS

As part of establishing a data exchange connection with the registry, the organization is provided access (data exchange credentials) to the registry's data exchange methods which are used to send and receive data. The date exchange credentials are also known as File Transfer Protocol (FTP) credentials.

OVERVIEW

The organization's point of contact, as indicated in ImmTrac2:

Receives the data exchange credentials in a secure email

Is responsible for sharing the data exchange credentials with the organization's EHR vendor.

DATA EXCHANGE CREDENTIALS ARE:

Completely different from the individual ImmTrac2 user accounts

Assigned to the organization, not an individual user

To only be shared with persons responsible for establishing electronic connectivity between the organization and the registry.

FTP INFORMATION

- The organization's point of contact receives a secure email containing the organization's assigned FTP information.
- FTP Username
- FTP Password
- Import Code
- Texas Immunization Information System (TX IIS) Identification (ID)

FTP SPECIFICATIONS

STEP 4: TESTING

Testing Requirements The registry requires all organizations to perform and pass testing to ensure the data exchange is configured to state standards.

- Organizations should use test patients while testing the data exchange connection.
- Any data submitted during testing is not imported to the registry.
    - If real patient data is sent it will not be imported and must be resubmitted once in production. Organization's Responsibilities for Data Exchange

While in test, the organization must:

- Submit test files
- Review the registry's generated data quality assurance reports on the submitted test files
- Correct all data quality errors or issues
- Submit subsequent test files and verify that data quality errors or issues were corrected

Take and own responsibility of the patient and immunization data it submits as part of establishing a data exchange connection with the registry.

TESTING PHASE 1: CONNECTING TO THE REGISTRY

- Connectivity test to ensure the organization properly uses the data exchange credentials to connect to the registry.

- Once successfully connected, the organization must perform user acceptance testing of the patient and immunization information.

TESTING PHASE 2: USER ACCEPTANCE TESTING

- Organizations must submit at least one batch test HL7 file every 30 days until they are promoted to production.

- The test files must depict the volume of data that the organization handles in real-life.

- Failure to submit files within the 30-day time frame may result in removal from the data exchange process.

- Files must be submitted using the required file naming convention: ImportCodeYYDDD.hl7

    - Import Code – represents the provider and identifies the source of the file and is assigned by the registry.

    - YY – identifies the two-digit calendar year.

    - DDD – identifies the three-digit Ordinal Date of the date the file is submitted to the registry.

    - hl7 – is the file extension.

STEPS FOR TESTING

1. Submit batch HL7 file containing patient and vaccination information.

2. Receive an acknowledgment email indicating the file was received.

3. File is analyzed by the registry for any issues.

    a. Various stages of analysis are performed to identify any issues with the file.

    b. If there is a major issue with the file, it will not be processed, and a fatal error email will be sent.

        i. The fatal error(s) will need to be addressed by the organization and their EHR.

        ii. Once the fatal error(s) is addressed, start these steps over.

    c. The registry no longer sends emails about errors for the contents within the batch file.

    d. Organization must work with their EHR vendor on the review, correction and resubmission of the files to the registry.

4. File is processed; typically within two business days of receipt.

5. Data quality reports are generated.

    a. The registry produces reports for the organization to review to identify data quality issues and are found in the FTP account.

    b. Data quality reports include error files and consent notification files.

6. Organization and EHR review the data quality reports.

7. Organization and EHR make corrections to data.

The organization and EHR:

- Repeats these steps aiming for files returned with no errors;

- Must achieve three to five (consecutive) error-free HL7 files to be considered for promotion to production.

Step 5: Production

Once the organization has successfully met testing requirements, they will receive an email notification of their promotion to production. The email contains instructions and requirements for ongoing data submission to the registry.

Important Information:

- All data submitted after promoted to production is processed as live.

- Organizations are required to submit data in accordance with their submission agreement during the registration of intent process (e.g., weekly, bi-weekly, monthly, annually, or real time).

- Organizations changing vendors and/or desiring to test while in production must contact the Interoperability Team for guidance and support.

- No additional connectivity or delivery changes are required.

Step 6: Ongoing Submission Of Data

Organizations must utilize the reports (dqa-reports and CNF) provided to them by the registry to meet the organization's responsibilities for data exchange.

Organization's Responsibilities for Data Exchange

An organization in production must:

- Submit patient and immunization data regularly

- Regularly review the registry's generated data quality assurance reports or responses for data

- Correct any data quality errors or issues timely

- Take and own responsibility of the patient and immunization data it submits

Contact Information

For assistance with the registry, please contact the Texas Immunization Registry - Customer Support Team, Toll Free 800-348-9158 or email ImmTrac2@dshs.texas.gov.