Texas Immunization Provider Summary (TIPS) Guide



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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.

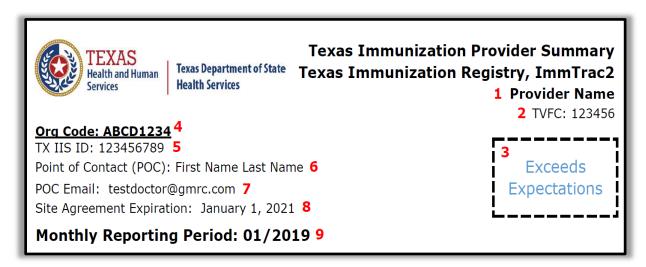


Figure 1: Organization Details

- 1. Facility/Organization Name as displayed in ImmTrac2.
- 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.

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. % of active users.

Online Activity Details

See Figure 3: Online Activity Details.

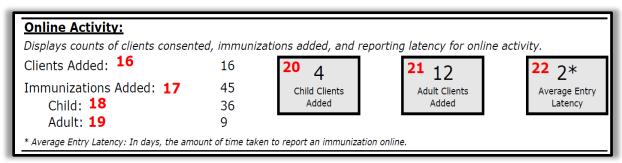


Figure 3: Online Activity Details

- 16. Total # of clients added online.
- 17. Total # of immunizations added online.
- 18. # of immunizations added online to minors.
- 19. # of immunizations added online to adults.
- 20. # of minor consents added online.
- 21. # of adult consents added online.
- 22. Average number of days between when an immunization was administered and added online in ImmTrac2.

Data Exchange Activity Details

See Figure 4: Data Exchange Activity Details.

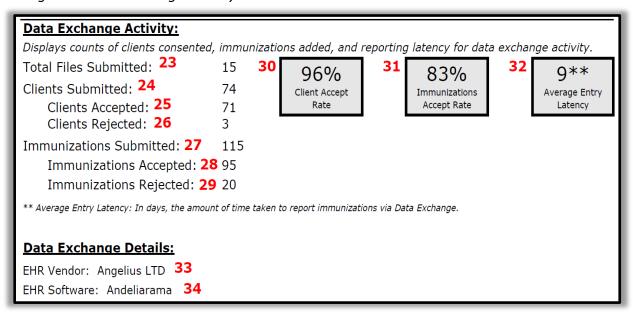


Figure 4: Data Exchange Activity Details

- 23. # of data exchange files submitted during the reporting period.
- 24. # of client records submitted.
- 25. # of client records accepted.
- 26. # of client records rejected.
- 27. # of immunizations submitted.
- 28. # of immunizations accepted.
- 29. # of immunizations rejected.
- 30. % of client records accepted.
- 31. % of immunizations accepted.
- 32. Average # 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 ImmTrac2.
- 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.

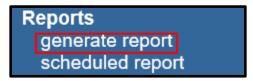


Figure 5: Generate Report

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

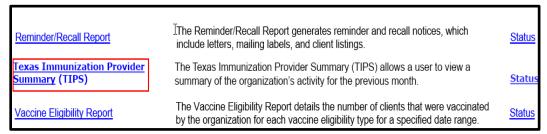


Figure 6: Link for Texas Immunization Provider Summary (mockup)

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



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.

See Figure 7: Focus 1 – Active Users.

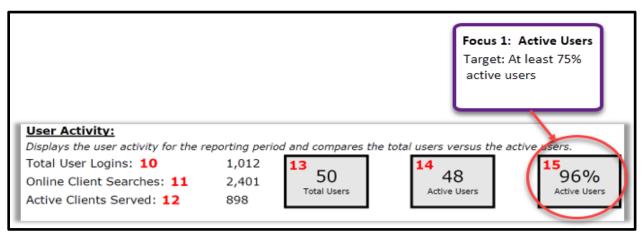


Figure 7: Focus 1 – Active Users

- **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. See *Figure 7:* Focus 1.
- 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 ImmTrac2. For instructions, go to the Forms and Documents webpage at

https://www.dshs.texas.gov/immunize/immtrac/forms.shtm and look for publication "11-15252 ImmTrac2 Site Renewal Guide" for instructions. See Figure 8: 11-15252 ImmTrac2 Site Renewal Guide.



Figure 8: 11-15252 ImmTrac2 Site Renewal Guide



• **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

See Figure 9: Focus 2 – Number of Logins per Active User.

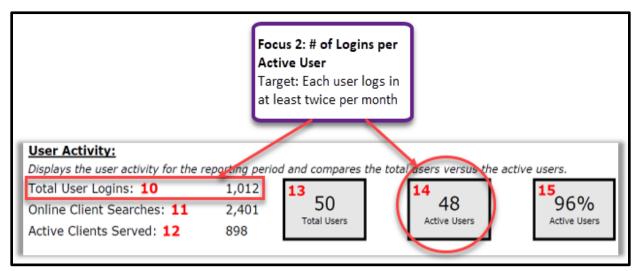


Figure 9: Focus 2 – Number of Logins per Active User

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 ImmTrac2. 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

See Figure 10: Focus 3 – Number of Online Client Searches per Active User.

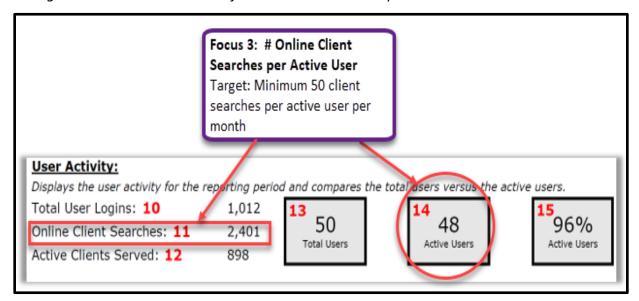


Figure 10: Focus 3 – Number of Online Client Searches per Active User

- **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.
- 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 educational material "11-15324 Provider Benefits of Using ImmTrac2" on the Forms and Documents webpage at https://www.dshs.texas.gov/immunizationunit/immtrac2-texas-immunization-registry/immtrac2-forms-documents.



Focus 4: Number of Immunizations Added per Client

See Figure 11: Focus 4 - Number of Immunizations Added per Client

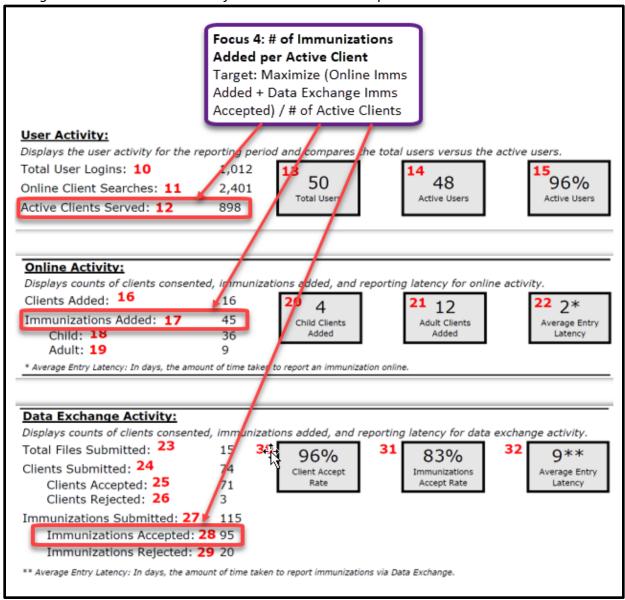


Figure 11: Focus 4 – Number of Immunizations Added per Client

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

Suggestions:

 Use the Manage Client Status Criteria function in ImmTrac2 to generate a list of active clients and change the status of clients who are no longer in your care to inactive. In ImmTrac2 select the "manage client status criteria" link on the left side of the screen. See Figure 12: Manage Client Status Criteria.

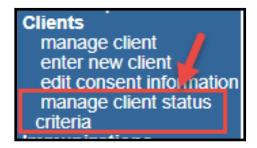


Figure 12: Manage Client Status Criteria

See also publication "11-15951 ImmTrac2 Manage Client Status Criteria in the Forms & Documents webpage at https://www.dshs.texas.gov/immunize/immtrac/forms.shtm. With this tool create a list of clients listed as active but who are no longer under your care and change their status from active to one of the inactive statuses. See *Figure 13: 11-15951 ImmTrac2 Manage Client Status Criteria*.



Figure 13: 11-15951 ImmTrac2 Manage Client Status Criteria



Focus 5: Average Latency

See Figure 14: Focus 5 – Average Latency.

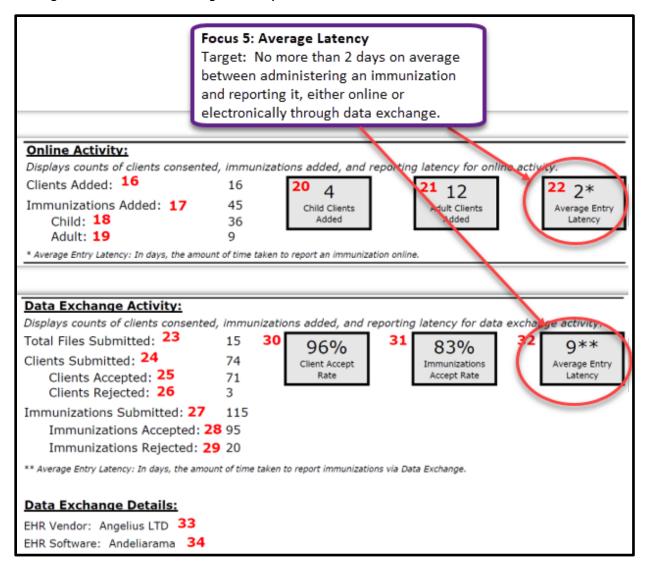


Figure 14: Focus 5 – Average Latency

- Calculation: The average of <u>Online</u> Average Entry Latency and <u>Data Exchange</u> Average Entry Latency.
- **Target**: No more than two days on average between administering an immunization and 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

See Figure 15: Focus 6 – Acceptance Rate of Clients and Immunizations Submitted Through Data Exchange.

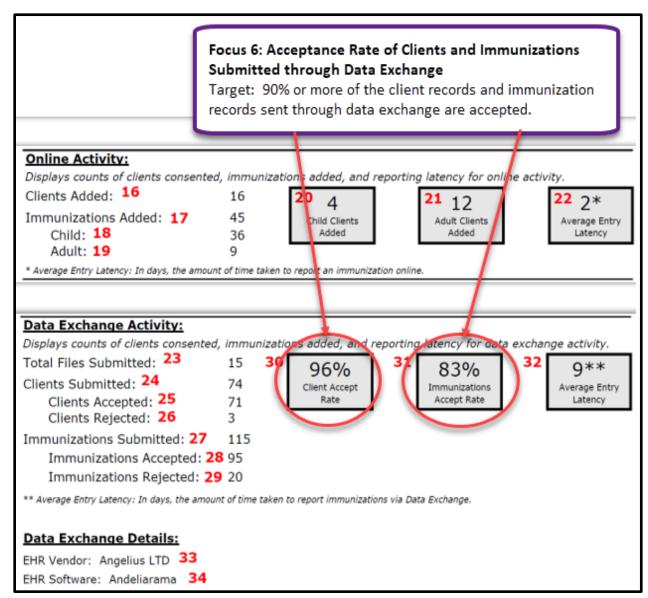


Figure 15: Focus 6 – Acceptance Rate of Clients and Immunizations Submitted Through Data Exchange

• **Calculation**: The average of the Client Accept Rate and the Immunizations Accept Rate, both from 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.
- If needed, consult the "Texas Immunization Registry HL7 2.5.1 Error Guide" on the Forms & Documents webpage at https://www.dshs.texas.gov/immunize/immtrac/forms.shtm.
 See Figure 16: 11-15703 Texas Immunization Registry HL7 2.5.1 Error Guide.

11-15703 Texas Immunization Registry HL7 2.5.1 Error Guide (rev. 06/2020)

Figure 16: 11-15703 – Texas Immunization Registry HL7 2.5.1 Error Guide

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), or
- 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 ImmTrac2.
- 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 17: Access Previously Approved Registration or Renewal.*

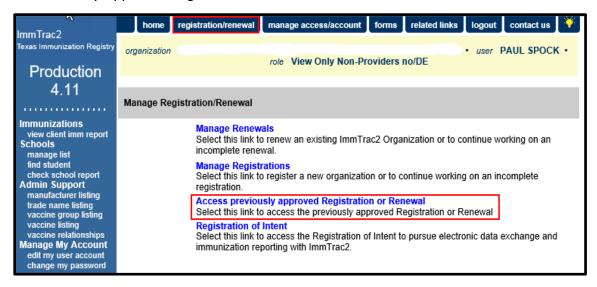


Figure 17: Access Previously Approved Registration or Renewal

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 18: POC and Primary Registry Contact Tabs*.

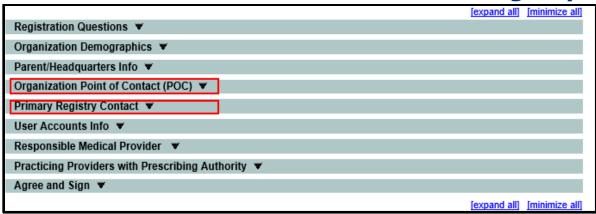


Figure 18: POC and Primary Registry Contact Tabs

5. E-mail requests to lmmTrac2@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 <u>carefully</u> 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; and
 - o 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

ORGANIZAT	ION NAME:			
STREET ADDRESS:				
POINT OF CONTACT (POC) FULL NAME:				
PHONE NUMBER:				
POINT OF CONTACT EMAIL ADDRESS:				
ORGANIZATION'S ORG CODE, TX IIS ID# (aka PFS ID#): (if known)				
List of Users to be Added or Disassociated				
1 st User	Action Required: Add This User	Disassociate This User		
USER FIRST	NAME:			
USER LAST NAME:				
UNIQUE USER EMAIL ADDRESS:				
USER JOB TI	TLE:			
CLINICIAN /	NURSES LICENSE #:			
PHONE NUM	MBER:			
2 nd 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 #:				
PHONE NUMBER:				
3 rd User	Action Required: Add This User	Disassociate This User		



PHONE NUMBER:

Texas Immunization Registry

USER FIRST	NAME:	
USER LAST	NAME:	
UNIQUE US	ER EMAIL ADDRESS:	
USER JOB T	ITLE:	
CLINICIAN /	NURSES LICENSE #:	
PHONE NU		
4th User	Action Required: Add This User	Disassociate This User
USER FIRST	NAME:	
USER LAST	NAME:	
UNIQUE US	ER EMAIL ADDRESS:	
USER JOB T	ITLE:	
CLINICIAN /	NURSES LICENSE #:	
PHONE NU	MBER:	
5th User	Action Required: Add This User	Disassociate This User
USER FIRST	NAME:	
USER LAST	NAME:	
UNIQUE US	ER EMAIL ADDRESS:	
USER JOB T	ITLE:	
CLINICIAN /	NURSES LICENSE #:	

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 (2) 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.
 - 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.
 - 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) 348-9158.

Data Exchange Qualifications

- 1. To engage in electronic data exchange, the organization must have an EHR system that meets the registry standards and requirements.
 - a. The organization, through their EHR system, must submit patient and immunization information in Health Level Seven (HL7) 2.5.1 Release 1.5 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.
 - 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 ImmTracMU@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; and
- 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 & 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 & 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 2-5 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 ImmTrac2.
- 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; and
- 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; and
- 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;
 and
- 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.
 - o 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 acknowledgement email from the Texas Immunization Registry 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 an email notification of a fatal error 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 email notifications about errors for the contents within the batch file.
 - d. It is the responsibility of the organization to work with their EHR vendor on the review, correction and resubmission of the files to the registry.
- 4. File is processed.
 - a. Files are typically processed 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 realtime).
- 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; and
- 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 e-mail lmmTrac2@dshs.texas.gov.