

The Texas Immunization **Registry:**

FAQ for Bidirectional Registration of Intent given on Jan. 25 & 29, 2021



Resources

ImmTrac2 Forms & Documents Page:

https://www.dshs.texas.gov/immunize/immtrac/forms.shtm

ImmTrac 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: <u>ImmTracMU@dshs.texas.gov</u>



Questions

Q: Would unidirectional or bidirectional be a good fit for organization's who are interested in batch immunization uploads?

A: Organization's interested in bulk (batch) uploads, may pursue unidirectional data exchange via FTP. Batch submissions would benefit organization who are not interested in real time data exchange or being able to guery the ImmTrac2 database.

Bidirectional data exchange may be pursued by organizations who are looking to report and receive patient/immunization records in real time within their EHR as well as receive real time history forecasts.

Q: Is an interface between ImmTrac2 and an EHR system available?

A: The Texas Immunization Registry supports interface connections with various EHR vendors. Please speak with your EHR vendor to determine if they can establish a connection with the registry.

Q: Is there a WSDL?

A: The registry uses the CDC's SOAP WSDL with no modifications made

Q: How long will it take to complete the bi-directional interface?

A: Organizations who are looking to onboard for bidirectional must ensure that they have all the necessary system enhancement for a bidirectional interface. The onboarding process is four to six weeks. Please keep in mind that State registry staff support data exchange and HL7 needs that relate to Immtrac2 generated errors after HL7 files have been submitted. State immunization registry staff do not support HL7 interface development prior to HL7 files being supported.



Q: Does an organization need to sign up for TVFC prior to submitting an ROI?

A: No. An ROI can be submitted without registering for TVFC.

Q: Can an organization elect to only transmit VXU messages without Querying the ImmTrac2 database?

A: Yes. The registry offers Query only, VXU only, or Query and VXU combination submission options.

Q: Do organizations who already have an established bidirectional interface with ImmTrac need to submit another ROI for new ImmTrac2 sites?

A: If the new site is going to have a Parent/child relationship in Immtrac2, a new ROI is not needed. Please ensure that your EHR vendor maps the new TX IIS ID of the new site accordingly.

If the new site is going to be a standalone site, a Bidirectional ROI will need to be submitted.

Q: Will organizations who already submitted an ROI for unidirectionally, need to submit an ROI for bidirectional?

A: Yes. The ROI for unidirectional and the ROI for bidirectional are two different forms. Organizations who are looking to transition away from unidirectional to bidirectional, will need to complete the bidirectional ROI. The bidirectional ROI is currently not available online. Prior to requesting the ROI from the registry, please be sure to review the Bidirectional Readiness Checklist on our forms page on our website.

Q: What is the difference between this (bidirectional) and entering patient/immunizations through Immtrac2?

A: The main difference is that everything, such as reporting immunization, looking up Immtrac2 clients, updating patient's demographic and even consenting registry clients, can be done directly through your EHR/EMR.

Q: Do historical messages that already exist in ImmTrac2 count against the 90% threshold to move forward with the bidirectional?

A: Any message (immunization) that is reflected in ImmTrac2, indicates that it was processed successfully without any hard rejections. Hard rejections, which prevents immunization from being uploaded to ImmTrac2, can affect an organization's TIPs report, which in turn can affect whether the organization is able to move forward with bidirectional. It is important that organizations are checking their Data Quality Analysis (DQA) reports to see which messages contain errors and address those errors. Organizations can utilize our *Texas Immunization Registry HL7 2.5.1 Error Guide* which is available on our DSHS ImmTrac2 website, under Forms & Documents, for a detailed analysis of errors they're seeing and how to resolve them.

Q: Is bidirectional reporting optional or required?

A: Bidirectional is only a requirement for organization's participating in Promoting Interoperability (formerly known as Meaningful Use Stage 3). Please speak with your Promoting Interoperability coordinator to learn more about bidirectional data exchange deadlines that may apply to your organization.

Q: How should mobile clinic locations that are all based out of a single office report data to the registry?

A: Mobile clinics can choose to either report under one site in ImmTrac2, meaning that every immunization reported will reflect from one specific site.

Or each mobile site can register in ImmTrac2 to be identified as unique sites. Each mobile clinic will have its own unique identifiers (Organization code, TX IIS ID number, etc.). Organizations who select to have each mobile site established as unique sites will need to ensure that they speak with their EHR vendor to confirm that they correctly map the new TX IIS IDs associated to each unique mobile clinic.

Q: What is SOAP?

A: Simple Object Access Protocol (SOAP) is a standard based web services access protocol which relies solely on XML to provide messaging services.



Q: How can an organization determine if they have SOAP capabilities?

A: Organization's will need to communicate with their electronic health records (EHR) vendor to identify if their organization's systems have SOAP capabilities.

Q: Should organization's reach out to IMMTRAC or their EHR vendor first for bidirectional?

A: To begin participating in bidirectional data exchange, your organization must first review the Bidirectional Readiness Checklist found on our <u>website</u>. Once you have reviewed the checklist and believe your organization and EHR meet all requirements for participation, please contact the registry and state your readiness.

Q: How can organization obtain their TX IIS ID?

A: Organizations can email the registry at Immtramu@dshs.texas.gov with their organization's name, address and phone number. If the organization is registered, a TX IIS ID will be provided.

Q: Would Consents still be needed for immunization's to be uploaded/stored into ImmTrac2?

A: For the registry to legally retain patient's immunization record in ImmTrac2, an ImmTrac2 consent form will need to be completed and added to the registry. The only instance when consent is not required for immunization retention is when disaster related immunizations (ex: COVID immunizations) are being reported. The registry will store any administered related immunization for up to five years (without consent). After five years, any disaster related immunization will be permanently purged from the system.

Q: Will a resource from the state be provided to organizations during the bidirectional interface process?

A: Once an organization begins onboarding, they will be assigned a point of contact who will work with them for the next four to six weeks to ensure that the organization successfully completes testing to moves into production.



Q: Are School districts only restricted to use Query only?

A: Query Only is typically chosen by organizations that do not administer immunizations, like some schools or health plans. School district that administer immunizations, may choose to move forward with the VXU and Query option.

Q: Does the Texas Immunization Registry charge a fee to set up a bidirectional interface?

A: ImmTrac2 does not charge a fee for data exchange, but EHRs may have an associated fee. Please speak with your EHR vendor for further guidance.

Q: Can Health plans/entities pursue bidirectional?

A: Yes. Health Plans may establish a bidirectional interface with the registry to Query the system in real time to meet reporting needs.

Q: Who can organizations contact to obtain credentials to review their Data Quality Analysis (DQA) report?

A: An organization's Point of Contact may email <u>Immtracmu@dshs.texas.gov</u> for the login credentials to their data exchange (ftp) account.

Q: Can organizations still get an exemption for 2020 performance year for bidirectional requirement for IMMTRAC for MIPS?

A: Since the state registry did not declare readiness for bidirectional data exchange until June 26, 2020 everyone with a reporting period in 2020 is qualified for the exclusion (i.e. exemption).

Q: Will organizations still receive a DQA response files as part of the bidirectional feeds?

A: DQA reports will no longer be provided for organizations who transition over to bidirectional data exchange. Errors and rejections will be provided in real time by the registry. Your EHR vendor will need to configure your EMR to receive the ACK (response) messages in real time with bidirectional.



Q: Can an organization report immunization via FTP while Querying the system via webservices?

A: No. Organizations may only have one data exchange account at a time. Organizations will need to decide whether they would like a unidirectional (FTP) or a bidirectional (webservice) interface with the registry. FTP submitters, do not have the option to query the system. Query capabilities is only reserved for bidirectional organizations.