Script for Introduction to Data Exchange Webinar

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Title Slide

Introduction to Data Exchange with the Texas Immunization Registry.

Introductions

Hello everyone.

My name is Jonathan Patterson. I will be the main presenter today. I am an Interface Analyst with the Texas Immunization Registry.

Joining us today for the question and answer portion after our main presentation is:

Angela Herrera. Our Interoperability Team Lead, and

Jerry Peterson. A Continuous Quality Improvement Analyst. If you have any questions you would like to ask during this presentation, you will see an option for submitting questions at the bottom of your screen. Please submit your questions there and we will try to answer as many as can at the end of this presentation.

Overview

In this presentation we will discuss

how to establish a data exchange connection with the Registry,

as well as resources you can use,

and contact information.

Methods of Data Exchange

Before we dive into setting up a data exchange connection, let's talk about the types of data exchange offered by the registry.

The first and oldest option available is Batch F-T-P. FTP stands for File Transfer Protocol.

Batch F-T-P data exchange is unidirectional, meaning that records move in one direction: from your Electronic Health Records software, or EHR, to the registry, but not from the registry back to your EHR

There is also a processing delay for batch FTP. You would only upload records about once a week in batches, hence the name batch FTP, and then there would be another delay of about a few days before those records would show in ImmTrac2.

Batch FTP does offer a lot of flexibility in how you send records. You could use the registry's FTP website, your own FTP software, or an FTP connection set up by your EHR vendor. It's important to note that this method no longer meets Promoting Interoperability requirements.

The second option for data exchange with the registry is bidirectional data exchange. This option just recently became available when the registry declared readiness on June 26th. This is the option you would want if you are pursuing Promoting Interoperability.

Bidirectional data exchange, as the name would imply, allows records to be shared back and forth between your EHR and the registry.

Bidirectional data exchange occurs in real-time without any significant delay allowing you to look up records in the registry as you need them and for your records to appear in ImmTrac2 soon after documenting them.

All of this is done from within your EHR, so there is no need for additional software or websites to exchange records.

Step 1: Site Registration and Renewal

Once you've chosen a method of data exchange, the first step to getting connect is site registration and renewal.

Make sure that all the sites in your organization are registered in ImmTrac2 and that their site agreements are up to date. This step is crucial to ensuring that all of your organizations' information is accurate and up-to-date with the registry before you can begin to establish a data exchange connection.

As a reminder, site renewals must be completed once every two years, or whenever there are changes to:

your organization point of contact (POC),

- the business name, or
- when you need to add more than 5 new users.

Once completed, registrations and renewals may take the registry between 10 to 14 business days to process.

Assistance with Site Registration and Renewal

If you need any assistance with your Registration or Renewal,

Refer to the website at http://www.ImmTrac.com for the

Site Registration Guide if new to ImmTrac2, or the

Site Renewal Guide if already registered in ImmTrac2.

You can also contact ImmTrac2 customer support by

calling 800-348-9158 option 4, or

emailing <u>ImmTrac2@dshs.Texas.gov</u>. Please be aware that our phone support is currently unavailable due to our staff working remotely.

Step 2: Complete the Registration of Intent (ROI)

For step 2, you must fill out and complete the Registration of Intent, or ROI form.

The ROI indicates your organization is interested in participating in data exchange with the Registry.

It captures key information about your organization and EHR vendor such as who is your EHR vendor and what staff from your organization will be participating in the setup of your data exchange connection.

Only Parent or Stand-Alone Sites Submit Data

If you are part of a large organization with multiple sites, your parent site (or headquarters) is the only site that can submit an ROI as the ROI is used at an organizational level. This means that organizations with multiple sites will establish one data exchange account with the registry for the entire organization.

Batch FTP ROI

The ROI for Batch FTP can be submitted in ImmTrac2. Simply login to ImmTrac2, click the "Registration/Renewal" tab at the top of the screen, and then select "Registration of Intent".

Bidirectional ROI

The bidirectional ROI is not in ImmTrac2. Instead, you will begin by reviewing the Bidirectional Readiness Checklist found on the ImmTrac Forms & Document page.

Once you have reviewed the checklist and you believe that you meet all of the requirements for bidirectional data exchange, email the registry at ImmTracMU@dshs.texas.gov. State that you have reviewed the checklist and are ready to start bidirectional data exchange.

The registry will review your request and, if approved, then email the ROI form to your organization's Point of Contact.

Simply fill out the form and then email it back to the registry.

Step 3: Set up a Data Exchange Connection

The third step is to set up your organization's data exchange connection for testing.

After your ROI has been accepted, your organization's P-O-C will receive useful information about the data exchange account via email. This includes the data exchange login credentials (such as the username and Password for the data exchange account) and resources on how to setup or manage the data exchange account, including data quality management. If you are setting up a bidirectional connection, you will also receive a testing plan to follow.

Your data exchange credentials are only for data exchange and are different from those used by clinical staff to log in to the ImmTrac2 website.

The data exchange credentials are assigned to the organization, not to individuals, and must be maintained by the POC. Again, this is an organizational account, not an individual account.

Because of this, the POC may share the data exchange credentials with anyone in the organization who maintains or supports either data exchange

or the quality of data sent to the registry. This usually includes the EHR vendor staff and internal or external IT personnel.

Data Exchange Resource Guide

Another useful resource you should review while preparing for data exchange is the Data Exchange Resource Guide. Much of the information is currently geared towards Batch FTP, but it can help with some questions that may come up during bidirectional data exchange as well. We will discuss where to find this and other guides later in this presentation.

Step 4: Testing

After your data exchange connection is set up, the next step (Step 4) is Testing.

The registry requires all organizations to perform and pass testing to ensure their data exchange setup is configured to state standards.

Testing allows you to:

- Make sure your connection with the registry works correctly and you are able to successfully send data,
- Identify and resolve any data quality or technical issues that would prevent your data from being accepted by the registry,
- Familiarize yourself with new data exchange processes such as accessing and reviewing data quality errors, and to
- Identify training needs for your staff.

It is important to note that information sent to the registry during testing is *NOT* added to ImmTrac2.

HL7 Error Guide

A helpful tool you should use during testing, and later in production, is the Texas Immunization Registry HL7 2-point-5-point-1 Error Guide. It explains errors and provides guidance for resolving them.

Consents – A Significant Hurdle

Another topic to address during your testing is registry consent. The registry consent process is often one of the most significant hurdles for organizations

new to data exchange with the registry. It can have significant data quality and legal ramifications.

For this reason, it is very important that organizations give special attention to registry consent and review your organization's registry consent process.

State law requires individuals to give written consent before their records can be stored in the registry. The registry has its own official consent form for individuals to sign up (opt-in) to the registry to have their personal and immunization information stored in the registry.

Registry consent is optional for patients meaning that they are not required to participate. It's also important to note that this is different from other forms of patient consent, such as consent to share.

Patient Records Stored in the Registry AFTER Consent Signed

As I mentioned, patients must sign an official registry consent form, available on our website, before the registry may store the patient's immunization record. Any records sent to the registry for patients without registry consent on file will not be stored in the registry.

Additionally, your organization must add the patient to the registry as a client.

So how does your organization add patients as registry clients? Affirming that the client has consented to be in the registry can be done in one of two ways:

One way is online via the ImmTrac2 website. This is the same method used prior to data exchange. It is often called the manual affirmation process. Training on how to perform this task is available on our website. This method is only available for Batch FTP data exchange. If you choose bidirectional data exchange, manual affirmation is not an option.

The second way is electronically via data exchange. This method requires additional setup and testing by your organization but is best to be done in this step we are discussing, Step 4, Testing. If you choose to add patients as registry clients via data exchange, be sure to communicate that early on with both the registry and your EHR vendor. Electronic affirmation is required for all bidirectional connections.

Providers must retain the original registry consent form and save it in the patient's medical record.

PLEASE don't send the consent to the registry unless requested to do so by the registry! If you have any questions about registry consent and affirmation, you can reach out to the Texas Immunization Registry for quidance.

Testing Data Quality

During testing you will be primarily examining your organization's data quality. To do this:

Use your new data exchange account to

set up your connection, and

Send example immunization records to the registry. Keep in mind that during testing you may want to submit real examples of patients you see, so that you and the registry can evaluate how your data will come across, and identify any data quality issues or errors. Remember that none of the records submitted during testing will be added to the registry.

Review and correct any data quality or technical issues. It is your responsibility to manage your organization's data quality to ensure patient and immunization data is of good quality. Data with errors or issues will not get uploaded to the registry and may impact the patient's continuity of care.

Work with Your EHR Vendor and our Interoperability Team

You will likely need to work with your EHR vendor and our interoperability team to resolve errors.

You are responsible for troubleshooting and resolving issues on your organization's side.

For assistance on resolving issues, we suggest involving:

- your EHR vendor,
- your organization's internal IT support team, and
- the Registry's interoperability team at the DSHS State Office.

Take the lead with your EHR vendor and establish a good relationship with them. It's important that you drive the process and make sure your expectations are being met.

Note that our local and regional staff do not provide training on data exchange. Those specialized trainings are limited to the Interoperability Team.

Step 5: Production

After testing has been successfully completed, the fifth step is Production.

Your organization is now ready to add patient records to the Texas Immunization Registry via data exchange! From this point forward, any records sent to the registry that are error free will be added to ImmTrac2. If you are using bidirectional data exchange, you will also be able to begin looking up your patients records as well.

Records you send will be reviewed for data quality issues and you will continue to receive error responses when appropriate.

Only error-free data is accepted by the registry, so

Remember to check your errors regularly when in production!

An email is sent to everyone on your data exchange contact list letting them know you have been promoted to production.

To improve the quality and completeness of your patients' records in ImmTrac2, we recommend sending any historical immunization records that have not previously been shared with the registry.

Contact the Registry If There Are...

Contact the registry for guidance and support if there are:

Changes in your Electronic Health Records such as a new vendor or a new E-H-R program,

A change in your organization's point of contact, or

Testing of any new system upgrades that may impact data exchange.

Step 6: Ongoing Submissions of Data

The final step in establishing a data exchange connection is the Ongoing Submission of Data. On an ongoing basis, your organization must:

Submit immunization records to the registry at regular intervals.

Be responsible for the quality of your data sent to the registry.

Review your data quality on a regular basis to identify any errors or issues.

Work with your EHR vendor to correct any errors that arise.

And contact the registry any time you need assistance and support.

Steps to Establish a Data Exchange Connection

Let's recap. The 6 basic steps for setting up a data exchange connection with the Texas Immunization Registry are:

- 1. Ensure all of your sites are registered with up-to-date Site Renewals,
- 2. Submit a Registration of Intent,
- 3. Set up a data exchange connection,
- 4. Perform data exchange testing,
- 5. Enter Production, and
- 6. Have an ongoing submission of data.

Resource Guides

Now lest review some of the resources and guides available to you:

The Electronic Data Exchange Resource Guide, stock number 11-15231, which provides detailed steps and information on how to establish a data exchange connection with the registry.

The Data Quality Guide, stock number 11-15232, which provides guidance on the most common data quality issues organizations face and how to correct them.

The Secure File Transfer Protocol Specifications, stock number 11-15236, which contains all the information you and your support team will need to set up a secure FTP connection with the registry.

The Texas Immunization Registry HL7 2.5.1 Implementation Guide, stock number 11-14872, contains detailed descriptions of the HL7 customizations need to transmit HL7 records to the registry. This document is intended to be used as a companion to the CDC's standard HL7 2.5.1 implementation guide.

The HL7 2.5.1 Error Guide, stock number 11-15703, which provides guidance on all the data quality errors our system produces and detailed instructions on how to resolve the errors. This resource should be one of the primary go-to tools in your data exchange tool box.

Additional Resource Guides

Texas Immunization Registry Consent Overview, stock number 11-15702, provides information about what registry consent is and how it works. This is a non-technical document that non-IT individuals can easily read and answers most common questions about consent.

The ImmTrac2 Site Registration Guide, stock number 11-15175, provides detailed step and useful information about how to register new sites with the immunization registry.

The ImmTrac Site Renewal Guide, stock number 11-15252, provides detailed steps and information on how to submit an ImmTrac2 site renewal.

Lastly, we also have a library of online training videos available. These resources and more can be found on the DSHS Texas Immunization Registry website.

Customer Support Phone Line

The registry has a customer support phone line. The line is currently unavailable due to remote work, but once it is available again you can reach us by calling

800-348-9158, Monday through Friday, from 8:00 am to 4:30 pm central time.

Choosing option 1 provides assistance for the general public, such as requesting immunization records.

Option 2 gives assistance with the ImmTrac2 website, including access.

Option 3 provides assistance with data exchange and puts you in contact with the Interoperability Team.

Option 4 gives assistance with site registrations or renewals.

Email

You can also email the Texas Immunization Registry. Email is currently the best way to get in contact with the registry. The registry has two email addresses.

Email us at ImmTrac2@dshs.Texas.gov for questions about ImmTrac2 access, site registrations or renewals, adding or removing users, training, or publications.

Email us at ImmTracMU@dshs.Texas.gov for questions on data exchange, promoting interoperability, or data quality reports.

ImmTrac2 Website

To find more information on the Texas Immunization Registry, visit our websites.

The ImmTrac2 website is primarily used by health care organizations like yours who use the ImmTrac2 application.

This site is where organizations can get registered to gain access to ImmTrac2.

Once granted access, you can look up registry client information, run reports,

add immunizations, and much more.

We also list the link to the website here.

Texas Immunization Registry Website

The second website is the DSHS Texas Immunization Registry website, our public facing website.

This site provides information on how to opt-in or sign up to be a registry client,

how to get a copy of your immunization records, and

how to order registry publications or posters or locate the resources we discussed earlier.

We list the website link here. This concludes our presentation.

Thank You!

Thank you, from the Texas Immunization Registry.

Q & A