

NMSIIS On-Boarding Test Requirements Guide



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Revision History

Date	Version	Author	Changes
6/30/2014	2.1	Fran Johnston	<ul style="list-style-type: none"> • Moved BTS segment information in front of FTS segment for proper continuity. • Added Parent/Child information and examples for FHS/BHS/MSH segments to assist providers in understanding how NMSIIS requires the data.
7/30/2014	2.1	Fran Johnston	<ul style="list-style-type: none"> • Updated page headers
9/16/2014	2.2	Fran Johnston	<ul style="list-style-type: none"> • Updated OBX requirements • Removed Financial Class V05 – not needed in documentation
7/02/2015	2.3	Fran Johnston	<ul style="list-style-type: none"> • Updated Production batch file requirements from 750k to 250k • Removed Financial Class V07
01/15/2016	2.4	Elizabeth Cisneros	<ul style="list-style-type: none"> • Removed the option to send messages as parent child relationship.
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5/1/2016	2.6	Elizabeth Cisneros	<ul style="list-style-type: none"> • Removed Certificate information

Overview

This guide provides on-boarding information for Automated Data Exchange (ADX) with the New Mexico Statewide Immunization Information System (NMSIIS).

Automated Data Exchange (ADX) allows providers to submit immunization information directly from their Electronic Health Record's (EHR). This eliminates the need for manual data entry through the NMSIIS website. ADX provides a more accurate and less costly alternative to manual data entry. The NMSIIS on-boarding process is designed to ensure that EHR's and NMSIIS can successfully and accurately exchange data.

Audience

This NMSIIS On-Boarding Guide is for Providers and EHR vendors. Specifically, it includes on-boarding information for project managers, developers, and technical personnel. Familiarity with HL7 standards, Immunization Information Systems (IIS), EHR's, and basic database operations is assumed.

Time Estimate

After a Provider registers for ADX with NMSIIS, the NMSIIS team begins work with their technical staff. The Provider's technical staff will make the necessary EHR changes. NMSIIS estimates that a dedicated and responsive Provider can be fully on-boarded in three to six weeks. The Coordinator will keep communication with the Provider and/or EHR vendor periodically.

After on-boarding completion, Providers should periodically check their data on the NMSIIS website for quality assurance purposes.

Process Steps

The NMSIIS On-Boarding process includes five phases:

1. **Registration** – collection of basic Provider contacts, EHR vendor contacts, and NMSIIS on-boarding information
2. **Ready Check**– HL7 competence testing and EHR information gathering
3. **Production**– migration to production

Each phase includes duties for the Provider and for the NMSIIS team. The appropriate party must complete the phases in order. Providers should expect the [Message Testing](#) phase to demand the most effort and time.

Registration

In the Registration phase, Providers must register with the New Mexico Health Information Technology (NMHIT) workgroup at www.nmhit.org. This online registration includes a quick process to collect basic contact and Provider information.

The New Mexico Department of Health (NMDOH) has provided the capability for health care providers to test their messages through this website. Providers must register and create an account to begin the on-boarding process.

The Registration Phase:

1. Provider registers on the NMHIT.org website.
2. Coordinator welcomes the NMHIT.org registrant through email. The email includes [NMSIIS Provider and EHR Information Sheet](#).
3. Provider completes the [NMSIIS Provider and EHR Information Sheet](#) and emails to the Coordinator at Elizabeth.Cisneros@state.nm.us.
4. Coordinator assesses [NMSIIS Provider and EHR Information Sheet](#) and EHR architecture.
5. Provider & EHR receives email from Coordinator with link to On Boarding documents.
6. Provider and EHR vendor download and review the On Boarding documents. The documents include:
 - [NMSIIS On-Boarding Guide](#)
 - [NMSIIS Participant Organizational Security and Confidentiality Agreement](#)
 - [NMSIIS User Security and Confidentiality Agreement](#)
 - [NMSIIS HL7 2.5.1 Local Specifications Guide](#)

Ready Check

In the Ready Check phase, Providers and EHR complete required documentation.

1. Provider completes the [NMSIIS Participant Organizational Security and Confidentiality Agreement](#), [NMSIIS User Security and Confidentiality Agreement](#), [NMSIIS Provider and EHR Information sheet](#) and mails or faxes to NMSIIS at the address contained at the end of this Guide. Provider then receives Org ID from NMSIIS Program.
2. Provider tests for HL7 2.5.1 competence on NMHIT.org and achieves zero errors.

Ready Queue

During the Ready Queue phase, the NMSIIS Coordinator will contact the Provider and EHR vendor to ensure they are prepared to move onto the message testing phase. When the Coordinator is satisfied with the communications aspect, the provider and EHR vendor will be notified as to when they can move into the next phase.

1. Coordinator places the Provider into the Ready Queue phase.
2. Coordinator conducts an orientation interview with the Provider's management staff and EHR vendor. The orientation interview allows the Provider and EHR vendor to ask NMSIIS questions. It also gives NMSIIS an opportunity to verify readiness information.
3. The Coordinator will also have the opportunity to verify multiple sites if applicable.
4. Coordinator emails the Provider and EHR vendor to verify the move from the Ready Queue to the Message Testing phase.

Message Testing

During the Message Testing phase, the Provider or EHR vendor completes [Connectivity Test](#) and test messages. After the Provider completes their testing, the NMSIIS data exchange coordinator will verify the results. The on boarding coordinator will direct the provider and EHR to the location in NMSIIS to download the specifications:

- Provider receives assigned data exchange org/pin codes and Transmission guide from Coordinator.

ADX Connectivity Test

1. Provider completes the [Connectivity Test](#) found in [Appendix C](#).
2. Provider notifies Coordinator at Elizabeth.Cisneros@state.nm.us. when Connectivity test concluded and results found in the Connectivity Test response file.

Message Tests

1. Provider notified by Coordinator to begin Message Testing.
2. Provider conducts the message tests found in [Appendix D](#).
3. Provider corrects any and all errors found in the response files. Then, resubmits the corrected messages to NMSIIS. Providers must complete this process until they receive response files with no rejections and minimal errors.
4. If the NMSIIS test coordinator finds a problem with any of the message tests, the coordinator notifies the Provider to repeat that particular message test.
5. Coordinator notifies the Provider of the message test approval.

Production

During the Production phase, the Provider migrates in a coordinated move from testing to production.

1. NMSIIS Outreach Coordinator contacts EHR Vendor to reiterate responsibilities, verify contact information, and confirm a "go" status for Production phase.
2. NMSIIS Outreach contacts Provider to reiterate responsibilities, verify contact information, and confirm a "go" status for Production phase.

3. Data Exchange Coordinator schedules move to Production and notifies Provider and EHR Vendor
4. NMSIIS Technical Staff sends Production URL to Provider.
5. Data Exchange Coordinator notifies Provider of initial production data exchange success.

Responsibilities

The NMSIIS team works closely with the Provider's technical staff and EHR vendor to ensure a smooth on-boarding process. The following section lists NMSIIS responsibilities and responsibilities for the Provider and EHR vendor.

Provider and EHR Vendor

The Provider and EHR vendor agree to the following responsibilities. The Provider and EHR vendor must:

- Download all required documents listed in this guide.
- Complete all required checklists referenced in this guide.
- Provide own technical support and HL7 analysis.
- Research and correct all the errors in a response file. Then, resubmit the corrected file to NMSIIS. Providers must complete this process to achieve a response file with zero errors.
- Inform the NMSIIS Outreach Coordinator of new sites and/or changes in sites.
- Check data periodically for quality assurance purposes.
- Contact the Data Exchange Coordinator if they cannot send and/or receive messages.
- Email the Data Exchange Coordinator changes in: transport protocol, EHR, EHR vendor, management, and contact information related to Automated Data Exchange (ADX).
- Maintain registration and communication with NMSIIS.
- Update the NMSIIS Participant Organizational Security and Confidentiality Agreement yearly.

NMSIIS

The NMSIIS team agrees to the following responsibilities. The NMSIIS team will:

- Provide NMSIIS technical information.
- Give access to the NMSIIS testing and production system.
- Maintain contact with the Provider and EHR vendor through the on-boarding process. The Provider and EHR vendor must in turn, keep in contact with the NMSIIS team to ensure a successful path to production.
- Clarify procedures related to NMSIIS.

NMSIIS Roles and Resources

The NMSIIS team includes the NMSIIS Outreach Coordinator, Data Exchange Coordinator, Program Manager, test coordinator, system administrators, and various technical staff. NMSIIS resources include websites and the physical address for the NMSIIS program.

NMSIIS Outreach Coordinator

The Coordinator is the main contact for the on-boarding process. The NMSIIS Outreach Coordinator is the point of contact for all paperwork, forms, and any questions about on boarding into the NMSIIS application.

Email:

NMSIIS Program Manager

The NMSIIS Program Manager manages all aspects of the NMSIIS program. Contact the NMSIIS Program Manager for general information about NMSIIS.

NMSIIS Data Exchange Coordinator

The NMSIIS Data Exchange Coordinator checks HL7 messages for problems during the on-boarding process. Contact the NMSIIS Data Exchange Coordinator for message testing information.

NMHIT

The NMHIT website promotes health information technology in New Mexico. Access the NMHIT website to register for NMSIIS Automated Data Exchange (ADX), run general HL7 competence tests and verify progress status of the on boarding process. The NMHIT website can be found at:

www.NMHIT.org

Appendix A. Automated Data Exchange Guide

The NMSIIS Automated Data Exchange (ADX) Transmission Guide provides information about interfaces available for real-time data exchange between a client and the New Mexico Department of Health (NMDOH). This ADX guide allows providers to make an initial assessment of their ability to transmit real-time information to the New Mexico Statewide Immunization Information System (NMSIIS).

Introduction

This document provides information about interfaces available for real-time data exchange between a client and the New Mexico Department of Health. The information in this document is

intended to allow providers to make an initial assessment of their ability to transmit real-time information to the New Mexico Statewide Immunization Information System (NMSIIS).

The goal of this document is giving the reader a solid technical understanding of our platform and what it has to offer in order to effectively exchange data in a real-time fashion.

Interfaces

The foundation communication layer at the core of all our interfaces is **Secure HTTP**. The reason behind it relies on its broad acceptance across different platforms, availability of software implementations and communication tools used by developers. Depending on the degree of familiarity with technical matter a total of two interfaces are available to choose from and their requirements are discussed in the NMSIIS Automated Transmission Guide which is provided to you by the Outreach Coordinator:

- Web Services
- WSDL

Important! Before starting you need to obtain the following information from the New Mexico Department of Health:

- orgCode
- pinCode

The *orgCode* is either a numeric or alphanumeric string assigned by the New Mexico Department of Health that uniquely identifies your organization. The *orgCode* is also called "**shortname**".

The *pincode* is a numeric field generated by the New Mexico Department of Health used in conjunction with the *orgCode* uniquely for the purpose of exchanging data through our interfaces.

To contact New Mexico Department of Health personnel that can help you obtain the above mentioned information please refer to Appendix A.

APPENDIX B

Required Segments

The required segments per the NMSIIS specification are discussed below.

If the provider is sending messages in real-time mode, only the MSH segment is required.

MSH-4 field

The MSH-4 field will contain the Organization **short name** for the sending facility. This is the short name assigned to you by the Outreach Coordinator.

MSH-5 field

The MSH-5 field is required by may be empty per the specification. If it is populated, use **NMSIIS** as it is defining the receiving application.

MSH-6 field

The MSH-6 field needs to contain the receiving organization, in this case **NMSIIS**. Messages that do not contain NMSIIS will be rejected. When NMSIIS acknowledges or sends a response file back to the facility, this value echoes the MSH-4 sending facility field.

ORC Segment – Common Order Segment

The Common Order segment (ORC) is used to transmit fields that are common to all orders.

Example:

```
ORC|RE||12345^NMSIIS|||||||
```

OBX Segments – Observation/Result Segment

Per the NMSIIS HL7 2.5.1 specifications, the OBX segments are required for administered immunizations. The funding source OBX segment contains the Financial Class in the OBX-5 field and is required by NMDOH for an administered immunization. These codes are listed in the New Mexico HL7 2.5.1 Local Implementation Guide. The OBX segment transmits a single observation or observation fragment, and can be used more than once in the message. More than one OBX segment may be used in a message, depending on the requirements for the provider. Sequentially number the OBX segments as needed and shown in the example below.

The OBX segment is not required for the following:

- Adult immunizations
- Historical immunizations

Examples:

OBX|1|CE|64994-7^Vaccine funding program eligibility category^LN|1|V01^VFC eligible - Local-specific eligibility^HL70064|||||F|||20140410||| |||||

OBX|2|TS|29768-9^DATE VACCINE INFORMATION STATEMENT PUBLISHED^LN|1|20010711|||||F|

OBX|3|TS|29769-7^DATE VACCINE INFORMATION STATEMENT PRESENTED^LN|1|19901207|||||F|

OBX|4|CE|38890-0^COMPONENT VACCINE TYPE^LN|1|45^HEP B, NOS^CVX|||||F|

Ignored Segments

The PV1 segment is ignored in Version 2.5.1 of HL7 for immunizations and in the NMSIIS application. The response file will indicate a warning message.

Appendix C. Connectivity Test

The Connectivity Test checks the Provider's system's ability to transport a message. The connectivity test is very simple. Have your EHR generate a valid HL7 message and submit it to the NMSIIS Test System (UAT) using the connection information in the Connectivity Specification.

Detailed Steps:

1. Successfully complete the NMSIIS Org Agreement, NMSIIS User Agreement, Registration and Ready Check steps
2. Contact the NMSIIS On-boarding team and request the *NMSIIS Automated Data Exchange Transmission Specification*, your NMSIIS Organization ID, and your organization's Pin Code.
3. Review the *NMSIIS Automated Data Exchange Transmission Specification* and decide which method you will use to transport your data.
4. Set up your data transport using your chosen method.
5. Submit a valid HL7 message from your EHR to the NMSIIS test system (UAT)
6. Rhapsody errors indicate the test was unsuccessful. This Sample Rhapsody error indicates the incorrect org and/or pin code combinations were used: "[RHAPSODY ERROR] SUBMITTING FACILITY IN MESSAGE INCORRECT FOR SUBMITTING PARTY"
7. If the test is successful you will receive an HL7 response file from NMSIIS. Any HL7 formatted response from NMSIIS is acceptable. At this point in the testing process you can ignore any error messages contained in a NMSIIS response message. A Sample response message follows, please note the "NMSIIS" value in FHS-3:

```
MSH|^~\&|IZ
Registry|NMSIIS||316|20160413151851||ACK^V04^ACK|20160413NMSIIS404843|P|2.5.1
MSA|AE|IMMUN.1.23303
```

ERR||Pd1^0^16^1|103^Table value not found^HL70357|W||||PD1-16
(ImmunizationRegistryStatus) unable to be set, missing PD1-17
(ImmunizationRegistryStatusEffectiveDate)

ERR||PD1^1^16^1|999^Application
error^HL70357|W|||(Path:PD1/ImmunizationRegistryStatus)|PD1-16
(PD1/ImmunizationRegistryStatus) : Field value not found in validation table

ERR||Pd1^0|0^Message accepted^HL70357|I||||The PD1-12 (ProtectionIndicator) has
been set, the contents of this message will still be loaded. Please contact the
registry if you wish to opt out the patient.

8. The NMSIIS on boarding team will review your response file to ensure that all is correct per their requirements and specification.

Appendix D. Message Tests

This Appendix provides test cases for evaluating an Electronic Health Record's (EHR) ability to create HL7 2.5.1 test messages that the New Mexico Statewide Immunization Information System (NMSIIS) accepts. The test procedures may be updated during the on-boarding activities. These test cases were developed to ensure the provider and EHR vendor could create and complete messages per the NMSIIS specifications.

Server Downtime

The NMSIIS system is backed up from approximately 12:00 am to 4:00 am Mountain Time daily. During this time, the interface will not be available.

Please refrain from sending messages during this timeframe. Your messages may be rejected and when this occurs you may be notified by the NMSIIS personnel.

Instructions

Each test case presents a situation that needs to be translated into an HL7 message and transmitted to NMSIIS. The scenarios provide the critical information in both narrative and tabular format. The TESTER must read the scenario and enter the appropriate information into their EHR and, using the EHR's HL7 encoding functionality, create the HL7 message for testing.

Once the message has been created, the messages must be transmitted to the NMSIIS testing system by the submitting entity - Provider or EHR provider (for simplification, referred to as the TESTER). After the message has been processed by NMSIIS, a response message will be automatically returned to the submitting entity. The TESTER is responsible for analyzing the response file and taking appropriate action to correct any problems. The messages will need to be modified and resubmitted until the data exchange coordinator is satisfied with the messages and testing.

Some of the Test Cases are optional and should only be used by providers who's EHR's are able to submit record protection and death notifications. All other tests are **required**. Financial Class 05 will not be addressed as it does not apply to New Mexico.

If you have questions about the testing process please contact the NMSIIS program at NMSIIS.Access@state.nm.us.

Creating Names

Each test must contain a unique person name for the test cases. These names must be unique across the test system or the tests will fail due to the messages being flagged as duplicates and merged. Each iteration of a test case will need a new, unique name since the name will be stored in the NMSIIS system.

Suggestions: 1) Create names using a random string of letters or 2) use values unique to your organization.

Creating Birth Dates

Birth dates in these test cases are expressed as the age of the patient on the day the test files are created. The TESTER must calculate the date of birth given the patient's current age.

Tip: This Excel formula calculates the date of birth given the current age in years, months and days:

```
=DATE(YEAR(TODAY())-C1,MONTH(TODAY())-B1,DAY(TODAY())-A1)
```

With Days in cell A1, Months in cell B1 and Years in cell C1.

Administration Dates and Expiration

Similar to birth dates, the TESTER must calculate the administration date and vaccine expiration date from the data provided in the test cases.



The tests cases are to demonstrate an EHR's ability to properly structure and encode HL7 messages. Therefore, the test messages must be created using the EHR's HL7 engine.

Financial Class V01 – Insured <= 18 years

This test case examines the ability of an EHR to create a message with immunizations administered to an insured client <= 18 years old.

Description

A client is brought to the clinic today for a well child visit. The clinic staff collects basic identifying information: name, birth date, and sex.

A clinician reviews the patient's immunization history and determines that the child requires an HPV (Cervarix) vaccine 1 year and 11 months ago.

Test Data

PATIENT INFORMATION	
Patient Name	[Created by TESTER, no PHI]
Date/Time of Birth	[Today - 13 years, 6 months, 0 days; See Instructions]
Administrative Sex	Male
Ethnic Group	Non-Hispanic

NEW IMMUNIZATION RECORD	
Vaccine funding program eligibility	VFC eligible – Insured

IMMUNIZATION ADMINISTRATION INFORMATION	
Administered Code (Text)	HPV Cervarix
Date/Time Start of Administration	[Today – 1 year, 11 months, 0 days]
Administered Amount	1 dose
Administration Notes (Text)	Historical information - source unspecified
Substance Manufacturer Name	GlaxoSmithKline

IMMUNIZATION ADMINISTRATION INFORMATION	
Administered Code (Text)	Meningococcal
Date/Time Start of Administration	[Today – 1 year, 11 months, 0 days]
Administered Amount	1 dose
Administration Notes (Text)	Historical information - source unspecified
Substance Manufacturer Name	Sanofi Pasteur

Financial Class 02 – Medicaid/Salud <= 18 years old

This test case examines the ability of an EHR to create a message for a client <=18 years of age or under, with Medicaid/Salud insurance, where immunizations are reported to NMSIIS.

Description

A client is brought to the provider for a visit. The clinic staff collects basic identifying information: name, birth date, and sex.

The clinician determines that the patient needs an Influenza (Fluarix) immunization and a DTaP-Hib-IPV (Pentacel) combination immunization.

The parent agrees that the child should receive the immunizations. A clinician interviews the parent to gather vaccine funding program eligibility information. The clinician determines that the patient qualifies for Vaccines For Children (VFC) supplied vaccines under the status of VFC eligible – Medicaid/Salud <= 18 years old. The clinician records the patient’s information and Medicaid Case Number into their system

A clinician prepares an Influenza vaccine, GlaxoSmithKline Lot # K5094SC, from the VFC publicly supplied vaccine stock and administers it to the patient in the right arm. The clinician also prepares a DTaP-Hib-IPV vaccine, Sanofi Pasteur Lot #568AHK11, from the VFC publicly supplied vaccine stock and administered it to the patient in the right arm.

Test Data

PATIENT INFORMATION

Patient Name	[Created by TESTER, no PHI]
Date/Time of Birth	[Current Age = 18 years or under as of day of test; See Instructions]
Administrative Sex	Determined by TESTER

IMMUNIZATION ADMINISTRATION INFORMATION

Administered Code (Text)	Influenza Fluarix
Date/Time Start of Administration	[Today]
Administered Amount	1
Administration Notes (Text)	New immunization
Substance Lot Number	K5094SC
Substance Expiration Date	[Today + 2 years; See Instructions]
Substance Manufacturer Name	GlaxoSmithCline
Route	Intramuscular
Administration Site	Right Arm

IMMUNIZATION ADMINISTRATION INFORMATION

Administered Code Text	DTaP-Hib-IPV Pentacel
Date/Time Start of Administration	[Today]
Administered Amount	1
Administration Notes (Text)	New immunization
Substance Lot Number	568AHK11
Substance Expiration Date	[Today + 2 years; See Instructions]
Substance Manufacturer Name	Sanofi Pasteur

IMMUNIZATION ADMINISTRATION INFORMATION

Route	Intramuscular
Administration Site	Right Arm

NEW IMMUNIZATION RECORD

Vaccine funding program eligibility	VFC eligible – Medicaid/Salud <= 18 years old
Financial Class	V02<=18 years

Financial Class V03 – No Health Insurance <= 18 years

This test case examines the ability of an EHR to create a message for a client <= 18 years of age with no health insurance.

Description

A client 18 or under is brought into the clinic. The clinic staff collects basic identifying information: name, birth date, and sex.

A clinician reviews the patient's immunization history and determines that the client needs to receive an HPV immunization. If this is a male client, the immunization will be Gardasil and if the client is a female, the immunization will be Cervarix. Ensure that the client meets the age requirements.

Test Data

PATIENT INFORMATION

Patient Name	[Created by TESTER, no PHI]
Date/Time of Birth	[Current Age = 18 years or younger as of the date of the immunization; See Instructions]
Administrative Sex	Determined by Tester

IMMUNIZATION ADMINISTRATION INFORMATION

Administered Code (Text)	HPV – Gardasil or Cervarix
Date/Time Start of Administration	[Today]
Administered Amount	1 dose
Administration Notes (Text)	Administered

NEW IMMUNIZATION RECORD

Vaccine funding program eligibility	No Insurance
Financial Code in OBX-5 field	V03

Financial Class V04 – American Indian/Alaskan Native <= 18 years

This test case examines the ability of an EHR to create a message for a well child visit single immunization where the guardian has indicated that the information shall be protected.

Description

A child is brought to the clinic today for a well child visit. The clinic staff collects basic identifying information: name, birth date, and sex.

A clinician reviews the patient's immunization history and determines that the child previously received a Tdap (Boostrix) vaccine.

The clinic staff explains that this immunization information will be sent to NMSIIS. The guardian explicitly requests to protect Dora's immunization information in NMSIIS. The clinician then gives the guardian a NMSIIS supplied form. The guardian signs the form indicating that the patient's immunization history cannot be shared with authorized entities like schools and other health care providers.

Test Data

PATIENT INFORMATION

Patient Name	[Created by TESTER, no PHI]
Date/Time of Birth	[Today - 11 years, 4 months, 0 days; See Instructions]
Administrative Sex	Female

IMMUNIZATION REGISTRY INFORMATION

Protection Indicator	Yes, protect access to data. Do not share information
Protection Indicator Effective Date	[Today]

IMMUNIZATION ADMINISTRATION INFORMATION

Administered Code Text	Tdap Boostrix
Date/Time Start of Administration	[Today - 6 months, 0 days; See Instructions]
Administered Amount	1 dose
Administration Notes (Text)	Historical immunization – source unspecified
Substance Manufacturer Name	GlaxoSmithKline

This test case examines the ability of an EHR to create a message for a well child visit single immunization where the guardian has indicated that the information shall be protected.

Description

A child is brought to the clinic today for a well child visit. The clinic staff collects basic identifying information: name, birth date, and sex.

A clinician reviews the patient's immunization history and determines that the child previously received a Tdap (Boostrix) vaccine.

The clinic staff explains that this immunization information will be sent to NMSIIS. The guardian explicitly requests to protect Dora's immunization information in NMSIIS. The clinician then gives the guardian a NMSIIS supplied form. The guardian signs the form indicating that the patient's immunization history cannot be shared with authorized entities like schools and other health care providers.

Test Data

PATIENT INFORMATION

Patient Name [Created by TESTER, no PHI]

Date/Time of Birth [Today - 11 years, 4 months, 0 days; See Instructions]

Administrative Sex Female

IMMUNIZATION REGISTRY INFORMATION

Protection Indicator Yes, protect access to data. Do not share information

Protection Indicator Effective Date [Today]

IMMUNIZATION ADMINISTRATION INFORMATION

Administered Code Text Tdap Boostrix

Date/Time Start of Administration [Today - 6 months, 0 days; See Instructions]

Administered Amount 1 dose

Administration Notes (Text) Historical immunization – source unspecified

Substance Manufacturer Name GlaxoSmithKline

NMSIIS Helpdesk

The NMSIIS Help Desk assists with technical difficulties, including password resets. The NMSIIS Help Desk logs and tracks all calls and messages through completion.

Phone: 1-833-882-6454

(8:00 am to 5:00 pm Monday through Friday)

NMSIIS Program

The NMSIIS program and team members are located in Santa Fe, New Mexico. Mail or fax the documents to the NMSIIS program. **Email:** NMSIIS.Access@state.nm.us

NMSIIS

NMDOH/Immunization Program

Harold Runnels Building, S-1250

PO Box 26110

Santa Fe, NM 87502-6110

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