## **NMDOH ELR Onboarding QuickStart Guide**





All conditions listed in the New Mexico Administrative Code for Control of Disease and Conditions of Public Health Significance (7.4.3 NMAC) are reportable by "All physicians, laboratories, healthcare professionals, and other persons having knowledge of diseases or conditions," regardless of reporting mode or testing laboratory. Results should be reported for New Mexico residents and persons seeking care in New Mexico. New Mexico is a 'Dual Use' state, meaning hospitals, facilities, and providers are required to report regardless of if other entities report the same event.

The Trading Partner is responsible for:

Identifying stakeholders in their facility

Engage appropriately skilled people

Document the difference between ELR requirements and the ability of the system to send ELR

Communicate which results need to still be sent via ELR or Fax

The purpose of this document is to review the requirements for onboarding with ELR and the New Mexico Department of Health. For full guidance, see <a href="Mexico Department of Health">New Mexico Department of Health (nmhealth.org)</a>. Direct questions to: <a href="Mexico Department of Health">NMDOH.ELRinbox@doh.nm.gov</a>

- HL7 Version 2.5.1 Implementation Guide: Electronic Laboratory Reporting to Public Health Release 1 (US Realm) with Errata: <u>HL7 Standards Product Brief HL7 Version 2.5.1 Implementation Guide: Electronic Laboratory Reporting to Public Health, Release 1 (US Realm) | HL7 International.
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- Guidance for specific conditions can be found on nmhealth.org.
- Use snapshot mode.
- Send only Final and Corrected results.
- MSH, PID, ORC, OBR, OBX, NTE (where applicable), and SPM segments are required (see below).
- Resulted test (OBX3) must be LOINC coded <a href="http://loinc.org">http://loinc.org</a>. If you are unsure of which LOINC to use, check with test manufacturer.
- The Trading Partner is required to document any differences between what is required to send and what they can send.
- ELR content must fulfill the need of the program to investigate the case and mount a response.

The current offering for HL7 message delivery is sFTP. To connect to our sFTP server, the public facing IP address for the server(s) that will be sending data is required. These IP addresses will be added to the SYNCRONYS allow-list. A user ID and password will be generated and communicated back to you. Please use the following file naming convention:

<lab name>-ELR-TEST-<datetime stamp>.hl7

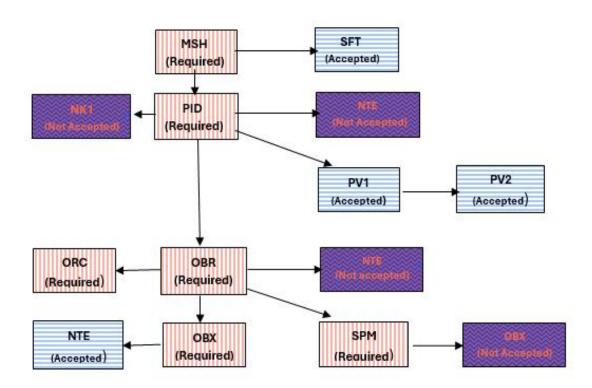
Example File Names:

EgorsLab-ELR-TEST-20240729-130517.0005.hl7 Flubbler Lab\_ELR\_TEST\_20240729-130517.hl7

The preference is for messages in batches, delivered hourly. You do not need to include a File Header (FHS) or Batch Header (BHS) segment. They will be accepted with or without. Please let SYNCRONYS know when you have placed files on the server, as the TEST environment does not auto-process. If possible, please route production messages under the "TEST" file name for validation purposes.

## Diagram of ORU^R01^ORU\_R01 Message Segment Structure with New Mexico Reporting Requirements





Following are New Mexico's specifications for literal values, requirement and requests above the HL7 implementation guide and provides information for fields where laboratories commonly have trouble.

Segment or Field Component	Description	HL7 2.5.1	Notes and literal values
MSH-1	FieldSeparator	R	Literal value: ' '
MSH-2	EncodingCharacters	R	Literal value: '^~\&'
MSH-4.1	SendingFacilityName	R	Describe the Sending facility so that a person can understand. Commonly recognized abbreviations are encouraged. (Limited to 20 characters).
MSH-4.2	SendingFacilityID	R	Enter your facility's CLIA or OID number
MSH-4.3	UniversalIDType	R	Literal value: 'CLIA' or 'ISO'
MSH-5	ReceivingApplication	R	Literal value: 'NMDOH^2.16.840.1.113883.3.5364^ISO'
MSH-6	ReceivingFacility	R	Literal value: 'NMDOH^2.16.840.1.113883.3.5364^ISO'
MSH-9	MessageType	R	Literal Value: 'ORU^R01^ORU R01'
MSH-10	MessageControlID	R	Must be unique for each message. Uniquely identifies the message instance from the sending application. NM requirement is different from HL7: number of characters is 100.
MSH-11	ProcessingID	R	Literal value: 'P' (even in test mode)
MSH-12	VersionID	R	Literal value: '2.5.1'
MSH-15	Accept Acknowledgment Type	CE	Literal value: 'NE'
MSH-16	Application Acknowledgment Type	CE	Literal value: 'NE'
MSH-21	MessageProfileIdenti fier	R	Literal value: 'PHLabReport-NoAck^^2.16.840.1.114222.4.10.3^ISO'
PID-3	PatientIdentifierList	R	This is a repeating segment. Enter the MRN in the first repeating block, then others. Reference laboratories should enter their own and the hospital's Person IDs if possible.
PID-5.7	PatientName	R in NM	Multiple repeating segments are accepted. At least one must have the literal value" 'L' (Legal).  We require a name in each message, even if it is a placeholder name. For example, if it is the only value available 'Baby' should be designated a legal name until the actual name is entered into the system.
PID-8	AdministrativeSex	RE	Transform local codes to the value set HL70001. If your facility accommodates more than the value set HL70001, provide the codes and values to ELRC.
PID-10	Race	RE	Please use the value set from table HL70005. Unknown can either be blank or "UNK". No other values should be sent.
PID-11.9	CountyParishCode	RE	We request county information for home address. We prefer that it be coded as PHVS_County_FIPS_6-4, but if that is not possible, provide the ELRC with a list of possible codes and values. Text is also acceptable.
PID-22	EthnicGroup	RE	Transform local codes to the value set HL70189. If your facility accommodates more than the value set HL70189, provide the codes and values to the ELRC during the onboarding process. If Ethnicity is unknown, leave the field blank.

OrderingFacilityNam e	R	Ordering facility name, address and phone number are required regardless of the presence or absence of ordering provider information.
OrderingFacilityAddr ess	R	Ordering facility name, address and phone number are required regardless of the presence or absence of ordering provider information.
OrderingFacilityPhon eNumber	R	Ordering facility name, address and phone number are required regardless of the presence or absence of ordering provider information.
UniversalServiceIdent ifier	R	Please send a code, description and the name of the coding system. If LOINC is used please make sure the LOINC code is in OBR-4.1, the description in OBR-4.2 and "LN" is in OBR-4.3. If a local code/description is being sent, it can appear in either OBR-4.1, 2 and 3 or OBR-4.4, 5 and 6. Please use "L" for the name of the coding system.
ResultStatus	R	Send only F (Final) or C (Corrected) results. Do not send preliminary (P) results—if it is a preliminary result (a culture result, for example) for a condition that requires emergent notification, call the Epidemiology line at 505-827-0006. Do not send ordered tests that have been cancelled (X) they will fail in our system.
ValueType	R	Use only NM, CE, CWE, ST, TX, CE, DT, TS or SN values. Make sure that OBX-2 and OBX-5 match.
ObservationIdentifier	R	OBX-3.1 must be a LOINC code with the description in OBX-3.2 and "LN" in OBX-3.3. A local code is allowed in OBX-3.4 with description in OBX-3.5 and "L" in OBX-3.6 as long as the LOINC is also present.
ObservationValue	CE	Request that coded results be coded using SNOMED
Units	CE	Populate if OBX-2 is 'SN' or 'NM' using valid UCUM values.
Observation Result Status	R	Send only F (Final) or C (Corrected) results. Do not send preliminary (P) results—if it is a preliminary result (a culture result, for example) for a condition that requires emergent notification, call the Epidemiology line at 505-827-0006. Do not send results that have been cancelled (X) they will fail in our system.
DateTimeOfTheAnaly		This field is required in our systems.
sis	R in NM	
Comment	0	Maximum number or characters is 1999. Send only NTE segments
		associated with an OBX segment.
SpecimenType SpecimenSourceSite	R	SNOMED codes are preferred.  SNOMED codes are preferred.
	e OrderingFacilityAddress OrderingFacilityPhoneNumber UniversalServiceIdentifier ResultStatus ValueType ObservationIdentifier ObservationValue Units Observation Result Status DateTimeOfTheAnalysis	e OrderingFacilityAddr ess OrderingFacilityPhon eNumber R UniversalServiceIdent ifier R ResultStatus R ValueType R ObservationIdentifier R ObservationValue Units CE Units CE Observation Result Status  DateTimeOfTheAnaly sis R in NM

R: Required

RE: Required, but can be empty if unknown

O: Optional

CE: Conditional, but may be empty