KIDSNET UPDATE

RHODE ISLAND'S INTEGRATED CHILD HEALTH INFORMATION SYSTEM

CENTER FOR HEALTH DATA AND ANALYSIS (CHDA)

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7 Day Delay for Newborn Immunization Records

Beginning on January 1, 2024, newborn immunization records submitted to KIDSNET for patients younger than seven days will initially be processed by KIDSNET if submitted by Vital Records and originating from a birthing hospital. This change is being instituted to decrease the number of duplicate patient records in the registry. The matching of records is anticipated to improve with the availability of more robust information contained in the completed Vital Records import. Records submitted by other institutions providing newborn immunizations will be queued and processed as usual on the patient's eighth day of life.

Test/Fictitious Patients Strictly Prohibited

KIDSNET/RICAIR would like to remind its users that data submissions containing *Test* or *Fictitious* patients is strictly prohibited. It is a violation of the annual agreements that practices sign for the receipt of State Supplied Vaccines and the use and access to KIDSNET/RICAIR. This continues to be an issue with the submission of production data for many practices. Training of practice staff, testing the installation of new coding, or workflow updates in your production system environments forward this bogus data. Continued occurrences of this violation may result in a loss of access for the facility.

KIDSNET Reports Available - for Managed Care Organizations

Managed Care Organizations (MCO) now have access to the same KIDSNET reports that select user groups have. Authorized users can run reports to identify members in need of follow-up services, including newborn hearing screening, immunization, and lead screening reports. The reports can be downloaded into Excel for use in outreach to members. MCO KIDSNET users interested in training on these reports should reach out to their KIDSNET liaison or contact DOH.Kidsnet@health.ri.gov.

Invalid Dose Indicator*

Occasionally, vaccine doses are administered at an interval sooner than the minimum spacing or to patients who are younger than the minimum age. Doses administered too close together or at too young an age can result in a sub-optimal immune response. KIDSNET Immunization Reports will now indicate INVALID doses with an "*" to indicate that the dose may need to be repeated. Some examples of invalid doses are:

- Live injectable or intranasal vaccine given before the acceptable 28 day spacing if another injectable or intranasal vaccine was given in the previous 28 days;
- The first dose in a series is given sooner than five days before the recommended minimum age; and
- The first and second doses of hepatitis A vaccine were administered less than six months apart.

For more information regarding the invalid indicator or additional instructions on how to run the KIDSNET Immunization Reports, please contact Provider Relations at DOH.Kidsnet@health.ri.gov

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Reporting Requirement for Pediatric Administration of RSV Vaccine

Recent discussions have identified confusion concerning the reporting of administration of RSV-mAb doses to pediatric patients, prompting the need for clarity on the product's reporting requirements.

RSV-mAb, traditionally considered a treatment, has not consistently been recorded and transmitted by a number of sites as a vaccine (CVX 306 & 307). Per CDC and ACIP guidelines, RSV should be captured and reported as a vaccine.

These products are distributed through the SSV program and fall under the VFC (Vaccine for Children) umbrella which requires them to be reported to KIDSNET/RICAIR in the same manner as all vaccines that are available through SSV.

Please ensure all previous administrations be reported immediately as immunizations to KIDSNET/RICAIR if that is not already done. The critical impact on a child's health and limited product availability make accurate and timely reporting essential. If you have any questions, please contact Danielle.Woods@health.ri.gov

2023 Major Accomplishments

In addition to maintaining and enhancing the system based on user feedback, major achievements for KIDSNET during 2023 include:

- Enhancement of the direct immunization data entry feature to allow data entry of all vaccines, including all State-supplied vaccines. The initial 2022 pilot project only included three vaccines (Influenza, COVID-19, and MPox). Note: Corrections to vaccine doses submitted via other methods cannot be made using the direct data entry feature.

NEW AND ENHANCED REPORTS

- Healthy Tomorrows newborn characteristics report:lists patients in practice with selected characteristics that could lead to less-than-optimal developmental outcomes that can be used to facilitate care coordination.
- Preventive healthcare measures report: calculates the number and percent of patients in a practice that have met various preventive health measures, such as one lead screening by 24 months or kindergarten immunization requirements. It also identifies specific children who do not meet the requirements so that appropriate outreach can be done.
- Invalid dose indicator: An * appears next to invalid doses on missing immunization reports.
- Enhancement to enable removal of adult patients from patient lists.
- Elevated Lead Report revision to include children with results ≥3.5 µg/dl, reflecting the new CDC reference level.
- Managed Care Organizations now have access to reports for their members.
- Added text for Mother's language "Other" on demographic page.
- Added Headstart ID to Headstart Report output.

DATA SUBMISSION AND EXCHANGE

- Processing HL7 updates and deletes: electronic requests to update or delete a previously submitted immunization records are now processed, eliminating the need for manual update or delete.
- Automated updating of NDC codes and mapping to CVX codes allows senders to send only NDC codes, if desired.
- Began collecting lead screening levels out to one decimal point to adapt to the new CDC reference value for elevated lead of 3.5 µg /dL.
- Data exchange with health plans (EOHHS QRS system IMAT): all immunization data (not just COVID-19) and lead and developmental screening are sent to the EOHHS Quality Reporting System (IMAT) for future exchange with health plans.

- Added State Pre-k and Childcare Assistance Program to data import from Early Childcare and Education programs. They will be added to data display and reports in 2024.
- A substance exposed newborn (SEN) application was developed to support data collection and tracking for policy and care coordination. Once a substance exposed newborn is identified, relevant information is automatically linked to the child record for review in KIDSNET by the SEN manager.
- Enhancements to interoperability via the national Immunization Gateway, include accepting electronic queries from the Veteran's Health Administration and immunization exchange with the Kentucky Immunization Information System.

DATA QUALITY ENHANCEMENTS

- Additional programming for de-duplication of vaccine doses. To date, more than 500,000 duplicate immunizations administrations have been removed from KIDSNET/RICAIR through development of new business rules and new nightly data processes.
- Maintained code tables to include new vaccines/treatments (example RSV, 2023 COVID-19)
- Developed an Adult Practice Quality Assurance/Quality Improvement Program application for collection of information on QA/QC visits as well as storage and handling information for SSV practices.

TECHNOLOGY UPGRADES

- Completed KIDSNET's migration to a 100% virtual server platform and retired KIDSNET's older physical servers, improving KIDSNET's reliability and business continuity, disaster recovery, and growth capabilities
- Enhanced KIDSNET's FHIR server to allow providers with FHIR capability to authenticate with a certificate instead of a password and to submit queries for matching patients in bulk

WEB APPLICATION AND VACCINE ORDERING IMPROVEMENTS

- Added "Recently Viewed" lists for users with Patient Lists (previously, users with Patient Lists only had Patient Lists and not Recently Viewed lists).
- Updated Vaccine Ordering (OSMOSSIS) to support CDC's "COVID Commercialization" transition, as well as several improvements to the enrollment, transfer, and waste/return workflows in OSMOSSIS
- Prepared Asthma page with new referral options to be made available for 2024.