Guide to Capturing Required Immunization Data in EHRs

The Rhode Island HL7 Implementation Guide for Immunization Transactions (http://www.health.ri.gov/family/kidsnet/dataexchange.php) includes the minimum requirements for an HL7 interface with KIDSNET. There are additional data requirements for participation in the Vaccine for Children (VFC) and State Supplied Vaccine (SSV) programs regardless of whether that data is sent to KIDSNET.

Electronic Health Records (EHRs) should store required data in structured data fields and use recommended national code sets. This allows HL7 interfaces to be built so data can be electronically shared with KIDSNET.

**Information Required under National Childhood Vaccine Injury Act (NCVIA)**
Health care providers who administer vaccines are required to ensure that the patient’s permanent health record includes:

1) publication date of the Vaccine Information Statement (VIS) distributed  
2) date the VIS was given to the patient  
3) name or initials, address and title of the individual administering the vaccine  
4) date of administration  
5) vaccine manufacturer and lot number of vaccine used

KIDSNET requires: The date of administration  
KIDSNET also expects: The vaccine manufacturer and lot number.  
Other data (VIS dates, etc) required by the NCVIA must be recorded, but is not stored in KIDSNET.

**Requirements under the Federal Vaccines for Children (VFC) Program**
Participants in the Vaccine for Children (VFC) program are required to screen patients under 19 years of age for VFC eligibility and record any changes at all immunization encounters. The results of VFC screening may be sent to KIDSNET with each HL7 VXU message in PV1-20, Financial Class, using code table 0064. The screening categories are:

<table>
<thead>
<tr>
<th>HL7 code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V01</td>
<td>Not VFC eligible (ie: Blue Cross, United Health, Blue Chip, etc)</td>
</tr>
<tr>
<td>V02</td>
<td>VFC Eligible - Medicaid, RiteCare</td>
</tr>
<tr>
<td>V03</td>
<td>VFC eligible - Uninsured</td>
</tr>
<tr>
<td>V04</td>
<td>VFC eligible – American Indian/Alaska Native</td>
</tr>
<tr>
<td>V05</td>
<td>VFC eligible – Federally Qualified Health Center Patient (under insured)</td>
</tr>
</tbody>
</table>

The eligibility field should be populated at the time of the first immunization, reviewed and updated if necessary at subsequent immunization encounters. Changes in insurance may impact a child’s VFC eligibility, however status V04 never changes. Only Federally Qualified Health Centers utilize the eligibility code V05.

If PV1-20 in the VXU message is used, KIDSNET will store the child’s eligibility for VFC vaccine with each dose of vaccine administered.
VFC requirements if not submitted to KIDSNET:
If VFC screening data is not sent to KIDSNET, then the following data must be stored in the EHR and retrievable:
- patient’s name
- parent’s or legal representative’s name
- provider’s name
- patient’s date of birth
- patient’s insurance status (Medicaid/RITeCare, uninsured, underinsured or insured)
- whether patient is Native American or Alaska Native
- documentation that insurance status screening takes place at each immunization encounter

SSV & KIDSNET Agreement to Participate - Vaccine Accountability
Required reporting:
- All vaccines administered to children < 19 years of age at least weekly
- Histories for children new to the practice < 19 years of age

KIDSNET is used for vaccine accountability. Administered vaccine reported to KIDSNET should account for all vaccine doses distributed to a practice.

In the HL7 message, RXA-9 is used to indicate that either the practice administered the vaccine, code “00”, or that the vaccine was administered elsewhere, code “01” (code table NIP001). If necessary, a practice may report immunization histories obtained from other practices by sending paper copies of immunization records for children new to the practice and only send vaccines administered by the reporting practice in the HL7 messages.

Coding Vaccines
Please use RI’s CVX/CPT coding chart to assure that all vaccines are recorded and transmitted to KIDSNET accurately. The chart lists all the vaccines currently distributed by the RI Vaccine Programs and many vaccines historically used. This list is frequently updated.

KIDSNET will accept either CVX or CPT codes in the HL7 messages sent to KIDSNET, in RXA-5. Meaningful Use requires the use of CVX codes in the HL7 message. Currently KIDSNET converts CVX codes to CPT codes to store them.

The correct code may depend on the specific brand/manufacturer as well as the type of vaccine. Some CVX and CPT codes are used when the manufacturer of a vaccine is unknown or the specific type of vaccine within the category is not otherwise specified (NOS). Incorrect coding may result in inappropriate scheduling of vaccines, an inaccurate child vaccine record and lack of accountability for vaccines received from the State Supplied Vaccine program.

A complete and up–to-date listing of CVX, CPT and Manufacturer codes is maintained by CDC at:
http://www.cdc.gov/vaccines/programs/iis/code-sets.html

For assistance with appropriate coding for any vaccines or questions related to this document, contact:

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