



EHR and KIDSNET Immunization Interface

Testing Procedure

1. Complete Registration of Intent, <http://www.health.ri.gov/healthinformationtechnology/about/meaningfuluse/immunizations/>
2. Complete any additional Agreements which may be required prior to any data exchange.
3. Identify contact people for the Practice and the EHR Vendor
4. During the testing process the Practice must continue to submit KIDSNET immunization data at least weekly either using data sheets or using an already approved electronic format.
5. Have Practice/Vendor review the RI HL7 2.5.1 Immunization Implementation Guide: <http://www.health.ri.gov/publications/guidelines/KIDSNETHL7.2.5.1ImplementationGuide.pdf>
6. Discuss with Practice/Vendor any known barriers
7. Determine if the Practice/Vendor is able to send files using SOAP transport or HTTPS post. KIDSNET provides the Practice/Vendor with identifiers for MSH-4, MSH-22, RXA-11.4, ORC-17, a Password, and the appropriate URL for testing the HL7 2.5.1 message transmission.
8. The Practice/Vendor will send a test transmission of HL7 2.5.1 immunization transactions. Please note, when submitting data a "P" must be present in this processing id field (MSH-11). An initial test transmission may have made-up test data, to test transport and formatting. Subsequent tests must utilize real data from the Practice and represent recent transactions. Ideally 100-200 transactions should be sent. Jeff Goggin should be notified whenever a test is sent either by telephone (401-222-4968) or email jeff.goggin@health.ri.gov.
9. The test transmission will be processed by the test KIDSNET system and the results will be reviewed and shared with the Practice/Vendor.
10. After the initial test transmission a plan will be developed by KIDSNET and the Practice/Vendor for subsequent test transmissions to resolve issues that occurred during the testing. Issues identified may be technical or be related to how information is entered and stored into the EHR.
11. KIDSNET does not consider testing completed until both technical issues are resolved, and data is being appropriately recorded in the EHR in such a way that quality data would be sent to KIDSNET
12. When testing is completed a plan for the start of the production HL7 immunization information exchange is made identifying start date, frequency of transmissions, and confirming contact emails.

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