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- Correcting Patient Records

What Is an Interface?
An interface is a means of exchanging data electronically from one system to another. When your electronic health record (EHR) has an interface with the WA State Immunization Information System (IIS), your data is sent electronically to the IIS as a Health Level 7 (HL7) message.

How Does an Interface Work?
When you document patient information and vaccines in your EHR, this data is sent to the IIS through your interface. This means you need to enter data carefully in your EHR because any documentation errors will also be reflected in the IIS. When you send data to the IIS, your organization becomes the owner of this data and is responsible for its accuracy. The quality of your data in the IIS is a reflection of the quality of data in your EHR. Interfaces can be set up in many different ways and these differences may affect inventory management and troubleshooting.

How Do Vaccines Transfer from your EHR to the IIS?
The process starts with clinic staff entering vaccines in your EHR. Then, your EHR sends this data in an HL7 message to the IIS. The IIS receives and then accepts or rejects the HL7 message. For accepted messages, the data goes through deduplication (a record matching process), and the vaccination shows up in the patient’s IIS record. If the IIS rejects the HL7 message, this vaccine will not show up in the IIS record. You need to correct whatever caused the IIS to reject the message and then resend the data.
What Is Deduplication?
Deduplication is the process of matching an incoming record from your EHR to an existing record in the IIS. Records go through two types of deduplication: patient-level and vaccination-level.

### Possible Patient Deduplication Outcomes
- **Incoming Record Exactly or Closely Matches Existing IIS Record**
  - IIS merges the records

- **Incoming Record Possibly Matches Existing IIS Record**
  - Records must be reviewed by WA Dept of Health staff

- **Incoming Record Does Not Match Any Existing IIS Records**
  - IIS creates a new record

### Possible Vaccine Deduplication Outcomes
- **Incoming Vaccine Matches Existing Vaccine on Patient’s Record**
  - IIS merges vaccines if given on the same date or **within five days of** an existing vaccine

- **Incoming Vaccine Possibly Matches Existing Vaccine**
  - IIS adds vaccine to the patient’s record if the date is **more than five days** apart

- **Incoming Vaccine Does Not Match Existing Vaccine**
  - IIS adds vaccine to patient’s record

How Long Does it Take for Vaccines to Show on Patient Records in the IIS?
This depends on several factors:
- How often you send data from your EHR to the IIS.
- The amount of data coming in and the volume of other processes running in the system.
- How easily the system deduplicates your EHR data. If the IIS can’t automatically deduplicate a record, it goes into manual deduplication. This means it takes longer for the vaccine to show up on the patient’s record in the system and longer to decrement from your IIS inventory.

**TIP:** Providing complete and accurate patient demographic data helps the system match your data to existing patient records in the IIS.
What If a Vaccine Documented in your EHR does not Show Up in the IIS?

Check with your IT or EHR lead to see if any messages sent from your EHR were rejected by the IIS because these vaccines will not show up in the system.

- If you receive the provider detail error report ("warnings & errors report"), any messages listed with an error were rejected. We recommend that clinics prioritize errors because those messages never made it into the IIS.
- Warnings on messages are different. A warning means the data will show up on patient records in the IIS, but some data was inaccurate or inconsistent with IIS data quality standards. We expect clinics to review messages with warnings and correct those issues to help maintain data quality in the IIS.

What You Need to Know About your Interface

Below is a list of things that you should know about your interface when considering the best vaccine inventory management workflow for your practice. Your IT staff or EHR vendor may be able to answer these questions.

<table>
<thead>
<tr>
<th>How often does your EHR send data to the IIS?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Real time</strong></td>
</tr>
<tr>
<td><strong>Batch</strong></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Does your EHR send vaccinator names and credentials?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does your EHR send update messages when vaccines are edited?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does your EHR send delete messages?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>

For people with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).

DOH 348-610 January 2019
### How Does your Interface Affect Vaccine Inventory Management?

Vaccination information sent in HL7 messages directly impacts your inventory in the IIS. Making sure all clinic staff consistently enter accurate and complete vaccination data helps your inventory decrement from the system correctly. Errors or missing information causes issues with your inventory because those doses don’t subtract.

### Best Practice Vaccine Management Staffing & Workflow

It is important to discuss staff roles and possible workflows prior to your interface going live. Some staff members interact with the IIS frequently, some rarely, and some not at all. Clinics participating in the Washington State Childhood Vaccine Program (CVP) must have primary and backup vaccine coordinators to manage vaccine ordering, troubleshooting, and monthly reporting.

This diagram shows an example of a best practice workflow for managing vaccine in the IIS. The vaccine management workflow starts with receiving vaccine orders in the IIS (for most publicly-supplied vaccines) or manually adding vaccines to your IIS inventory (for privately-purchased and some publicly-supplied vaccines). Once the vaccine is in your IIS inventory, you may start administering the vaccine and documenting it in your EHR.

### Monitoring your Inventory

Throughout the month or at least once a month (for CVP providers), you need to count your physical inventory and compare it to your IIS inventory counts.

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Before Doing Physical Inventory Counts:

- Review your IIS Reconciliation screen and make sure all of the vaccine in your clinic’s storage units show up on the screen (if you only manage publicly supplied vaccines in the IIS, just make sure the Reconciliation screen includes all of your publicly supplied vaccines).
- If any lot numbers in your vaccine storage units are missing on the IIS Reconciliation screen, look for any Inbound Orders on the Create/View Orders screen that show a “Shipped” status. If these orders already arrived at your clinic, receive them in the IIS to add the inventory to your Reconciliation screen.
  - If you have publicly-supplied vaccine for adults at your clinic, you will need to manually add this vaccine to your IIS inventory.
  - If you receive vaccine from another provider, you will need to manually add this vaccine to your inventory through Lot Numbers → Search/Add.
- Print out the Reconciliation worksheet and take it to your storage units to count your vaccine.

After Doing Physical Inventory Counts:

- Note any differences between your physical inventory counts and the counts on the IIS Reconciliation screen.
- Note any lot numbers with 0 doses left in your physical inventory. Inactivate these lot numbers after reconciling your inventory and submitting any vaccine returns associated with these lot numbers.

Troubleshooting Inventory Issues in the IIS
If your physical inventory counts do not match your IIS inventory counts, use the tools described below to identify why.
Managing Inventory with an Interface

Reconciliation Screen
This screen displays your current inventory in the IIS and serves as an “early warning system” to help you quickly identify inventory issues, like:
- Lot numbers in your clinic’s physical inventory that are missing from your IIS inventory.
- Negative quantities on hand for any lot numbers.

Patient Detail Report
Run this report when your inventory counts in the IIS are larger than your physical counts. This means some of the doses documented in your EHR did not subtract from your IIS inventory. This report helps identify vaccine documentation errors and patient eligibility status issues. Access patient detail report instructions here.

Lot Usage and Recall Report
Run this report when you have negative counts on the Reconciliation screen. This report helps identify all patients who received a certain lot number. Compare this report to your EHR records to identify any discrepancies. Access lot usage and recall report instructions here.

Other Troubleshooting Tools

Provider Detail Error Report (“Warnings & Errors Report”)
Organizations with interfaces designate which users should receive this report via email. The report shows warnings and errors produced by data sent from your EHR to the IIS. It is meant to help you identify and resolve data issues throughout the month (including issues that impact your inventory). This report allows you to monitor the quality of your electronic data and identify any issues that need to be corrected. This report looks at data sent for all ages, not just pediatric patients.

What Impacts your Inventory?

<table>
<thead>
<tr>
<th>Timing</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Lot numbers must be received through the Create/View Order screen OR manually entered in the IIS before any doses are sent from your EHR. Doses won’t decrement unless your inventory is in the IIS before messages are sent from your EHR.</td>
</tr>
<tr>
<td>- Do not receive an order AND manually add the lot numbers or you will double your inventory.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Accuracy</th>
</tr>
</thead>
<tbody>
<tr>
<td>- The “right medication” for the “right patient” and the “right documentation” every time.</td>
</tr>
<tr>
<td>- You must document the correct vaccine type, lot number, manufacturer, vaccine CVX code, and eligibility status.</td>
</tr>
<tr>
<td>- If you have multiple lot numbers of the same vaccine in your inventory, only use one lot at a time and make sure you type or select the correct lot number in your EHR.</td>
</tr>
<tr>
<td>- If you have staff that float between multiple clinics, they need to be logged in under the correct facility in your EHR to connect to the right clinic’s inventory in the IIS.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Matching</th>
</tr>
</thead>
<tbody>
<tr>
<td>- The vaccine type, lot number and manufacturer entered in your EHR must exactly match the information for that vaccine in your IIS inventory. Make sure you document lot numbers from the box of vaccine, not the vial.</td>
</tr>
<tr>
<td>- You must document the correct patient eligibility status for the age and insurance status of your patient. If your EHR sends a funding source, the funding source must match the eligibility status (e.g. Eligibility status: Medicaid and Funding Source: Public).</td>
</tr>
</tbody>
</table>
HL7 Message Data Elements & Inventory Decrementing
This section explains the data elements that must be documented correctly in your EHR and included in HL7 messages in order for doses to subtract from your clinic’s IIS inventory.

<table>
<thead>
<tr>
<th>Data element</th>
<th>Where is it in the HL7 message?</th>
<th>What’s important to know?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot number</td>
<td>RXA-15</td>
<td>The combination of these four elements must be valid (no typos or extra spaces) and match the IIS inventory for the facility that administered the vaccine.</td>
</tr>
<tr>
<td>Manufacturer Code</td>
<td>RXA-17</td>
<td></td>
</tr>
<tr>
<td>CVX Code</td>
<td>RXA-5</td>
<td></td>
</tr>
<tr>
<td>Administering Facility ID</td>
<td>RXA-11</td>
<td></td>
</tr>
<tr>
<td>Administered Vaccine</td>
<td>RXA-9</td>
<td>Must be documented as a newly administered vaccine (RXA-9 = “00”) in order to subtract from inventory. Historical doses do not subtract from inventory.</td>
</tr>
</tbody>
</table>
| Eligibility Status Code    | If OBX-3 = 64994-7, then OBX-5 = eligibility status If the eligibility code is invalid or blank, doses will not subtract from inventory. | **Pediatric Patients**
Eligibility Codes must be: V02, V03, V04, V05, V22 or V25 in order to subtract from public inventory.

**Adult Patients**
Eligibility Codes must be: V01, V23 or V24.

| Funding Source Code        | If OBX-3 = 30963-3, then OBX-5 = Funding Source If sent, the funding source code determines which vaccine supply to decrement. If not sent, the eligibility status code determines which vaccine supply to decrement. | **Administered Public (VFC/State-Supplied) Inventory**
Funding Source must be a public code if public inventory was administered. **Administered Private Inventory**
Funding Source must be a private code if private inventory was administered. |

*Documentation should always reflect what actually took place. For example, if a pediatric patient receives vaccine from the clinic’s private-purchased stock, they should document a private funding source.*
Example
GreatShots Clinic (Facility ID: SIISSClient12345) administered a dose from their public flu vaccine inventory for CVX 158 (Influenza, injectable, quadrivalent), lot number 123ABC, manufacturer Sanofi Pasteur (Manufacturer Code: PMC) and this lot is currently active in the clinic’s inventory.

- In order for doses to subtract from the clinic’s IIS inventory, the HL7 message must include:
  - CVX code: 158
  - Lot number: 123ABC
  - Manufacturer code: PMC
  - Facility ID: SIISSClient12345
  - Newly administered vaccine code: 00
  - Eligibility Code: V02, V03, V04, V05, V22, V23 or V25
  - Funding Source Code (if sending this information): Public funding source code
- If GreatShots Clinic does not have lot number 123ABC in their IIS inventory or they inactivated this lot number, these doses will not subtract from their inventory.

Correcting Patient Records
Once you identify any issues in patient records, you need to correct the records so that:
- The patient’s IIS record contains the correct information.
- The doses decrement from your inventory.
- Your monthly vaccine reports are accurate (for CVP providers).

Reminders about Correcting Records:
- If your EHR cannot send update messages to the IIS, you need to correct the records in your EHR and manually edit the records in the IIS.
- If you document the wrong vaccine administration date or vaccine type, you must delete the record and then re-enter. You will need to delete the record in your EHR and in the IIS if your EHR cannot send delete messages.

Submitting Monthly Reports (for CVP providers only)
After correcting any errors in patient records, you can submit your monthly reports.

Submit the following vaccine accountability reports every month:
- **Doses Administered Report**
  - If you see all 0’s on this report, there may be an issue with your interface. Contact IISDataExchange@doh.wa.gov for help troubleshooting this issue.
- **Monthly Inventory Reconciliation Report**
  - You may need to reconcile your inventory by adjusting for any doses that were wasted or transferred during the month.