Immunization Registry Reporting functionality allows immunizations documented as administered within Cerner to interface automatically to the Maine Immunization Information System, ImmPact, eliminating the need for duplicate and manual entry to ImmPact. In addition, the functionality enables clinical staff to confirm and document a patient's opt in/opt out election for re-disclosure electronically – prior to administration, which will also communicate with ImmPact.

Participation in the Immunization Registry

Per Maine DHS Immunization Information System (IIS) Rules , section 4D, all patients/guardians must be informed during an initial immunization encounter of the inclusion of their immunization record and demographic information into the IIS, and provided the opportunity to opt-out of the IIS.

Discussion for opt in/out must be had with the patient/guardian, and documented with their election in the EHR, once. Should the patient/guardian choose to change their election at a future date, it is their responsibility to notify their provider of such, and documentation adjusted in the EHR accordingly.

For patients electing to opt out of the Immunization Registry, appropriate Non-Participation Form provided by DHS, must be filled out, signed by the patient/guardian and faxed to the state.

NOTE: The non-participation form is now available within the Clinical Links Cerner and can be printed from there.
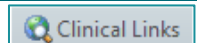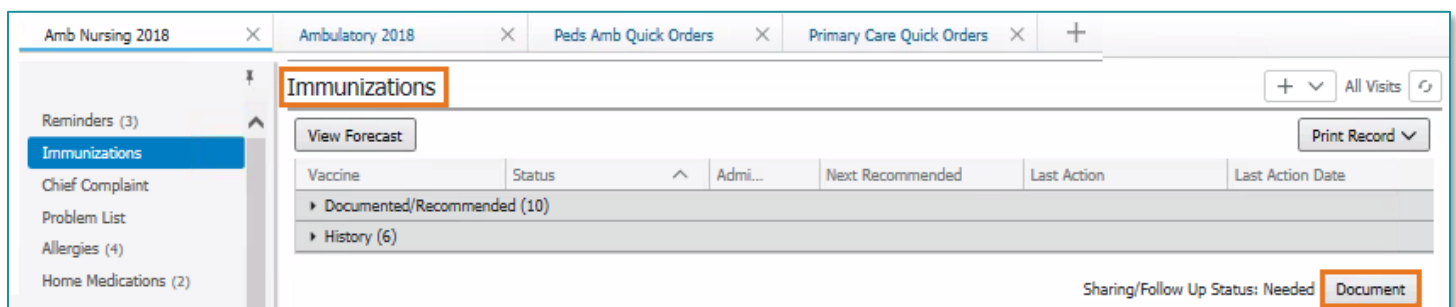
## Documenting Opt In/Opt Out within Cerner

From your designated **Ambulatory Workflow MPage**:

STEP 1: Navigate to the **Immunizations** component.

STEP 2: On the bottom, right corner of the component, Sharing/Follow Up Status, click **Document**.

NOTE: In this instance the status states 'Needed'. Once the form is completed in its entirety the status will show as 'Complete'. This form only needs to be completed once per patient, or modified should patient/guardian change their initial election.
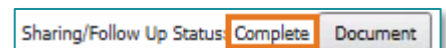
STEP 3: Document patient's elections for **Immunization Notifications** in both Due and Overdue sections.

NOTES: **'Provider' should not be selected for either of these options as it does not yield any result, and we are unable to remove it from the form. Please limit selections to 'Do Not Notify' and 'Self'.**

If 'Self' is selected, the checkbox beneath notifications must also be selected.

STEP 4: Document patient's elections for opt in or opt out of the Maine IIS registry **Personal Health Information Sharing Consent:**

- **Ok to Share** = Opt In to the registry. This means that all patient demographic and immunization information will interface to the registry.
- **Do not Share** = Opt Out (appropriate non-participation form must be filled out and faxed to the state, and **YES** should be selected in the **Document on File** field). This means that all documentation will not leave Cerner and no patient demographic and immunization information will interface to the registry.

NOTE: **If patients/guardians opt-out, and this field is NOT selected, information will continue to interface to ImmPact, regardless of the paper non-participation form being filled out and sent to the State.**

If patients/guardians have previously been opted in with information in the registry, and now decide to opt out, previous information will stay on the registry but be locked and no future information will interface so long as appropriate selections in the form are made.

Patients may always elect to opt back into the registry at any time. The above section will need to be modified to 'Ok to Share' in this event. Any previous records on ImmPact will become unlocked, if there were any, though immunizations during the time of opt out will not show in the registry.

NOTE: **Immunizations for patients that opt out will need to be manually entered into ImmPact, with medication information only, to decrement state supply inventory appropriately. This process is not different than your process prior to the interface.**

STEP 5: Document patient's elections for re-disclosure of information in the **Immunization Registry Re-Disclosure Consent** section.

NOTES: This section allows immunization information interfaced to ImmPact to be reviewed by any provider that may need to access the historical information; for example, a specialist provider not in system and without access to Cerner, non-NLH emergency room providers etc.

If the patients/guardians elect to not re-disclose information, only the patients listed primary care provider will be able to access this information on ImmPact.

Immunization Registry Re-disclosure Consent					
Would you like to allow registries to re-disclose your immunization information with others?					
All Registries	✓ **Ok to Re-disclose**	✗ **Do not Re-disclose**	**No Consent Obtained**	˅	**Document On File**
All Registries				˅ No	

STEP 6: Click **Save**.

NOTE: The Guardian section is not necessary to fill out as ImmPact pulls this data from our registration tool, not from this form.

## Documenting Vaccine Administration and Vaccines for Children (VFC) using the Single Patient Task List

Indicating an entry in the Vaccines for Children (VFC) field of the administration window is one of the requirements in order for the vaccine information to interface electronically to ImmPact.

STEP 1: Follow existing workflow within the Immunization Component, Immunization Forecaster and/or Recommendations component to identify vaccines needed for your patient and place orders accordingly per Joint Practice Protocol or Proposal.

NOTE: Orders should be placed utilizing the appropriate folder on your Quick Order page dependent on whether the vaccine is State Supplied or Office Supplied. The folder from which you place the orders, will drive charges upon completion of the task.
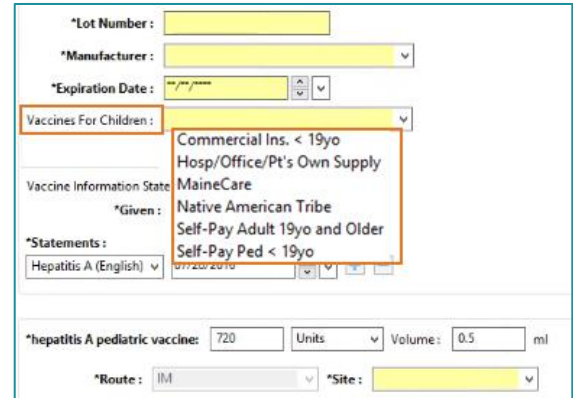
STEP 2: Navigate to the **Single Patient Task List** and click on the **pill icon** to complete the administration documentation.
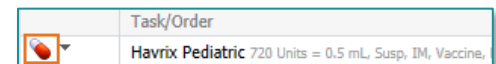
STEP 3: Fill in all required fields for **Lot Number, Manufacturer, Expiration Date.**

NOTE: Lot numbers entered into this screen MUST reflect the lot number on the vial of the medication for accurate documentation in the patients EHR. This is NLH best practice for patient safety.

Lot numbers that include letters must be capitalized to interface and decrement inventory appropriately. Lot numbers consistently have only one letter in a lot number, which is the first character. Be mindful of this when using the capital letter 'o' versus the number zero.

Should there be a discrepancy between the vial and box lot numbers, this will need to be fixed within the ImmPact fix tool to reflect the box lot number to appropriately decrement your state supply inventory.

STEP 4: Select the appropriate option, pertinent to your patient, in the **Vaccines For Children** field, which is now a required field. The available drop-down options have been renamed to be more meaningful in regards to the patients insurance type.

STEP 5: Fill in the injection **Site**, and select the **green check mark** to complete documentation.

NOTE: The Funding Source field has been removed. This field currently is not applicable for billing purposes as charges are driven based on the which folder the vaccine order was selected from, State Supply or Office Supply, and task completion of that order.

Documenting Vaccine Administration and Vaccines for Children (VFC) using Bar-Code Medication Scanning

STEP 1: Follow existing workflow within the Immunization Component, Immunization Forecaster and/or Recommendations component to identify vaccines needed for your patient and place orders accordingly per Joint Practice Protocol or Proposal.

NOTE: Orders should be placed utilizing the appropriate folder on your Quick Order page dependent on whether the vaccine is State Supplied or Office Supplied. The folder from which you place the orders, will drive charges upon completion of the task.

STEP 2:   Use the Medication Administration wizard as appropriate to your location, or navigate to the MAR, to chart administration details.

STEP 3:   Fill in all required fields for **Lot Number, Manufacturer, Expiration Date** as needed if not using bar code scanning.

NOTE: **Lot numbers entered into this screen MUST reflect the lot number on the vial of the medication for accurate documentation in the patients EHR. This is NLH best practice for patient safety.**

              Lot numbers that include letters must be capitalized to interface and decrement inventory appropriately. Lot numbers consistently have only one letter in a lot number, which is the first character. Be mindful of this when using the capital letter 'o' versus the number zero.

              Should there be a discrepancy between the vial and box lot numbers, this will need to be fixed within the ImmPact fix tool to reflect the box lot number to appropriately decrement your state supply inventory.

STEP 4:   Select the option, pertinent to your patient, in the **Vaccines For Children** field, which is now a required field. The available drop-down options have been renamed to be more meaningful in regards to the patients insurance type.

STEP 5:   Fill in the injection **Site**, and select the **green check mark** ☑ or click [OK] to complete documentation.

Managing State Supply Inventory

Although immunizations will now electronically interface to ImmPact, managing state supplied immunization inventory, and the process for reordering supply, for you practice will not become electronic. The process currently in place within your practice for managing and re-ordering immunizations will remain as is.

Managing Private (Office Supply) Inventory

The process currently in place within your practice for managing and re-ordering office supplied immunizations will remain manual as is.

Historical COVID-19 Immunizations

Historical COVID immunization are being pulled into the Immunization component from the state registry (ImmPact) which is facilitated by HealthInfoNet. These immunizations have been added as historical with a designation of HX_NLH and can be viewable in the Immunization component and Immunization forecaster.

➢ When reviewing the immunization record of a patient the Ø symbol may be seen in the Immunization MPage component and the Immunization forecaster. The Ø symbol represents "Did not Count" logic in immunization forecaster. If this symbol is seen, it will represent one of the scenarios has occurred.

- Scenario 1: There is a potential for duplicate information if the original documentation of the immunization was performed manually. These will be marked as "Did not count" and will not affect clinical workflow.

- Scenario 2: There is evidence in the downloads of incorrect manual historical data download dates which will also show as duplicate information. This will show as the same immunization but a day or days apart. Depending on the situation these may be marked as "Did not count" and clinical evaluation by the RN or provider must occur.

- Scenario 3: Review the date has also shown that patients may have gone to more than one location and received more immunization than they should have. This can be confirmed by HealthInfoNet (which has more detail and will show the multiple locations. Clinical evaluation by RN or provider must occur.

➢ In the immunization component, click the **COVID-19** row to open additional details.

➢ When duplicate immunizations have the same date, one is the immunization administered within NLH and one is the download from ImmPact. The Ø symbol will appear next to the IMMPACT download.

➢ In the forecaster, click the record to see the additional details. In this example the record of a third dose does not meet any immunization dosing recommendations and will require the provider to discuss with the patient.