



## Regional Immunization Data Exchange Meaningful Use Checklist

*Purpose: To define the workflow of RIDE and RIDE's Staff to Meaningful Use Attestation and specifically to test procedure DTR170.302.k-3 as defined by the CDC.*

### RIDE Registration/Testing Steps

- Provider/Vendor will complete, sign and send in the “**Meaningful Use Registration**” form (Appendix C) to RIDE staff. If a Vendor is coordinating this for multiple Providers, a registration form must be completed for **each provider**.
- Upon registration, the RIDE Meaningful Use Testing Coordinator will provide the most recent version of the “RIDE HL7 Implementation Guide” document via email.
- Test Message Specifications: *(Current specifications are fixed. As the system is updated other options will be available)*
  - Test data format: **HL7 v2.5.1**
  - Data elements to send: **All elements indicated in test data.**
  - Standard format to use: **Standard delimiters and line feeds.**
  - Transport layer specifications: **HTTPS POST or SOAP**
- Provider/Vendor should review the sample HL7 messages included in this document and sample data found in NIST Guidelines.
- Provider/Vendor should complete and return the “**RIDE Technical Checklist**” (Appendix A) in advance of meeting. If a Vendor is coordinating this for multiple Providers, a checklist must be completed for **each provider**.
- Once the completed “**Meaningful Use Registration**” form and “**RIDE Technical Checklist**” is received, the RIDE Meaningful Use Testing Coordinator will contact you to schedule an INTRODUCTORY MEETING to discuss the testing process and requirements.
- INTRODUCTORY MEETING:
  - Phone conference to include the Medical Provider's team, Provider's EHR vendor and RIDE staff.
  - Review testing process, requirements/“RIDE checklist”, any required testing options/decisions
  - Confirm that only test or “dummy” data will be used (data with real patient information cannot be transmitted to the RIDE test environment)
  - Test Messages to include at least two of the test Data Sets from NIST test procedure document found at [http://healthcare.nist.gov/docs/170.302.k\\_Immunizations\\_v1.1.pdf](http://healthcare.nist.gov/docs/170.302.k_Immunizations_v1.1.pdf) (two of which are supplied here in Appendix B)



## Regional Immunization Data Exchange Meaningful Use Checklist

- Schedule date for TESTING WINDOW (testing window will be a four hour window of time in which test message may be sent to RIDE and tracking of messages will be performed).
- Define which test message data sets will be sent.
- Exchange any follow-up information or specifications requested during above introductory meeting.
- TESTING PROCESS:
  - In advance of the agreed upon TESTING WINDOW timeframe, Provider/Vendor will send an initial test message **with test data only** via email for visual review by RIDE technical staff.
  - During the agreed upon TESTING WINDOW timeframe, Provider/Vendor will attempt to electronically submit a Meaningful Use test message.
  - RIDE technical staff will monitor and review the test message to determine whether or not it was successful according to MU Phase 1 requirements.
  - The RIDE Meaningful Use Testing Coordinator will send the Provider/Vendor written Meaningful Use testing results (via emailed PDF).
  - If the results of testing are unsuccessful, the Provider/Vendor may request a FOLLOW-UP MEETING, pending available RIDE resources.

### RIDE Contact Information

#### Meaningful Use Testing Coordinator

Ragini Thakkar  
San Joaquin County Public Health Services  
(209) 468-2292 / [support@izride.com](mailto:support@izride.com)

#### Technical Contact

Please direct technical questions to (209) 468-2292 / [dataexchange@izride.com](mailto:dataexchange@izride.com)



## Regional Immunization Data Exchange Meaningful Use Checklist

### Appendix A

#### RIDE Technical Checklist

- Sending application has the ability to send message in HL7 v2.5.1 format
- Sending application's message complies with our HL7 Implementation Guide
  
- Verified that no firewall rules are prohibiting connection from the server that will be transmitting the HL7 message to <https://webapp.sjcphs.org/hl7/Default.aspx> (HTTP POST) on TCP Port 443 and that sending applications host operating system has correct routing to host webapp.sjcphs.org. (Note: SOAP URL is <https://webapp.sjcphs.org/hl7/Soap.asmx> )
  
- Sending application has the ability to send messages via https protocol on TCP Port 443.
  
- Sending application has the ability to transmit messages using the HTTP POST or SOAP method of sending data.
  
- Sending application has the ability to send messages containing the following POST or SOAP Variables:
  - USERID
  - PASSWORD
  - FACILITYID
  - MESSAGEDATA
  
- USERID, PASSWORD, and FACILITYID can be set in the sending application to the values given by RIDE Staff.
  
- Sending application has the ability to accept results as a General Acknowledgment (ACK) without errors.

The RIDE Meaningful use Test Server is configured within the RIDE test environment for testing only. **Real or "live" data should not be sent in test messages.**

_____ Provider Name/Location	_____ Vendor Name
_____ Phone, Email	_____ Software Name/Version
_____ Name (Printed)	_____ Signature



## Regional Immunization Data Exchange Meaningful Use Checklist

### Appendix B -Data for test messages

#### Data Set #1

ID Number	9817566735
ID Number Type	Medical Record
Family Name/Surname	Johnson
Given Name	Philip
Date of Birth	May 26, 2007
Administrative Sex/Gender	Male
Race	White
Ethnic Group	Not Hispanic or Latino
Patient Address	
Street Address	3345 Elm Street
City	Aurora
State	Colorado
Zip Code	80011
Address Type	Mailing
Telecommunication Use Code	PRN
Telephone Number - Home	303-554-8889
CVX Code	33
Vaccine Name	Pneumococcal Polysaccharide Vaccine
Date/Time Start of Vaccine Administration	April 5, 2010 4:00PM
Administered Amount	0.5
Administered Units	ML
Vaccine Lot Number	1039A
Manufacturer Name	MERCK
Manufacturer Code	MSD



## Regional Immunization Data Exchange Meaningful Use Checklist

### Data Set #2

ID Number	686774009
ID Number Type	Medical Record
Family Name/Surname	Takamura
Given Name	Michael
Date of Birth	19820815
Administrative Sex/Gender	Male
Race	Asian
Ethnic Group	Not Hispanic or Latino
Patient Address	
Street Address	3567 Maple Street
City	Oakland
State	California
Zip Code	94605
Address Type	Mailing
Telecommunication Use Code	PRN
Telephone Number - Home	510-665-8876
CVX Code	43
Vaccine Name	Hepatitis B, Adult
Date/Time Start of Vaccine Administration	June 25, 2010
Administered Amount	999
Administered Units	
Vaccine Lot Number	
Manufacturer Name	
Manufacturer Code	



**Regional Immunization Data Exchange  
Meaningful Use Checklist**

**Appendix C – Request for Meaningful Use Immunization Transmission  
Attestation**

**Regional Immunization Data Exchange (RIDE)  
Public Health Services of San Joaquin County**

For questions regarding Meaningful Use, contact Ragini Thakkar at (209) 468-2292 or email [support@izride.com](mailto:support@izride.com)

Completed form can be send via fax to (209) 462-2019 or e-mail to [support@izride.com](mailto:support@izride.com)  
Once completed and signed form is received, RIDE staff will contact you to schedule a planning meeting and provide the most recent RIDE Meaningful Use Testing Specifications document.

Organization:		Date:	
Administrative/MU Contact Name:		Phone:	Email:
Information Systems Contact Name:		Phone:	Email:
Main contact for MU activities (if different):		Phone:	Email:
Street Address		Mailing Address (if different than street):	
City:		State:	Zip:
Meaningful Use Attestation Planned Start Date:		Primary Attestation: <b>Immunizations</b>	
Number of Clinics:	VFC Pin(s):	Number of Physicians on staff:	
Number of Patient Visits per year (estimated):		Electronic Health Record (EHR) system:	
EHR vendor contact:		Phone:	Email:
Comments/Questions:			

The RIDE Meaningful use Test Server is configured within the RIDE test environment for testing only.  
**Real or “live” data should not be sent in test messages.**

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature