



Montana Immunization Program

imMTrax Medical Home Association Guide



Medical Home Association*

- Primary Care
- Secondary Care
- Not Associated
- Mass Immunization
- School (non-SBHC)
- WIC

If this patient comes to you for MOST of their immunizations select **“Primary Care”** as you are their Primary Immunization Provider.

NOTE: This patient will be calculated into your facility’s immunization coverage rate AND eligible for your facility’s immunization reminder letters.

If this patient is not an established patient at your facility BUT did attend a mass immunization clinic you hosted select **“Mass Immunization”** as you do NOT provide them with ongoing immunization services.

If you are the patient’s WIC representative, select **“WIC”** as you are accessing their record for WIC program purposes.

NOTE: WIC is a supplemental nutrition program for Women, Infants, and Children.

If you are the patient’s K-12 school nurse select **“School”** as you are accessing their record for school related purposes.

NOTE: Non-SBHC stands for non-School Based Health Clinic.

If this patient comes to you for SOME of their immunizations select **“Secondary Care”** as you are their Secondary Immunization Provider.

NOTE: This patient will be calculated into your facility’s immunization coverage rate AND eligible for your facility’s immunization reminder letters.

If this patient is not an established patient at your facility select **“Not Associated”** as you do NOT provide them with ongoing immunization services.

Examples of When to Select Not Associated:

- When you access the account ONLY to obtain a record for the client.
- If you provide a one-time immunization service such as an influenza dose.

For more information, call the Montana Immunization Program at 406-444-5580