

imMTrax Data and Your Clinic



Presented by: Katie Grady-Selby
2015 Regional Workshops

» Today's Goals:

- > Identify one imMTrax data issue that could cause incomplete results in your vaccine coverage reports
- > Review how to correct incomplete results
- > Create your plan so that the reports are not incomplete
- > How to work towards matching imMTrax data with NIS results



» Topics:

- > Reasons why imMTrax data is up-to-date and accurate
- > Reasons why some imMTrax data is incomplete
- > How to correct this (Best Practices)
- > Why review your data
- > Who can help with the data
- > Where do we want to go
- > How to create a sustainable plan.....



» A Show of Hands Please:

- > How many clinics use our quarterly reports/bi-annual reports?
- > How many clinics check immunization records at every visit?
- > How many clinics enter historical shots into imMTrax?

» FYI:

- > In 2015 the quarterly reports are switching to bi-annual reports!
 - + May 2015
 - + November 2015

Here we go...



» Coverage Level Reports provided by the Montana Immunization Program

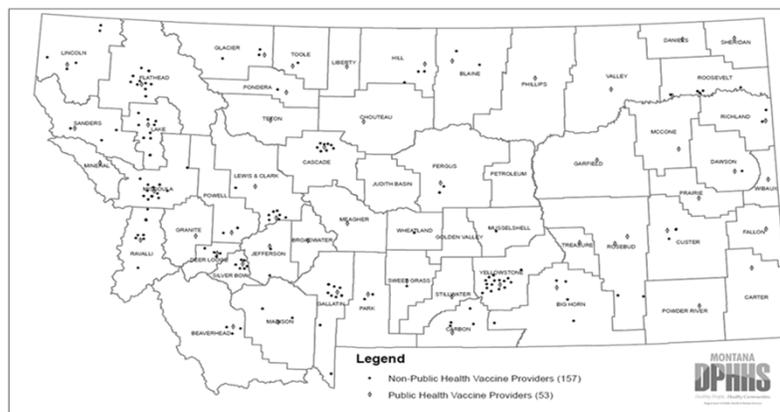
Report Title	Distributed When	Distributed How	Age Range	As of Date	Patients Included (Medical Home Assoc.)	Notes on the Data
Clinic Review AFIX Coverage Reports	During VFC/AFIX Clinic Review	In person	24-35 months	03/01 of the current year	Primary and Secondary	Data is reviewed and missing shots are entered
De-identified Summary of Clinic Review AFIX results	Summary of the Clinic AFIX Coverage Results Distributed at the end of the year when Clinic Review AFIX visits are complete.					
AFIX 6-Month Follow-Up/	3-6 months from Clinic Review	Snail Mail	24-35 months	Dependent on Clinic Review Date	Primary and Secondary	No clean up on data prior to running results
Bi-annual Reports (formerly qtrly)	May November	Snail Mail	19-35 months Diagnostic Report 9-35 Months Missing Immunizations Overdue Report	04/30 10/31	Primary and Secondary	No clean up or entering historical shots prior to running reports
imMTrax Coverage Graph	Current through prior day	imMTrax Homepage	19-35 Months	Current through prior day	Primary	No clean up click graph to review

» imMTrax VFC Sites:

- > Total Sites reviewed: **234**
- > Excluding Birthing Hospitals: **23**
211
- > Aggregate Sites: **82 38.9%**
 - + Sites that either submit data electronically, enter data historically, or only use imMTrax for VFC requirements.
- > Integrated Sites: **129 61.1%**
 - + Sites that enter all VFC shots from inventory tracking lot numbers. (Private shots may be entered from inventory, historically, or not at all).



» Map of VFC Clinics in MT for reference:



» List of VFC Clinics:

<http://dphhs.mt.gov/Portals/85/publichealth/documents/Immunization/Provider%20List%20for%20Web%20022015.pdf>

» Reasons for accurate imMTrax data:

- + Entering shots directly into imMTrax and pulling from inventory.
- + Entering both private and public shots administered into imMTrax.
- + Entering all historical shots into imMTrax that are missing from patients records.
- + Using/Reviewing the bi-annual reports or running the coverage level reports for their clinic on a regular basis.
- + Updating the “Medical Home Association” field in imMTrax for patients that have moved or are no longer seen by that clinic.



» Reasons for incomplete imMTrax data:

+ Shots-

- Clinics that are submitting data electronically might only be sending recent shots administered and not all shots or historical shots in the patient's records.

+ Consent-

- Most clinics using an E H R must document consent in the E H R prior to entering the shot(s) given.

+ Immunization Codes-

- Clinics on data feeds might be sending wrong codes which causes shots to error out and not be imported into imMTrax.

CPT Code	CVX Code
90476	54
90477	55



» Reasons for incomplete imMTrax data cont.:

+ Merging incorrectly-

- When a clinic/person merges 2 records together and forgets to bring all shots over this creates an invalid/inaccurate record.

+ Not using imMTrax-

- Some clinics not using imMTrax for storing immunization shots will have no data or incomplete due to not entering/sending data.

+ Medical Home Association-

- Not keeping active patients current in imMTrax by using the medical home association field.

+ Private/Public-

- Some clinics might only be entering VFC shots and not private doses given into imMTrax.



» Best Practices for complete data collection

- + Check records at every visit (Applies to both imMTrax data and clinic data)- Checking records at every visit decreases missed opportunities. Not only checking, but entering missing data imMTrax!
- + Administer all Immunizations that are due= NO missed opportunities- The only way to reach this goal at a clinic is to CHECK RECORDS at EVERY VISIT.
- + Enter all historical records into imMTrax- Just because 61% of VFC providers are integrated providers doesn't mean all data is imMTrax.
- + Use imMTrax graph- Click on graph to know who is bringing your coverage rates UP or down.



» Best Practices Cont.

- + Use CoCASA reports- Use the CoCASA (bi-annual) reports to generate recall letters.
- + Reminder Recalls- It is proven that reminders and recalls work! They can be phone, text, snail mail, twitter, e-mail, etc.
- + Use current ACIP schedule- When using the current schedule it decreases shots being missed or patients not returning to the clinic at a certain age.

Figure 1. Recommended immunization schedule for persons aged 0 through 18 years - United States, 2015.
 (FOR THOSE WHO FALL BEHIND OR START LATE, SEE THE CATCH-UP SCHEDULE (FIGURE 2)).
 These recommendations must be read with the footnotes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Figure 1. To determine minimum intervals between doses, see the catch-up schedule (Figure 2). School entry and adolescent vaccine age groups are shaded.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16-18 yrs
Hepatitis B (HepB)	1 st dose		2 nd dose						3 rd dose							
Rotavirus (RV) (RV1 (2-dose series), RV2 (3-dose series))			1 st dose	2 nd dose	See footnote 2											
Diphtheria, tetanus, & acellular pertussis (DTaP-a7 yrs)			1 st dose	2 nd dose	3 rd dose				4 th dose			5 th dose				
Tetanus, diphtheria, & acellular pertussis (Tdap-a7 yrs)														(Tdap)		
Haemophilus influenzae type b (Hib)			1 st dose	2 nd dose	See footnote 5				3 rd or 4 th dose	See footnote 5						
Pneumococcal conjugate (PCV13)			1 st dose	2 nd dose	3 rd dose				4 th dose							



» Examples of change in missing immunizations-overdue report after entering historical shots, reviewing active patient list, and merging records to make one:

Clinic	# of Patients Listed on Missing-overdue IZ Report	# of Patients List on Missing-overdue IZ Report after re-running data	# of patients Entered historical shots/ dis-associated patients/merged
Clinic A	63	51	12
Clinic B	423	207	216
Clinic C	66	50	16
Clinic D	335	175	160
Clinic E	296	170	126
Clinic F	595	182	413
Clinic G	74	26	48
Clinic H	151	78	73

» Example of CoCASA Report/Immunization Record:

Immunizations Given:

TOPP, CARROT T

12/20/2012 Polio 3, HepB 3, HIB 4

DTaP			
1	02/19/2013	Pediarix	
2	04/25/2013	Pediarix	
3	06/26/2013	Pentacel	
4	01/12/2015	DTaP (younger than 7 yrs)	
Hep B			
1	12/20/2012	hep B (ped/adol, 3 dose)	
2	02/19/2013	Pediarix	
3	04/25/2013	Pediarix	
HIB			
1	02/19/2013	Hib (PRP-OMP)	
2	04/25/2013	Hib (PRP-OMP)	
3	06/26/2013	Pentacel	
4	01/12/2015	Hib (PRP-OMP)	
Pneumococcal			
1	02/19/2013	Prevnar 13	
2	04/25/2013	Prevnar 13	
3	06/26/2013	Prevnar 13	
4	12/26/2013	Prevnar 13	
Polio			
1	02/19/2013	Pediarix	
2	04/25/2013	Pediarix	
3	06/26/2013	Pentacel	

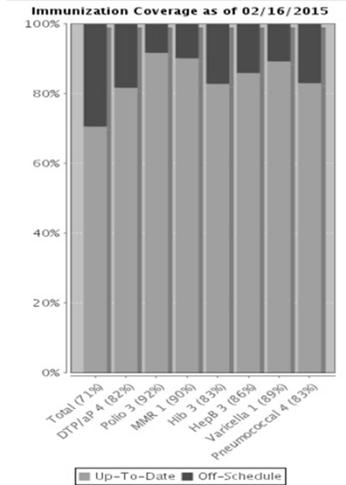
History			<input type="button" value="Add Immunization"/>
Vaccine Group	Date Administered	Series	
DTPIaP	02/19/2013	1 of 5	
	06/26/2013	2 of 5	
	01/12/2015	3 of 5	
Hep B	12/20/2012	1 of 3	
	02/19/2013	2 of 3	
Hib	02/19/2013	1 of 4	
	04/25/2013	2 of 4	
MMR	06/26/2013	3 of 4	
	12/26/2013	1 of 2	
Pneumococcal	02/19/2013	1 of 3	
	06/26/2013	2 of 3	
	12/26/2013	3 of 3	
Polio	02/19/2013	1 of 4	
	06/26/2013	2 of 4	
Rotavirus	02/19/2013	1 of 2	
Varicella	12/26/2013	1 of 2	

» Using the graph on imMTrax home page:

- > About the graph-
 - + Generates for “Medical Home Association” as only “Primary”
 - + 19-35 months of age
 - + Updates regularly
 - + Can click on each antigen or series to get the patients that are affecting your coverage rate

Medical Home Association*	
Primary Provider*	Primary Care
VFC Eligibility*	Secondary Care
Other Eligibility*	Not Associated
Secondary Associations	Mass Immunization School (non-SBHC) WIC

Daily Client Report Status			
Report Type	Started	Completed	Percent Complete
Patient Listing	02/27/2015 18:01:08 PDF 02/27/2015 18:01:08 CSV	02/27/2015 18:12:05	100
Coverage Rates	02/27/2015 18:01:08 PDF 02/27/2015 18:01:08 CSV	02/27/2015 18:12:05	100



» Why review data?

- + To utilize your clinic’s information to insure your patients are immunized.
- + Kids don’t get over immunized- If records are accurate in imMTrax then patients won’t be over immunized.
- + Schools/Childcare reports are accurate- Back to school season will go smoother for everyone.
- + Clinics calling other clinics- If records are accurate then Clinics/CHDs don’t have to call other clinics wondering if the child has had those shots.
- + All Clinic/AFIX Reviews are based off IIS data for the AFIX results.
- + Reach NIS rates- As a state we are working to have imMTrax clinic coverage rates reach the NIS rate in 2015!



» Who Can Help with the data

> EVERYONE!!

+ We all have to work together to get all records in imMTrax accurate and up-to-date depending on what the patient has received.



» A look back at 2014 data...

	# of Patients	4:3:1:4:3:1:4	4 Dtap	3 Polio	1 MMR	4 Hib	3 Hep B	1 Var	4 PCV
As of 12/31/2013	18,189	51%	57%	75%	72%	69%	75%	70%	68%
As of 03/31/2014	18,673	53%	60%	76%	74%	72%	77%	72%	70%
As of 06/30/2014	18,273	54%	61%	77%	75%	72%	77%	72%	71%
As of 09/30/2014	17,649	53%	61%	76%	75%	72%	76%	72%	71%

» Where do we go and want to be...

> National Immunization Survey (NIS) results???

	4:3:1:4:3:1:4 4	4 Dtap	3 Polio	1 MMR	4 Hib	3 Hep B	1 Var	4 PCV
imMTrax	53%	61%	76%	75%	72%	76%	72%	71%
NIS	65.4%	79%	92.7%	87.3%	82.3%	89.9%	87.1%	76.8%
Difference to Accomplish (Percentage Points)	12.4	18	16.7	12.3	10.3	13.9	15.1	5.8

» Where do we want to go

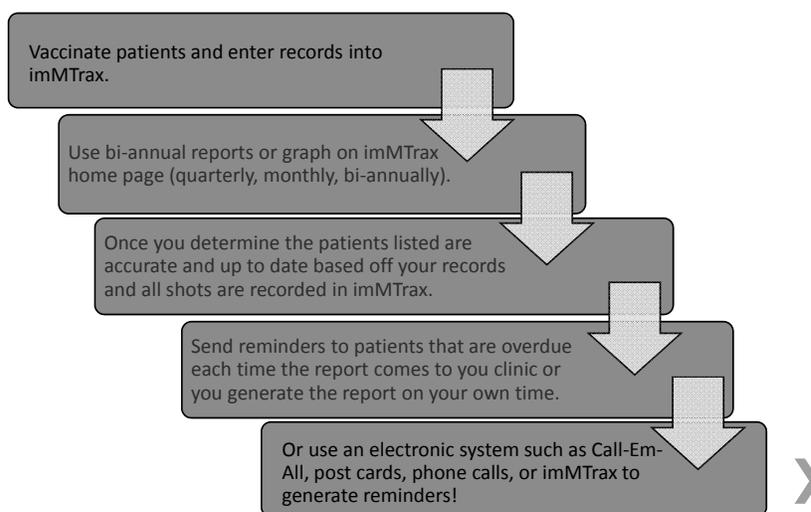
- > We want to be able to at least match imMTrax data with NIS data results.
- > Have complete and accurate data housed in imMTrax.
- > Have all clinics using imMTrax as the place to look for immunization records.
- > Be able to generate accurate bi-annual reports to provide to clinics.
- > Be able to assist clinics with using the reminders and recalls generated from imMTrax.

> How do we get there?

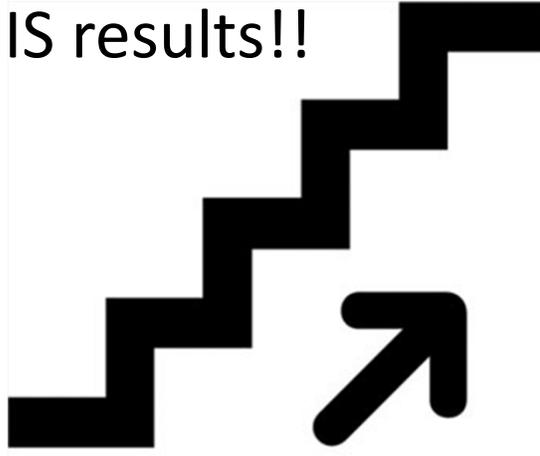


» Create a sustainable plan

- > What does this look like?



»We want to keep moving up, or to the top to match NIS results!!



»Discussion



Thank you! Questions?

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