# **Texas Department of State Health Services**



Designing Around Consent: ImmTrac Replacement Project in Texas

AIRA 2015 National Meeting April 22, 2015





#### **Outline**

- DSHS Immunization Branch
- ImmTrac Replacement Project
  - ImmTrac
  - EVI
- Consent in Texas
- Proposed ImmTrac Legislation
- Questions?

# Texas DSHS Immunization Branch

#### Vision:

A Texas free of vaccine-preventable diseases

#### Mission:

 To provide leadership to increase vaccine coverage levels and to reduce the burden of vaccine preventable diseases

### Strategies to Increase Immunization Rates



- Promoting the Medical Home
- Developing and implementing systematic provider, public, and parent education
- Increasing access points of TVFC and Adult vaccinations
- Promoting the use of the Statewide Immunization Registry, ImmTrac

### ImmTrac Replacement Project

ImmTrac -Texas Immunization Registry



Electronic Vaccine Ordering System



ImmTrac2

### ImmTrac System

- Texas House Bill No. 3054 in the 75<sup>th</sup> legislative session in 1995 called for the creation of the registry by 1997.
- 1995: DSHS began registering public medical providers to use the ImmTrac application
- 1996: the registry application was available for request by any private medical provider.
- Under Texas Health & Safety Code 161, has operated as an "opt-in" registry since 1999.

### ImmTrac System

- Currently has over 131.2 million immunizations recorded
- 7 million children in the registry
  - 2.3 million under age 6 years
- 383,870 adults in the registry
- Approximately 11,000 active users

# Electronic Vaccine Inventory (EVI) System

- Established in 2010
- EVI allows TVFC providers to record current inventory and place vaccine orders
- Provider submits order through EVI
  - DSHS transmits EVI orders to CDC
- Doses administered are recorded in aggregate

# Electronic Vaccine Inventory (EVI) System

 Robust, fully functioning inventory management system

 9,415,896 doses ordered through EVI in 2014

3,404 sites enrolled in TVFC

## Consent in Texas





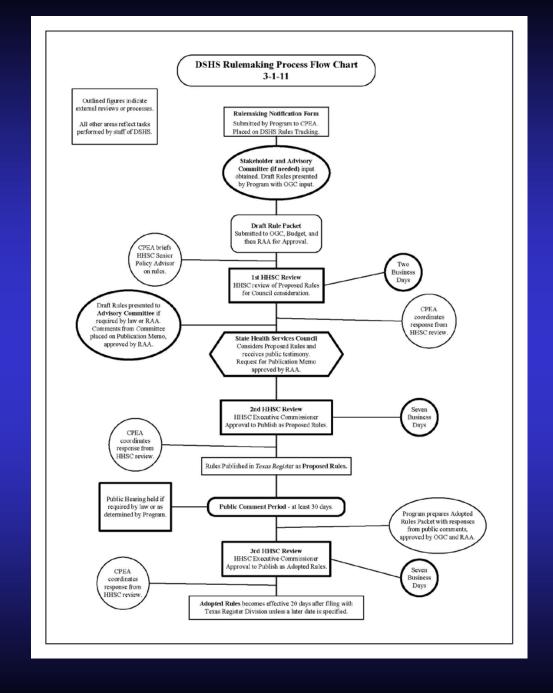
#### **Consent Law**

Sec. 161.007. IMMUNIZATION REGISTRY; REPORTS TO DEPARTMENT.

 (a) The department, for the primary purpose of establishing and maintaining a single repository of accurate, complete, and current immunization records to be used in aiding, coordinating, and promoting efficient and costeffective communicable disease prevention and control efforts, shall establish and maintain an immunization registry. The executive commissioner of the Health and Human Services Commission by rule shall develop guidelines to:

- (1) protect the confidentiality of patients in accordance with Section <u>159.002</u>, Occupations Code;
- (2) inform the individual or the individual's legally authorized representative about the registry and that registry information may be released under Section <u>161.00735</u>;

- (3) require the written or electronic consent of the individual or the individual's legally authorized representative before any information relating to the individual is included in the registry;
- (4) permit the individual or the individual's legally authorized representative to withdraw consent for the individual to be included in the registry; and
- (5) determine the process by which consent is verified, including affirmation by a health care provider, birth registrar, regional health information exchange, or local immunization registry that consent has been obtained.



Client Type	Attributes
ImmTrac Child	<ul> <li>This client is a child whose parent or legal guardian gave consent to retain their data in ImmTrac.</li> <li>The client can be a first responder's minor family member.</li> </ul>
ImmTrac Adult	<ul> <li>This client is an adult who gave consent to retain their data in ImmTrac; an adult's legal guardian can also give consent on the adult's behalf.</li> <li>This is type of ImmTrac client was introduced by Senate Bill 346 in 2009.</li> </ul>
First Responder (FR)	<ul> <li>This client acts as first responder in emergency events.</li> <li>"View FR/FM" rights are required to view these clients.</li> </ul>
Adult Family Member of a First Responder (FM)	<ul> <li>This client is an adult related to a first responder.</li> <li>Children of first responders do not have a separate client type. Instead, they are added as an ImmTrac child (IC) with a Minor FR Family Member attribute.</li> <li>"View FR/FM" rights are required to view these clients.</li> </ul>

Client Type	Attributes	
Pending Adult Consent (PA)	<ul> <li>This client is an adult between 18 and 19 years old for whom lmmTrac only has childhood consent on file.</li> <li>Once a client turns 18, their childhood consent is no longer valid and they must give adult consent to remain in the registry.</li> </ul>	
Pending Verification (PV)	<ul> <li>This client does not have a valid client consent type on file.</li> <li>The client could be an unconsented QM, or could have reached 19 years of age since the previous over age purge.</li> <li>ImmTrac removes the unconsented QM clients that have reached their 90-day expiration, and all unconsented over age clients that are not associated with a disaster.</li> </ul>	
Disaster Related Client – (DC and DU)	<ul> <li>This client was administered an anti-viral, immunization, and/or medication as part of a regionally/nationally declared disaster.</li> <li>The DC client gave consent to have their records retained beyond the disaster retention period.</li> <li>The DU client did not give consent to have their records retained beyond the disaster retention period; however, ImmTrac is legally bound to retain their disaster-related information for a designated period of time.</li> <li>"View Client Disaster" rights are required to view these clients</li> </ul>	

#### **Methods of Capturing Consent**

Data Exchange (Provider)	User Interface (Provider)	Direct from Client
Affirmation file  Consent form may be saved at the provider level with either an electronic or wet signature	I have a consent form on file.  Consent may be saved at the provider level with either an electronic or wet signature	<ul> <li>Form completed, signed and faxed by client to ImmTrac Group main fax</li> </ul>
	<ul> <li>I would like to print a consent form.</li> <li>Once form is signed, then affirm consent by using checkbox on screen</li> </ul>	<ul><li>Mail</li><li>Form completed, signed and mailed by client to ImmTrac Group</li></ul>
<ul> <li>Vital Statistics Unit Birth file</li> <li>All births certified through the Texas Electronic Registrar who have obtained consent from the parent/legal guardian</li> </ul>	I would like a consent form to pre-populate electronically based on information entered into the smart search fields.  • Once form is signed, then affirm consent by using checkbox on screen	<ul><li>In Person</li><li>Form completed, signed and presented by client to ImmTrac Group</li></ul>

### **Complexities of Consent**

46 requirements related to consent

- Thus far, 16 FDDs related to consent management in the first design and development cycle.
  - Due to the intricacy, there were 12 additional addendums to the FDDs.

#### **Designing around Consent**

- Consent client types.
- Modifying the UI to record the capture of consent at the provider level.
- Capturing consent history for audit purposes.
  - Where, by whom, and when
- Questionable matches and the hierarchy of consent.
- Decrementing doses for unconsented individuals and doselevel accountability.
- Implementing consent viewing permissions at the user role level.

#### View Permissions

Org Types and Roles with the "View FRFM"

Roles by Org Types

Org Type	
N	lum Users
College/University	
with DX	15
College/University	1.5
with NO DX	336
College/University	
Non-Providers with NO DX	
Community Health Center	
with DX	16
Community Health Center	1987
with NO DX Community Health Center	1907
Non-Providers with NO DX	
Correctional Facility	
with NO DX	24
Correctional Facility	
Non-Providers with NO DX	
Daycare	
with NO DX	51
Daycare Non-Providers with NO DX	
Dialysis Center	
with DX	g
Dialysis Center	
with NO DX	85
Federally Qualified Health C	linic
with DX	12
Federally Qualified Health C	11n1c 952
with NO DX Federally Qualified Health C	
Non-Providers with NO DX	Time
Fire Dept - EMS	
with DX	3
Fire Dept - EMS	
with_NO DX	67
Health Plans	
with DX Health Plans	1
with NO DX	1
Health Plans	
Non-Providers with DX	
Health Plans	
Non-Providers with NO DX	
Hospital	26
with DX	36
Hospital with NO DX	1645
Hospital	1043
Non-Providers with DX	
Hospital	
Non-Providers with NO DX	
Local Health Dept	
with DX	23
Local Health Dept	

View.DisasterClients Org Types and Roles with the "View Disaster-only Clients" right

Roles by Org Types

	Num Users		Ro
C-11 (N-iit			
College/University with DX	15		Fu
College/University	17		Fu
with NO DX	336		
College/University			Vi
Non-Providers with NO DX Community Health Center		4	Fu
with DX	16		Fu
Community Health Center	10		Fu
with NO DX	1987		
Community Health Center		20	Vi
Non-Providers with NO DX Correctional Facility		39	Fu
with NO DX	24		Fu
Correctional Facility	2.		Vi
Non-Providers with NO DX		4	
Daycare			Fu
with NO DX Daycare	51		Vi
Non-Providers with NO DX		7	* 1
Dialysis Center			Fu
with DX	9		
Dialysis Center	0.5		Fu
with NO DX Federally Qualified Health	Clinic 85		Fu
with DX	12		Fu
Federally Qualified Health			Fu
with NO_DX	952		
Federally Qualified Health	Clinic		Vi
Non-Providers with NO DX Fire Dept - EMS		24	Fu
with DX	3		Fu
Fire Dept - EMS	-		Fu
with_NO DX	67		
Health Plans	_		Fu
with DX Health Plans	1		Fu
with NO DX	1		ru
Health Plans	_		Vi
Non-Providers with DX		1	
Health Plans		-	Vi
Non-Providers with NO DX Hospital		5	Fu
with DX	36		ru
Hospital			Fu
with NO DX	1645		
Hospital		1	Vi
Non-Providers with DX Hospital		1	Vi
Non-Providers with NO DX		31	* 1
Local Health Dept			Fu
with DX	23		
Local Health Dept	Dage 1		Fu
	Page 1		

3/31/2015 Texas Administrative Code

#### << Prev Rule

Next Rule>>

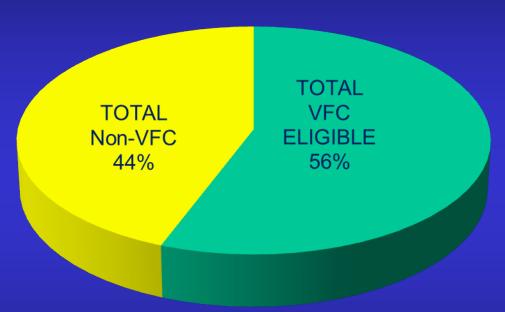
#### **Texas Administrative Code**

TITLE 25 PART 1	HEALTH SERVICES DEPARTMENT OF STATE HEALTH SERVICES
<b>CHAPTER 100</b>	IMMUNIZATION REGISTRY
<b>RULE §100.4</b>	Registry Consent and Withdrawal Relating to a Minor

- (a) A parent, managing conservator or legal guardian of a patient younger than 18 years of age may consent to the inclusion of the child's immunization history in the immunization registry by doing one of the following:
- (1) indicating consent at birth certificate registration, including by electronic signature;
- (2) submitting written notification to the department in a format prescribed by the department or substantially similar and mailed to the Department of State Health Services, Immunization Branch, MC-1946, P.O. Box 149347, Austin, Texas 78714-9347, or by courier to Department of State Health Services, Immunization Branch, 1100 West 49th Street, MC-1946, Austin, Texas 78756, or by calling the Immunization Branch at (800) 252-9152 to request a consent form;
- (3) completing written consent to be submitted to a health care provider, birth registrar, regional health information exchange, or local immunization registry, who may review that consent and affirm that consent has been obtained via an affirmation process as directed by the department.
- (b) Unless otherwise provided by §100.7 of this title (relating to Potential and Declared Disasters, Public Health Emergency, Terrorist Attack, Hostile Military or Paramilitary Action, and Extraordinary Law Enforcement Emergency Event), the department shall verify consent before including the reported information regarding the child in the immunization registry. Under Health and Safety Code, §161.007(a)(5), the department may elect to verify consent by receiving affirmation from a health care provider, birth registrar, regional health information exchange, or local immunization registry that consent has been obtained. The department shall provide notice to a provider that submits data elements for a person for whom consent cannot be verified. The notice shall contain instructions for obtaining and affirming consent and resubmitting the data elements to the department.
- (c) Consent is required to be obtained only one time, and is valid until the child becomes 18 years of age, unless the consent is withdrawn in writing.
- (d) A parent, managing conservator or legal guardian of a patient younger than 18 years of age may withdraw consent for the child to be included in the registry at any time by submitting written notification to the department in a format prescribed by the department or substantially similar and mailed to the Department of State Health Services, Immunization Branch, MC-1946, P.O. Box 149347, Austin, Texas 78714-9347, or by courier to Department of State Health Services, Immunization Branch, 1100 West 49th Street, MC-1946, Austin, Texas 78756, or by calling the Immunization Branch at (800) 252-9152 to request a consent withdrawal form. Unless otherwise provided by §100.7 of this title, the department shall remove information from the immunization registry for any person for whom consent has been withdrawn, and the department shall send the parent, managing conservator or legal guardian a written confirmation of the removal of the information. The department may not retain individually identifiable information about any person for whom consent has been withdrawn except as provided for by §100.7 of this title.

#### **Texas Childhood Population – 2015**

(ages 0-18 years)



#### VFC Eligible:

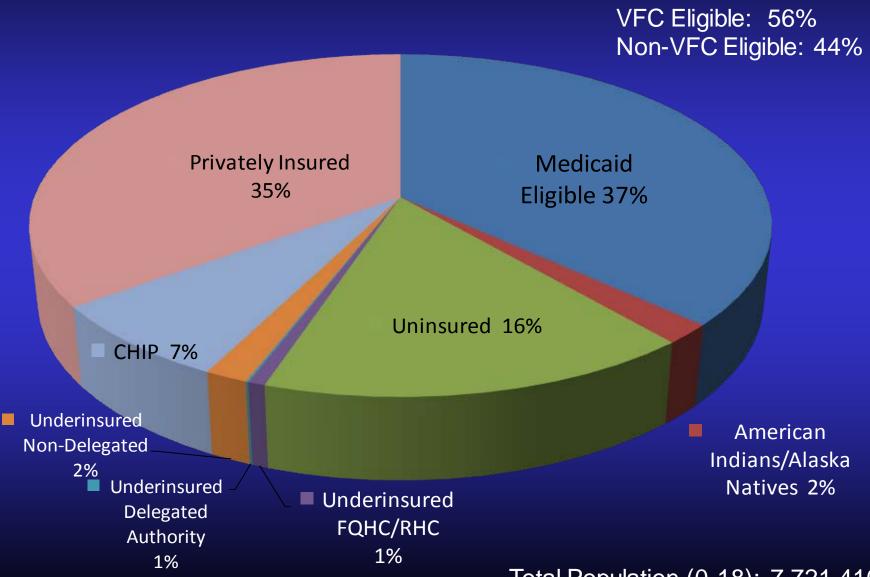
- Medicaid-eligible
- Uninsured
- American Indian/ Alaska Native
- Underinsured
  - has commercial (private) health insurance but coverage does not include vaccines; insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only), or vaccine coverage is capped at a certain amount (VFC eligible after cap is reached).

#### Non-VFC Eligible:

- Insured
- CHIP
- Underinsured in private sites

Total Population (0-18): 7,721,410

## Texas 2015 Total Population (0-18) By Eligibility



Total Population (0-18): 7,721,410

#### 2015 Texas Legislative Session

- House Bill 465 and Senate Bill 29 change ImmTrac from an opt-in registry to an opt-out.
- House Bill 2171 extends the timeframe for inclusion in the registry from 18 to 26 years of age.
- House Bills 2641 and 1319 relate to information authorized through a health information exchange.

## Questions?

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