Process Overview for Electronic Data Exchange to the Registry



(Bidirectional)

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The Validation Testing Phase begins after the Arkansas WebIZ Interface Coordinator contacts the EHR vendor testing lead. Arkansas WebIZ will not review test messages from EHR vendors prior to initiating this contact.

- 1. If not already completed during Step 3, generate HL7 test message(s) and send to Arkansas MURCS for formatting review. Note: EHR vendors capable of sending 100+ test messages for format testing within 24 business hours of contact will be given priority in interface establishment.
- 2. Work with Arkansas WeblZ staff to identify provider office(s) for interface implementation
- 3. The Implementation begins after the EHR vendor has tested its interface with Arkansas WebIZ and has successfully met Arkansas WebIZ file formatting requirements using test data. This is still considered part of the TESTING process. All provider offices will follow the steps described below.

NOTE: The term "Provider Office" refers to a physical building with a distinct mailing address. It is possible for an organization to be comprised of multiple provider offices. The steps outlined below MUST be completed for each individual provider office regardless of the status of another provider office within the same organization.

- 4. Participate in project kick-off call
 - a. Coordinate timing of interface installation with provider office prior to production testing.
 - b. Discuss project timeline, including ongoing meetings, communications, milestones, and file frequency.
- 5. Test interface using fake patient data from provider's test environment
 - a. Successfully install interface in provider's local environment(s) (may not be applicable for all EHR vendors).
 - b. EHR vendor or provider generates HL7 test message and sends to Arkansas WebIZ for formatting review. This step will only test the structural validity of the HL7 message and ensure the required elements are present. The provider/EHR will need to repeat this step until deemed successful by the Arkansas WebIZ Interface Coordinator and/or the Arkansas WebIZ Coordinator.
- 6. Establish a secure connection with the Arkansas WebIZ Webservice.
 - a. Work with the Arkansas WebIZ Interface Coordinator to successfully connect to the Arkansas WebIZ Webservice (Arkansas WebIZ will provide necessary documentation).
 - b. Test the Webservice connection with Arkansas WebIZ staff (this will generally be performed by the EHR).
- 7. Test interface using real patient data from the provider's production environment
 - a. EHR vendor or provider generates HL7 message using real patient data and sends to Arkansas WebIZ over the established interface connection (from step 3).
 - NOTE: Providers willing to submit two (2) full years of immunization history data will be given priority in testing
 - b. Arkansas WebIZ staff will analyze the information sent across the interface connection and provide the EHR vendor/provider with results.

- 8. EHR vendor generates file for data validation based on Arkansas WebIZ-specified parameters.
 - a. Arkansas WebIZ staff performs review of submitted data and communicates any issues back to provider.
 - b. Provider pulls any/all requested hardcopy patient records and submits them to Arkansas WebIZ for data validation.
 - c. Provider works with Arkansas WebIZ staff to resolve issues.
 - d. This step will not be considered complete, and the provider will not progress any further, until ≥95% accuracy rate.
- 9. Support interface Go Live.
 - a. Provider assistance to Arkansas Provider office in selecting Go Live date and communicate scheduled Go Live date to Arkansas WeblZ Interface Coordinator.
 - b. Arkansas WebIZ staff will verify the receipt of enhanced data files submitted to the IIS on Go Live date.
 - c. Provider staff participates in Arkansas WebIZ HL7 training, if not already completed.
 - d. Send ongoing data files to Arkansas WebIZ
 - e. Ensure that provider and/or EHR technical contact monitor and promptly correct any and all errors represented in the HL7 management logs.

NOTE: Failure to provide a prompt resolution to data errors stemming from HL7 transmission will lead to the provider practice being taken out of production. Once this occurs, the provider practice will be required to resolve any pending data issues, and re-certify ability to provide accurate data by repeating steps 5 and 6 of the implementation phase.