Data Exchange with the Oregon ELR Project -- Onboarding

Oregon ELR

1. Provide HL7 Specification, and appropriate Data Exchange forms

4. Establish data exchange credentials

7. Review messages and provide feedback

Pass

Lab/LIMS

Expresses interest in ELR

2. Kick-off call

3. Return Data Exchange Forms

5. Pre-test with PHIN-MQF

6. Submit test messages

Fail

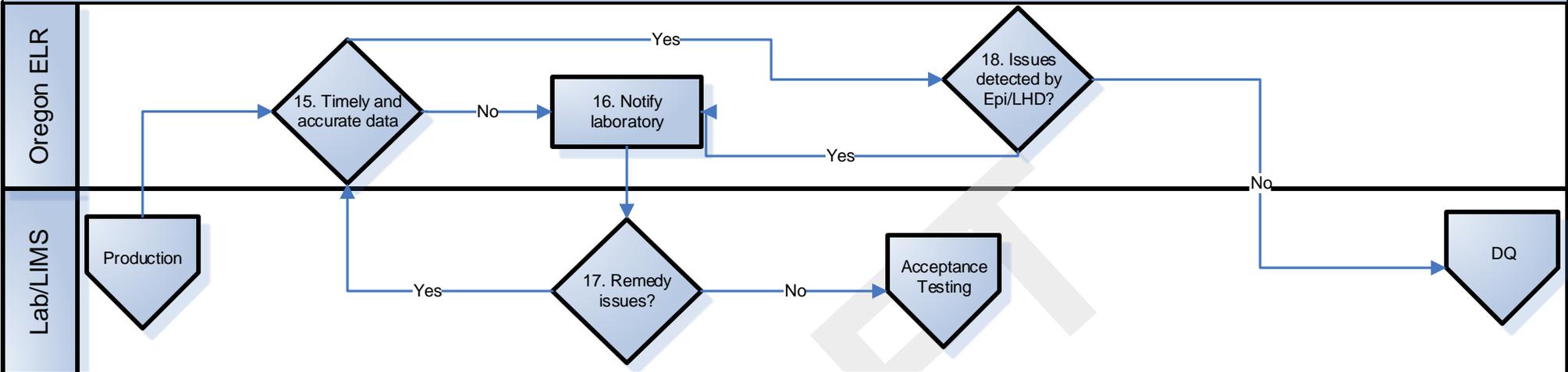**Acceptance Testing**
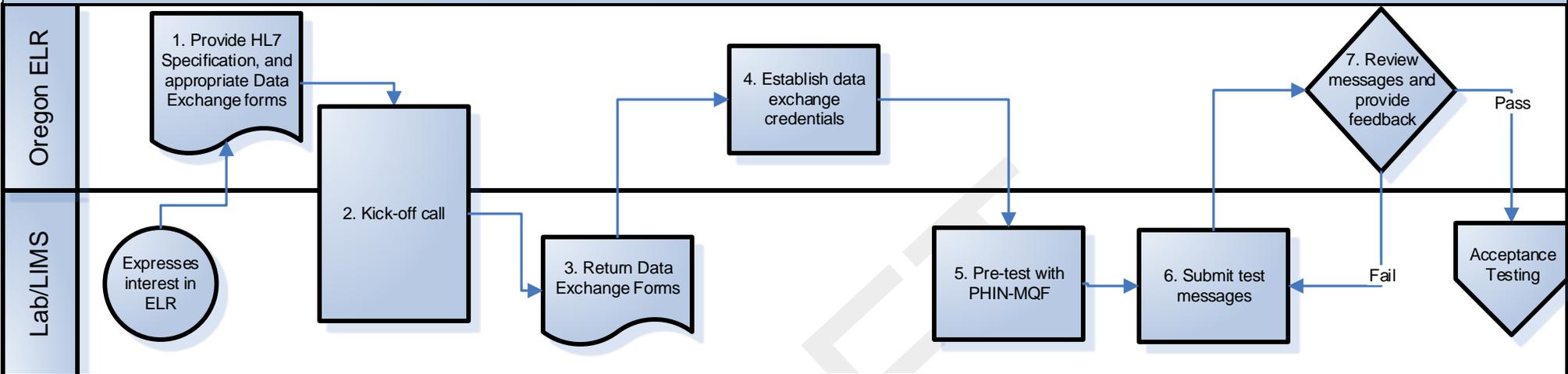
Activity Details

(1) Laboratories may submit files via secure file transfer protocol (FTP) or via the Public Health Information Network-Messaging System (PHIN-MS). Refer to the Data Exchange SOP for details.

While meaningful use (MU) requires labs to submit HL7 v2.5.1, non-MU labs may request to send earlier versions of HL7. Those requests will be evaluated on a case by case basis.

(2) The kick off call should include the ELR Coordinator, laboratory managers responsible for reporting, and technical staff responsible for message creation and submission. This meeting may also include a project manager, meaningful use coordinator, and data quality personnel.

During this call, timelines for project phases should be established, points of contact clarified, and impacts to workflow at the laboratory discussed. Regular meetings should be scheduled with key project staff to ensure that the project stays on target and critical issues are addressed in a timely fashion. Should also determine transport method.

(3) Data exchange forms must be completed by the trading partner.

(4) The Interoperability Director (ID) will work with appropriate OIS/ETS staff to establish credentials. FTP account is created Refer to the Data Exchange SOP.

(5) Submitters are encouraged to create and send multiple messages to CDC's PHIN-Message Quality Framework testing site (https://phinmqf.cdc.gov/) prior to submitting tests to Oregon ELR to ensure that basic message construction is sound. This does not involve any engagement from the Oregon ELR Project and results are immediately accessible to the message developer.

(6) Once messages successfully pass the PHIN-MQF or if the developer has questions about interpreting those results the Oregon ELR Project should be notified (971-673-1111 or via email at ELR.Project@state.or.us.

Messages should comply with the Oregon ELR 2.5.1 Implementation Guide (unless another format is approved at discretion of the Interoperability Director).

(7) The ELR Coordinator will review messages per the schedule established in step 2. Feedback will be provided by email as well as during regularly scheduled calls. Once the messages have been deemed acceptable by the ELR Coordinator the site moves to Acceptance Testing.

DRAFT

Data Exchange with the Oregon ELR Project – Acceptance Testing

Oregon ELR

10. Notify LHD of dual report start date; configure script to move file

12. Issues Identified?

13. 30 days and LHD approval?

14. Production and DQ prep call

Lab/LIMS

Acceptance Testing

9. Dual-reporting prep call

11. Production ELR reporting begins (faxing continues)

No

Yes

No
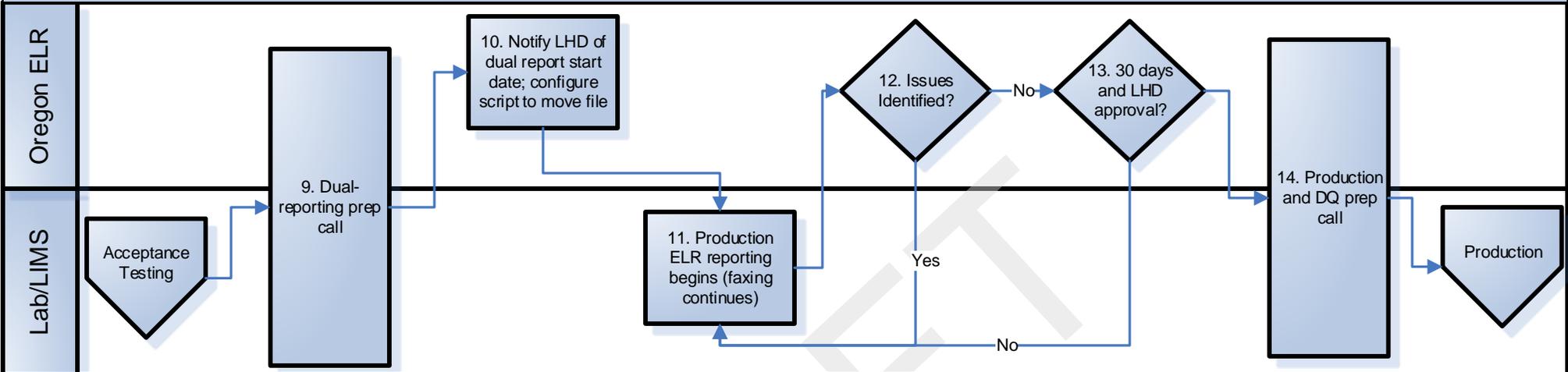
Production

Activity Details

(9) The project team convenes to determine a date to begin dual reporting (i.e., production ELR and simultaneous faxing of reportable conditions). During this call a dual-reporting start date is selected and the process for determining how issues will be dealt with and how often the team will meet is outlined.

(10) The ELR Coordinator will notify Local Health Department users that the facility will begin its minimum 30-day dual reporting period.

The ELR Coordinator will modify the FTP script to route production ELR messages to the appropriate folders.

(11) Dual reporting begins

(12) As issues are identified, the lab will be notified. Non-critical issues (e.g., formatting, code set updates, etc.) may be fixed and not affect the timeframe. Critical issues that are identified will result in a halt to dual reporting and a return to the test environment until resolved. A plan for resolving issues must be agreed upon within one work week.

If the lab has to return to the test environment, the 30-day clock starts over.

(13) If the lab has corrected all minor issues and has engaged in a minimum of 30 days dual reporting, the lab will have preliminary approval to go live.

Final approval by the Local Health Department Orpheus User Group (LHD-OUG) is required. Since the LHD is part of the dual reporting process, most issues should have been identified prior to this point. The laboratory remains in the dual reporting cycle until the LHD-OUD grants approval (this group meets monthly).

(14) All labs must have a production/DQ preparation call following final approval from the LHDs, where the official go-live date will be set and the processes for ongoing data quality reviewed.

Data Exchange with the Oregon ELR Project – Production/Maintenance

Oregon ELR

15. Timely and accurate data → No → **16. Notify laboratory** → Yes → **18. Issues detected by Epi/LHD?**

18. Issues detected by Epi/LHD? → Yes → **16. Notify laboratory**

18. Issues detected by Epi/LHD? → No →

Lab/LIMS

Production

16. Notify laboratory → **17. Remedy issues?** → Yes → (back to 15)

17. Remedy issues? → No → **Acceptance Testing**

DQ

Activity Details

(15) As long as there are no issues with a lab in production ELR they will remain there indefinitely

If a lab wants to upgrade to a new laboratory information management system, a new electronic health record system, or start using a newer version of HL7, an abbreviated test to production cycle will be considered.

Note: If at any time a critical failure is identified (the OPHD Rhapsody or FileMaker servers are unavailable or the LIMS or EHR server is unavailable, the lab will be asked to resume faxing immediately. When the issue is resolved and the reason for failure has been identified, the lab may resume ELR transmissions.

(16) Labs should be sending LOINC and SNOMED codes for tests and results. If something comes across that does not map, it is the Tech Team's responsibility to determine why and handle appropriately (see ELR DQ and ELR Converter SOPs.

Both lags in reporting as well as structural and coding issues should be reported to the laboratory for remediation.

(17) If the laboratory corrects the issue, or has a plan to correct the issue going forward, no further action is needed. The facility may remain in production. If, however, they are not able to (or are not willing to) correct the issue, they will revert back to acceptance testing for a minimum of 30 days or until the issue is resolved. If they fail to comply with this strategy, and are a "high volume lab" (i.e., >30 reportables/month) they may be subject to civil penalties.

(18) If at any point during reporting, the epidemiologists or local health departments identify issues with the data (e.g., new labs are not being reported), the issue must be reported to the facility for remediation.

If no anomalies are identified, the lab is considered in maintenance mode. Labs in maintenance will still be requested to update LOINC and SNOMED codes annually as well as generate an audit review file once each year to be analyzed by the DQ Team. (See ELR Data Quality Assurance SOP.)