



New Mexico Statewide Immunization Information System (NMSIIS)



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Tips for NMSIIS Users

Ad Hoc Reports

The NMSIIS *Administrator* access includes the Ad Hoc Reports functionality. This function in NMSIIS allows an Administrator to create customized reports, either lists of information for clients or counts of information for clients or immunizations.

Both types of reports require a longer processing time than other reports in NMSIIS. They run overnight so that “new client” and “new immunization” data entered in NMSIIS on the day the report query is submitted will be included in the report. You can only have one Ad Hoc Report query running overnight. If you submit multiple Ad Hoc Report queries for the same evening, NMSIIS will only run the last one submitted.

Example 1:

New client Georgie Porgie’s Client Record is entered today. New shot records for Georgie are entered today. Administrator submits an Ad Hoc Report query today.

Outcome: the Ad Hoc Report will be ready tomorrow and all of Georgie’s record will be included in the Report data.

Example 2:

New shot records for existing client, Dooby Gillis, are entered today. Administrator submits an Ad Hoc Report query today.

Outcome: the Ad Hoc Report will be ready tomorrow and the new shots for Dooby will be included in the Report data.

Client Status in NMSIIS

When you create a Client record in NMSIIS, its status defaults to ACTIVE (A). You can manually change a status to INACTIVE (N), MOVED (M) or PERMANENTLY INACTIVE / DECEASED (P). Except for the Permanently Inactive / Deceased (P) status, you can update a status at any time. Only the NMSIIS Team can change a (P) status if it is entered in error. NMSIIS will automatically update the status for N or M if you open such a Client record and add an immunization - NMSIIS makes the record ACTIVE (A) again.

A key reason to move a Client record from an ACTIVE status is if the client is a child 18 years of age or younger and not getting services from your organization. If the child is no longer getting services and is not getting immunizations recorded in NMSIIS, then the child’s record is lowering your organization’s vaccination rate. By changing the child’s record to INACTIVE or MOVED, then the child’s record is not included in the immunization rates.

Things to remember regarding client statuses:

- Client status relates to an organization (not the whole State)
- Status “N” or “M” does not make a client inactive for all providers
- Can only permanently inactivate a client statewide via the “P” status



Corrections

The responsibility for correcting data errors in NMSIIS is shared between NMSIIS users and the NMSIIS Project Team. At the site level, Standard Users, Inventory Managers and Administrators each have access for specific data fields, so the person to correct may depend on the User Role. Please submit a Helpdesk ticket for data errors that you cannot correct (one or more clients reported per Email). Send a brief, simple message such as, "Duplicate Records" or "Client Correction Needed."

Remember! If you submit an Email to the Helpdesk to get a client record corrected, NEVER send client name or PHI because Email is not a secure channel! Emailing identifiable client information via an unsecure channel is a HIPAA security violation.

NMSIIS Users: You can only update Client Personal Information for Mother's Maiden and First names. You can update most Client Information, Client Address, Client Responsible Person and Client Comments fields. You can edit/delete "owned" immunizations and historical immunizations. You can keep your Clinician and Provider lists up to date.

NMSIIS Project Team: Can update Client Personal Information; merge duplicate client records; and update User records, passwords and access.

Grace Period for Immunization Administration

NMSIIS is hard-coded to evaluate immunizations according to the ACIP schedule published by the CDC. NMSIIS has no programming for 'grace period.' If your practice is to administer immunizations prior to the ACIP recommended dates, then the NMSIIS evaluator will generate the "Not Valid" indicator. Results:

- The "Not Valid" cannot be remedied in NMSIIS.
- Parents and children may face delays in student registration for a school year due to the presence of "Not Valid" indicator on the immunization record.
- A client might be required to get re-immunized.

To avoid these problems, simply follow the 'recommended' dates in NMSIIS (earliest and latest dates). These were created to help as a guidance tool.

Insurance

All NMSIIS sites are required to obtain and enter medical insurance information any time a client has coverage, whether child or adult client. Your best chance at obtaining insurance information is when the client is at your site for an immunization appointment. If you later discover that insurance information isn't written on the Part B form, then look in the client's medical file. There are tips for entering insurance information in NMSIIS on the [NMSIIS Frequently Asked Questions](#) document, on this website.

Insurance Information Display on Client Record

To ensure that the correct insurance information displays on a client record, you must enter the same insurance information on all immunization records for any given date. If you enter different insurance information on each record, for the same date, NMSIIS cannot determine which is the correct information. It will default to displaying whatever you entered on the first record of the day.



Inventory Alerts: Expired Vaccine Lots on the Home Page

When you log on to NMSIIS, you'll find Inventory Alerts on your Home page, which include vaccine lots that have expired and still have a positive quantity. To get these expired lots off the Inventory Alerts section, you will need to adjust the quantity of the lot to zero (0). To be able to access the Quantity on Hand field, edit the vaccine's **Expiration Date** to a future date and **Save**. You can then **Modify Quantity On Hand** to zero and **Save**. Finish by editing the vaccine's **Expiration Date** back to its original date and **Save**. The expired listing should now be removed from the Home page Alerts.

Immunization Reports: Non-NMSIIS Inventory

NMSIIS inventory reports pull data from the NMSIIS Inventory. If you want to get a report for Historical immunizations, you would use the Ad Hoc Report function. Include FROM INVENTORY in the filters that you set, using the operator of EQUALS and the comparison value to NO.

Not Valid Alert for HPV Immunization

You see a "NOT VALID" alert on the Immunization History screen for an HPV immunization series that you believe to be valid.



Explanation: HPV immunizations must meet all of the following criteria:

- between doses 1 and 2: minimum 4 weeks (28 days)
- between doses 2 and 3: minimum 12 weeks (84 days)
- between doses 1 and 3: minimum 24 weeks (168 days)

Each minimum interval must be met for the series to be valid, including the minimum 12 week interval between doses 2 and 3.

Solution: Be sure the minimum 12 week interval between doses 2 and 3 has been met before giving the 3rd dose. We recommend checking the “Vaccines Recommended by Selected Tracking Schedule” section in NMSIIS for the earliest date that the next dose of HPV may be given. *NMSIIS calculates week intervals by converting weeks to days. Depending on how you count weeks, your calculations of the number of weeks that have elapsed may differ from NMSIIS’s.*

Pertussis Missing in Historical Immunization Record of Tdap

When attempting to enter a historical Tdap shot, it may be the case that no Tdap vaccine group is available to record the shot in NMSIIS. If you record the components, Td and Pertussis, no trade names are available for the record. If you record without trade names, then only the TD component appears on the client’s Immunization History screen.

Solution: Enter just the Pertussis component as a Historical shot without trade name and NMSIIS will record both Td and Pertussis on the client’s Immunization History screen.

Red Font Listing of Non-Expired Vaccine

When you administer all of the doses of a non-expired vaccine, for a particular Lot Number, the **INV On Hand** column displays the quantity as zero (0) and the vaccine listing displays in red font. If you add in more inventory for that vaccine/Lot number, it will still display in red font until you re-activate the Lot. To re-activate, go to the Show Inventory page and click on the **Trade Name** link for the vaccine. Change the **Lot Active** field to Yes.

Trade Names De-activated

Manufacturers have discontinued some vaccine trade names in recent years, so those vaccine trade names have been de-activated in NMSIIS. You probably do not have any vaccine supplies having these trade names but if you do, you should contact DOH immediately using a DOH Helpdesk ticket. You will still be able to document historical immunizations having these de-activated trade names. Current immunizations for the vaccines will be documented using their current trade names.

Training Requests

Any site that is already signed up as a NMSIIS Organization can request NMSIIS training for site staff and volunteers. Although it used to be the case that a site could contact a NMSIIS trainer directly, the request process now goes through the Department of Health Helpdesk. A supervisor would send an Email to the DOH Helpdesk requesting NMSIIS training for an employee, which would include the following information:

- Site Name
- NMSIIS Site ID#
- Name of site person to contact about the training request



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Phone number and Email address for site contact person
Type(s) of NMSIIS training needed (Look-Up Only, Standard User, Inventory Management, Administrative, and/or Reports)
Number of people who will attend the training
If available, computer training room dates

If your site has not yet applied to be a NMSIIS Organization, you would send an Email to the DOH Helpdesk asking for the NMSIIS Organization application form.

Contact the DOH Helpdesk at: DOH-HelpDesk-Main@state.nm.us

Transfer of vaccine inventory

Vaccine transfers from clinic to clinic require two actions to complete: *shipping* and *accepting*. An Inventory Alert on your Manage Inventory screen notifies you when a transfer has been initiated. The receiving clinic must *accept* the transfer to get the doses to post to the receiving clinic inventory. To accept a transfer, you would go to the Manage Transfer screen and access the transfer details by clicking on the Create Date link for the Inbound Transfer. Once you have confirmed the details of the transfer, you can Accept, Reject, or Partially Accept the vaccine transfer. If you fail to accept, the shipped doses stay in NMSIIS under the shipper's inventory – neither you nor the shipper will be able to reconcile your physical inventory totals to the NMSIIS totals.

User ID and Password for Log-In

Each NMSIIS log-in is to be used by the person for whom it was created. Still – we continue to hear about people sharing a log-in or using a log-in belonging to some former employee. The point of a unique user log-in is that it ensures that NMSIIS activity can be traced to a specific individual. It's not a management choice, it's the law. When you use a log-in that is not yours, you are violating the HIPAA Security Rule for a "Unique User Identification for each electronic system holding electronic protected health information (EPHI)."

It doesn't matter if you are just looking up records or doing data entry in NMSIIS. Never share a user ID or use one that was created for a former employee. To get your own NMSIIS log-in, submit a helpdesk request to: DOH-HelpDesk-Main@state.nm.us

What is CDC definition of under- and fully-insured?

The terms "underinsured" and "fully insured" are defined as follows:

- **Underinsured:** A person who has health insurance, but the coverage does not include vaccines or a person whose insurance covers only selected vaccines. Children who are underinsured for selected vaccines are VFC-eligible for non-covered vaccines only. Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) or under an approved deputization agreement.
- **Fully Insured:** Anyone with insurance that covers the cost of vaccine, even if the insurance includes a high deductible or co-pay, or if a claim for the cost of the vaccine and its administration would be denied for payment by the insurance carrier because the plan's deductible had not been met.

From the [CDC website](#):



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