KIDSNET UPDATE

RHODE ISLAND'S INTEGRATED CHILD HEALTH INFORMATION SYSTEM

CENTER FOR HEALTH DATA AND ANALYSIS (CHDA)

Sam Viner-Brown
Chief

Ellen Amore
KIDSNET Program Manager
ellen.amore@health.ri.gov
401-222-4601

Kim Salisbury-Keith
Development Manager
kim.salisburykeith@health.ri.gov
401-222-5925

Jeff Goggin
Immunization Interface Manager
jeff.goggin@health.ri.gov
401-222-4968

PROVIDER RELATIONS
Janet Limoges
janet.limoges@health.ri.gov
401-222-7681

Carla Laroche-Harris
Carla.LarocheHarris@health.ri.gov
401-222-4644

PROGRAMMER
Jeannine Warrener

DATA MANAGEMENT/DATA QUALITY
Joel Balkum   Catherine Drance
Christine Jason   AJ Lizarda
Richard Lupino

KIDSNET

NOVEMBER / DECEMBER 2016

Happy Holidays
from the KIDSNET Team!

DID YOU KNOW?

Fifty-two children born in 2015 received newborn screening follow-up at one of these Hasbro clinics: Metabolic/Endocrine, Sickle Cell, Cystic Fibrosis, or Immunology. Primary care providers can view a summary of the evaluation in KIDSNET by clicking on "Newborn Diagnostic Summary" in the left-hand menu.

ERRATUM

There was an error in the last KIDSNET Update Newsletter. The "Infant Mortality in Rhode Island" article incorrectly stated that infant mortality was 5 per 1000 live births in 1975 compared to 6.5 per 1000 live births in 2013. The correct statistic is that infant mortality was 14.5 per 1000 live births in 1975 compared to 6.2 per 1000 live births in 2013. Although infant mortality has been declining in Rhode Island, disparities persist.

"WHERE'S WALDO?" - EXTENDED SEARCH CAPACITY

Searching for a child in KIDSNET can be challenging. Sometimes parents call children by nicknames or middle names, last names have changed, spelling of a child's name or date of birth is uncertain, or perhaps the child's name is hyphenated. Entering a combination of information into KIDSNET that identifies the correct child can be difficult.

To help improve this process, since November, all KIDSNET users have been granted the ability to conduct an "Extended Search". All users can now enter search criteria that yields more than one match. If there are fewer than 100 possible matches, KIDSNET will return a list which can be reviewed to help identify the child for whom you are searching. If there are more than 100 possible matches, the search criteria must be narrowed to get a full list of possible matches.

When searching, users can enter a "*" in place of some letters in a name for broader searching. For example, searching for "Chris* Smith" will result in a list that includes Chris Smith, Christopher Smith, Christian Smith, Christof Smith, etc. As a reminder, users are required by state and federal law to keep KIDSNET data confidential, and may only access records for their patients and clients to ensure services and coordinate care.

KIDSNET SECURITY UPDATE

To ensure secure connections, KIDSNET's Security Certificate is being upgraded on January 3, 2017.

Users who access KIDSNET using up-to-date versions of Chrome, Firefox, or Safari, as well as Internet Explorer version 7 or higher, should be unaffected by the change.

Practices submitting immunization data electronically will need to support SHA-256 certificates. Please inform your technical staff of this change to ensure your connection to KIDSNET is not interrupted.

Details of the upgrade can be found at:
http://health.ri.gov/publications/bytopic.php?parm=KIDSNET

HOW TO ENSURE IMMUNIZATION DATA ARE RECEIVED BY KIDSNET

Most electronic transmissions to KIDSNET are reflected in KIDSNET within a day of when they are sent. However, occasionally, records are rejected due to incomplete data or because the message is improperly formatted, and therefore cannot be processed. Internet connection problems may also occur. Below are several ways to monitor what data make it to KIDSNET:

- KIDSNET sends a daily email notification to HL7 senders using the email address(es) provided when data submission began. The email includes the number of HL7 immunizations received by KIDSNET from your organization the previous day, and can be sent to multiple email addresses. Changes to who receives this email can be made by notifying Jeff Goggin (see contact information below).

- In addition, when KIDSNET receives an HL7 transmission, it sends an electronic HL7 acknowledgement to the sending computer system to let it know that KIDSNET received the transmission. This electronic acknowledgement may also contain important information including any errors that were encountered; for example, that the lot number for an administered immunization was missing. Please check with your organization's Electronic Health Record (EHR) support team to learn more about your ability to review the HL7 acknowledgement information.

- An acknowledgement is also sent to the sending computer system if KIDSNET received the message but is unable to process it because critical information such as name or date of vaccine administration are missing. In these cases, the immunization must be resent.

- Finally, a provider can check to see if reported immunizations are in the KIDSNET database by running the "Immunization Report". As a reminder, there can be a delay between the time an immunization is sent electronically to KIDSNET and the time it is added to the system database due to the need for human review.

If you have a question or concern please contact Jeff Goggin at **Jeff.Goggin@health.ri.gov** or **401-222-4968**.

CRITICAL CONGENITAL HEART DEFECTS IN RHODE ISLAND

Approximately 7,200 babies are born annually with a congenital heart defect in the U.S. Of these infants, one in four have a critical congenital heart defect (CCHD). A newborn with a CCHD may appear healthy in the first few days or weeks after birth, but if the condition remains undiagnosed, serious and even fatal complications can quickly develop. CCHD newborn screening in Rhode Island helps detect CCHDs sooner in an infant's life, improving survival and health outcomes. Between 2014 and 2016, 44 babies were born with a CCHD in Rhode Island. Among these 44 newborns, 49 CCHD diagnoses were reported (some newborns present with more than one CCHD diagnosis).

The Rhode Island Birth Defects Program identifies and reports data on CCHD occurrences and trends, and collaborates with the Rhode Island Parent Information Network (RIPIN) to follow up with children with these conditions. A RIPIN Family Resource Specialist (parent consultant) interviews and conducts a service assessment with families of newborns with CCHD. The Specialist helps parents ensure that their children receive specific care on a timely basis and informs them of developmental and educational services as well as parent supports that are available. Newborn screening for CCHD results can be viewed on the KIDSNET Newborn Screening page. Diagnoses can be seen on the KIDSNET Birth Defects Reporting page if they were reported through KIDSNET.

CCHD Diagnoses in Rhode Island, 2014 - August 2016	
Diagnosis	**Frequency**
Coarctation of Aorta	13
Tetralogy of Fallot	11
Transposition of Great Arteries (d-TGA)	7
Double Outlet Right Ventricle	4
Pulmonary Atresia	4
Ebstein's Anomaly	3
Hypoplastic Left Heart	2
Tricuspid Atresia	2
Truncus Arteriosus	1
Single Ventricle	2
Total Anomalous Pulmonary Venous Return (TAPVR)	0
Interrupted Aortic Arch	0
Total	**49**

Source: Rhode Island Birth Defects Program

VACCINE FOR CHILDREN (VFC) ELIGIBILITY CODES

Eligibility for VFC vaccine must be assessed and recorded in the medical record based on the categories listed below. The information is also required in the electronic messages for newly administered vaccines that are sent to KIDSNET.

For categories V02 – V05, the individual must also be younger than 19 years of age and the administered vaccine must be eligible for VFC funding.

Code	Category	Description
V01	Not VFC eligible	Patients with private insurance. Patient does not qualify for VFC because they do not have one of the statuses below. (V02-V05)
V02	VFC eligible – Medicaid/Medicaid Managed Care	Patient is currently eligible for Medicaid or Medicaid managed care (RIteCare)
V03	VFC eligible – Uninsured	Patient does not have health insurance
V04	VFC eligible – American Indian/Alaska native	Patient is a member of a federally recognized tribe
V05	VFC eligible – underinsured at FQHC	Patient has insurance but insurance does not cover vaccines, limits the vaccines covered or caps vaccine coverage at a certain amount Patient is receiving care at an FQHC

Q: What value do I use if a child qualifies for more than one VFC eligibility code?

A: Use the code that requires the smallest out-of-pocket expense to the parent/guardian. For example, if a child has private insurance and Medicaid, use the V02 code "VFC eligible - Medicaid/Medicaid Managed Care (RIteCare)".

VFC Questions? Please contact your Immunization Representative:

Sue Duggan-Ball.............................401-222-1580......................**Sue.Dugganball@health.ri.gov**
Neha Patel ....401-222-5945......................**Neha.Patel@health.ri.gov**
Heidi Wallace................................401-222-4631......................**Heidi.Wallace@health.ri.gov**