Navigation in CoPHR/CIIS

Pharmacy Single Site

Colorado's Integrated Public Heath Reporting portal (CoPHR) allows Colorado's health care community to register intent for Meaningful Use for the following public health programs: Cancer Registry Reporting, Electronic Lab Reporting, Immunization Reporting, and Syndromic Surveillance Reporting. **This guide describes how to navigate the CIIS Resource Center (CRC) within CoPHR. This guide does not address the other public health programs.**

CoPHR is the primary portal for all public health reporting in Colorado. Within CoPHR there is an immunization-specific sub-portal called the CIIS Resource Center (CRC). The CRC is a self-service system that allows you to do a number of tasks once enrollment is complete, including:

- Submit new user account requests.
- Access training information and resources.
- Provides access to electronic data exchange guidelines and CIIS messaging specifications.
- Test Health Level 7 (HL7) messages generated from your EHR against CIIS specifications for formatting accuracy (HL7 validation).
- Submit online support tickets to the CIIS Help Desk for assistance.

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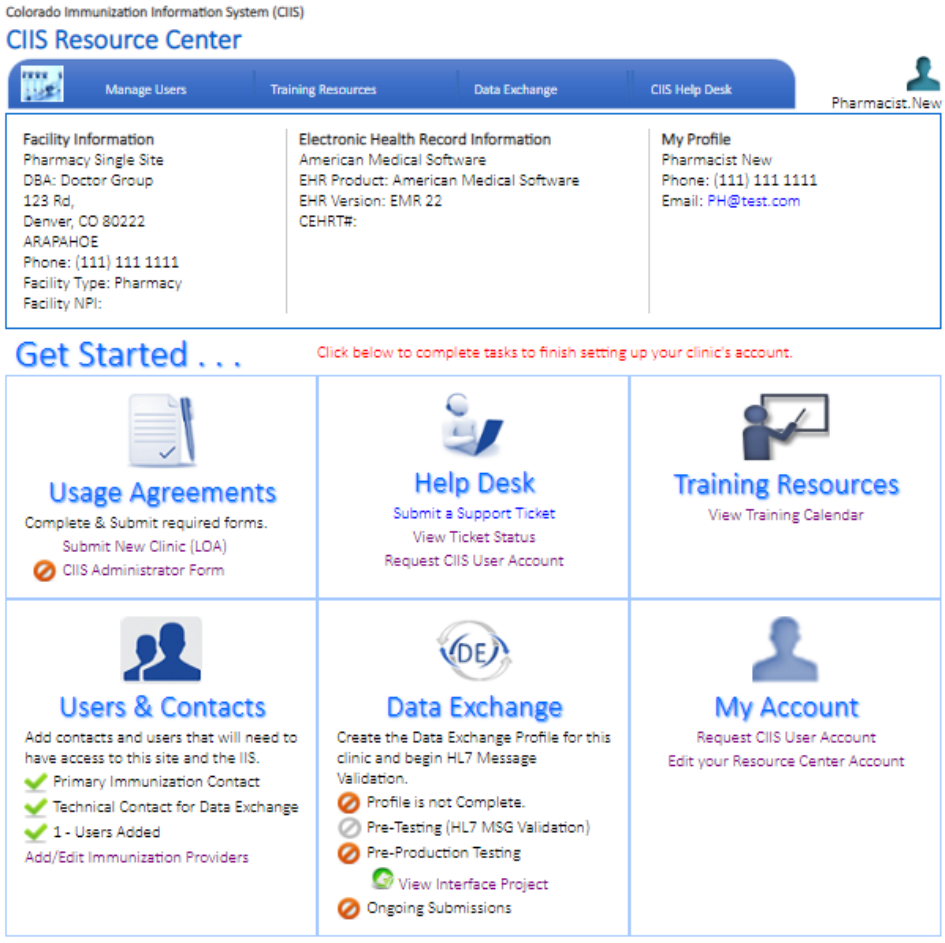
Navigating the CIIS Resource Center

This document picks up where the Pharmacy Enrollment guidance docmuent left off. Please login to your CoPHR account on the CoPHR website (www.cophr.com).

1. After logging in, you will be taken directly to the CIIS Resource Center (CRC) within CoPHR where you will see 6 widgets.



Note: Each section on the Main Screen will be called a widget in the remainder of this guidance document. The chart below describes what the icons stand for:

✔	Step Completed and approved (if applicable)
⊘	Step Not Completed
⚠	Step In Process – May Need Approval

2. If at any time you get lost within the portal or redirected back to the main CRC homepage by clicking Main in the dark blue bar at the top of the page.

Widget Navigation

This section describes how to navigate the following:

- Usage Agreements
- Help Desk
- Training Resources
- Users & Contacts
- Data Exchange
- My Account

Note:

<u>All sites</u> should complete the information within the Usage Agreement widget and setup users under the Users & Contacts widget.

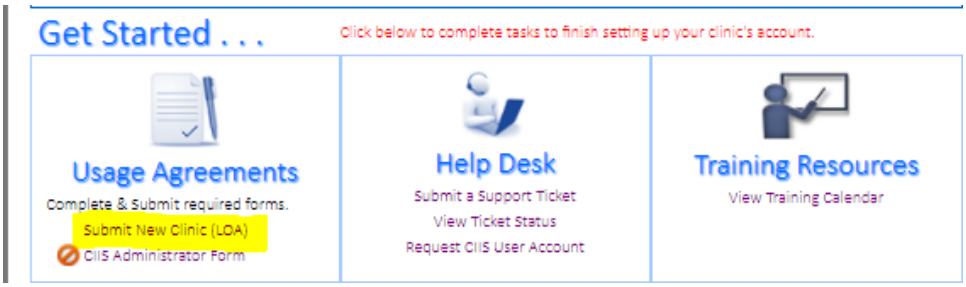
Sites <u>interested in developing an immunization interface</u> should complete pre-testing or have their EHR vendor complete pre-testing for them using the HL7 testing tool under the Data Exchange Widget.

Usage Agreements Widget

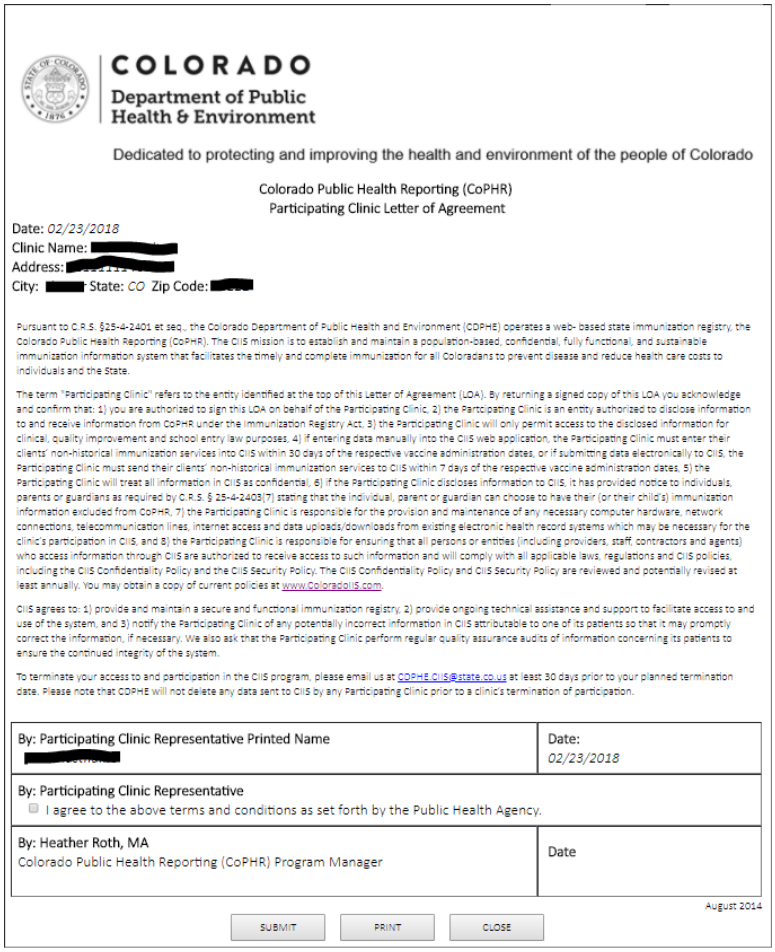
This section describes how to submit a site Letter of Agreement (LOA) and sign the CIIS Administrator Form.

Signing the Site LOA

1. Click on the *Submit New Clinic (LOA)* link under the Usage Agreements Widget.



2. Review the Colorado Immunization Information System Participating Clinic Letter of Agreement. Check the box next to *I agree to the above terms and conditions as set forth by the Public Health Agency*. Click *Submit*.



COLORADO
Department of Public Health & Environment

Dedicated to protecting and improving the health and environment of the people of Colorado

Colorado Public Health Reporting (CoPHR)
Participating Clinic Letter of Agreement

Date: *02/23/2018*
Clinic Name: [redacted]
Address: [redacted]
City: [redacted] State: *CO* Zip Code: [redacted]

Pursuant to C.R.S. §25-4-2401 et seq., the Colorado Department of Public Health and Environment (CDPHE) operates a web- based state immunization registry, the Colorado Public Health Reporting (CoPHR). The CIIS mission is to establish and maintain a population-based, confidential, fully functional, and sustainable immunization information system that facilitates the timely and complete immunization for all Coloradans to prevent disease and reduce health care costs to individuals and the State.

The term "Participating Clinic" refers to the entity identified at the top of this Letter of Agreement (LOA). By returning a signed copy of this LOA you acknowledge and confirm that: 1) you are authorized to sign this LOA on behalf of the Participating Clinic, 2) the Participating Clinic is an entity authorized to disclose information to and receive information from CoPHR under the Immunization Registry Act, 3) the Participating Clinic will only permit access to the disclosed information for clinical, quality improvement and school entry law purposes, 4) if entering data manually into the CIIS web application, the Participating Clinic must enter their clients' non-historical immunization services into CIIS within 30 days of the respective vaccine administration dates, or if submitting data electronically to CIIS, the Participating Clinic must send their clients' non-historical immunization services to CIIS within 7 days of the respective vaccine administration dates, 5) the Participating Clinic will treat all information in CIIS as confidential, 6) if the Participating Clinic discloses information to CIIS, it has provided notice to individuals, parents or guardians as required by C.R.S. § 25-4-2403(7) stating that the individual, parent or guardian can choose to have their (or their child's) immunization information excluded from CoPHR, 7) the Participating Clinic is responsible for the provision and maintenance of any necessary computer hardware, network connections, telecommunication lines, internet access and data uploads/downloads from existing electronic health record systems which may be necessary for the clinic's participation in CIIS, and 8) the Participating Clinic is responsible for ensuring that all persons or entities (including providers, staff, contractors and agents) who access information through CIIS are authorized to receive access to such information and will comply with all applicable laws, regulations and CIIS policies, including the CIIS Confidentiality Policy and the CIIS Security Policy. The CIIS Confidentiality Policy and CIIS Security Policy are reviewed and potentially revised at least annually. You may obtain a copy of current policies at www.ColoradoIIS.com.

CIIS agrees to: 1) provide and maintain a secure and functional immunization registry, 2) provide ongoing technical assistance and support to facilitate access to and use of the system, and 3) notify the Participating Clinic of any potentially incorrect information in CIIS attributable to one of its patients so that it may promptly correct the information, if necessary. We also ask that the Participating Clinic perform regular quality assurance audits of information concerning its patients to ensure the continued integrity of the system.

To terminate your access to and participation in the CIIS program, please email us at CDPHE.CIIS@state.co.us at least 30 days prior to your planned termination date. Please note that CDPHE will not delete any data sent to CIIS by any Participating Clinic prior to a clinic's termination of participation.

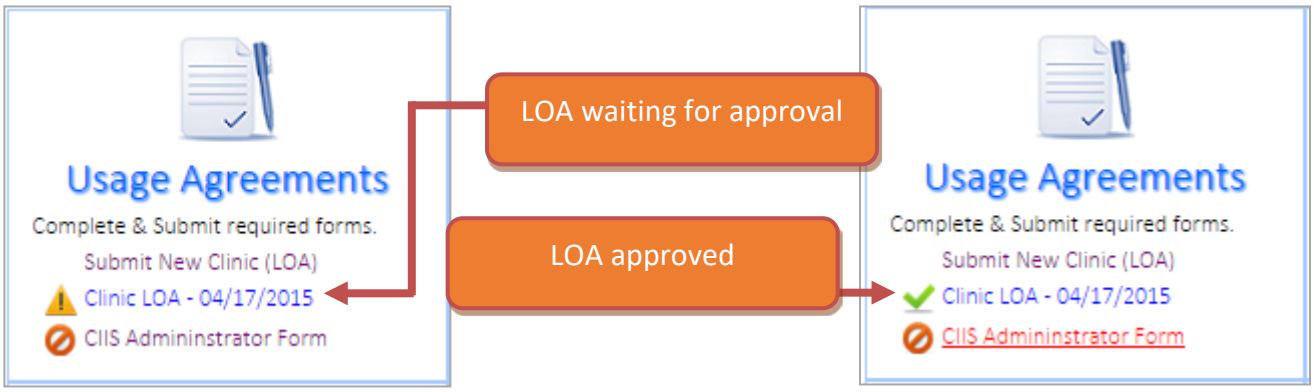
By: Participating Clinic Representative Printed Name [redacted]	Date: *02/23/2018*
By: Participating Clinic Representative ☐ I agree to the above terms and conditions as set forth by the Public Health Agency.	
By: Heather Roth, MA Colorado Public Health Reporting (CoPHR) Program Manager	Date

August 2014

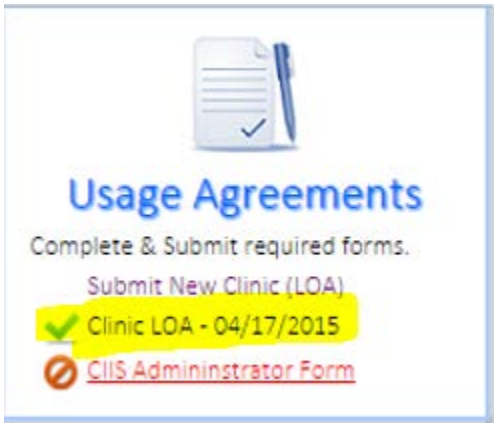
SUBMIT PRINT CLOSE

3. A box confirming that your LOA was submitted successfully will be displayed. Click *Close*.

4. Under Usage Agreements it will display that your site's LOA is in process. Once the LOA has been approved by the CIIS Program Manager the icon will change; displaying that it has been approved.

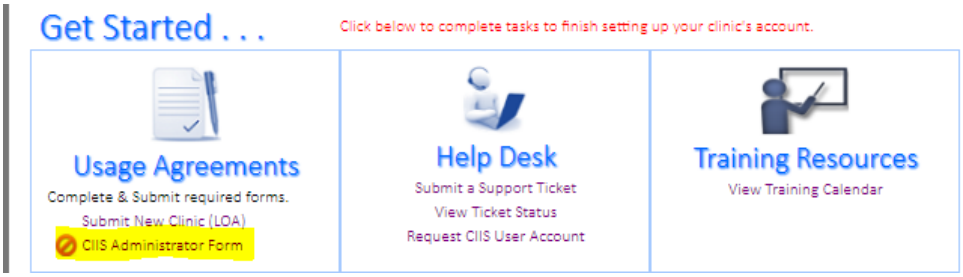


5. To view or print your approved CIIS Letter of Agreement click on the blue link.

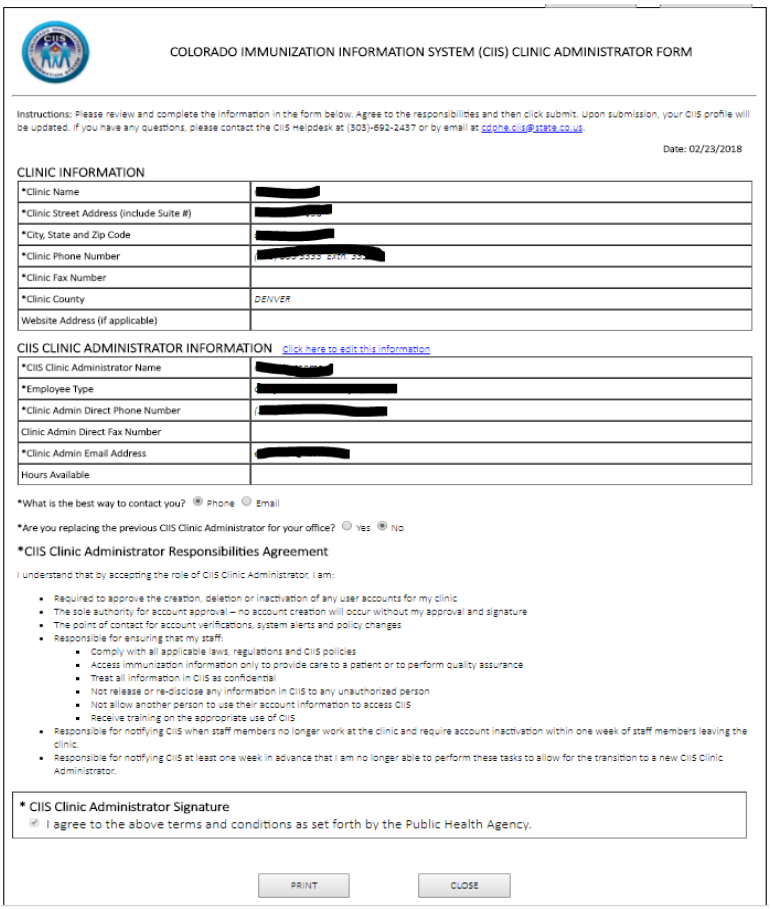


Completing the CIIS Administrator Form

1. Click on the *CIIS Administrator Form* link under the Usage Agreements Widget.



2. Review and complete the Colorado Immunization Information System (CIIS) Clinic Administrator Form.
   a. Required question: *The best way to contact you.* Select phone or email.
   b. Required question: *Are you replacing the previous CIIS Administrator?* Select yes or no.
   c. Click on the box next to: *I agree to the above terms and conditions as set forth by the Public Health Agency*.
   d. Click *Submit.*



COLORADO IMMUNIZATION INFORMATION SYSTEM (CIIS) CLINIC ADMINISTRATOR FORM

Instructions: Please review and complete the information in the form below. Agree to the responsibilities and then click submit. Upon submission, your CIIS profile will be updated. If you have any questions, please contact the CIIS Helpdesk at (303)-692-2437 or by email at cdphe.ciis@state.co.us.

Date: 02/23/2018

CLINIC INFORMATION

*Clinic Name	[redacted]
*Clinic Street Address (include Suite #)	[redacted]
*City, State and Zip Code	[redacted]
*Clinic Phone Number	[redacted]
*Clinic Fax Number	
*Clinic County	DENVER
Website Address (if applicable)	

CIIS CLINIC ADMINISTRATOR INFORMATION Click here to edit this information

*CIIS Clinic Administrator Name	[redacted]
*Employee Type	[redacted]
*Clinic Admin Direct Phone Number	[redacted]
Clinic Admin Direct Fax Number	
*Clinic Admin Email Address	[redacted]
Hours Available	

*What is the best way to contact you? (•) Phone ( ) Email

*Are you replacing the previous CIIS Clinic Administrator for your office? ( ) Yes (•) No

*CIIS Clinic Administrator Responsibilities Agreement

I understand that by accepting the role of CIIS Clinic Administrator, I am:

- Required to approve the creation, deletion or inactivation of any user accounts for my clinic
- The sole authority for account approval – no account creation will occur without my approval and signature
- The point of contact for account verifications, system alerts and policy changes
- Responsible for ensuring that my staff:
  - Comply with all applicable laws, regulations and CIIS policies
  - Access immunization information only to provide care to a patient or to perform quality assurance
  - Treat all information in CIIS as confidential
  - Not release or re-disclose any information in CIIS to any unauthorized person
  - Not allow another person to use their account information to access CIIS
  - Receive training on the appropriate use of CIIS
- Responsible for notifying CIIS when staff members no longer work at the clinic and require account inactivation within one week of staff members leaving the clinic.
- Responsible for notifying CIIS at least one week in advance that I am no longer able to perform these tasks to allow for the transition to a new CIIS Clinic Administrator.

* CIIS Clinic Administrator Signature

[x] I agree to the above terms and conditions as set forth by the Public Health Agency.

PRINT CLOSE

6. A box confirming that your CIIS Administrator Form was submitted successfully will be displayed. Click *Close*.

7. Under Usage Agreements it will display that your CIIS Administrator Form has been completed.

Help Desk Widget

1. Click on the Help Desk link on the blue bar or on the Help Desk Widget.
2. Detailed instructions for using the *Help Desk* Widget are in a separate document that can be accessed by clicking on the Create Support Ticket link, under Guidance Documents, on the right.

Training Resources Widget

This section describes how to access training resources offered by CIIS.

Accessing CIIS Training Resources

NOTE: The Training Calendar functionality within this widget is not utilized by CIIS.

1. Click on the *Training Resources* link on the blue bar or on the icon in the Training Resources Widget.

2. The Training Resources widget provides links and information regarding CIIS Training Webinars (when available), CIIS Video Library, Job Aids, Quick Guides, and CIIS Online Training Courses. This page provides detailed descriptions on CIIS REQUIRED trainings and how to register for an online course.

Users & Contacts Widget

This section describes how to setup staff who need user accounts within the CIIS Resource Center. In addition, users will have access to requesting an account for CIIS.

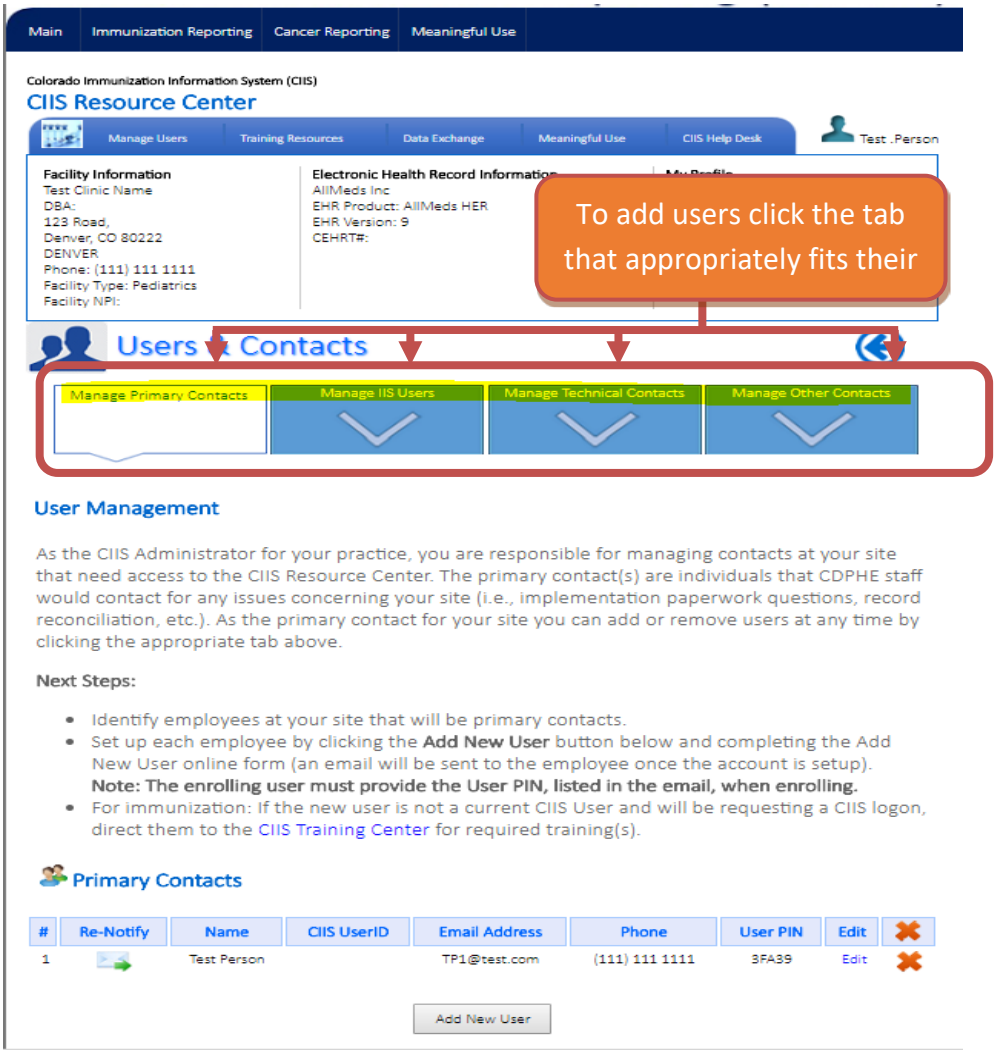
Add New User

Click on the Manage Users link on the blue bar or on the icon in the Users & Contacts Widget to add a user (non-provider). Once opened, the widget displays information on each type of user. *NOTE: To add a provider, see the next section.*

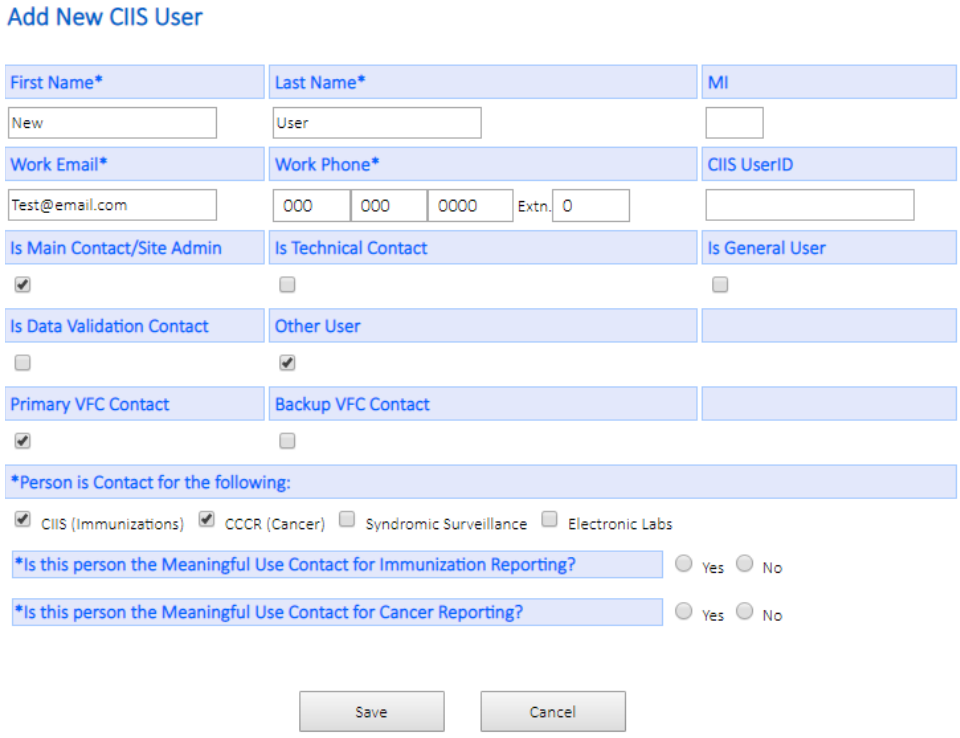
1.

a. Primary Contact – Individuals that CIIS staff would contact for any issues concerning your site (i.e., CIIS implementation paperwork, CIIS record reconciliation, etc.).
   Note: Primary Contacts can add or edit users at any time.
b. IIS Users– Individuals that do not fall into the category of Primary Contacts or Technical Contacts who will access CIIS and be general CIIS users.
c. Technical Contacts – Individuals that will be responsible for data exchange and data validation at your clinic.
d. Other Contacts.

2. Click the *Add New User* at the bottom of the screen.



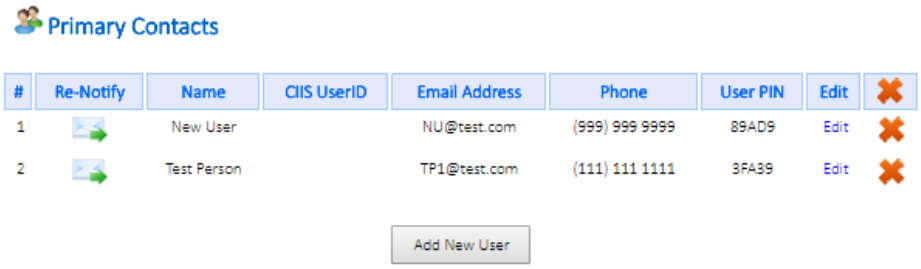
3. On the Add New CIIS User screen complete all fields, including selecting what type of user they will be (i.e., Main Contact/Site Admin, Technical Contact, or General User). Select if they are a VFC contact. Be sure to check the boxes for each public health reporting program that the contact is affiliated with. Click *Save*.
   Note: All Fields with an * notation are required fields.
   Note: As you fill in information, more questions may display depending on your answers.



NOTE: Not all Public Health reporting programs are applicable to a pharmacy.

4. *A New User has been Successfully Added* message is displayed to verify that the user has been setup correctly. The User will receive an email with information on completing their User Enrollment and the Primary Contact will receive a notification email. Click *Close*.

5. You will be directed back to the Users & Contacts screen and the new user will be listed under the user section at the bottom.



6. Repeat these steps to add additional users to the CIIS Resource Center.

Once the User is added, they will receive the following email:

CIIS Enrollment Instructions for New User: New User3

You have successfully added a new user to the CIIS Resource Center. The following notification has been emailed to the user with instructions for how to enroll:

You have been successfully added to the CIIS Resource Center for the following site:
NewTest
1234 Ave , Denver, CO, 80123
BACA

Your user account is pending enrollment. You will need to go to the CIIS Resource Center at http://74.118.245.168/isiiscoPreProd/enrollmentUser.asp to complete the enrollment process.

User Pin for [New User3] : A4DBF

Invited By : Test Lady

Enrollment Instructions:

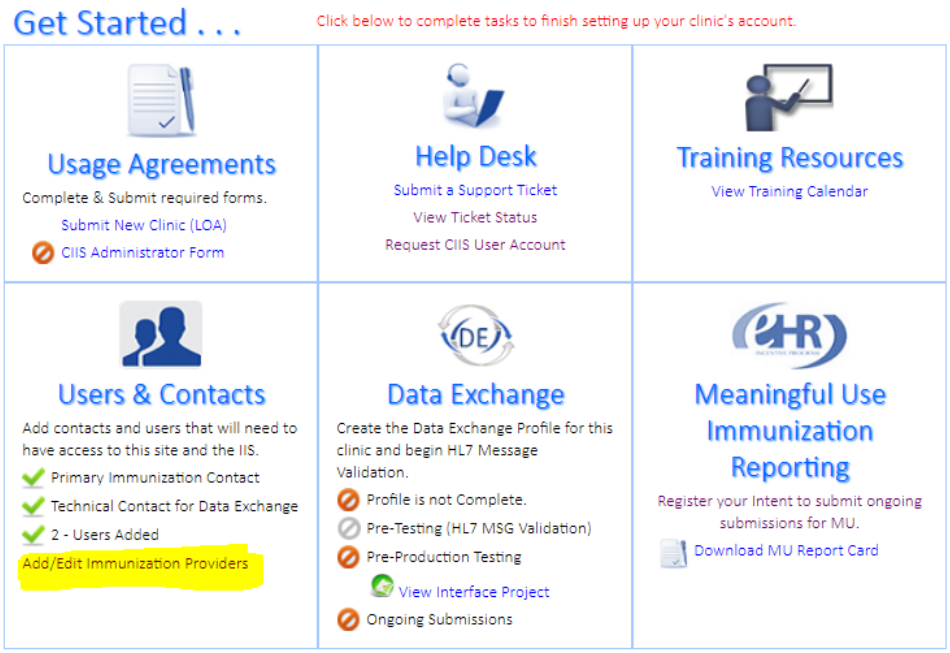
1. Click the link above in this email to access the User Enrollment page on the CIIS Resource Center.
2. Read the information on the page.
3. Click the Begin User Enrollment button at the bottom of the page.
4. The following information will be asked for during the enrollment process:
   - The name, address, and county of the site where you work, as included in this email.
   - The User Pin included in this email.

If you need assistance, please feel free to contact us.

7. Once the contact receives this email, they have the option to enter their code into the site when prompted and complete their enrollment. They will then have access to the CIIS Resource Center portal. This is optional for added providers who do not need access to the portal.

Add/ Edit Immunization Providers

1. Click on the Add/Edit Immunization provider's link within the Users & Contacts widget.

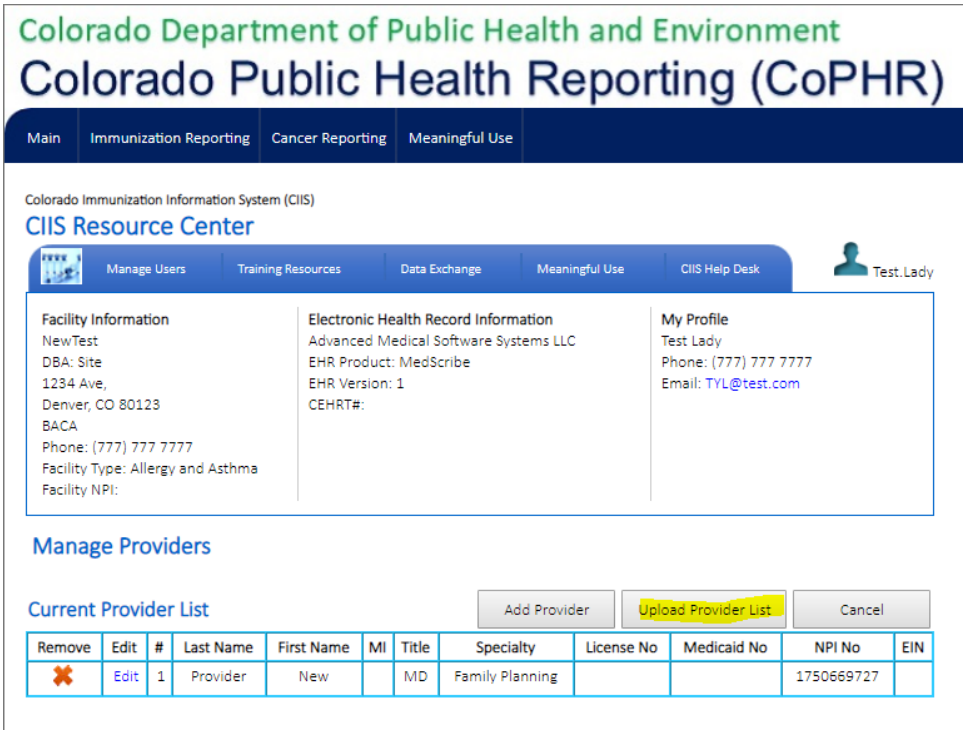


2. To add a new provider, click on the *Add Provider* button.

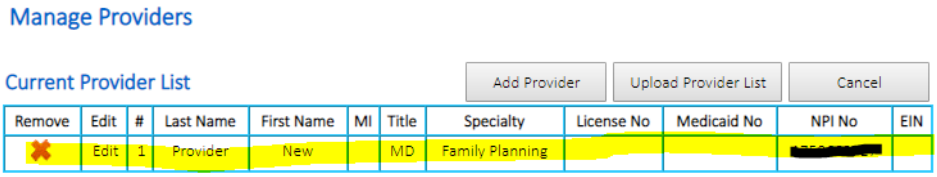
3. Complete all required fields and click *Continue*.

NOTE: Please provide one or both of the following: Medicaid or the prescribing provider's National Provider Identification (NPI).

4. To enter multiple new providers at once instead of one-by-one, click on *Upload Provider List*.



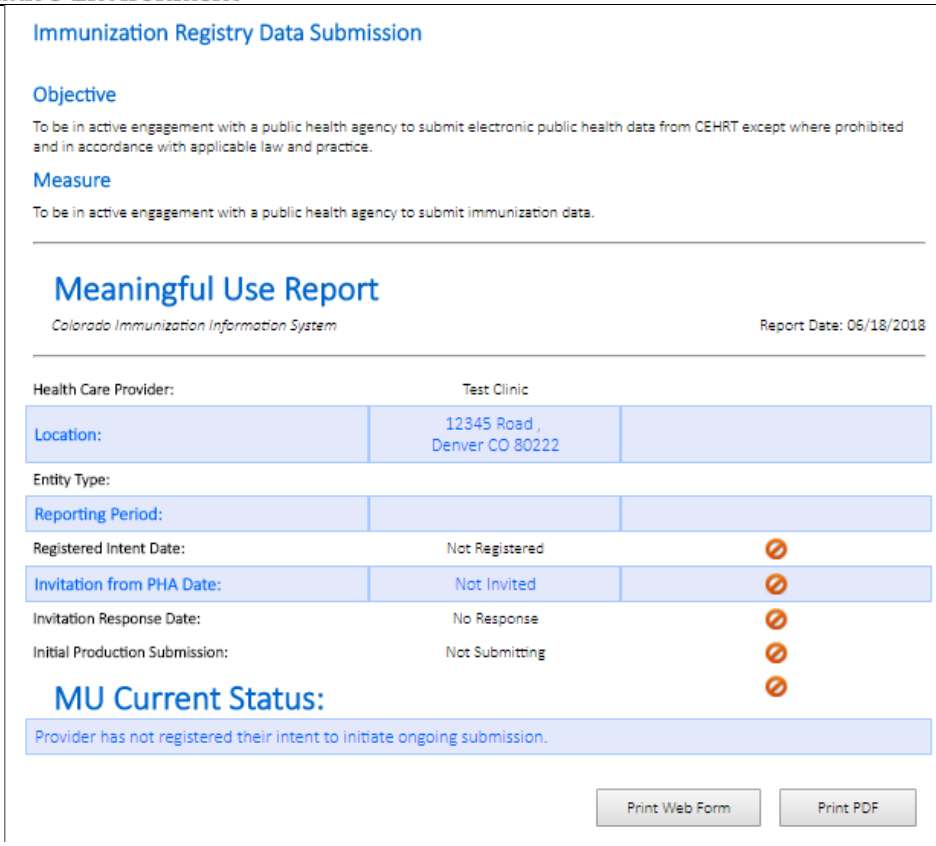
5. You can download the provided template, then follow the listed instructions for uploading the list.
6. Once the new providers have been added (either one-by-one or via upload), they will display under the Current Provider List. From here, providers can be removed or edited.



Data Exchange Widget

Instructions for using the Data Exchange widget can be found in a separate document by clicking on the appropriate HL7 Test Tool link under Guidance Documents on the right tab. You can access the Data Exchange profile and testing tool by clicking on Data Exchange in the blue header, or on the widget's icon.

The HL7 Test Tool guidance documents located on the right hand tab of the website under Guidance Documents, describe how provider staff or an EHR vendor can validate HL7 messages for a practice. This tool provides instantaneous, detailed error reporting information that is necessary to correct formatting/content issues without delay.



Immunization Registry Data Submission

Objective

To be in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Measure

To be in active engagement with a public health agency to submit immunization data.

Meaningful Use Report

Colorado Immunization Information System Report Date: 06/18/2018

Health Care Provider:	Test Clinic	
Location:	12345 Road , Denver CO 80222	
Entity Type:		
Reporting Period:		
Registered Intent Date:	Not Registered	
Invitation from PHA Date:	Not Invited	
Invitation Response Date:	No Response	
Initial Production Submission:	Not Submitting	

MU Current Status:

Provider has not registered their intent to initiate ongoing submission.

Print Web Form Print PDF

My Account Widget

This widget is an additional place to Request a CIIS User Account (see steps in the *Help Desk* section above), as well as a place to edit any information in your account profile (same steps as in *Modifying My Profile* section below).

My Account

Request CIIS User Account

Edit your Resource Center Account

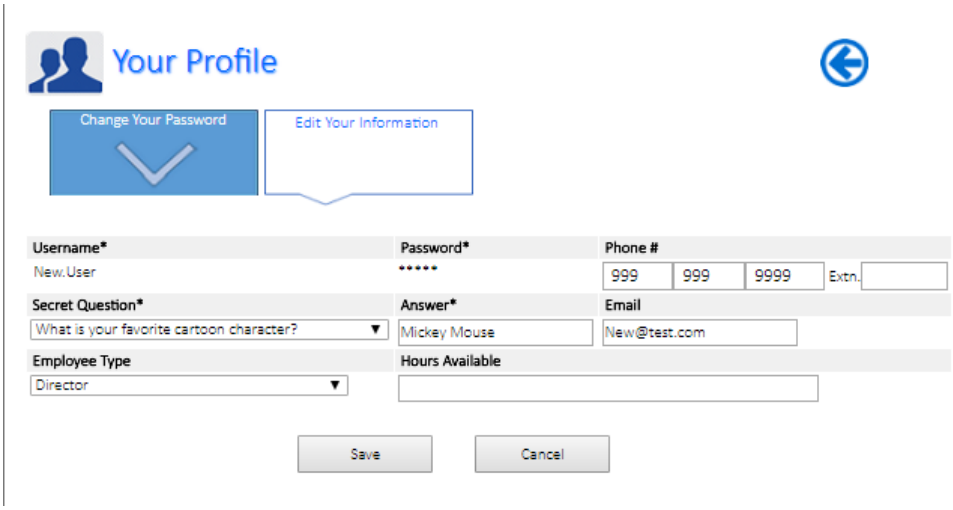
Modifying My Profile

This section describes how to edit your contact information (Phone #, Secret Question/Answer, Email, and Employee Type) and change your password.

Editing Your Information

1. Click on *My Profile* in the upper right corner of the screen.

2. The Edit Your Information sub-tab is automatically selected. Change any of the editable fields that need updating. Click *Save*.

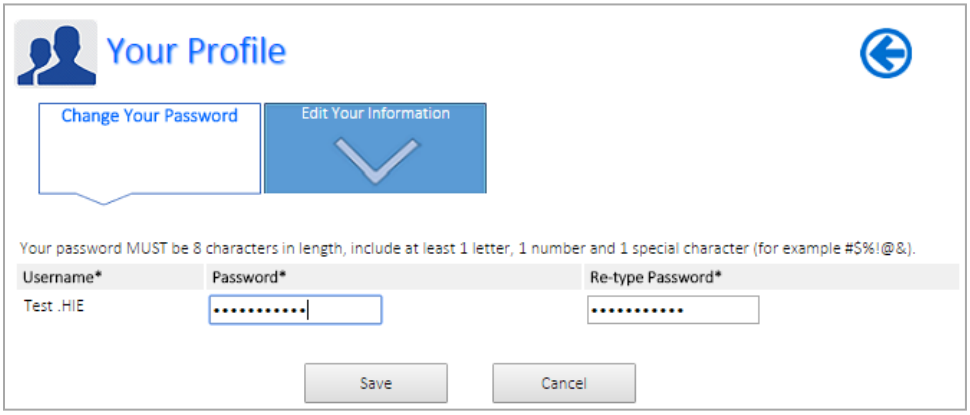


3. Click the *Cancel* button to return to the Main screen.

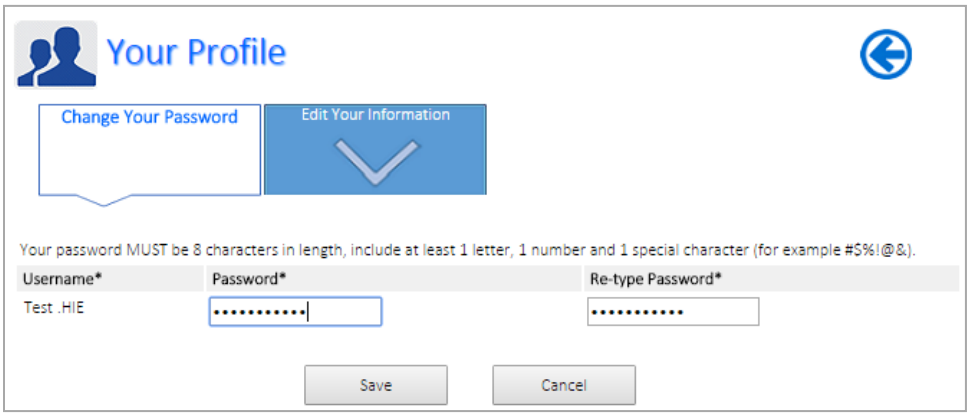
Changing Your Password

1. Click on My Profile in the upper right corner of the screen.

2. Select the Change Your Password sub-tab.



3. Enter a new password in the Password and Re-type Password fields**.**



4. Click *Save*.
5. Click the *Cancel* button to return to the Main page screen.

Questions?

CIIS Help Desk
Phone: 303-692-2437 option 2
Toll Free: 1-888-611-9918 option 1
Fax: 303-758-3640

Send us an email:
Cdphe.ciis@state.co.us