Supplemental Information regarding question #3:

3. Provider Implementation / Validation: It is our understanding that a validation process must be completed before a provider can establish a data exchange interface with the Registry.   What is this process?

Process:

For the purposes of on going submissions some additional QA is required. Each vaccine code must be transmitted, imported, and then checked to be sure that the intended vaccine was included in the registry.

1. **VXU** message or messages sent from provider via e-mail – message to include the following:
   a. Utilize mapping test client
   b. A sample of each CVX code that will be transmitted using a distinct date for each. (This is to include all codes represented in the provider's dataset and not necessarily the complete list of CVX codes issued by CDC.)
2. For each VXU sent an accompanying definition of the intended vaccines must be sent via a separate medium such as email or fax. Each intended code transmittal must have a discrete administration date associated to it for QA Purposes.
3. Once **VXU(s) are/**is received we will process this manually.
4. Review system for accuracy.
5. Activate electronic interface.
6. Provider to submit live test data.
7. Both provider and Registry staff to check submission for accuracy. *Please note there is a five minute delay between submission and entry into Healthy Futures database providing there are no mapping errors etc.

Provided there is a signed Memorandum of Understanding in place we will be able to further test utilizing data from one clinic site. Depending on the number of records submitted a QA needs to be done for each record submitted. Upon a successful submission of the clinic we will be able to move forward with a submission from a Hospital. Again depending on the number of records received a QA on random records will need to be done.