

## Responses to Questions from March 24, 2023 EMR Kickoff Webinar:

### General Certification Process Questions:

**1. What will the process for actual approval/certification look like?**

In general, the steps will be:

1. Local System/Provider confirms which entities they will be using, along with the personnel file of users taking part in testing.
2. SSG provides list of required test case scenarios.
3. VA local systems complete required testing.
4. SSG works with the local systems to review and validate test case scenarios.
5. Once validated, SSG provides statement of approval and requests VA's final approval for local system.
6. Prior to Go-Live, SSG will grant access and assign user roles to the local system staff.
7. After Go-Live, Production Support will be available as well.

More specific information about the timing of the file certification process will be shared later this spring.

**2. Once a system has been certified, can they routinely engage in uploads rather than manual data entry even if it's before 12/11?**

No

**3. Can you show the slide with the upcoming dates again?**

The presentation from 3/24/23 shared the following dates:

- **March 24:** EMR File Certification Kickoff - Demo
- **April 5:** Billing Extract Webinar
- **May 19:** Local Systems & Provider Agencies to confirm participation
  - Send timeline for file readiness.
  - Send personnel files of users participating in the testing process.
- **July:** Beginning of File Certification Process
  - Regular support office hours will be held to assist users with the process.
- **December:** EMR and Required fields Go-Live

- 4. Is it correct that your expectations are for CSBs to be able to have staff run and upload TRAC-IT report files DAILY, review the response files DAILY, and make updates accordingly to resubmit?**

The suggestion is to upload information into TRAC-IT on a daily basis to keep a child's record up-to-date in TRAC-IT for reporting and timely communication purposes as well as limit the amount of time it takes to review a response file.

- 5. Which type of agency is responsible for a new child, local system agencies or service providers?**

Either the Local System Agency or a Provider can submit a referral via an EMR file for a child. If the child's county belongs to the local system that is importing the file, the system will accept the referral for that local system. If the child's county is for a different local system OR the referral is from a provider agency, then the system will create a review referral task for the child's home local system. In this scenario, the appropriate messaging will be in the response file.

General Uploading Data Questions:

- 6. Where are these xml files coming from to begin with? Can you provide the steps to create the XML file?**

The expectation is that your local EHR will provide the ability to export information in an XML format. Since each local system is using a different EHR, we are not able to provide steps to create the XML file – you should contact your EHR technical support for any additional questions.

- 7. At what point is the insurance confirmation information required?**

Insurance information will be required at the same point it is required currently – if the child has Medicaid, the insurance information must be uploaded before the Intake information. If the child does not have Medicaid, insurance information will be required before the IFSP.

- 8. Can you please speak to the option of an API again on what is needed to get that to happen?**

There is no API option at this time.

- 9. There are a few instances of children in one jurisdiction but served by another due to parental request. Is there an override to assign them to the providing system?**

The guidance for this situation is the same for EHR users and users that are entering information through the tasks. In general, there are two options (System A = child's home system; System B = child's preferred system):

- System A can use the Add Provider ad hoc task and link the providers from System B, OR
- INITIALLY, System B can enter a county for the child that will ensure that System B is the primary system. Then, once the referral is created, System B can create a Support Desk ticket, explaining the situation and asking for support to change the county of the child to the geographically correct county.

System A and System B need to work together to decide who will be financially responsible for and count the child since that will drive which one of the two options makes the most sense. If there is ever a question about how to proceed in this situation, please contact the Support Desk for clarification.

#### General Results File Questions:

- 10. Can you please go over the more user friendly report so all of us can get a better idea of what our users will really be using?**

The user-friendly report will look similar to this mock-up:

Error Summary					
Enrollment Number	Client Name	Segment (Entity) with Error	Error Location (in XML)	Error Message	Status
123456	Bobby Bushay	Intake	line 30	Parent or guardian not found...	Not Processed
123456	Bobby Bushay	IFSP	line 30	Insurance not valid...	Partially Processed
123456	Bobby Bushay	Service Log	line 45	Enrollment not found...	Not Processed
Total Errors for this Enrollment		3			

In this format, the errors will be highlighted for you to easily identify. You can always refer to the expanded XML results file for more details regarding the error if you would like.

- 11. So, you are saying that if I upload 25 client files in one EMR file that if two fail it will show me only the rejected files**

There are two files that you will receive in the response:

1. XML file – includes a summary at top with the total number of records broken down by successes, errors, and warnings. Beneath this, are the details for each record. This is where you will find the TRAC-IT ID for any new child that was imported successfully. This is also where you can find details on any errors or warnings.
2. Excel / .CSV file – a more user-friendly summary of the records that were included in the file. There will be one line item for each record included in the upload file with a status and any error / warning message. A sample of this is shown above.

**12. Assuming many records go in one upload file, if one record has an error, will it reject the entire upload? If no, will we be able to fix the issue records, and reupload the entire file with TRAC-IT pulling out all duplicates or will we need to pare down the batch to only include the failed records? (Apologies if this was covered)**

TRAC-IT will accept all the information it is able to accept. This means that if one portion of a record has an error, only the portion that has the error is rejected. The other records included in the file are imported and evaluated individually for any errors.

When submitting corrections, you may upload just the updated records or the full file. There is deduplication logic that will prevent duplicate entries from being created.

**13. There were a number of questions/comments expressing concern about error reports - the volume of errors, who will have the time and expertise to review them, etc.**

The purpose of the file testing and certification process is to eliminate almost all errors. To be approved by SSG and DBHDS to use the EHR file upload in the live TRAC-IT system, an agency will have to demonstrate that they have created an import file that uploads the given entity(ies) with a high degree of accuracy. Once the testing and certification are complete and the agency is using the upload file in the live TRAC-IT system, errors should be rare and the time needed to manage those occasional errors should be minimal.

General Support Questions:

**14. Most of the users that are expected to export these files are not trained on XML. What assistance is going to be available to help with that piece?**

In general, the testing process will include support for users in reading and understanding the response files. Once a user is live in TRAC-IT, the Support Desk is available to provide high-level assistance for EHR file questions.

**15. What if an EHR is not ready for Go-Live in December? How long will you provide support for until an EHR has completed the process?**

Specific procedures and timelines to address this situation will be determined on a case-by-case basis. Generally speaking, if an agency has been working throughout the onboarding and testing process to be ready for Go-Live on December 11 and is not quite ready yet, we will work with that agency to complete the process.