



MCIR Region 4 News SPRING 2016

REGION 4 MICHIGAN CARE IMPROVEMENT REGISTRY

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MCIR UPDATES

- A new **Transaction History Report** is available for providers utilizing and balancing VFC and private vaccine inventories in MCIR. The report provides a snapshot view of all transactions created within a chosen time period. Local Health Departments (LHD) can also generate this report for their inventory or for their VFC provider sites. **See Page 2 for more information about this new report.**
- Providers who experience incidents of **compromised vaccine doses** administered to patients should contact their local health department (LHD) to have those doses marked as compromised in MCIR records. Vaccine doses can be compromised by refrigerator temperature excursions, inappropriate administration or mishandling issues. **Compromised doses may need to be administered again. LHDs can mark the doses as compromised in MCIR records to provide an accurate assessment for that series. Contact your LHD for more information.**
- **Effective 4/6/16, all Vaccines for Children (VFC) providers should begin using the Return/Waste electronic report in MCIR.** The new Return/Waste reports in MCIR are auto populated by transactions created in the provider's vaccine inventory (VIM) by the transaction date. **Contact your LHD VFC contact for more information.**
- The Michigan Department of Health and Human Services (MDHHS), Division of Immunization, is generating and mailing reminder letters from the **MCIR Reminder/Recall Module** to children 6 months through 18 months old who are overdue for the following routinely recommended vaccines: DTaP, Hep B, Hib, IPV, PCV, Hep A, MMR, Varicella. Letters will not include flu, Rota or any child with two or fewer immunizations reported to MCIR. These reminder letters are intended to enhance existing efforts of providers to notify parents of children due for vaccines. **Contact your LHD for questions regarding the reminder letters.**

Winter Newsletter Contest Winner

Congratulations to our **Winter 2016** Newsletter Contest prize winner Patty Entrekin at St Marys of Michigan Chesaning Health Center (Dr Forsyth). Don't forget to enter the Spring 2016 contest on **Page 5** to be included in a drawing for a \$10 gift card.



Region 4 MCIR

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[Region 4 MCIR Newsletters and Docs](#)

MCIR INVENTORY TRANSACTION HISTORY REPORT

The MCIR Transaction History Report was designed to assist the VFC program with Return/Waste reporting and identifying inventory transaction issues that a provider may have. This report is available to both the local health departments and private providers to generate and see a snapshot view of inventory transactions completed within a designated timeframe. To generate the report:

- From the MCIR home screen click the Vaccine link under the Reports section. Click the Report dropdown list and choose Transaction History Report.

- Enter the Start and End dates for the desired report period. Inventory options include All, Private, VFC/Public, All Hazard or choose the default All. If, for example, DTaP was chosen for Vaccine Product Group then information on both Daptacel and Infanrix would be included in the report. If no Vaccine Product Group is chosen then the NDC option will default to all.

- Local Health Departments have additional options on the report parameters screen. The Site ID/PIN field allows the LHD to choose an individual VFC provider from their county for which to run the report. When the Site ID/Pin field is left blank the report is generated for the LHD only.

- After choosing report options, click Submit. Open the report by clicking Retrieve Results under Reports. Review the report for transaction or inventory maintenance/balancing issues. Print a detailed tip sheet for the Transaction History report at:

http://cms4.revize.com/revize/geneseecountyhealth/other_services/docs/Transaction_History_Report.pdf

INVENTORY TIPS ON MCIR.ORG

Managing and Balancing Tips

- [Adding Transactions to Lot in Inventory](#)
- [Reporting Doses for Persons who have Opted-Out of MCIR](#)
- [Vaccine Lot Transaction Tip Sheet](#)

Transfer Site Provider Balancing Tips

- [Balancing the Inventory for Transfer Sites](#)
- [VIM Balancing Checklist for Transfer Site in MCIR](#)

Videos for Transfer Provider Sites

- [Generating the Electronic Summary Submission Report \(ESSR\)](#)
- [ESSR Explained](#)
- [ESSR Troubleshooting #1](#)
- [ESSR Troubleshooting #2](#)



Helpful Tip Sheets

- [Changing Patient Status \(Active vs. Inactive\) for Providers/Clinics](#)
- [Address Features for Providers](#)
- [Recall Criteria Guide](#)
NEW
- [Reminder-Recall Manual](#)



MCIR Moments

- MCIR **Patient Status** in records is visible under all provider MCIR sites to mark a patient as deceased. But only a Provider with **Point of Contact (POC)** can change a patient status from active to inactive if no longer with their practice. For a tip sheet with more information go to: http://www.mcir.org/forms/Patient_Status_for_Providers.pdf
- Remember to **update addresses in MCIR records** when updating in your office EHR record. Current addresses are vital when reminder recall letters are generated from MCIR or if utilizing MCIR records to contact people due for immunizations. Utilizing reminder letters from MCIR have been successful in increasing immunization rates and can be utilized by providers, LHDs and MDHHS. For more information about using MCIR Reminder Recall click these links:
 - ✓ [Recall Criteria Guide](#)
 - ✓ [Reminder-Recall Manual](#)
- The **MCIR Point of Contact Rules (POC)** determines the provider who is identified in a MCIR record as the Medical Home. In general, the last provider to enter an immunization into a MCIR records becomes the POC or Medical Home for that person. There are exceptions:
 - ✓ The dose is NOT a birth dose Hepatitis B, Seasonal Influenza, or H1N1 Influenza
 - ✓ The dose does not include any non-vaccine administered products (such as antivirals).
 - ✓ The dose must be a provider administered dose. Historical doses are ignored.
 - ✓ The dose is approved for provider use (not a duplicate or school dose).
 - ✓ The provider reporting the dose is an immunization provider and meets a certain facility type.

For more details read the POC reference guide at

https://www.mcir.org/wp-content/uploads/2014/08/MCIR_Point_of_Contact_rules.pdf



REGION 4 MCIR



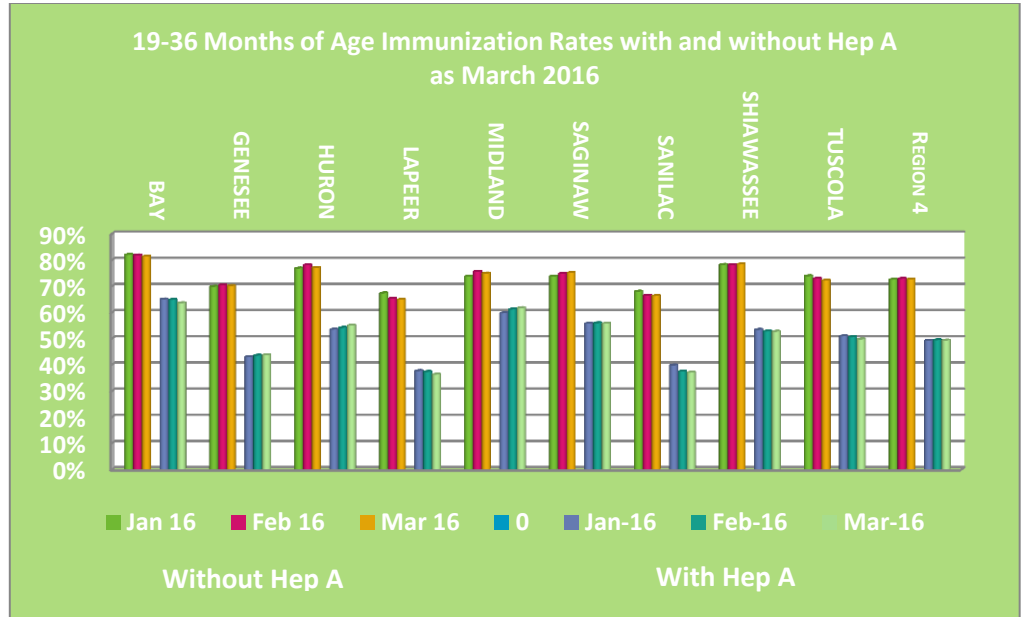
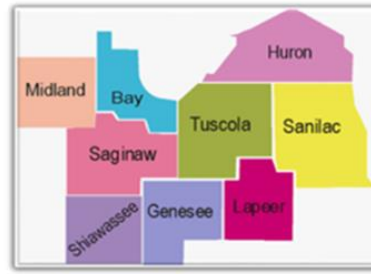
MCIR Profiles Region 4 ages 19-36 Months

73%

Vaccine Series 4:3:1:3:3:1:4 as of March 2016 (without Hepatitis A vaccine)

49%

Vaccine Series 4:3:1:3:3:1:4:2 as of March 2016 (with Hepatitis A vaccine)



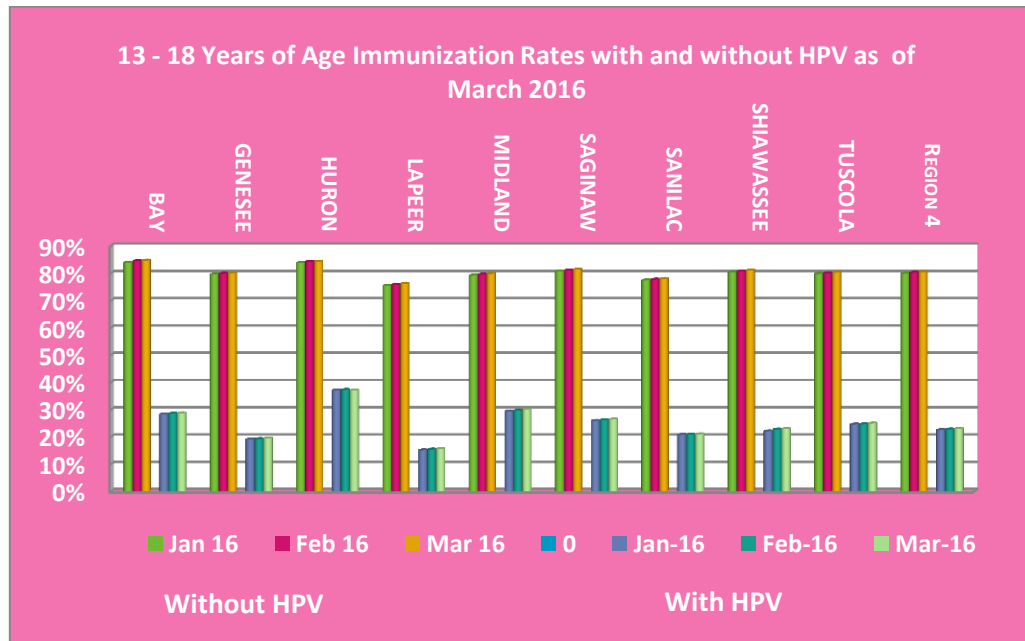
MCIR Profiles Region 4 ages 13-18 Years

81%

Vaccine Series: 1 Tdap, 3 Polio, 2 MMR, 3 Hep B, 2 Varicella, 1 MCV4 as of March 2016

23%

Vaccine Series: 1 Tdap, 3 Polio, 2 MMR, 3 Hep B, 2 Varicella, 1 MCV4, 3 HPV as of March 2016



Contest!

Answer the questions for a chance to win. Those with all correct answers will be entered into a random drawing for a \$10 gift card from Target. Email or FAX answers with your name, phone and work place to the Region 4 office by [May 20, 2016](#).

1. Providers with incidents of _____ administered to patients should contact their local health department (LHD) to have those doses marked as _____ in MCIR records.
2. MCIR _____ in records is visible under all provider MCIR sites to mark a patient as deceased. But only a Provider with _____ can change a patient status from active to inactive if no longer with their practice.
3. The _____ report provides a snapshot view of the all inventory transactions created within a chosen time period.

Wondering if your answers were correct last contest? The answers to the [Winter 2016](#) contest were:

1. Avoid duplicating existing MCIR records by using the [Wildcard](#) search.
2. The [MI-Child](#) eligibility has been removed from the MCIR Add Immunization eligibility dropdown list.
3. Lead screening and test information submitted to the MDHHS lead program can be viewed in MCIR records by clicking the [Lead Tab](#).

