Qualified Entity (QE) Member Facing Services Requirements

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AS DEVELOPED THROUGH THE STATEWIDE HEALTH INFORMATION NETWORK OF NEW YORK (SHIN-NY) POLICY STANDARDS

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Introduction

This document, developed through the statewide collaboration process, sets forth the defined minimum set of core Member Facing Services that QEs must implement and have available to all QE Participants. They include requirements for legal and information sharing agreements, providing marketing and recruitment strategies, adoption and usage support services, training for Participants and Authorized Users, user support services that focus on solving system access issues, a collaborative governance structure that supports Participant priorities and development of value added services that strengthen the SHIN-NY and serve to improve health care delivery for all New Yorkers.

The requirements set forth herein will be evaluated as part of the Certification Process by the Certification Body (as such terms are defined in the *Qualified Entity (QE) Organizational Characteristics Requirements* (as amended from time-to-time, the "Organizational Characteristics") that will be under contract with the New York eHealth Collaborative, Inc. (NYeC), under agreement and in conjunction with the New York State Department of Health (NYS DOH). All capitalized terms used and not defined herein shall have the respective meanings given to such terms in the *Privacy and Security Policies and Procedures for QEs and their Participants in New York State* (as amended from time-to-time, the "Policies and Procedures").

Member Facing Services Definition

Member Facing Services means facilitative services provided by the Qualified Entity that offer value to its participants and that ensure the secure exchange and use of clinical and other health information among physicians and other health care providers including but not limited to health plans, consumers, Public Health, health homes and social service organizations, to improve patient care. To qualify as a Qualified Entity, an entity must be capable of providing the Member Facing Services.

1. Legal & Information Sharing Agreements

Enter into Participant Agreements and/or other agreements (including but not limited to data sharing agreements, business associate agreements, and documents), if applicable, that (x) clarify the responsibilities of Participants and vendors in relation to the QE and (y) ensure exchange of information in a private and secure manner and for authorized purposes only.

1.1   Framework

These agreements shall include

1.1.1   Participant Agreements and/or other agreements (including but not limited to data sharing agreements, business associate agreements, and documents), if applicable, that clarify the responsibility of Participants and vendors in relation to the QE.

1.1.2   Participant Agreement and/or other agreements (including but not limited to data sharing agreements business associate agreements, and documents), that ensure privacy and security of information exchange by Authorized Users that is consistent with the Policies and Procedures.

1.2   QE certification evidence requirements

QEs must:

1.2.1   Provide signed Participant Agreements and/or other agreements (including but not limited to data sharing agreements, business associate agreements, and documents), that include

    1.2.1.1   the requirements for participation in the SHIN-NY in either a separate addendum to the Participant Agreement or within the provisions of the Participant Agreement, and

    1.2.1.2   the requirements for conformance to service levels as specified in service level agreements

1.3 Certification tasks and QE evaluation standards

The Certification Body will be required to verify evidence provided by the QE including:

1.3.1   QE data sharing agreements that are complete and signed

1.3.2   Conformance to service levels for reliability and availability established by the SCP

1.4   Ongoing monitoring and audits

In addition to QE's obligations under or in accordance with the *Oversight & Enforcement Policies and Procedures for QEs* (as amended from time-to-time, the "Oversight and Enforcement Policies"), QEs shall ensure that an ongoing monitoring process includes:

1.4.1   Self-Audits that include ongoing monitoring of state regulatory or policy changes or corporate changes in Participant status.

1.4.2   That QEs shall ensure that no data connections or Authorized User credentials are completed before signing legal and information sharing agreements with a Participant.

1.4.3   External Audits and monitoring by the Certification Body that confirms the validity of Participant Agreements and/or other agreements via review of a specific number of these Participant Agreements and/or other agreements as part of QE audit.

2.   Marketing and Recruitment

Utilize evidence-based marketing and education techniques and tools to promote QE services and the benefits of participating in an HIE. Efforts should include implementation of recruitment and outreach strategies that increase participation in the QE and that include but are not limited to hospitals/health care systems; ambulatory health care settings; payers; health homes; Medicaid; public health; labs; community based social service organizations. Outreach to consumer/patient groups to increase their understanding and appropriate usage of HIE, and to gain their input on HIE, is also required, although they are not recruited as Participants in the QE.

2.1   Framework

The service should include recruitment and outreach strategies that:

2.1.1   Increase participation from all interested candidates that might qualify for participation in a QE in the SHIN-NY

2.1.2   Enhance patient understanding of the value of consenting

2.2 QE certification evidence requirements

QEs must:

2.2.1   Make available a copy of their QE Marketing and Recruitment Plan that includes:

     2.2.1.1   recruitment and outreach strategies and targets

     2.2.1.2   communications/education activities/plan

     2.2.1.3   description of target audience(s) for recruitment

2.3 Certification tasks and QE evaluation standards

The Certification Body will be required to verify evidence provided by the QE including:

2.3.1   Existence of QE Marketing and Recruitment Plan for period of review.

2.3.2   Conformance of QE Marketing and Recruitment Plan to standards:

     2.3.2.1   QE Marketing and Recruitment Plan describes the QE approach to promoting HIE services and benefits and outlines measures for achieving increased numbers and diversity of Participants.

     2.3.2.2   Includes communication and education strategies for both providers and patients that are designed to foster trust and use of the HIE.

     2.3.2.3   Contains target audience strategies and measures.

     2.3.2.4   Promotes an open process that is broadly inclusive of the health care community to be served and is not limited to entities that have a contractual relationship with a Participant in the QE.

2.3.3   Review of marketing and recruitment outcome measures against projected performance.

2.4 Ongoing monitoring and audits

In addition to QE's obligations under or in accordance with the Oversight and Enforcement Policies, QEs shall ensure that an ongoing monitoring process includes:

2.4.1   Self-audits that track participation levels to ensure open community process. Activities will be reported through the QE governance process that tracks performance against measures established in the QE Marketing and Recruitment Plan.

2.4.2   That QEs shall ensure all stakeholder types across the community are represented and have a voice.

2.4.3   External audits and monitoring by the Certification Body will review marketing and recruitment outcome measures that track member participation.

3   Support for Adoption and Usage

Provide services to Participants that add value to participation and that include meaningful use support for HIE services (process and workflow); MPI maintenance (de-duplication of records and ability to link same person from other data sources).

3.1 Framework

The service should support:

3.1.1   Meaningful use of the HIE services to improve healthcare workflows

3.1.2   MPI maintenance

3.1.3   Interface connectivity to the HIE

3.2   QE Certification Evidence Requirements

QEs must be able to provide:

3.2.1   Copy of QE Adoption and Support Plan

3.2.2   Statistics that reflect use of Minimum Technical Requirements as outlined in the *Qualified Entity (QE) Minimum Technical Requirements* (as amended from time-to-time, the "Minimum Technical Requirements")

3.2.3   An explanation of support services that:

    3.2.3.1   facilitate design and implementation

    3.2.3.2   explore available options, where feasible, in interface connectivity approaches

    3.2.3.3   highlight alternative mechanisms to support consent management

3.2.4   Examples of reports or other tools that are made available for better MPI management

3.3 Certification Tasks and QE Evaluation Standards

The Certification Body will be required to verify evidence provided by the QE including:

3.3.1   Existence of QE Adoption and Support Plan for time period.

3.3.2   Documentation of services offered that include at a minimum support for MU of the HIE, MPI maintenance and interface connectivity to the HIE.

3.3.3   Verification of the number of Participants using each service offered against actual vs. planned

3.4   Ongoing Monitoring and Audits

In addition to QE's obligations under or in accordance with the Oversight and Enforcement Policies, QEs shall ensure that an ongoing monitoring process includes:

3.4.1   Self-audit that includes regular reporting and trending analysis of usage to the QE governance body (e.g., Board of Directors).

3.4.2   External audits by the Certification Body that evaluate a sampling, by practice, usage of services delivered against QE goal projections.

4.   Participant/Authorized User Training

Provide a training and education program for all Authorized Users of the QE before allowing access to the system and annually or as needed based on any policy or procedure changes. Training will include but may not be limited to system integration, navigation, policies (privacy and security) and the appropriate use for role based access.

4.1   Framework

The service should:

4.1.1   Provide a training and education program for all Authorized Users:

    4.1.1.1   Prior to allowing access to the HIE

    4.1.1.2   At least annually or as needed based on any policy or procedure change

4.2 QE Certification Evidence Requirements

QEs must provide:

4.2.1   A QE Training and Education Plan/Curriculum

4.2.2   Logs of trainings completed that are maintained by Participants and made available upon request for audits

4.3 Certification Tasks and QE Evaluation Standards

The Certification Body will be required to verify evidence provided by the QE including:

4.3.1   Verification of the QE Training and Education Plan/Curriculum and training logs including annual logs.

4.3.2   Conformance based on QE logs including:

    4.3.2.1   tracking logs for training(s) held for new Participants and/or Authorized Users that compare to new Participant Agreements

    4.3.2.2   tracking logs for annual training(s) or as needed based on any policy or procedure change completed by Participants and/or Authorized Users that compare to full list or Participants and/or Authorized Users

4.4 Ongoing Monitoring and Audits

In addition to QE's obligations under or in accordance with the Oversight and Enforcement Policies, QEs shall ensure that an ongoing monitoring process includes:

4.4.1   Self-audits that ensure that if training is delegated to Participants, the QE regularly collects attestation by Participants that specifies for which of their Authorized Users annual refresh training has occurred. If training is completed by QE, an attestation by QE that specifies for which of their Participants and/or Authorized Users annual refresh training has occurred.

4.4.2   External Audits by the Certification Body will assess that:

    4.4.2.1   no one is authorized to use the system without the required training and that Authorized Users are routinely retrained

    4.4.2.2   training on technology and policy compliance has occurred and will track and record the date of training and Authorized Users trained

5. User Support

Provide help desk and online service for Authorized User support to troubleshoot and resolve issues that may arise when accessing the system.

5.1 Framework

The service should:

5.1.1   Provide Authorized User support for technical issues that may arise when accessing the system that include:

      5.1.1.1   help desk support services

      5.1.1.2   online service support that provides a mechanism for submission of service requests

5.2 QE Certification Evidence Requirements

QEs must:

5.2.1   Provide a QE Authorized User Support Plan

5.2.2   Documentation of service requests received via help desk or online service for specified time period

5.3   Certification Tasks and QE Evaluation Standards

The Certification Body will be required to verify evidence provided by the QE including:

5.3.1   Verification of QE Authorized User Support Plan

5.3.2   Verification of help desk tracking logs for issues reported and issues resolved

5.3.3   Assessment of average time required to resolve issues against planned timeframes outlined in QE Authorized User Support Plan

5.4   Ongoing Monitoring and Audits

In addition to QE's obligations under or in accordance with the Oversight and Enforcement Policies, QEs shall ensure that an ongoing monitoring process includes:

5.4.1   Self-audits that include:

      5.4.1.1   regular review of issue tickets and timeframe for resolution

      5.4.1.2   monthly reporting of volume and time to resolve

      5.4.1.3   percent within agreed timeframe as outlined in QE Authorized User Support Plan and outliers

      5.4.1.4   internal corrective action plans if performance is below standard

5.4.2   External audits and monitoring by Certification Body that:

      5.4.2.1   assess QE adherence to QE/QE Participant agreed upon resolution timeframes

      5.4.2.2   review "x" samples of help desk issue logs from submission to resolution with attention to percent that meet standard for resolution as noted in QE Authorized User Support Plan

6   Aligning with Stakeholder Priorities

Facilitate a collaborative process for Participants of the QE that is responsive to needs of Participants and priorities and that provides a feedback loop in order to support the identification and development of high value service solutions.

6.1 Framework

The process should:

6.1.1   Establish a mechanism for input from Participants and patients/consumers into development of service priorities, new services, enhanced functionality that builds value of health information exchange.

6.2 QE Certification Evidence Requirements

QEs must provide:

6.2.1   Evidence of stakeholder involvement that may include a description of the process for obtaining input from stakeholders.

6.3 Certification Tasks and QE Evaluation Standards

The Certification Body will be required to verify evidence provided by the QE including:

6.3.1   Verification that QE has a process for customer relations that:

       6.3.1.1 is a clearly defined process for input on service priorities, solutions, added value initiatives.

6.4 Ongoing Monitoring and Audits

In addition to QE's obligations under or in accordance with the Oversight and Enforcement Policies, QEs shall ensure that an ongoing monitoring process includes:

6.4.1   Validation that input to the business plan and enhancement of services is being sought and considered through self-evaluation of customer service approaches and outcomes.

6.4.2   External Audits and monitoring by Certification Body will assess the types and level of input by external stakeholders in the ongoing governance process.