**New World Health Information Exchange**

**Patient Look-Up Service**

**On-boarding Readiness Questionnaire**

01/01/2016

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# Introduction

The patient look-up service enables an authorized health care provider to search for and retrieve his/her patient’s clinical data from other network participants at the point of care for treatment purposes. There are other HIE services that will be offered through the New World HIE (e.g., public health reporting, provider to provider messaging, and provider directory), however, this On-Boarding Readiness Questionnaire is focused on prospective provider networks who wish to participate in the New World HIE patient look-up service. Examples of provider networks include operational Regional Health Information Organizations (RHIOs), Integrated Delivery Networks (IDNs), health systems, and Clinical HIEs.

Provider Network General Information

Organization Name: Click here to enter name

Address: Click here to enter address.

### Primary Points of Contact Information

1. Who is your Program Management Point of Contact? (This person will be responsible for ensuring agreements are signed and determining implementation vision.)

|  |  |
| --- | --- |
| *Name:* | Click here to enter name |
| *Title:* | Click here to enter title. |
| *Phone Numbers (office and cell):* | Click here to enter phone. |
| *Email:* | Click here to enter e-mail. |
| *Mailing address:* | Click here to enter address. |

1. Who is your Technical Point of Contact? (This person will be responsible for setting up the servers.)

|  |  |
| --- | --- |
| *Name:* | Click here to enter name. |
| *Title:* | Click here to enter title |
| *Phone Numbers (office and cell):* | Click here to enter phone. |
| *Email:* | Click here to enter e-mail. |
| *Mailing address:* | Click here to enter address. |

1. Who is your Computer Security/Chief Security Officer Point of Contact?

|  |  |
| --- | --- |
| *Name:* | Click here to enter name. |
| *Title:* | Click here to enter title. |
| *Phone Numbers (office and cell):* | Click here to enter phone. |
| *Email:* | Click here to enter e-mail. |
| *Mailing address:* | Click here to enter address. |

### Logistics Information

1. When would you be interested in on-boarding to the New World HIE patient look-up service? (e.g., As soon as possible, within 6 months, within 1 year, within 18 months, or within 2 years) Click here to enter timeframe.
2. Are you willing to dedicate time and resources to enable interfacing between your organization’s information system and the New World HIE in such areas as server configuration, ingest of test patients and document data and message validation? This will likely include a system administrator, interface/software specialist, and possibly other clinical specialists (please see **Attachment A** of this Readiness Questionnaire for recommended organizational staff skills). Please explain any constraints.

 Click here to enter constraints.

1. Do you have any upcoming major system migrations or upgrades that the New World HIE should be aware of? **Yes/No.**

If yes, please detail: Click here to enter text.

Click here to enter Page Marking (optional).

#  New World HIE On-boarding Readiness Questionnaire

The New World HIE On-boarding Readiness Questionnaire is used to help assess an organization’s overall readiness to on-board to the New World HIE for the patient look-up services.  Areas covered in the Readiness Questionnaire include current state of information systems, network information, and interfaces. Please answer the following questions to the best of your ability. If a specific section or question is not applicable to your organization, please leave it blank.

## Health Information Exchange (HIE) System Implementation Questions

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Please identify what HIE system you are using. Please include vendor, the version/release of the system application, and specific vendor contact information. | Enter response here. |
|  | If an individual hospital system, please identify the EHR system you are using. Please include vendor, the version/release of the system application, if they support the eHealth Exchange services and specific vendor contact information. |  |
|  | How many unique patients do you estimate have clinical data contained and accessible within your network? Please note: the desired minimum specified by the Patient Lookup subscription agreement is 250,000 unique patients. | Enter response here. |
|  | How many physicians currently have access to your HIE? | Enter response here. |
|  | How many physicians will have access to the New World HIE through your organization’s participation? If different than the response to question 3 above, please explain. | Enter response here. |
| 1. 3.
 | Do you have a Master Patient Index (MPI) capability? (If yes and it is a third party add-on, please identify what MPI system is used and version) | Enter response here. |
|  | If you have an MPI, do you also have a Record Locator Service (RLS) capability? That is, how are clinical records pulled or located for sharing within your local provider network? Please specify software vendor and version. | Enter response here. |

Click here to enter Page Marking (optional).

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Does your HIE system utilize an interface engine? If so, please specify vendor and version. | Enter response here. |
|  | Does your HIE exchange data using a Continuity of Care Document (CCD) XML payload? | Enter response here. |
|  | When does your vendor anticipate moving to the Consolidated Clinical Document Architecture (C-CDA)? Can they support both the C-CDA and the CCD (C32) at the same time? | Enter response here |
|  | Does your HIE exchange or have the capability to generate structured CCD:a) C32 documents?b) C37 documents?c) C48 documents? d) C78 documents? | Enter response here. |
|  | If your HIE does not exchange or generate structured CCDs, is there an existing method to access the clinical data contained in your participating entities’ EHRs (e.g., API, database access, application exports, etc)? (If yes, please describe). | Enter response here. |
| 1. 6.
 | Do you support/send HL7 messages? If yes, what version? | Enter response here. |
|  | What other types of data formats do you support that could potentially be used to generate a payload (e.g., PDF, .doc, .rtf, TIFF, JPEG, ebXML, etc)? | Enter response here. |
|  | Does your HIE have an Electronic Document Repository or a Clinical Data Repository? Is it centralized? | Enter response here. |

Click here to enter Page Marking (optional).

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Do you currently interface with third party EHRs? If yes, what are the products and what tool do you use to interface? | Enter response here. |
|  | Does your system exchange any electronic documents or messages that contain any of the following codes or terminology (if yes, please specify):* LOINC
* SNOMED CT
* CPT4
* RxNorm
 | Enter response here. |
|  | Please describe any terminology file(s) or database(s) that you utilize? | Enter response here. |

Click here to enter Page Marking (optional).

##  Data Source Questions

In order for us to have an understanding about the clinical data available for patient look-up service from your system, please complete the following chart about the data source systems that you currently have LIVE IN PRODUCTION sharing clinical data through your provider network.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Source Organization** | **Specific Source System** | **Type of Clinical Data\*\*** | **Date first live in production\*** | **Volume Estimates (i.e., # of unique patients)** | **Clinical Data Format (include terminology used, if any)** | **Location or region** |
| Click here. | Click here. | Click here. | Click here. | Click here. | Click here. | Click here. |
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\*Date from which clinical data is available.

\*\*Examples of types of clinical data include, but are not limited to:

|  |  |
| --- | --- |
| * Patient registration and/or admissioninformation
 | * Visit Notes
* Other transcribed reports
 |
| * Discharge Summaries
 | * Medication history
 |
| * Lab test results
 | * Problem list
 |
| * Cardiology studies
 | * Allergies
 |
| * EKG text reports
 | * Vital signs
 |
| * Pathology reports
 | * Patient Histories
 |
| * Radiology studies and reports
 | * Immunizations
 |
| * Operative notes
 | * Lab orders
 |
| * Progress Notes
 | * Other clinical data (please specify)
 |

**Example:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Source Organization** | **Specific Source System** | **Type of Clinical Data\*\*** | **Date first live in production\*** | **Volume Estimates (e.g., # of unique patients)** | **Clinical Data Format (include terminology used, if any)** | **Location or region** |
| XYZ Health System (hospital) | ADT (GE) | Admissions data, discharge summaries | Since Jan 2009 | 2,000,000 | HL7 v2.5.1 | Boston |
| ABC Hospital | Lab (Cerner) | Lab results | Since Feb 2010 | 1,000,000 | HL7 v2.5.1, LOINC coded | Newton |
| St. Francis Hospital | Transcription (XYZ vendor) | Transcribed reports: surgical notes, radiology reports | Since June 2010 | 1,000,000 | HL7 v2.6 | Hartford |

Click here to enter Page Marking (optional).

##  Security Implementation Questions

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Do you fully comply with the HIPAA Security Rule? | Enter response here. |
|  | Have you performed a thorough assessment of the current potential security risks and vulnerabilities to the confidentiality, integrity, and availability of Electronic Protected Health Information (EPHI) held by your organization and your business associates? Note: Each organization that will be on-boarding to the New World HIE must have completed a Security Risk Analysis that meets HIPAA requirements and be actively working on resolving identified security issues. | Enter response here. |
|  | Do you have an updated Risk Management plan addressing the implementation of security measures sufficient to reduce risks and vulnerabilities to a reasonable and appropriate level?  | Enter response here. |

Click here to enter Page Marking (optional).

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Which of the following security control systems are used throughout your organization and business associates?* Data Loss Protection
* Internet Proxy
* Intrusion Protection
* Antivirus Protection
* Host Encryption
* Vulnerability Management
* Security Information and Event Management
* Encryption Management for disk and portable media
 | Enter response here. |
| 1. 3.
 | Do you monitor your security logs?  | Enter response here. |
| 1. 4.
 | Do you have a documented computer security incident response plan? If yes, has it been tested in the last 12 months? | Enter response here. |
|  | Have you had any security breaches in the last 5 years? If so, please describe the cause of the breach(es) and what steps were taken to address any issues. | Enter response here. |
|  | Additional comments? | Enter response here. |

Click here to enter Page Marking (optional).

##  Privacy Implementation Questions

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Please enumerate the systems with Protected Health Information (PHI) that are maintained by your organization and business associates and how many are audited and monitored? | Enter response here. |
|  | Have you implemented a comprehensive audit program and when was it last evaluated? | Enter response here. |
|  | How often are audits performed on your systems containing or using PHI? | Enter response here. |
|  | What tool(s) are used to monitor and audit activity on systems containing or using PHI? | Enter response here. |
|  | What procedures and tools do you use to grant and deny access to PHI by your users? How often to you audit them?  | Enter response here. |
|  | When registering your users for accounts that can access PHI, do you identity proof them at NIST Level 1, 2, 3, or 4?(Please see: <http://csrc.nist.gov/publications/nistpubs/800-63/SP800-63V1_0_2.pdf> .Note: Currently, the New World HIE requires NIST Level 3 or higher identify proofing, and NIST Level 2 or higher remote network authentication) | Enter response here. |
|  | Please describe any emergency (break-the-glass) access procedure for users to access PHI. | Enter response here. |
| 1. 2.
 | How is Patient Consent (if any) to access PHI administered within your system? Please describe. | Enter response here. |

Click here to enter Page Marking (optional).

| **Item**  | **Information Systems Question** | **Response and Discussion**  |
| --- | --- | --- |
|  | Fully describe any privacy policies you have at your HIE system level and any policies at the data source system level (if any additional policies exist). Be sure to include a description of whether your organization or provider network currently requires any patient consent or authorization to allow disclosure of a patient’s data to other treating health care providers.  | Enter response here. |
|  | Do you have any federally funded substance abuse treatment programs that are subject to 42 CFR Part 2 in your HIE? If so, please list them and explain your privacy and consent approach used. | Enter response here. |
|  | Do you have written contracts for data sharing with all your provider organizations or other data sources used in your network? Do they include HIPAA business associate language, when applicable?  | Enter response here. |
|  | Additional comments? | Enter response here. |

Click here to enter Page Marking (optional).

##  Test and Quality Assurance Questions

| **Issue**  | **QA Question** | **Discussion and Decision****(if your answer is yes to the question, please describe)** |
| --- | --- | --- |
|  | Do you support and can the Galen New World HIE Team establish a Virtual Private Network (VPN) connection to your organization?Note: This connection will allow the Galen New World HIE Team to facilitate the on-boarding process and test and troubleshoot connectivity to the New World HIE. | Enter response here. |
|  | Do you currently maintain a test environment? | Enter response here. |
|  | Does your organization require a separate test evaluation and acceptance testing processes before software can be rolled out to production? If yes, please describe. | Enter response here. |
|  | Do you currently have test patient data? | Enter response here. |
|  | Additional comments? | Enter response here. |

#

Thank you for completing the New World HIE On-boarding Readiness Questionnaire. Please e-mail your responses to New WorldHIE@Galenhealthcare.com (e.g., use the “send” option within Microsoft Word). A Galen Team representative may contact you for follow-up information, as needed.

# Attachment A

### Recommended Organizational Staff Skills for On-boarding Tasks

* Web services or java classes knowledge for interface development to the HIE/EMR APIs and MPI
	+ JavaScript
	+ WSDL
	+ SOAP
	+ XML
	+ Web Service
	+ HTTP/HTTPS
* Knowledge on deploying and testing web services
* Knowledge in the use of SOAP UI for testing services
* Knowledge in reviewing log files (glassfish server.log) for processing and exceptions
* Web services or java classes knowledge for interface development to the HIE/EMR APIs and MPI
* Basic database (Oracle) knowledge to view data