

Proposed Changes: 2014 Subscription Agreements

Patient Look-Up (PLU) Service

1. Clarify that access to patient information is limited to health care providers in a treating relationship with the patient solely for their use in treating the patient. [2. Permitted Purposes]
2. Filtering permitted where explicit consent required by 42 CFR Part 2. [3. b. iii. Responsibilities of Participants]
3. Patient Look-Up Access (hybrid) revised to require monthly reporting of transactions with explicit expectation of data sharing. [3. c. Patient Look-Up and Delivery Access.]
4. Eliminate Express or Express Lite selection and reference to installation services. [4. a. Vendor Responsibilities]
5. Updates fees and billing and adds fee schedule exhibit [5. Fees]
6. Change signature line from Health Care Provider Sponsor to Health Care Provider Co-signer.
7. Patient authorization audit plan will be submitted to Vendor (which forwards to AHCA) and available to other Participants upon request. [Attachment A 3. Universal Patient Authorization Form]
8. Participants will cooperate in documenting consent or medical emergency access as requested by another Participant. [Attachment A 3. Universal Patient Authorization Form]
9. Require designation by a Participant of an individual (“PLU Privacy Manager”) that will have access to the PLU audit log using an account established by the Vendor. [Attachment A 7. PLU Privacy Manger (added)]
10. Addition of optional eHealth Exchange addendum

Direct Secure Messaging (DSM)

1. Remove trade secret status of Provider Directory (DSM addresses will be posted on the Florida HIE website) [4. Vendor Responsibilities]
2. Eliminate reference to monthly billing, remove waived fees, and adds fee schedule exhibit [5. Fees]

3. Notice can be by email [6. Miscellaneous]
4. Provide that maintenance of records is a responsibility of Participant Users; permits fees for vendor support of data retrieval; limits archiving to 90 days [Attachment A. Accounting of Disclosures]
5. Addition of Event Notification System Addendum Health Care Providers, and Health Plans
 - a. Provides that alerts may include discharges only or both admissions and discharges
 - b. Add fee schedule to the Health Plan addendum

General Terms and Conditions

1. Increase days to resolve disputes by informal conference from 15 calendar days to thirty (30) [19. b. ii. Dispute Resolution Process]