


 Approved

Rhode Island Health Information Exchange	
RI HIE POLICY AND PROCEDURE	
Subject: Consumer Enrollment in the RI HIE	Related Policies: RI HIE Patient Authorization Policy, Uniform Patient Authorization Form, Patient Authentication Policy, Termination of HIE Participation Policy, Temporary Authorization Policy
Stakeholder Group: Steering Committee	Submission Date: April 24, 2008
Target Implementation Date: July 2008	Date of Scheduled Review: TBD

BRIEF DEFINITION: The RI HIE Enrollment Policy describes consumers' choice to participate in the statewide HIE and allows consumers to terminate participation at will. Upon enrollment in the system, participants will be given choices to specify which healthcare organizations may view their health information through the HIE and under what circumstances disclosure may occur. Consumer choices also include revocation of such authorization at will.

BACKGROUND AND PURPOSE: As an extension of the RI HIE Authorization Policy, the intent of the HIE Consumer Enrollment Policy is to articulate the underlying principles and guidance by which the RI HIE must obtain explicit authorization from patients before participating sources of health information can transfer the patient's data to the HIE. Further, according to the Authorization Policy, once participation is declared, providers must be authorized by the patient prior to viewing the patient's health information through the HIE. These authorization requirements are described in the Enrollment Policy in terms of the participation and authorization options available to consumers; the information to be gathered from those choosing to enroll in the HIE; various channels through which enrollment may be initiated; and performance expectations of the HIE relative to executing enrollment and authorization declarations.

Responsibility:

The entity responsible for assuring policy compliance:

- Initial HIE development, testing and implementation: RI Department of Health via trained RI HIE Enrollment Specialists
- Ongoing HIE operations: RI RHIO via trained RI HIE Enrollment Specialists and RI HIE Privacy/Security Officer (RHIO-provided resource).

POLICY

- 1. Consumer (patient) enrollment in the RI HIE is voluntary and may be terminated at will.** All consumers who have a reasonable expectation of wanting to build a longitudinal record of health information in RI's HIE – to be made available to their RI providers now or in the future – may enroll in the HIE.
- 2. To enroll, a consumer must complete an HIE Enrollment and Authorization Form. This form provides identifying information and a valid signature. The HIE will not activate or revoke a patient enrollment profile until a valid authorized signature is in the possession of the RHIO.** The RI HIE will make consumer-oriented educational materials available to clearly explain the context and details of HIE Enrollment and Authorization. During the enrollment process, information will be gathered from participating consumers as necessary to accomplish critical functions to activate and maintain enrollment and authorization, achieve accurate record matching in the HIE, and perform patient notification. Specific information elements are detailed in Appendix A.
- 3. By enrolling in the RI HIE, consumers at a minimum authorize healthcare providers that may care for them in emergencies or other unscheduled visits to access their health information through the RI HIE on a temporary basis.**

These temporary authorizations of access require the user to attest the reason for viewing without active authorization to view for their provider organization. These temporary acquisitions of access will receive a higher level of audit and review, and the reason given for requesting temporary access will be part of the audit that is available to consumers upon request.

- 4. Consumers may also give healthcare provider organizations “authorization to view” according to several options. These viewing rights, which can be documented upon enrollment, may be changed at any point thereafter.** These options include:
 - a. Authorization of all health care providers who are treating the patient or are involved in the coordination of their health care and are current or future participants in the RI HIE.
 - b. Authorization of named healthcare provider organizations:
 - i. Patients will grant authorization at the healthcare provider organization level which includes provider offices, health centers, hospitals and their medical and administrative staff members as designated by each organization. For practice settings with multiple locations such as large multi-specialty group practices, the authorization applies to the entity across all locations. This approach does not permit authorization at the health system/IDN level or the individual provider level unless that individual comprises an organization.
 - ii. Duration of named authorizations will be ongoing until actively revoked by the patient or their authorized representative.
 - iii. Revocation of authorizations by any means will terminate authorization at the same healthcare provider organization level that authorization was originally granted.

5. **Various enrollment channels will be offered to the extent that there is either a current method of patient authentication in place or one that can be put in place.** The HIE Enrollment and Authorization Form must be collected by a trusted source (provider, enrollment specialist, or other intermediary) who has processes in place to verify that the information on the form is of the actual person who authorized participation in the HIE.
6. **Each enrolled patient will be uniquely identified in the RI HIE. Use of this ID will be limited to purposes that support accuracy in system interactions related to that patient.**
7. **The organization operating the RI HIE is responsible for timely enrollment, authorizations and all changes and/or terminations and revocations as declared by the patient.** Once the Enrollment Form is signed, the enrollee's information should be entered into the HIE system in a timely manner – either via manual data entry or uploading from another system. Forms must also be delivered to the organization operating the HIE (in hard-copy or electronically) so that it has a record of the valid authorization that preceded enrollment in the HIE.

Appendix A: Information Collected for HIE Enrollment

1. Information required from enrollees in the HIE:

- a. First name (including other first names)
- b. Last name (including former last names)
- c. Street address (including city, state, and zip code)
Persons who do not want the HIE to maintain a record of their street address should use the following address to complete these fields:
XXXXXXX
- d. Date of birth
- e. Gender
- f. Name of authorized representative (if minor or otherwise not competent to sign authorization)
- g. Authorization of provider organizations who may view information through the HIE
- h. Signature authorizing enrollment
- i. For minors, the name of each parent and/or guardian

2. Optional information:

- a. Insurance ID number (TBD)
- b. Primary phone number
- c. Cell phone number
- d. Email address

PROCEDURE

I. Overview

Consumers will have the opportunity to enroll in the Rhode Island Health Information Exchange (RI HIE) using several “channels” for enrollment. Initially, these channels of enrollment will be directed at consumers whose health care providers will be early users of the HIE (i.e., providers whose identity is known to the HIE to enable access to viewing information in the HIE), though open to everyone. Eventually, enrollment channels will be broadened so as to ensure that all Rhode Islanders have easy access to the process for enrolling in the HIE.

1. Materials required for enrollment –

- a. Educational brochure about the RI HIE to support patients’ decision-making about enrollment in the RI HIE.
- b. HIE Enrollment and Authorization Form
 - i. Generic for those whose “authorization to view” options are either a) “any treating provider organizations” or b) “only in an emergency.”
 - ii. Customized with provider site name for those whose “authorization to view” choice is to select provider organizations one-by-one.
 - iii. All forms may include a list of hospitals as potential provider organizations to authorize if consumer chooses to authorize provider organizations one-by-one to view their health information (TBD).

2. Verification of enrollees’ identity –

- a. Enrollee’s identity must be assured by a trusted source such as:
 - i. Health care provider organization who is already caring for the enrollee under the same demographic information used in HIE enrollment.
 - ii. RHIO’s enrollment specialist who can use widely-accepted identification documents to verify identity.
 - iii. Insurers that are already communicating to enrollee with enrollee-specific information using same mechanism (i.e., online account, mailing address) as used to acquire HIE Enrollment and Authorization Form.
- b. An authorized representative may enroll the consumer following these guidelines:
 - i. If individual is a minor, the authorized representative is parent or guardian of enrollee.
 - ii. If individual is a decisionally-impaired adult with a legal representative such as a guardian or durable power of attorney, the authorized representative is that legal representative.
 - iii. If individual is a decisionally-impaired adult with no legal representative, the authorized representative is whomever the enroller (as a “trusted source”) relies upon to make treatment or other legal decisions for the

enrollee, based on existing protocols at that enrollment site (e.g., order of probate, order of organ donor decision-making, etc.).

- iv. In the case where the individual doesn't have anyone who is deemed a legal representative or appropriate person based on the enroller's protocol, then cases *could* be referred to the Disability Law Center.

3. Changes to enrollment information –

- a. Enrollees may discontinue their enrollment in the HIE by completing a “Revocation of Authorization” form and submitting it to the organization operating the HIE.
- b. Enrollees may revise their “authorization to view” preference at any time by completing an HIE Enrollment and Authorization Form and selecting a different choice in the “authorization to view” section.
- c. Enrollees may update their demographic information in the HIE by submitting a revised HIE Enrollment and Authorization Form to the organization operating the HIE. Participant demographic information may also be updated electronically through the records of data submitting partners as they provide healthcare services to HIE enrollees.

II. Enrollment channels

Enrollment channels describe the site and/or mechanism by which consumers will be verified by a “trusted source” in order to complete the HIE Enrollment and Authorization Form to enroll in the HIE. The specific procedures for each enrollment channel may vary. Initial channels may include, but are not limited to:

- 1. Nursing Homes**
- 2. Community Health Centers and Community Mental Health Centers**
- 3. Primary Care Providers**
- 4. Insurers**

III. Entering Enrollment Information into the HIE

There are several mechanisms that may be used to enter an enrollee's enrollment information into the HIE System.

1. Manual entry via web-based interface –

- a. When the organization operating the HIE receives an HIE Enrollment and Authorization Form, an authenticated HIE user with enrollment permissions may key-in the enrollment information that appears on the form in order to create an HIE enrollment record.
- b. When a provider receives enrollment information via an HIE Enrollment and Authorization Form, an authenticated HIE user with enrollment permissions may key-in the enrollment information at the provider site before submitting

- the form to the HIE where it will be kept as documentation of the enrollee's authorization.
- c. When an HIE Enrollment Specialist receives an HIE Enrollment and Authorization Form in the field, he or she may key the enrollment information into the HIE as an authenticated HIE user with enrollment permissions.
 - d. At some point in the future, it may be possible for consumers to self-enroll in the HIE via the web, once the mechanisms to collect their authorization signature and verify their identity are in place.
 - e. A mechanism for recording the enrollment channel will be employed.

2. Electronic upload of enrollment information –

- a. At some point in the future, it may be possible for the HIE to accept the enrollment information electronically from another source – such as a provider's or insurer's electronic records – for those consumers who have authorized their participation in the HIE.