Guide to Completing the California Health Information Exchange Onboarding Program (Cal-HOP)
Onboarding Plan Template

<u>Directions</u>

In addition to a cover letter which provides a project summary, Qualified Health Information Organizations (QHIOs) may utilize the Excel template provided by the Department of Health Care Services, to help describe its Cal-HOP HIO onboarding plan being submitted for approval. Alternative formats may be used, but must contain at a minimum, the following information:

<u>Organization Column</u>

Please identify the name of provider, ambulatory practice or hospital you will be onboarding, including NPI.

<u>Milestone 1</u>

Please indicate whether the organization is a hospital or Ambulatory Practice. If an ambulatory practice, please identify if the practice size is less than 10, or 10 and greater. Please include projected start and completion dates for this milestone.

<u>Milestone 2</u>

Milestone 2 is comprised of two mandatory interfaces which must be accomplished within 1 year of executing agreement with practice or hospital, or September 30, 2021, whichever is sooner. Failure to complete these milestones where an exemption is not granted, will result in the claw-back of milestone payments.

<u>M2a – ADT/Event Feed</u>

Please include projected milestone start and completion dates.

<u>M2b – CURES</u>

Please include projected milestone start and completion dates. If an exemption is being requested because the hospital/provider practice was already querying the CURES database through the HIO before February 25, 2020 or has achieved EHR integration with CURES in a manner not involving the QHIO, please explain in your submission. If the hospital/provider practice chooses to access CURES through your QHIO rather than through its EHR, please state.

<u>Milestone 3 – Advanced Interfaces (at least 3 for Ambulatory Providers and 5 for Hospitals)</u>

Please list all of the individual interfaces which will be implemented under the Cal-HOP

program for each hospital or provider practice, including projected milestone start and completion dates.

A list of eligible interfaces is available at:

https://www.dhcs.ca.gov/provgovpart/Documents/OHIT/Cal-HOP_Approved_Interface_Update.pdf

<u>Upgraded Interface</u>

Please indicate any proposed interfaces that will be an upgrade or modernization effort related to an existing interface.

<u>Upgrade Justification</u>

For each proposed upgrade or modernization effort under this proposal, please provide a clear justification of why this upgrade is substantial and necessary.

<u>Provider Organizations Onboarding to Multiple QHIOs</u>

The onboarding plan must identify any provider organizations which have been or will be engaged in the Cal-HOP onboarding process with another QHIO. Please identify the other QHIO and how its geographic service area does not overlap with the geographic service area of your QHIO.