

ALBERTA NETCARE PORTAL

Data Management Contracting Terms

Quick Reference



Data management as it relates to electronic medical record (EMR) systems includes the extraction, loading and retention of patient-related data and select administrative data. Data management activities are required to support clinic operations, the continuity of patient care and the safeguard of patient records.

Data management can be complex as it is dependent on the outgoing and incoming EMR systems, the capabilities of vendors, the quality of data and the plans for the use of that data.

There are generally two types of contracts that define the content of data that is to be managed and the services required to extract data from one system, load it to another and retain data for custodial purposes:

1. The EMR vendor contract(s) which include both the current vendor (outgoing) contract and the future (incoming) vendor contract.
2. A data management contract which may be needed when moving from one EMR system to another to address items not covered in either the outgoing or incoming EMR vendor contract. This contract might be with a third party or it might be with the current or future EMR vendor.

The following information may assist in developing a contract with a vendor(s). While each clinic's contract will be specific to its individual needs, the following suggestions are meant to support the contracting process. While this checklist provides things to consider, it does not replace legal advice.

Compliance with privacy acts and regulations	The EMR vendor and third party vendor must remain compliant with all Alberta privacy acts and regulations including but not limited to the Health Information Act (HIA) of Alberta.
Service expectations	Discuss all aspects of service expectations with vendors. Consider terms that: <ul style="list-style-type: none">• Provide services to the physician(s) and physician groups promptly upon request (define timeframes)• Ensure that all vendor resources are available in a reasonable timeframe to review and resolve unusual patient data issues• Undertake commercially reasonable efforts to ensure that in the course of providing the services, the EMR is not compromised, altered, destroyed or otherwise affected• Confirm the escalation process for unresolved issues
Costs of services	Understand the process and costs involved with all aspects of the data management project. Understand the basis of payments—fixed, time and materials, and number of records.
Exit clauses	Discuss with vendors how fees are impacted if either party terminates work or the contract.
Export services used to extract data from the current EMR	All EMR vendor contracts should include export strategies such as: <ul style="list-style-type: none">• Producing a transfer of patient data (ToPD) extract (a minimum of two full ToPD extracts for all physician patients for import into the new EMR system is beneficial)• Creating a full data export per patient including audit logs to a printable PDF format• Providing billing and transition support from your former EMR system

NOTE: The information in this fact sheet is provided for education and guidance only and is not intended to replace expert advice. Physicians are responsible for making informed decisions to meet their medical-legal obligations.

Import services used to load a new EMR system with patient data extracts during implementation	<p>Before going live with the new EMR system, the EMR vendor will need to import the data extracts produced by the outgoing EMR vendor. Discuss these aspects:</p> <ul style="list-style-type: none"> • Quantity – importing should include as many ToPD extracts as required, including attachments, for all physicians' patients into the new EMR system. • If the outgoing EMR vendor was unable to complete a ToPD extract, the new EMR vendor will provide commercially reasonable efforts to import as many clinical data dump files as required from the outgoing EMR vendor, including attachments, for all physicians' patients into the new EMR system. • Quality assurance steps for the import and testing of the ToPD(s) such as providing access to the imported files to allow the physician to validate and signoff that the data import transferred appropriately and is free of material defects. <ul style="list-style-type: none"> • Repeat the ToPD import, or patient demographic import, as many times as required. • Transportation of clinic data – Discuss how the transportation of ToPD data to and from the physician(s) or physician site and EMR vendor will be conducted in a secure and reliable manner. All data must be electronically encrypted.
Data retention	<p>Alberta's Health Information Act and the College of Physicians & Surgeons of Alberta Custodian Policy outline basic requirements for records retention related to medical records. It is expected that all custodians comply with these records retention standards. Propose that your outgoing EMR vendor provide a full data export per patient including audit logs to printable PDF format using a file naming convention referencing the patient and data type or the EMR system database for records retention purposes.</p>
Data conversion	<p>If transitioning to an EMR system that requires that the data be converted and the incoming EMR vendor does not have the capability to manage this conversion, a third party could be contracted to conduct the conversion.</p>
Billing and transition support	<p>The billing information that resides in the existing EMR system cannot be migrated into a new EMR system.</p> <p>To support billing reconciliation of the old EMR, propose that the outgoing EMR vendor provide:</p> <ul style="list-style-type: none"> • An EMR license for up to six months to allow for billing reconciliation • Billing support during the transition period
Additional considerations	<p>Non-standard data such as demographics, referrals and schedules are not normally migrated between systems but are worth discussing with the vendors.</p>