



# DOQ-IT

Doctor's Office Quality - Information Technology

## DOCTOR'S OFFICE QUALITY – INFORMATION TECHNOLOGY (DOQ-IT)

### PARTICIPATION AGREEMENT

<b>Practice Name</b>			
<b>Practice Address</b>			
<b>Telephone</b>			
<b>Fax</b>			
<b>Group UPIN</b>			
<b>Tax Identification</b>			
<b>DOQ-IT Project Lead Physician</b>		<b>Lead MD UPIN</b>	
<b>DOQ-IT Primary Contact</b>	<b>Name &amp; Title</b>		
	<b>E-mail</b>		
<b>Alternate Contact (only if needed)</b>	<b>Name &amp; Title</b>		
	<b>E-mail</b>		

As part of IPRO's Quality Improvement Organization (QIO) contract with the Centers for Medicare & Medicaid Services (CMS), IPRO is conducting the Doctor's Office Quality – Information Technology (DOQ-IT) project. The purpose of this participation agreement is to outline the roles and responsibilities of the DOQ-IT physician practices and IPRO.

<b>IPRO DOQ-IT Team Contacts</b>	
<b>Zeynep Sumer</b> Project Manager 516-326-7767 ext 645 <a href="mailto:zsumer@nyqio.sdps.org">zsumer@nyqio.sdps.org</a>	<b>John Parry</b> Senior Data Analyst 516-326-7767 ext 294 <a href="mailto:jparry@nyqio.sdps.org">jparry@nyqio.sdps.org</a>
<b>Suzanne Columbus</b> Senior EHR Implementation Advisor 516-326-7767 ext 589 <a href="mailto:scolumbus@nyqio.sdps.org">scolumbus@nyqio.sdps.org</a>	<b>Dr. Alan Silver</b> Medical Officer 516-326-7767 ext 509 <a href="mailto:asilver2@nyqio.sdps.org">asilver2@nyqio.sdps.org</a>



## **DOCTOR'S OFFICE QUALITY – INFORMATION TECHNOLOGY (DOQ-IT) PARTICIPATION AGREEMENT**

### **PHYSICIAN PRACTICE RESPONSIBILITIES**

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During the project period that runs until July 2008, the practice agrees to work with IPRO to develop a health information technology (HIT) implementation plan. The practice will endeavor to have at least electronic prescribing and electronic registries in place on or before October 2007. This involves:

- Designating a practice project manager who will be the point of contact
- Completing a limited number of standardized practice assessment forms. This includes a readiness assessment form and an office systems survey created by CMS. The office systems survey must be completed two times by September 2006 and by August 2007. CMS estimates the survey takes 15-30 minutes to complete.
- Permitting IPRO staff to perform onsite assessments of office organization and workflow if needed and by mutual agreement of IPRO and the physician practice.
- Reviewing electronic health record (EHR) /HIT vendor products with IPRO appropriate to practice needs and priorities.
- Working with IPRO to prepare an information technology (IT) and quality improvement (QI) implementation plan that includes objectives and a timeline.
- If contacted by CMS, completing a satisfaction survey about the DOQ-IT project
- Participating in feedback sessions with IPRO to assist us in improving our services.
- Consideration of submission of clinical performance indicators (see [www.doqit.org](http://www.doqit.org)) to a single, protected all-payer CMS data warehouse. The clinical areas are coronary artery disease, diabetes, heart failure, hypertension and preventive services. The clinical metrics are bases, in part, upon the American Medical Association Physician Consortium for Performance Improvement measures. The practice can choose which measure(s) it may want to submit and submission is voluntary.

### **IPRO RESPONSIBILITIES**

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During the project, IPRO will provide the practice with the tools and resources necessary to complete this set of tasks that includes the following:

- An assessment of practice readiness to implement an EHR and engage in quality improvement



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- An assessment and recommendations to the practice on office organization to enhance workflow and quality of care
- Access to IPRO EHR implementation specialists and QI specialists
- Assistance with vendor selection, including provision of vendor selection tools (IPRO is not an EHR vendor and does not endorse specific EHR vendor products)
- Access to educational resources on HIT and QI
- Advise regarding the best use of HIT for office efficiency and quality improvement

#### OTHER NOTES

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- Participation by the practice is voluntary. The practice may withdraw from the project at any time by notifying IPRO in writing. It is expected that the practice will enroll in the project only if committed to work with IPRO for the duration of DOQ-IT.
  - IPRO will provide the services described in this participation agreement free of charge to the practice.
  - With regards to patient confidentiality, QIOs such as IPRO, as CMS contractors, are considered health oversight agencies. The Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), under 45 CFR §164.501, allows such agencies access to protected health information without patient permission. Furthermore, the Social Security Act provides protections to providers who disclose information to the QIOs, as described in §1157 of the Act.

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DOQ-IT Lead Physician Signature

Date

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IPRO Representative Signature

Date