STATEWIDE ENS FRAMEWORK FAQS

This document answers frequently asked questions regarding the Statewide ENS Framework. Questions that are not answered by these FAQs may be sent via email to the Mass HIway at MassHIway@state.ma.us.

FREQUENTLY ASKED QUESTIONS (FAQS)

1. CERTIFIED ENS VENDORS AND SUBSCRIBERS

1.1 Q: Who are the Certified ENS Vendors?
A: Currently, there are two Certified ENS Vendors, CollectiveMedical (now part of PointClickCare) and Bamboo Health (formerly Appriss Health + PatientPing). You can find their contact information on the Statewide ENS Framework page of this website.

1.2 Q: Is there a list of organizations that have subscribed or are connected to the Certified ENS Vendors?
A: The Certified ENS Vendors are happy to share their network lists with subscribers. Please reach out to the Certified ENS Vendors directly to discuss further.

1.3 Q: If a provider or an organization subscribes to only one Certified ENS Vendor, would they be missing ADT alerts from hospitals that only send information to the other Certified ENS Vendor?
A: No. The Certified ENS Vendors have connected their ENS systems to share Acute Care Hospital ADT alerts with each other. A provider or organization subscribed to receive ADT alerts from either Certified ENS Vendor will receive the ADT alerts from all Acute Care Hospitals in Massachusetts, which are required to send ADT alerts to either Certified ENS Vendor, further to 101 CMR 20.08.

1.4 Q: Are hospitals required to partner/contract with both Certified ENS Vendors?
A: No. Hospitals are not required to contract with both Certified ENS Vendors, but may decide to do so (see question 1.5). One of the purposes of the Statewide ENS Framework is to ensure hospitals only need to submit ADTs to one Certified ENS Vendor. The Certified ENS Vendors share ADTs they receive with one another as part of the Statewide ENS Framework.

1.5 Q: Is it useful to sign up with both Certified ENS Vendors?
A: In some cases, perhaps. The Statewide ENS Framework makes signing up with both Certified ENS Vendors unnecessary, because the Certified ENS Vendors share the ADT alerts. However, providers may consider the benefits of subscribing to both since the

Certified ENS Vendors may offer additional services beyond ENS. Reach out to the Certified ENS Vendors directly to discuss further.

1.6 Q: My organization does not have a Certified ENS Vendor subscription, but we are receiving ADT Alerts from the Certified ENS Vendors in our EHR. What are these messages?
A: These alerts may be CMS Conditions of Participation (CoP) ADT Alerts. These unsolicited ADT Alerts are sent to providers via Direct message regardless of whether they have a subscription with a Certified ENS Vendor. CMS requires that hospitals send ADTs via Direct message to another healthcare facility or to another community provider or practitioner. These ADT alerts are reliant on the patient identifying their PCP during their hospital visit, so these ADT alerts are not all inclusive of a provider's patient panel. Provider organizations have little control over how they come to their organization.

1.7 Q: What are the ways that an organization can receive ADT Alerts via a Certified ENS Vendor?
A: A Certified ENS Vendor Subscriber can opt to receive ADTs via several methods such as ENS Vendor Portal, EHR, email notification, and more. To learn more about each Certified ENS Vendor's specific offerings, you can reach out directly to the Certified ENS Vendors.

1.8 Q: What clinical information is included within ADT alerts?
A: ADT Alerts may contain clinical information like chief complaint, diagnosis, and, in some cases, CCDAs may be passed along as well. The clinical information included in an ADT alert will be dependent on which information the sending facility passes along to the Certified ENS Vendor. This means that the level of clinical information within an ADT may vary depending on the hospital where the alert originated.

1.9 Q: How can my organization use ADT Alerts from a Certified ENS Vendor in tandem with other ENS Alerts that we are already receiving?
A: There are many ways that a Certified ENS Vendor subscription can be tailored to meet your organization's unique needs. To learn more, you can reach out directly to the Certified ENS Vendors as well as review the Mass HIway ADT Alert Best Practices for Provider Organizations documentation.

2. PROVIDERS REQUIRED TO SEND ADT ALERTS

2.1 Q: Who is required to submit ADT alerts?
A: Per the Mass HIway Regulations (see 101 CMR 20.08(4)), at this time, only Acute Care Hospitals are required to submit ADT alerts to at least one Certified ENS Vendor, but are not required to subscribe to receive alerts.

2.2 Q: Are post-acute care providers such as SNFs and rehab hospitals required to send ADT alerts?
A: State regulations currently do not require post-acute care providers to send ADT alerts to a Certified ENS Vendor. However, SNFs, post-acute care facilities, and all other providers are encouraged to submit to a Certified ENS Vendor as well as subscribe to receive ADT alerts.

2.3 Q: Are primary care and specialty medical practices required to send ADT alerts?
A: State regulations currently do not require medical practices to send ADT alerts to a Certified ENS Vendor. However, medical practices are encouraged to subscribe to a Certified ENS Vendor to receive ADT alerts.

2.4 Q: What data elements are acute care hospitals required to include in their ADT feeds to the Certified ENS Vendors?
A: At this time, the Mass HIway does not have regulatory requirements specifying which data elements need to be included within ADT feeds shared with the Certified ENS Vendors. However, for effective patient matching so that the alert can go to the appropriate care provider, demographic data elements like patient DOB, sex, address, and phone number need to be included. Additionally, receiving providers rely on diagnosis information within the alert to determine what patient follow-up is necessary.

3. PROVIDERS ELIGIBLE TO SUBSCRIBE TO RECEIVE ADT ALERTS

3.1 Q: Who can subscribe to the Certified ENS Vendors to receive the ADT alerts?
A: All Massachusetts healthcare providers are eligible to subscribe to a Certified ENS Vendor to receive ADT alerts generated through the Statewide ENS Framework, further to 101 CMR 20.00. Subscribing to receive ADT alerts is voluntary but strongly recommended.

3.2 Q: Is there a requirement for ambulatory providers to subscribe to a Certified ENS Vendor to receive ADT alerts?
A: There is currently no regulatory requirement for ambulatory providers to subscribe to receive ADT alerts. Nevertheless, all Massachusetts healthcare providers are encouraged to subscribe to a Certified ENS Vendor to receive the alerts.

3.3 Q: Is there a requirement for behavioral health providers to subscribe to a Certified ENS Vendor to receive ADT alerts?
A: There is currently no regulatory requirement for behavioral health providers to subscribe to receive ADT alerts. However, behavioral health organizations are

encouraged to subscribe to a Certified ENS Vendor so they can receive the alerts when their patients present in an acute care hospital setting.

3.4 Q: Are there additional ways to receive ENS alerts other than subscribing to a Certified ENS Vendor?
A: Yes, there are other methods of receiving ENS alerts (i.e. Direct feeds from hospitals, CoP Notifications, etc.), however, to ensure that your organization will receive ADT alerts for your patient population from all Massachusetts Acute Care Hospitals you would need to subscribe to a Certified ENS Vendor.

4. MECHANICS OF SENDING AND RECEIVING ADTS

4.1 Q: When we sign up with a Certified ENS Vendor, will they handle sending our ADT alerts out?
A: Yes, the Certified ENS Vendors are responsible for both sending ADT alerts out to ENS subscribers, and for receiving ADT alerts from ENS submitters.

4.2 Q: How can ADT alerts be received by providers such as an independent PCP using their ambulatory EHR?
A: There are several methods by which providers can receive ADT alerts. Alerts can be accessed in the Certified ENS Vendor's secure web-based portal, pushed to a population health management system, or directed to the organization's EHR. Certified ENS Vendors can work with each provider to send the alerts in a way that works best for them.

4.3 Q: How will providers and PCPs receive alerts that there is new data?
A: The Certified ENS Vendors support a broad range of alert options to allow for ease of use. Examples include secure email, text message, or as a Direct Message (via a Direct Address); transmitted via outbound HL7 into the organization's EHR, care management tool, or population health management system; or accessed through the vendor's web-based portal. There are many different options depending on the needs of each provider, and both Certified ENS Vendors will work with the provider to incorporate the method that works best for them.

4.4 Q: What do the Certified ENS Vendors do for a provider who works in multiple locations that have a subscription?
A: User accounts are provisioned at the organization level because data use rights and consent mechanisms are aligned with the provider organizational level. For example, if a provider works at two different physician practices, they would have two separate logins at Practice A and Practice B. A provider can also customize the types of alerts, the frequency of alerts, and the modality of alerts to a common location to make it

easier for the provider to use. Please contact your Certified ENS Vendor to discuss details.

5. PATIENT ROSTER

5.1 Q: How does the Certified ENS Vendor's system know the patient population that a provider serves?
A: Each subscribing provider will need to send specific patient rosters to their selected Certified ENS Vendor. The roster must include their patients for whom they want to receive alerts. The roster information is used in the patient matching algorithm.

5.2 Q: How often do subscribers have to update the Certified ENS Vendor with their patient roster?
A: Typically, subscribers submit patient rosters monthly. However, the Certified ENS Vendors can ingest rosters on a more frequent basis if necessary. You can contact your vendor to discuss your options.

6. PATIENT OPT-OUT

6.1 Q: Does the state require all patients to have their data sent to a Certified ENS Vendor or is there an opt-out process?
A: If a patient wants to opt out of having their ADTs shared, they should contact their provider organization directly.

6.2 Q: Will providers be penalized if their patients opt out, since it is a mandate from the state?
A: There will be no penalties imposed on a provider who does not share ADT alerts for a patient who has opted out locally.

6.3 Q: Can a patient view patient matching criteria and transactions?
A: Currently, patients do not have access to the ENS systems of the Certified ENS Vendors, so they can only see what their care providers share with them.

6.4 Q: Would a Certified ENS Vendor be able to filter out information to adhere to confidentiality requirements such as 42 CFR, or would that be the responsibility of the sending organization?
A: Care providers are best positioned to filter out 42 CFR applicable information from the ADT HL7 messages sent to a Certified ENS Vendor. However, the Certified ENS Vendors have additional safeguards in place to identify and proactively filter information that may not be permissible to share, or are capable of filtering out information to adhere to confidentiality requirements such as 42 CFR. If hospitals have questions about these safeguards and filter capabilities, they should contact their Certified ENS Vendor for more details.

7. PATIENT MATCHING

7.1 Q: How does the algorithm for making an accurate match work?
A: The matching algorithm gathers all patient data available in the patient rosters, including, demographics, insurance IDs, etc. This data is sorted by weighted importance to provide a match. For example, possible matches such as a first name of Jim or Jimmy are taken into consideration when matching a patient.

7.2 Q: Is the patient matching algorithm required under state regulation?
A: The patient matching algorithm itself is not stipulated in the state's regulations, but the use of a patient matching algorithm is a criterion for ENS vendor certification. The state requires, further to 101 CMR 20.11(1) and (2), that Certified ENS Vendors be able to match patient data with a high degree of accuracy, with the goal of eliminating false positives.

8. STORING OF PATIENT DATA

8.1 Q: How do the Certified ENS Vendors store data provided under the Statewide ENS Framework?
A: All data is encrypted in transit and at rest. The Certified ENS Vendors are HITRUST certified.

8.2 Q: What protections are in place for the data provided under the Statewide ENS Framework?
A: The Certified ENS Vendors are subject to a Business Associate Agreement (BAA) with every provider or provisioner of data on the network. The BAA process provides for transparency and compliance with the policies of the ASTP/ONC (Assistant Secretary for Technology Policy/Office of the National Coordinator for Health Information Technology) and applicable federal and state law and regulation. Additionally, the BAA outlines the vendor's policies for data destruction and the prevention of using data for monetization or other improper purposes.

8.3 Q: Will the Mass HIway build a master patient index for the storage of patient information?
A: No, the Mass HIway will not store any data.

9. THE STATEWIDE ENS FRAMEWORK VERSUS THE MASS HIWAY

9.1 Q: Does the Statewide ENS Framework use the Mass HIway to transport ADT alerts?
A: No. Providers can use HIway Direct Messaging, or Direct Messaging services provided by another HISP, to send and receive ADT alerts to and from the ENS system

of their Certified ENS Vendor, but the ENS Framework does not require use of the Mass HIway by Vendors nor Providers.

9.2 Q: If a MassHealth Community Partner, or another care provider, independently subscribes to one of the Certified ENS Vendors, do they need to access it through the Mass HIway Direct Messaging System?
A: No. The ENS system is operated by the Certified ENS Vendors through a legal and regulatory framework created by the Mass HIway. Providers do not need to be a participant in the Mass HIway Direct Messaging System to participate in the Statewide ENS Framework. However, Direct Messaging (including Mass HIway Direct Messaging) may be used by providers to deliver ADTs to the Certified ENS Vendors or receive ADTs from the Certified ENS Vendors.

10. THE STATEWIDE ENS FRAMEWORK VERSUS OTHER ENS SERVICES

10.1 Q: Some of our provider organizations are connected to other HIE networks, like Epic's Care-Everywhere, Carequality, or Commonwell, through which we already receive ADTs from acute care hospitals that are connected to these networks. Will there be any duplication of information among the Certified ENS Vendors, and these other HIEs? How do the Certified ENS Vendors address this problem?
A: The Certified ENS Vendors can receive alerts and encounter information from a variety of different sources. The vendors recognize that not every hospital provider is the same. Workflows are idiosyncratic and often highly customized.
The Certified ENS Vendor may need to work with your organization to understand what information you already receive, potentially from an HIE or another ENS vendor, or from a common trust framework like Carequality or Commonwell, to be able to ingest that information along with the information flowing through the Statewide ENS Framework. The vendor can then reconcile the data and send your organization a single non-duplicative source of encounters that are filtered and adjusted based on your preferences. If you would like to know more, please contact your Certified ENS Vendor. You can also review the Mass HIway ADT Alert Best Practices for Provider Organizations documentation, which has tips on how to manage and optimize ADT workflows.

11. THE STATEWIDE ENS FRAMEWORK VERSUS CURES ACT ADT REQUIREMENT

11.1 Q: How is the Statewide ENS Framework different from the 21st Century Cures Act (Conditions of Participation (CoP) Notifications)?
A: The Statewide ENS Framework requires Acute Care Hospitals to submit their ADT alerts to a Certified ENS Vendor. The Cures Act requires hospitals that receive Medicare

and Medicaid reimbursements to make a reasonable effort to ensure their systems send ADT alerts to providers as required by CMS regulation. More specifically:

- The Statewide ENS Framework requires the Acute Care Hospitals to send ADT alerts to at least one Certified ENS Vendor.

- The Cures Act ADT requirement adds to the list of Conditions of Participation that hospitals must fulfill to receive Medicare and Medicaid reimbursements. The specifics are stipulated in CMS' Interoperability and Patient Access Final Rule (CMS-9115-F).

The Certified ENS Vendors can assist providers in complying with CMS-9115-F. While the CMS regulations do not require participation in the Statewide ENS Framework, the ENS framework can help providers fulfill the ADT obligation as it provides the mechanism needed for sending and receiving ADT alerts. To learn more, contact your Certified ENS Vendor.