

Task Order (Grant Contract)

The task order commences on January 1, 2016 but we didn't receive notification of the award until February 2nd. Will the grant dates be updated to reflect this? Shouldn't the task order commence when the contract is executed? [Answer posted on 3/31/16](#)

All Task Orders currently list January 1, 2016 as the commencement date and January 31, 2018 as the expiration date. If grantees find that they will not be able to meet the grant deliverables within this timeframe, then their contracts can be amended to include an expiration date that reflects two full years after the contract was fully executed. For example, if the contract was signed by Mass Tech on March 21, 2016 then the expiration date can be amended to March 20, 2018.

These dates reflect the "grant period" listed in the grantee's Task Order.

As far as the 2 year window, does that start from the time we fully execute or is the clock already ticking? [Answer posted on 3/10/16](#)

The two year grant period has officially begun and will end on January 31, 2018. However, the Transformation Plan is not due to the grantee's eHealth Community Manager until 90 days after the contract has been fully executed.

In the Task Order, what does the term "advance notice" (in section 6a) mean? *Grantee agrees that its key personnel and contractors working on the Project will be available at reasonable times with advance notice to be interviewed by Mass Tech Collaborative or its authorized representatives for purposes of program evaluation or case study development.* [Answer posted on 3/31/16](#)

Mass Tech will contact grantees during regular business hours to schedule interviews with key project staff and will schedule the interview when it is convenient for staff.

Regarding the certificate of insurance per section 10 of the contract, can you please provide the full name and address for Mass Tech to be included on the policy? [Answer posted on 4/12/16](#)

Massachusetts Technology Park Corporation d/b/a Massachusetts Technology Collaborative
75 North Drive
Westborough, MA 01581

Invoicing and Budget

What documentation will be required to go along with an invoice when a grantee achieves a milestone? [Answer updated on 6/22/16](#)

Grantees will be required to submit the Budget and Invoice Cost Summary with all submitted invoices (for The Transformation Plan deliverable and Milestones 1-4). The Budget and Invoice Cost Summary will list all grant-related expenses incurred to that date. For Milestones 1-4, grantees will also be required to submit Attestation Forms for their organizations and from collaborating organizations that are participating in the grant project's proposed use cases. The Budget and Invoice Cost Summary is available on MeHI's [Connected Communities Grantee Page](#) along with the Attestation Form for Milestone 1. No Attestation Form is required for the Transformation Plan deliverable.

Mass Tech will pay the grantee within 45 days after receiving a properly documented invoice, but typically invoices are paid within two to three weeks after a grantee submits a fully documented invoice.

Will invoices require itemization of expenses? For example, will this grant be paid like a cost reimbursement contract, or will the predetermined Milestone payment be made regardless of actual costs when the Milestone is achieved? Answer posted on 3/10/16

Grantees will be required to submit the Budget and Invoice Cost Summary with each Milestone invoice (available on MeHI's [Connected Communities Grantee Page](#)). This Summary will require that grantees submit a list of their incurred expenses up to the date of completing the Milestone. Grantees will not be required to submit corresponding receipts for the list of expenses, but should keep a record of these receipts internally. Should Mass Tech perform an audit, grantees would need to provide copies of these receipts.

Mass Tech will only pay the grantee up to the amount actually incurred for the project. Grantees will only be paid up to the specified milestone payment if the grantee has incurred actual expenses through deliverable completion date (either the Transformation Plan deliverable or a Milestone deliverable). If the total amount incurred is less than the amount listed in section 9.d.i. of the Task Order then the lesser amount will be paid to grantee and the remainder of the milestone amount will be rolled into the next milestone payment. For example, If a grantee is allowed to receive up to \$25,000 for the first deliverable (Transformation Plan), but only incurred \$18,000 in project expenses then the additional \$7,000 would be reimbursed as part of Milestone 1, provided that the grantee incurs at least as much as the carried over amount and the Milestone 1 payment amount since the last payment.

Will invoices for payment be cumulative in nature? Do we submit invoices by line item or cost category? The language is unclear. Should we follow direction from section 9.d.ii. 2, and not worry about line item language above? Answer posted on 3/10/16

Yes, grantees will include information included in section 9.d.ii. 2 of the Task Order by submitting the Budget and Invoice Cost Summary with all invoices (for The Transformation Plan deliverable and Milestones 1-4). The Budget and Invoice Cost Summary will list all grant-related expenses incurred to that date and reflect the language included in section 9.d.ii. 2 of the Task Order. The Budget and Invoice Cost Summary is available on MeHI's [Connected Communities Grantee Page](#).

Will budget amendments be allowed throughout the grant cycle? Some of the expenses are unknown at this point. Can we move funding between line items if we budgeted too much in one and not enough in another? Will there be restrictions on moving amounts between cost categories? Answer posted on 3/10/16

Budget modifications will be allowed, but must be communicated to and approved by the MeHI eHealth Community Manager. If more than 10% of the total budget is moved between **cost categories**, or if there are other material budget modifications, as determined by the eHealth Community Manager, a budget and agreement amendment would be required.

Is there a template for the invoices that must be submitted to Mass Tech for milestone payment? Answer posted on 5/26/16

MeHI developed a sample invoice template that grantees can use, which is available on the MeHI [Connected Communities Grantee Page](#). This sample invoice template is optional, and grantees may use their own invoice if they prefer, but should include all of the elements included on the sample invoice.

Can Grantees use grant funding to pay for expenses incurred by the collaborators that won't be participating in a use case included in the Transformation Plan? **NEW!** Answer posted on 8/4/16
Yes.

Changes in Project

If we update our grant project, will we need to submit a revised Transformation Plan?

Answer posted on 3/10/16

Yes, all updates to the grant project should be e-mailed to the eHealth Community Manager. The Transformation Plan should be updated to reflect any changes in the project and the revised Plan should be e-mailed to the eHealth Community Manager.

If a grantee adds or removes a collaborating organization, when and who do they notify?

Answer posted on 3/10/16

If it is determined that a collaborating organization will no longer be involved in the grant project, then the grantee should contact the eHealth Community Manager they are working with via e-mail. The Transformation Plan will need to be updated to reflect how this change will affect the project.

Will budget amendments be allowed throughout the grant cycle? Some of the expenses are unknown at this point. Can we move funding between line items if we budgeted too much in one and not enough in another? Will there be restrictions on moving amounts between cost categories? Answer posted on 3/10/16

Budget modifications will be allowed, but must be communicated to and approved by the MeHI eHealth Community Manager. If more than 10% of the total budget is moved between **cost categories**, or if there are other material budget modifications, as determined by the eHealth Community Manager, a budget and agreement amendment would be required.

Under the “Milestone Schedule and Deliverables” matrix – Milestone 2, Section 5 – in the Grant Task Order), it specifies “Transformation Plan approved by MeHI.” Does that refer only to *changes* made in the grant project that need to be documented in the Transformation Plan, and thereby approved by MeHI? Answer posted on 4/20/16

Yes, if changes are made to the grant project that require the Transformation Plan to be updated, then these documented changes should be highlighted within the Plan and should be sent to the eHealth Community Manager, along with the other Milestone 2 deliverables. If no changes were made to the grant project, then the Transformation Plan does not need to be updated or re-submitted as part of the Milestone 2 deliverables.

Collaborator Requirements

If a grantee adds or removes a collaborating organization, when and who do they notify?

Answer posted on 3/10/16

If it is determined that a collaborating organization will no longer be involved in the grant project the grantee should contact the eHealth Community Manager they are working with via e-mail. The Transformation Plan will need to be updated to reflect how this change will affect the project.

If the primary grantee develops a formal agreement for collaborators to sign, what requirements should be included in the agreement? Answer posted on 3/10/16

MeHI is not requiring that grantees have a formal agreement in place with collaborators who are participating in the Connected Communities Implementation Grant, but some grantees have shared that they are planning to develop an agreement with collaborators to ensure that they are aware of and acknowledge their specific roles and responsibilities within the grant project.

The *Connected Communities Grant Collaborator Requirements* document lists the specific requirements of the grant collaborators as part of the grantee's Task Order and could be included in an agreement between the grantee and its collaborators. This document can be found on MeHI's [Connected Communities Grantee Page](#) under "Templates and Forms".

Collaborators will also need to provide information for the Transformation Plan (first grant deliverable). You can also find a copy of the Transformation Plan with all collaborator contributions highlighted on the Grantee [webpage](#).

What is the difference between a *collaborator* and a *trading partner*? NEW! Answer posted on 8/4/16

A *collaborator* is an organization this is participating on the Connected Communities Implementation Grant with the Grantee. A *collaborator* may be any kind of organization, for example, a vendor, a hospital, a municipal department, or a behavioral health facility. *Trading partners* are those collaborating organizations that will be exchanging healthcare data electronically. For example, a Grantee may exchange patient data electronically with a behavioral health facility, which would qualify the behavioral health facility as a trading partner. A police department, however, that is not exchanging healthcare data with a Grantee would not be considered a trading partner. The Grantee's trading partners should be listed on the use cases that are submitted with the Transformation Plan.

Will the collaborators not included in a use case be required to submit updates to MeHI? NEW! Answer posted on 8/4/16

Yes, the Grantee will need to provide updates on the progress and participation of the collaborating organizations that are not participating in a use case. The updates will be provided as part of the End of Year Report (due 12/31/16), Mid-Year Report (due 6/30/17) and the Final Report (due at the end of the grant period).

What documentation will be required for the trading partners that are included in the use case(s) that are submitted with the Transformation Plan? NEW! Answer posted on 8/4/16

Grantees must include data for the trading partners (those collaborating organizations that are part of a use case) in their outcome measures (Table 1 of the Transformation Plan) and transaction volume targets (Section 7, Table 3 of the Transformation Plan).

Do collaborators have to attest to the completion of milestones, or just the lead organization? Answer posted on 3/10/16

Yes, collaborators must attest to the completion of all grant milestones. Attestation Forms must be signed by an officer at each participating organization. Below are the specific attestation requirements for Milestones 1-4:

Milestone 1- Grantee and collaborators must attest that test transactions are being sent/received for the use case described in the HIE Use Case Development Form in the "test" environment, and are substantiated by a transaction log detailing the test transactions and the

organizations involved. The Milestone 1 Attestation Form can be found on MeHI's [Connected Communities Grantee Page](#).

Milestone 2- Grantee and collaborators must attest that real transactions are being sent/received for the use case described in the HIE Use Case Development Form in a "production environment", and are substantiated by a transaction log from the sponsoring HIE/HISP detailing the transactions of the organizations involved.

Milestone 3- Grantee and collaborators must attest that activities identified in the Milestone 2 process improvement plan are complete.

Milestone 4- Grantee must submit a Use Case Volume table and log report from the respective HIE/HISP signed by an officer at each of the collaborating organizations.

Could you please clarify how and when should the funding from the grant be disbursed to the trade partners and in what amounts for each? Is there a specific amount of funding that is disbursed with the achievement of each milestone? Answer posted on 4/12/16

MeHI is not setting specific guidelines about how a grantee should disperse funds to their collaborators. The payment arrangement should be agreed upon by the grantee and the collaborators. The grantee should consider the *Invoices/Payment Schedule* listed in Section 9.a.i. of their Task Order, with payments to collaborators reflecting the percentages paid out to the grantee by Mass Tech upon the completion of each Milestone.

<i>Payments</i>	<i>Proportion of Grant Amount</i>
<i>Planning Payment upon acceptance of the Transformation Plan</i>	<i>10% up to \$25,000</i>
<i>Milestone 1-Develop & Test</i>	<i>25% of balance of award after planning payment</i>
<i>Milestone 2-Care Coordination Prototypes</i>	<i>25% of balance of award after planning payment</i>
<i>Milestone 3-Strengthening Workflows</i>	<i>25% of balance of award after planning payment</i>
<i>Milestone 4- Volume Targets</i>	<i>25% of balance of award after planning payment</i>

Transformation Plan

If we update our grant project, will we need to submit a revised Transformation Plan? Answer posted on 3/10/16

Yes, all updates to the grant project should be e-mailed to the eHealth Community Manager. The Transformation Plan should be updated to reflect any changes in the project and the revised Plan should be e-mailed to the eHealth Community Manager.

If a grantee adds or removes a collaborating organization, when and who do they notify?

Answer posted on 3/10/16

If it is determined that a collaborating organization will no longer be involved in the grant project, then the grantee should contact the eHealth Community Manager they are working with via e-mail. The Transformation Plan will need to be updated to reflect how this change will affect the project.

Do grantees need to provide current and future state information and diagrams for all collaborators? **Answer posted on 3/10/16**

Grantees (primary grant applications) should include current and future state diagrams in their Transformation Plan. Current and future state diagrams **do not** need to be included for collaborating organizations. You can find current and future state diagram examples [here](#).

Current and future state information (for Health IT products) for the grantee and all collaborators **should be included** in the Health IT Spreadsheet that is part of the Transformation Plan. The Health IT Spreadsheet can be accessed on the [Connected Communities Grantees and Collaborators webpage](#) under “Templates and Forms”.

Is it OK to use operational process measures as the outcomes measures? **Answer updated on 7/25/16**

Yes, grantees may use operational process measures as their required outcome measures, but should make sure they are including measures that address the program requirements included in Attachment A of their Task Order.

Grantee will:

4. Commit to measuring and reporting progress against the mutually agreed to outcome metrics as stated in the approved Transformation Plan. For each use case, at least one of the metrics chosen for measurement must be able to be linked to changes in cost or quality (e.g. reduce hospital readmissions, improve medication reconciliation, reduce preventable medical errors, avoid duplicate tests, reduce labor required).

Is it acceptable for the Grantee to list “0” for Baseline Transaction Volume in Table 3 of the Transformation Plan? **Answer posted on 5/5/16**

Yes, if no paper or electronic transactions are currently being sent between collaborators for the use case that is listed in Table 3 of the Transformation Plan, then the baseline number should be listed as 0.

If there is not currently a tracking system in place to capture the number of paper-based and electronic exchanges of patient information then a tracking process should be put in place so that a volume target can be measured.

Do grantees need to complete a Use Case Development Form for each use case included in the grant project or can all use cases be included in one Use Case Development Form? **Answer updated on 8/4/16**

Each clinical/business use case should be documented on its own Use Case Development Form (e.g. Discharge Summary from Hospital to Skilled Nursing Facility) which can be found on MeHI’s [Connected Communities Grantee Page](#). However, if this use case includes multiple organizations (trading partners) that will all be participating in the same use case, then these organizations (trading partners) can all be listed within one use case rather than filling out separate Use Case Development Forms for each set of trading partners. For the Discharge

Summary from Hospital to Skilled Nursing Facility example above, if the hospital is sending discharge summaries to three skilled nursing facilities, then all three nursing facilities could be listed within one Use Case Development Form with variances in systems and workflow noted.

The Transformation Plan is asking for use cases – how many do you recommend?

Answer posted to MeHI website on 5/26/16

There is not a “recommended” number of use cases. You must have a minimum of one use case, and your use cases should describe distinct and separate transactions that support a clinical need. For example, if a hospital plans to send discharge summaries as CCDs to a SNF in order to provide staff at the SNF with the most up to date clinical information to improve patient care delivery and to reduce the chance of a readmission, then that is your use case. If the hospital will also be sending discharge summaries to a primary care group, then this should be documented as a separate use case. These use cases may be interrelated in order to address a cross-setting care management goal, but it will be helpful for us to understand the details of each transaction between specific trading partners.

Here is a link that will help with your use case development process: <http://mehi.masstech.org/education/resources-tools/hie-toolkit>

For the Use Case Development Form – are we just elaborating on those uses cases included in the Transformation Plan? Answer updated on 8/4/16

Yes, the Use Case Development Form is what you use to provide details on the use cases described in the Transformation Plan. The Use Case Form will help you outline the goal of the clinical/business case, the organizations (trading partners) and systems involved, the data to be exchanged and the “story” which provides a snapshot of how this use case will be implemented and the outcomes it will produce.

Under the “Milestone Schedule and Deliverables” matrix – Milestone 2, Section 5 – in the Grant Task Order), it specifies “Transformation Plan approved by MeHI.” Does that refer only to *changes* made in the grant project that need to be documented in the Transformation Plan, and thereby approved by MeHI? Answer posted on 4/20/16

Yes, if changes are made to the grant project that require the Transformation Plan to be updated, then these documented changes should be highlighted within the Plan and should be sent to the eHealth Community Manager, along with the other Milestone 2 deliverables. If no changes were made to the grant project, then the Transformation Plan does not need to be updated or re-submitted as part of the Milestone 2 deliverables.

When will the Transformation Plan be approved by MeHI and what is the process?

Answer updated on 5/9/16

Each Transformation Plan will be reviewed by your assigned eHealth Community Manager to ensure that the grantee has fully responded to each section of the Plan. All eHealth Community Managers will use the same evaluation criteria to evaluate each Transformation Plan.

If the Community Manager identifies any areas of the Transformation Plan that need clarification or additional information, then they will review these areas with the MeHI Connected Communities team, so that all Transformation Plans are reviewed consistently. The eHealth Community Manager will then follow-up with the grantee directly with all questions and comments.

MeHI is anticipating that the Transformation Plan review process will take about two weeks. After the review process has taken place, grantees will be notified that their Transformation Plan

has been approved or they will be asked to make updates to their Plan based on the questions and comments from the eHealth Community Manager and MeHI Connected Communities team. The grantee will be notified via e-mail when the Transformation Plan has been approved, and the grantee will be asked to submit an invoice, and a Budget and Invoice Cost Summary to receive its grant payment. A sample invoice template, and Budget and Invoice Cost Summary can be found on MeHI's [Connected Communities Grantee Page](#) under "Useful Grant Resources" (Sample Invoice Template) and "Templates and Forms" (Budget and Invoice Cost Summary).

How much detail should grantees include in the Transformation Plan, specifically, in Section 4 (Grant Approach) where it asks grantees to discuss anticipated workflows impacted? Are brief narrative responses for this section sufficient? Or, should grantees also include annotated workflow diagrams – either general diagrams for each use case, or specific diagrams for each collaborator site? Answer posted on 6/30/16

Although the narratives will be sufficient for the Transformation Plan, if grantees have created diagrams, then they may also submit those. Grantees do not need to create workflow diagrams for the Transformation Plan, however, workflow diagrams will be required as part of the Milestone 2 deliverables.

Use Case

What is the difference between a *collaborator* and a *trading partner*? NEW! Answer posted on 8/4/16

A *collaborator* is an organization this is participating on the Connected Communities Implementation Grant with the Grantee. A *collaborator* may be any kind of organization, for example, a vendor, a hospital, a municipal department, or a behavioral health facility. *Trading partners* are those collaborating organizations that will be exchanging healthcare data electronically. For example, a Grantee may exchange patient data electronically with a behavioral health facility, which would qualify the behavioral health facility as a trading partner. A police department, however, that is not exchanging healthcare data with a Grantee would not be considered a trading partner. The Grantee's trading partners should be listed on the use cases that are submitted with the Transformation Plan.

Do all of the grant collaborators need to be included in a use case? NEW! Answer posted on 8/4/16

No, not all of the collaborating organizations included in the grant project are required to be included in the use case submitted with the Grantee's Transformation Plan. Collaborators that are included in the use cases (submitted with the Transformation Plan) are considered the Grantee's *trading partners*. All collaborating organizations that have the capacity to meet all of the grant milestones (milestones 1-4) by the end of the grant period should be included in a use case. Collaborating organizations that will not have the technology or workflow in place to meet the established milestone deadlines (these deadlines are established by the Grantee and included in their Transformation Plan) should still be active participants in the grant project, but will not be considered trading partners. These non-trading partners should use this grant project as a learning opportunity to observe the required workflow processes and technical implementations that the trading partners put into place in order to participate in the submitted use case(s).

Will the collaborators not included in a use case be required to submit updates to MeHI? **NEW! Answer posted on 8/4/16**

Yes, the Grantee will need to provide updates on the progress and participation of the collaborating organizations that are not participating in a use case. The updates will be provided as part of the End of Year Report (due 12/31/16), Mid-Year Report (due 6/30/17) and the Final Report (due at the end of the grant period).

What documentation will be required for the trading partners that are included in the use case(s) that are submitted with the Transformation Plan? **NEW! Answer posted on 8/4/16**

Grantees must include data for the trading partners (those collaborating organizations that are part of a use case) in their outcome measures (Table 1 of the Transformation Plan) and transaction volume targets (Section 7, Table 3 of the Transformation Plan).

Do grantees need to complete a Use Case Development Form for each use case included in the grant project or can all use cases be included in one Use Case Development Form? Answer updated on 8/4/16

Each clinical/business use case should be documented on its own Use Case Development Form (e.g. Discharge Summary from Hospital to Skilled Nursing Facility) which can be found on MeHI's [Connected Communities Grantee Page](#). However, if this use case includes multiple organizations (trading partners) that will all be participating in the same use case, then these organizations (trading partners) can all be listed within one use case rather than filling out separate Use Case Development Forms for each set of trading partners. For the Discharge Summary from Hospital to Skilled Nursing Facility example above, if the hospital is sending discharge summaries to three skilled nursing facilities, then all three nursing facilities could be listed within one Use Case Development Form with variances in systems and workflow noted.

Are grantees and their collaborators required to share patient information over the Mass Hlway? Answer posted on 4/12/16

Neither the grantee nor their collaborators are required to exchange information with one another over the Mass Hlway. While using the Mass Hlway to exchange information among trading partners is an option, many Grantees have opted to use a private HIE or HISP to share clinical information.

The Transformation Plan is asking for use cases – how many do you recommend? Answer posted to MeHI website on 5/26/16

There is not a “recommended” number of use cases. You must have a minimum of one use case, and your use cases should describe distinct and separate transactions that support a clinical need. For example, if a hospital plans to send discharge summaries as CCDs to a SNF in order to provide staff at the SNF with the most up to date clinical information to improve patient care delivery and to reduce the chance of a readmission, then that is your use case. If the hospital will also be sending discharge summaries to a primary care group, then this should be documented as a separate use case. These use cases may be interrelated in order to address a cross-setting care management goal, but it will be helpful for us to understand the details of each transaction between specific trading partners.

Here is a link that will help with your use case development process: <http://mehi.masstech.org/education/resources-tools/hie-toolkit>

For the Use Case Development Form – are we just elaborating on those uses cases included in the Transformation Plan? Answer updated on 8/4/16

Yes, the Use Case Development Form is what you use to provide details on the use cases described in the Transformation Plan. The Use Case Form (on MeHI's [Connected Communities Grantee Page](#)) will help you outline the goal of the clinical/business case, the organizations (trading partners) and systems involved, the data to be exchanged and the “story” which provides a snapshot of how this use case will be implemented and the outcomes it will produce.

HIE/HIway

Are grantees and their collaborators required to share patient information over the Mass HIway? Answer posted on 4/12/16

Neither the grantee nor its collaborators are required to exchange information with one another over the Mass HIway. While using the Mass HIway to exchange information among trading partners is an option, many Grantees have opted to use a private HIE or HISP to share clinical information.

When MeHI refers to “HIE,” is MeHI referring to a specific shared data exchange/repository, or health information exchange in more general terms? Answer posted on 4/20/16

Within the Grant Task Order and Transformation Plan the term “HIE” refers to a specific private or public Health Information Exchange, such as a Regional Health Information Organization (RHIO) or the Mass HIway (The Massachusetts Health Information Exchange).

Will there be an assigned account manager from the MassHIway to assist with questions and concerns by and between collaborators and Grantee? Answer posted on 4/27/16

Yes, the Mass HIway team will assign a specific account manager to each grantee and its collaborators to ensure that there is one main point of contact at the Mass HIway for each Connected Communities Grant. The grantee and collaborators should begin planning their methods of exchanging health information with one another as part of their Transformation Plan.

Consent

Can MeHI provide some resources around patient consent requirements for sharing information over the Mass HIway? Answer posted on 3/31/16

The following link includes information about consent requirements to share patient information over the Mass HIway as well as sample consent language that can be added to an organization’s existing patient consent forms. There are also examples of HIway consent forms used by Atrius Health and Wellport HIE.

<http://masshiway.net/HPP/Resources/ConsentforMassHIway/index.htm>

Can MeHI provide some resources around patient consent requirements for sharing behavioral health/substance abuse information? Answer posted on 3/31/16

The following report, *Sharing Behavioral Health Information in Massachusetts*, which was published by the Blue Cross Blue Shield Foundation of Massachusetts includes information about Federal laws which impact the sharing of behavioral health and substance abuse information (HIPAA, 42 CFR Part 2) as well as Massachusetts laws affecting this type of sharing

(General Health Records laws, Mental Health Information laws and Substance Abuse Information laws).

You can find a link to the report [here](#).

Changes to the current 42 CFR Part 2 law have recently been proposed and these proposed changes are open to public comment until April 11, 2016.