



The *Choice* is Clear.

HL7 Interface Request Worksheet

Office Name: _____
 Physician(s): _____
 Address: _____

 Main Phone: _____

Individual authorized to sign contract on behalf of practice:
 Name: _____
 Title: _____ Email Address: _____

| | Manager | Super User (will perform testing & verification) |
|---|---------|---|
| Office Contact (will need to be involved in implementation and vendor coordination): | | |
| Direct phone of Contact: | | |
| e-mail of Contact: | | |
| RALLP marketing rep for physician office: | | |
| Do you wish to just receive results or send orders and receive results (bi-directional)? | | |
| Are there multiple offices for this practice/physician? | | |
| If YES, does the other locations use/share the same EMR system? | | |

EMR Vendor Information:

EMR vendor name:
 EMR software name & version:

| | |
|--|--|
| Is the EMR server located on-site at a local office? | |
|--|--|

| INSIDE SALES (EMR) | Primary Contact | Secondary Contact |
|--------------------|-----------------|-------------------|
| Name: | | |
| Title: | | |
| E-mail address: | | |
| Primary Phone: | | |
| Direct Phone: | | |
| Fax: | | |

| SUPPORT (EMR) | Primary Contact | Secondary Contact |
|-----------------|-----------------|-------------------|
| Name: | | |
| Title: | | |
| E-mail address: | | |
| Primary Phone: | | |
| Direct Phone: | | |
| Fax: | | |



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Office Support Information:

Is your local network & equipment supported by your EMR vendor? _____

If NO, please fill in the below information.

| I.T. SUPPORT VENDOR | Primary Contact | Secondary Contact |
|----------------------------|------------------------|--------------------------|
| Name: | | |
| Title: | | |
| E-mail address: | | |
| Primary Phone: | | |
| Direct Phone: | | |
| Fax: | | |

Radiology Associates, LLP contact information:

| HL7 Staff | Primary Contact | Technical Contact |
|------------------|------------------------|--------------------------|
| Name: | Deedra Pearce | Jay Mosser |
| e-mail address: | dpearce@xraydocs.com | jmosser@xraydocs.com |
| Primary Phone: | (361) 561-3024 | (361) 561-3024 |
| Fax: | (361) 561-3028 | (361) 561-3028 |



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Frequently Asked Questions

What is an hl7 interface?

HL7 interface is a frequently used phrase in the healthcare IT marketplace. Other terms include interface engine and integration engine. It is a software program that processes data between numerous healthcare IT systems. Think of it as the nerve center or traffic cop of all the data that flows between multiple technologies in a hospital or other healthcare organization.

Radiology Associates can receive orders from your EMR directly and process them more quickly than faxing. We also send the results back to your EMR as soon as they are approved which means your reports will come into your patient's chart without delay.

Why do we need to share the cost of the implementation and maintenance for these interfaces?

In order to comply with federal anti-kickback regulations we are prohibited from providing monetary incentives for referrals. This agreement allows us to provide a cost-sharing arrangement in order to accommodate that requirement.

What are the benefits to my practice?

1. Ability to send us orders electronically utilizing our exam code list. Orders are received immediately and can be processed by our schedulers very quickly. Patients will receive a call from us to schedule their exam more quickly than if you faxed us the orders.
2. The order is more legible and since it utilizes our exam code list, it is able to be scheduled without us having to call you for clarification.
3. As soon as our doctor signs the report, you have the report in your system within minutes. No paper is used for faxing and the results go directly into the patient's chart.
4. When your order is received, it is also immediately available to view in our Royal MD Physician Portal so you can see when and where the patient is scheduled.

What are the terms of our cost sharing arrangement?

Provider and RALLP will share the costs of installing and maintaining the Interface. In the first year, Provider will pay 15% of the overall installation and maintenance costs for the Interface, which RALLP will invoice for payment upon execution of the Agreement. Thereafter, RALLP will invoice Provider annually on the anniversary date of the Agreement for 15% of the maintenance costs of the Interface. Invoices for installation and maintenance costs will be due upon receipt. Maintenance costs will include, but are not limited to, the applicable taxes and related fees charged by Provider's EMR Vendor.

What are the responsibilities for my practice?

The practice will have to initiate the request to obtain this interface from their EMR vendor and obtain a quote for the implementation and maintenance.

The practice will be responsible for maintaining whatever hardware or software the EMR vendor requires to maintain connectivity and to provide Radiology Associates IT Department technical contacts as well as an onsite administrator who we can work with to troubleshoot connection issues and update the exam compendium in your EMR. Your onsite contact will also be responsible for assisting with the testing and implementation of the interface.