



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

June 2, 2022

DAL: DHCBS 22-11
Subject: Health Commerce System (HCS) Roles

Dear Administrator:

The Health Commerce System (HCS) is the primary mechanism that the New York State Department of Health (Department) uses to communicate with licensed home care services agencies (LHCSAs), certified home health agencies (CHHAs), long term home health care programs (LTHHCPs) and hospice providers in New York State. The HCS is used for a multitude of purposes, including, but not limited to, targeted communications, access to applications, and collecting cost and statistical information from providers.

In emergency situations, it is imperative that the Department is able to communicate directly, whenever necessary, on urgent matters with the specific individuals holding leadership positions within the agency. To that end, the Department reminds agencies of their regulatory responsibility to maintain up to date business and after hours contact information for the agency leadership roles in the HCS Communications Directory (Directory). This letter describes steps to be taken by your agency to help ensure the Department has this capability.

Per regulation,

- 10 NYCRR Parts 766.9 (o)(1),(2),(3),(4): Licensed Home Care Services Agencies
- 10 NYCRR Parts 763.11(f)(1),(2),(3),(4): Certified Home Health Agencies
- 10 NYCRR Parts 793.1(n)(1),(2),(3),(4): Hospices

the following information is required of providers in maintaining Directory contact information:

“At a minimum, twenty-four hour, seven-day a week contacts for emergency communication and alerts, must be designated by each agency in the HPN [Health Commerce System (HCS)] Communications Directory” and “current and complete updates of the Communications Directory reflecting changes that include, but are not limited to, general information and personnel role changes as soon as they occur, and at a minimum, on a monthly basis.”

As indicated in the Health Commerce System User Security and Use Policy and Form: “Duties of each user with an established HCS account include, contacting the HCS coordinator(s) at the HCS organization(s) for which they are to access the HCS at least 3 business days prior to any change in user’s HCS responsibilities or in user’s employment status affecting the standing of the account.” The above-mentioned home care and hospice agencies will have 10 business days to update their HCS account after notification of a change in HCS responsibilities.

In the attached table, please review primary and backup roles, the text describing each role, and how many people should be assigned to each. One single individual should be assigned to each

primary leadership role (e.g., “Administrator”) and one (1) or two (2) individuals, can be assigned to the new backup role. The new backup roles will receive the same communications as the primary roles and will have the same access to the HCS applications that the primary role has.

Please assure that your agency’s HCS Coordinator modifies the contact information for these roles in the Directory accordingly, within **three (3) weeks of the date of this letter**. To reiterate, going forward, **only the one person meeting the primary leadership role description** should be assigned to each of the primary leadership roles listed in the attached table. Any additional individuals currently assigned to that primary leadership role should be removed. One (1) or two (2) additional individuals, can be assigned to the new backup role.

All phone, email and text contact options must be completed with up-to-date information, for both business hours and after-hours options. After hours contacts must include cell phone numbers. Agency leadership should verify that the information entered for the Directory roles by their HCS Coordinator is correct.

After the due date, Department staff will review the Directory to assure that role assignments have been made/updated and will contact those agencies that have not completed their updates. Drills of this contact information will be conducted periodically to ensure maintenance and accuracy of this information.

Agencies should have policies and procedures pertaining to HCS requirements. Clarification as to the minimum procedures that are necessary to achieve compliance is provided. As stipulated in regulation, each licensed site must have an individual HCS account with sufficient and knowledgeable staff available to maintain and keep the account current.

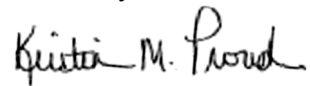
1. The HCS should be accessed regularly, at minimum once per week and more frequently during an emergency to check for news announcements, alerts and other Department communications.
2. Required roles, in addition to those required roles indicated in the attached charts. Current contact information for authorized individuals with an active HCS account must be entered for each of the following roles. DHCBS recommends two (2) authorized individuals in each role below:
 - a. **24 by 7 Facility Contact:** Emergency contact point for facility that will be monitored 24 hours a day every day of the week.
 - b. **Office of the Administrator:** Contact information for administrator during business hours.
 - c. **Director, Home Care Patient Services or Patient Services:** A licensed and currently registered nurse responsible for clinical direction and supervision of patient care services.
 - d. **Emergency Response Coordinator:** Individual(s) who serves as coordinator of a facility's emergency operations center.
 - e. **HPN Coordinator:** The principal point of contact concerning HPN access. The HPNC must have the authority and responsibility within the Participating Organization for execution of the roles and responsibilities for an HPNC as delineated in Schedule 1.A of the Health Provider Network Participant Organization Security and Use Policy

- f. **Criminal History Record Check Authorized Person (CHRC AP):** An individual designated by the operator of covered providers to carry-out the responsibilities of the Authorized Person (CHRC AP), as defined in New York State Executive Law, Section 845-b, consistent with Public Health Law Article 28-E and regulations in new Part 402. The CHRC AP will receive via the HPN, securely transmitted, time sensitive and important information, documents and reports, such as the DOH employment eligibility determinations for prospective employees to the covered providers designated CHRC AP.
 - g. **Data Reporter:** Individual able to report data for various surveys.
 - h. **Home Care Registry Agency Updater:** An individual designated by the agency to access the Home Care Registry and view all of the Agencies information that the registry contains. In addition, this person will have the ability to add and modify employment information for the Home Health Aide(s) and Personal Care Aide(s) that are employed by the Agency. This person will also be able to modify an Aides personal, employment, and certificate information for those Aides that the agency currently employs.
 - i. **Home Care Registry Agency Viewer:** An individual designated by the to access the Home Care Registry and view all of the Agencies information that the registry contains.
3. For agencies that operate a Personal Care Aide Training Program (PCATP) or Home Health Aide Training Program (HHATP), current contact information for authorized individuals with an active HCS account must be entered for each of the following roles. DHCBS recommends two (2) authorized individuals in each role below:
- a. **Home Care Registry Certification Form Printer:** An individual designated by an agency with an approved training program to access the Home Care Registry and view all of the training program's information that the Registry contains. In addition, this person will have the ability to assign a senior official to a list of students and produce the hard copy certification form to be signed in a written sworn statement by the senior official.
 - b. **Home Care Training Program Certificate Printer:** An individual designated by an agency with an approved training program to access the Home Care Registry and view all of the Training Program information that the registry contains. In addition, this person will have the ability to print the DOH created certificates for students who have graduated from their classes.
 - c. **Home Care Training Program Updater:** An individual designated by an agency with an approved training program to access the Home Care Registry and view all of the Training Program information that the registry contains. In addition, this person will have the ability to add Classes and Students to the registry.
 - d. **Home Care Training Program Viewer:** An individual designated by an agency with an approved training program to access the Home Care Registry and view all of the Training Program information that the registry contains.

The Department will continually monitor these role assignments. A Statement of Deficiencies may be issued to agencies which do not meet all of the requirements set out in this letter and subsequent enforcement action may be taken for findings of noncompliance.

If you have any questions about these requirements or need assistance with assigning HCS roles, please call (518) 408-1638 or send an email to hcreg@health.ny.gov.

Sincerely,

A handwritten signature in black ink that reads "Kristin M. Proud". The signature is written in a cursive style with a large initial 'K'.

Kristin Proud
Acting Executive Deputy Commissioner
New York State Department of Health

Attachment: HCS Communications Directory – LHCSA, CHHA, LTHHCP and Hospice,
Primary and new “Backup” Leadership Roles.

HCS Communications Directory – LHCSA, CHHA, LTHHCP and Hospice, Primary and new “Backup” Leadership Roles.

LHCSA, CHHA and LTHHCPs are listed on Page 1 of this attachment; Hospices are listed on Page 2. Refer to the appropriate chart for your provider type. All newly added Backup roles are highlighted.

Licensed Home Care Services Agency (LHCSA), Certified Home Health Agency (CHHA), Long Term Home Health Care Program (LTHHCP):

| Role Name | Role Description: Who should be assigned to this Role? | Number of persons who can be assigned to this role |
|-------------------------------|--|--|
| <i>Administrator</i> | This role is intended only for the single individual who serves as the approved Administrator of the agency, and who is the individual responsible to the Governing Body for all aspects of agency level operations, and who may or may not be a different individual than the CEO/President of a system/network that may own and/or operate the agency. | 1 |
| <i>Administrator – BACKUP</i> | This role is to be assigned to up to two individuals who serve as backups to the <u>approved</u> Administrator of the agency. | 1 – 2 |
| <i>Operator*</i> | This role is to be assigned only to the single individual who serves as the authoritative Chief Executive Officer/President/Managing Member of a system/network that may own and/or operate the agency. | 1 |
| <i>Operator – BACKUP*</i> | This role is to be assigned to up to two individuals who serve as backups to the authoritative CEO/President/Managing Member of a system/network that may own and/or operate the facility. | 1 – 2 |

*Please note that this is not a required role assignment for these agencies.

Hospice:

| Role Name | Role Description: Who should be assigned to this Role? | Number of persons who can be assigned to this role |
|----------------------------------|--|--|
| <i>Administrator</i> | This role is intended only for the single individual who serves as the approved Administrator of the agency, and who is the individual responsible to the Governing Body for all aspects of agency level operations, and who may or may not be a different individual than the CEO/President of a system/network that may own and/or operate the agency. | 1 |
| <i>Administrator – BACKUP</i> | This role is to be assigned to up to two individuals who serve as backups to the <u>approved</u> Administrator of the agency. | 1 – 2 |
| <i>Operator*</i> | This role is to be assigned only to the single individual who serves as the authoritative Chief Executive Officer/President/Managing Member of a system/network that may own and/or operate the agency. | 1 |
| <i>Operator – BACKUP*</i> | This role is to be assigned to up to two individuals who serve as backups to the authoritative CEO/President/Managing Member of a system/network that may own and/or operate the facility. | 1 – 2 |
| <i>Medical Director</i> | This role is to be assigned <u>only to the single MD</u> who serves in the role of the <u>authoritative</u> Medical Director of the agency and who is responsible for oversight of the medical services for the agency. | 1 |
| <i>Medical Director - BACKUP</i> | This role is to be assigned to up to two physicians who serve as backups to the <u>authoritative</u> Medical Director of the agency. | 1 – 2 |

*Please note that this is not a required role assignment for this agency.