MICHIGAN HEALTH INFORMATION NETWORK SHARED SERVICES

Use Case Exhibit

Use Case Name: Health Claims (institutional, professional, dental, and retail pharmacy)

Change Control

Version Number	Revision Date	Author(s)	Section(s)	Summary
1.0	12/3/20	TAP	All	Administrative Data Exchange for Health Claims
2.0	11/15/21	A. Giroux	All	Review, edit
3.0	3/1/22	A.Giroux / S. Patel	All	Review, edit
4	5/4/22	B. Peek	All	Review, edit
5	5/6/22	N. Steed, B. Peek, A. Giroux, S. Patel	All	Final Legal Review

This Use Case Exhibit ("UCE") is effective and binding upon the undersigned Participating Organization ("PO") and subject to the Data Sharing Agreement (the "Agreement") between PO and HIN as of the last date in the signature block hereto. HIN and PO are referred to herein collectively as "Parties" and individually as a "Party."

1.   Purpose. Health Providers collect a vast amount of clinical data through Treatment relationships. Sharing clinical information across the Active Care Team has been difficult and does not represent the entire care continuum. Claims data is highly structured and standardized with disciplined rigor when compared to less standardized and inconsistent clinical data sources. Supplementing clinical data with claims data can augment the understanding of various touch points of patients in the healthcare ecosystem and support the delivery of more optimal patient care.

Pre-adjudicated administrative data, such as found within claims, is a timely source of limited clinical and non-clinical data. The extraction of patient conditions, place of service, service provided, as well as other common data elements will enable the rapid population of registries, permit notification of the extended care team, and trigger the additional data collection of richer clinical information that can support quality improvement efforts.

2.   Definitions. Capitalized terms used herein and not otherwise defined, shall have the meaning given them in the Data Sharing Agreement.

2.1.   **Message Content**   means the data traditionally found on institutional (facility), professional, dental, or retail pharmacy claims forms. For example, this may include patient

conditions, place of service, service provided, as well as the other common data elements used as part of the claim's submission.

3. Use Case Details.

    3.1. **Primary Use**

The primary use for Message Content is for HIN to support the integration of administrative and clinical data for Treatment, Payment, and Healthcare Operations activities as well as compliance with relevant public health reporting requirements.

    3.2. **Additional Permissible Use**

The Parties may make additional use of Message Content as permitted under the Agreement.

    3.3. **Limitations on use**

This Use Case and the associated Message Content may only be used for price transparency, cost comparisons, or public financial benchmarking if an additional Use Case Exhibit authorizing such activity is also executed by PO.

    3.4. **Related Use Case Requirements**

In addition to the Use Cases required under the MUCA, PO must enter the following Use Cases: Active Care Relationship Service (ACRS) Health Provider Directory (HPD), and the Common Key Service (CKS).

4. Service Interruptions. No service interruption variations.

5. Responsibilities of the Parties.

    5.1. **PO's Responsibilities** PO shall ensure that Message Content is a Conforming Message and is properly encoded and can be properly parsed.

    5.2. **HIN's Responsibilities** HIN may retain all Message Content as set forth in the Use Case Implementation Guide.

6. Other Terms.

    6.1. **PO Contacts** Upon executing this UCE the PO shall write legibly the names, email addresses, and phone numbers for its contacts for this Use Case.

7. Use Case Implementation Guide(s). The Use Case Implementation Guide(s) for this Use Case are provided at https://mihin.org/implementation-guides/.