

CCQI – Acknowledgment of Reporting Requirements for State Health Plan Data

According to the terms of Data Use and Disclosure Agreement (DUA) between UNC and the State Health Plan (SHP), UNC is required to provide additional reports on CCQI projects using SHP data. As a principal investigator (PI) requesting SHP data from CCQI, you will be expected to provide these reports in a timely manner to CCQI so that UNC can meet its obligations. Specifically, you agree to providing CCQI with the necessary reports for your project to meet the following requirement (Section C.4 of the DUA):

Reports to the Plan. UNC agrees to aggregate and provide quarterly reports to the Plan with updates regarding ongoing approved projects that make use of Data provided hereunder. In addition to the quarterly report described above, UNC agrees to provide, upon request of the Plan, a report regarding any such project at any time, and within 10 working days of the request. These reports will, without limitation, (i) include an estimate of percent completion; (ii) indicate whether the project is on schedule with the timeline submitted at the time of data request and project approval; and (iii) describe any progress since the last report. If a project does not show any progress for two consecutive calendar quarters, or falls behind schedule, without reasonable and adequate explanation, then the Plan reserves the right to withdraw consent for use of Plan Data for the project. Further, the UNC Investigators for each project approved hereunder, as a condition of being granted access to Limited Data Sets derived from the Master Data Set, will submit a final report to the Plan upon project completion, in addition to any scientific publication or other work product it may generate from a project. Such report may take the form of a technical memorandum, policy brief, or other related form, and the purpose of such report will be to apply the findings of the project specifically to the benefit of the Plan and/or its members, and/or to otherwise demonstrate the value of the project to the Plan and/or its members.

Please review the above excerpt in its entirety to ensure you understand your reporting obligations.

I acknowledge the terms and conditions outlined above: _____
(PI signature) (date)