

MICHIGAN HEALTH INFORMATION NETWORK SHARED SERVICES

Use Case Exhibit

Use Case Name: Advance Care Documents

This Use Case Exhibit (“UCE”) is effective and binding upon the Participating Organization (“PO”) and subject to the Terms. HIN and PO are referred to herein collectively as “Parties” and individually as a “Party”.

1. Purpose. The Advance Care Document (ACD) use case supports the electronic storage and retrieval of ACDs from any organization participating in the ACD use case.

2. [RESERVED]

3. Definitions.

3.1 ACD means Advance Care Documents. Also known as an advance healthcare directive, living will, personal directive, advance directive, medical directive or advance decision, is a legal document in which a person specifies what actions should be taken for their health if they are no longer able to make decisions for themselves because of illness or incapacity.

3.2 Submitter means the person within a PO that is contributing the ACD to the HIN.

3.3 Message Content means the patient demographics and ACD submitted by the PO.

3.4 Transactional Basis means the transmission of Message Content to the HIN

4. Use Case Details.

4.1. Primary Use

4.1.1. Message Content may be used by Health Providers for Treatment consistent with the requirements set forth in HIPAA.

4.2. Additional Permissible Use

4.2.1. Message Content may be used by health professionals as permitted by HIPAA and Applicable Law.

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

4.2.3. HIN may use Message Content to gain insights needed to support the Advance Care Document use case and other use cases including public health reporting, population health reporting, analytics, and future use cases that reference advance care documents.

- 4.3. **Limitations on use** Messages may not be used for competitive purposes. PO may send, receive, find, or use messages consistent with the terms herein and as otherwise permitted by the Agreement. The PO shall not share messages in a manner inconsistent with this UCE, as applicable.

4.3. **Related Use Case Requirements**

4.3.1. Organizations participating in this use case may also onboard to any of the following use cases: Active Care Relationship Service, Health Directory, Longitudinal Record, eConsent and Common Key Service.

4.3.2. Healthcare stakeholder's ACD submissions via an electronic health record (EHR), electronic medical record (EMR) may require information technology architecture enhancements and upgrades to transmit standard incoming HL7 messages.

5. **Service Interruptions.** No service interruption variations.

6. **Responsibilities of the Parties.**

6.1. **PO's Responsibilities as a Submitter**

6.1.1. PO understands that the HIN does not review the documents for legal compliance and may reject certain submissions due to data entry errors.

6.1.2. PO assumes responsibility for obtaining permission from the individuals referenced in the uploaded ACD(s) to make their ACDs accessible.

6.1.3. PO will re-submit any Message Content that needs correction.

6.2. **HIN's Responsibilities**

6.2.1. HIN will ensure that Message Content is available in a timely manner.

6.2.2. HIN is allowed to send, receive, find and use Message Content for activities related to this Exhibit.

6.2.3. HIN may use Message Content for reporting and internal audits.

7. **Other Terms.**

7.1. **PO Contacts** PO will provide to HIN the appropriate contact for this Use Case.

7.2. **Data Format** Message Content submitted to HIN must fully conform to the specific UCIG for each Use Case that PO participates in using HIN.

8. **Implementation Guide(s).** The Use Case Implementation Guide(s) for this Use Case is provided at <https://mihin.org/implementation-guides/>.