**NHIF Patient Satisfaction Benchmarking Program Instructions – SHP Customers**

Thank you for applying to participate in the NHIF Patient Satisfaction Benchmarking Program.

Here are all the required documents for the program as well as instructions for completing them.

 SHP Customer Instruction Sheet

S1: NHIF Patient Satisfaction Agreement

S2: NHIF SHP Provider Release Agreement

S3: NHIF Benchmarking Survey Questions

S4: NHIF SOP Template (Survey Policy Template)

S5: NHIF Home Infusion Location Profile

**S1: The NHIF Patient Satisfaction Agreement**, is the agreement between your company and NHIF. It explains NHIFs confidentiality commitments, how NHIF plans to use the data your company is providing, and the responsibilities of both NHIF and the participating company.

This agreement is also where you will list all of the locations you are enrolling in the program. Participation is at the location level so the agreement should list all the locations your company plans to enroll.

Complete all sections of this agreement and return it to the NHIF representative.

**S2: The NHIF SHP Provider Release Agreement** explains SHPs involvement in the Benchmarking program. Because you are already an SHP customer, SHP will automatically be able to pull the eligible data and transmit that data, using a de-identified code, to NHIF for the program. NHIF will receive the data but not know which participating company it belongs to, keeping the data confidential.

Complete all sections of this agreement and return it to the NHIF representative.

**S3: NHIF Benchmarking Survey Questions**. To participate in the Benchmarking Program you must utilize the NHIF Uniform Patient Satisfaction Survey Questions for Home Infusion Providers. As SHP customers you are already using these questions for your patient surveys, SHP adopted these questions for Home Infusion patients when they were published back in 2017.

As a formality please send a copy of your Patient Satisfaction Survey for our records.

**S4: NHIF SOP Template**. The NHIF Patient Satisfaction Benchmarking Program has strict guidelines for which patient data will be included in the study data. You must have these guidelines spelled out in your Patient Satisfaction Policy; we have created a policy template for you to use in creating your policy.

 Policy Requirements:

 Patient Received Infusion Therapy in the Home Setting

 Therapy was given via an IV or SQ catheter (catheter care is included)

 Patient must have been active for at least 7 days with at least 1 infusion treatment

 Participating company must offer the patient the option of a paper survey

 Optional Items:

Participating companies may choose to survey active, long term patients (at least 6 months)

Excluded Patients:

Patients receiving home infusion as a secondary service

Patient receiving services in an ambulatory infusion suite

Patient receiving Enteral therapy

Patient receiving self-injectable medications

Your Patient Satisfaction Survey Policy must be submitted to the NHIF representative for review.

Once we have all the signed agreements, a copy of your survey (approved by NHIF) and a copy of your survey policy (approved by NHIF) we will ask SHP to send you Data Participation Codes (DPCs) for each of your participating locations.

**S5: The NHIF Home Infusion Location Profile Survey** was created to collect data to describe the sample population for benchmarking initiatives and to validate benchmarking procedures. As the program is completed at the location level you will be asked to complete this survey for each of your participating locations.

We suggest that you print the survey questions and complete it on paper before going in to complete the survey online. Once you are ready you can reach the online survey using this link:

[NHIF Patient Satisfaction Benchmarking Location Profile Survey](https://www.surveymonkey.com/r/NHIF_Benchmarking_2019)