



## MPOG Member Application

Thank you for your interest in joining the Multicenter Perioperative Outcomes Group (MPOG)!

Whether you are a new site or an existing site hoping to add more of your affiliates, we ask that you please address all questions in this application to ensure a smooth onboarding process.

You may need to contact other teams at your site (billing, quality, IT) to obtain all required information. This form can take about 20 minutes to complete and must be completed once - you are not able to save and edit later. Once we receive your submission, we will follow up via email with the next steps. We appreciate your interest and look forward to connecting with you. Thank you!

Section 1

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### Submitter Contact Information

1. First Name \*

Enter your answer

2. Last Name \*

Enter your answer

3. Title/Role \*

Enter your answer

4. Preferred Pronoun

Select your answer



5. Email Address (submitter) \*

Please enter an email

6. Employer \*

Enter your answer

### New Site vs. Existing MPOG Site

7. What best describes your request? \*

- Our organization is a new site applying to join MPOG
- We are an existing MPOG site and wish to add additional locations

### Existing MPOG site wishing to add additional locations/sites

Thank you for your interest in adding more locations to your current MPOG instance. We do require some background information for the sites you are interested in adding. Please note, for sites outside of Michigan, additional fees may apply. For more information regarding fees, please visit the MPOG website: <https://mpog.org/funding-outside-michigan/>

Please address all questions in this Intake Form to ensure a smooth onboarding process. You may need to contact other teams at your site (billing, quality, IT) to obtain all required information. This form can take about 20 minutes to complete and must be completed once - you are not able to save and edit later. Once we receive your submission, we will follow up via email with the next steps.

### General Site Information - Adding Site/s

91. Adding Site - Health System Name (if your facility not part of a health system, enter facility name here) \*

Enter your answer

## Multiple Facilities - Adding Site/s

### 92. Adding Site - How many facilities do you anticipate you will add to MPOG? \*

List up to 10 Hospitals and ASCs that plan to join MPOG from your health system. If there are more than 10 hospitals and ASCs, the MPOG team will discuss onboarding plan for your health system during our introductory meeting.

The value must be a number

### 93. Facility Name #1 - Adding Site \*

Enter your answer

### 94. Facility NPI #1 Adding Site (if known)

Enter your answer

### 95. Type of Facility #1 - Adding Site

- **Hospital (multispecialty):** Healthcare facility offering services for a variety of medical services and specialties
- **Freestanding ASC:** A standalone Ambulatory Surgery Center that would require transport to the hospital via ambulance if postoperative admission is needed. This location can be affiliated with a specific hospital, or it could be part of a larger health system with no specific hospital affiliation.
- **Attached ASC:** Ambulatory Surgery Center that is physically connected to a hospital. If a patient requires postoperative admission, transport to the hospital can be via stretcher or wheelchair, no ambulance transfer required.
- **Freestanding Cancer Center:** An independent hospital that primarily treats patients with cancer.
- **Cancer Center Affiliate:** A surgery center or hospital that primarily treats patients with cancer but is affiliated with a larger hospital. This location can be in a separate building on a hospital campus or only a few floors within the main hospital.
- **Freestanding Children's Hospital:** A standalone hospital dedicated to providing services primarily to pediatric patients (at least 120 pediatric beds).
- **Children's Hospital Affiliate:** A hospital dedicated to providing services primarily to pediatric patients but is affiliated with a larger hospital. This location can be in a separate building on a hospital campus or only a few floors within the main hospital.
- **Freestanding Children's Cancer Center:** A standalone hospital dedicated to providing services primarily to pediatric cancer patients (at least 120 pediatric beds).
- **Women's Hospital:** A hospital that primarily provides women's health services, including maternal fetal medicine. This location is usually affiliated with a larger hospital and can be in a separate building on the hospital campus or only a few floors within the main hospital.
- **Cardiovascular Center:** A surgery center that is dedicated to cardiovascular care. This location is usually affiliated with a larger hospital and can be in a separate building on the hospital campus or only a few floors within the main hospital.

\*

Select your answer



96. Facility #1 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



97. Facility #1 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

98. Do you have another site to add? \*

Yes

No

## Facility 2 - Adding Sites

99. Facility Name #2 - Adding Site \*

Enter your answer

100. Facility NPI #2 Adding Site (if known)

Enter your answer

101. Type of Facility #2 - Adding Site

- **Hospital (multispecialty):** Healthcare facility offering services for a variety of medical services and specialties
- **Freestanding ASC:** A standalone Ambulatory Surgery Center that would require transport to the hospital via ambulance if postoperative admission is needed. This location can be affiliated with a specific hospital, or it could be part of a larger health system with no specific hospital affiliation.
- **Attached ASC:** Ambulatory Surgery Center that is physically connected to a hospital. If a patient requires postoperative admission, transport to the hospital can be via stretcher or wheelchair, no ambulance transfer required.
- **Freestanding Cancer Center:** An independent hospital that primarily treats patients with cancer.
- **Cancer Center Affiliate:** A surgery center or hospital that primarily treats patients with cancer but is affiliated with a larger hospital. This location can be in a separate building on a hospital campus or only a few floors within the main hospital.
- **Freestanding Children's Hospital:** A standalone hospital dedicated to providing services primarily to pediatric patients (at least 120 pediatric beds).
- **Children's Hospital Affiliate:** A hospital dedicated to providing services primarily to pediatric patients but is affiliated with a larger hospital. This location can be in a separate building on a hospital campus or only a few floors within the main hospital.
- **Freestanding Children's Cancer Center:** A standalone hospital dedicated to providing services primarily to pediatric cancer patients (at least 120 pediatric beds).
- **Women's Hospital:** A hospital that primarily provides women's health services, including maternal fetal medicine. This location is usually affiliated with a larger hospital and can be in a separate building on the hospital campus or only a few floors within the main hospital.
- **Cardiovascular Center:** A surgery center that is dedicated to cardiovascular care. This location is usually affiliated with a larger hospital and can be in a separate building on the hospital campus or only a few floors within the main hospital.

\*

Select your answer



102. Facility #2 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



103. Facility #2 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

104. Do you have another site to add? \*

Yes

No

## Facility 3 - Adding Site

105. Facility Name #3 - Adding Site \*

Enter your answer

106. Facility NPI #3 Adding Site (if known)

Enter your answer

107. Type of Facility #3 - Adding Site \*

Select your answer



108. Facility #3 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



109. Facility #3 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

110. Do you have another site to add? \*

Yes

No

## Facility 4 - Adding Site

111. Facility Name #4 - Adding Site \*

Enter your answer

112. Facility NPI #4 Adding Site (if known)

Enter your answer

113. Type of Facility #4 - Adding Site \*

Select your answer



114. Facility #4 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



115. Facility #4 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

116. Do you have another site to add? \*

Yes

No

## Facility 6 - Adding Site

123. Facility Name #6 - Adding Site \*

Enter your answer

124. Facility NPI #6 Adding Site (if known)

Enter your answer

125. Type of Facility #6 - Adding Site \*

Select your answer



126. Facility #6 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



127. Facility #6 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

128. Do you have another site to add? \*

Yes

No

## Facility 7 - Adding Site

129. Facility Name #7 - Adding Site \*

Enter your answer

130. Facility NPI #7 Adding Site (if known)

Enter your answer

131. Type of Facility #7 - Adding Site \*

Select your answer



132. Facility #7 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



133. Facility #7 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

134. Do you have another site to add? \*

Yes

No

## Facility 8 - Adding Site

135. Facility Name #8 - Adding Site \*

Enter your answer

136. Facility NPI #8 Adding Site (if known)

Enter your answer

137. Type of Facility #8 - Adding Site \*

Select your answer



138. Facility #8 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



139. Facility #8 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

140. Do you have another site to add? \*

Yes

No

## Facility 9 - Adding Site

141. Facility Name #9 - Adding Site \*

Enter your answer

142. Facility NPI #9 Adding Site (if known)

Enter your answer

143. Type of Facility #9 - Adding Site \*

Select your answer



144. Facility #9 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



145. Facility #9 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

146. Do you have another site to add? \*

Yes

No

## Facility 10 - Adding Site

147. Facility Name #10 - Adding Site \*

Enter your answer

148. Facility NPI #10 Adding Site (if known)

Enter your answer

149. Type of Facility #10 - Adding Site \*

Select your answer



150. Facility #10 Adding Site - electronic health record in use for anesthesia documentation \*

Select your answer



151. Facility #10 Adding Site - Is this facility covered under the same Legal Entity as the current BAA, DUA, IRB and MPOG Service Agreement? \*

Yes

No

## Staffing Model Information

152. Does the facility contract anesthesia services from a private practice or external entity? \*

Select your answer



153. Name of Anesthesiology Practice Group #1: \*

Enter your answer

154. What roles does this group support? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

155. Does this practice group staff all sites? \*

Yes, all sites

No

156. Please specify which site/s this practice group applies to: \*

Enter your answer

157. Do you have an additional Anesthesia Practice Group to add? \*

Yes

No

158. Name of Anesthesiology Practice Group #2 (if applicable): \*

Enter your answer

159. What roles does this group support? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

160. Please specify which site/s this practice group applies to (#2): \*

Enter your answer

161. Do you have an additional Anesthesia Practice Group to add? \*

Yes

No

162. Name of Anesthesiology Practice Group #3 (if applicable): \*

Enter your answer

163. What roles does this group support? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

164. Please specify which site/s this practice group applies to (#3): \*

Enter your answer

165. Practice-related Comments:

Enter your answer

## Technical Details

166. Is your facility or facilities all on the same electronic health record instance? \*

EHR Instance: A unique installation of your EHR software. For example, a health system may have a single instance of Epic across all hospitals in the system or multiple instances of Epic if the health system acquired hospitals over time and has not yet converted all hospital to the same EHR instance.

Select your answer



167. Is the inpatient (floor, ICU, preop, PACU) electronic health record documentation system the same as the anesthesia electronic health record? \*

Select your answer



168. Inpatient Electronic Health Record \*

Select your answer



169. Are anesthesia professional fee services provided by the hospital? \*

Select your answer



170. Are the anesthesia professional fees stored in the EHR to support billing for any of these provider types? Check all that apply. \*

Anesthesiologists

CRNAs

AAs

No

Unknown

171. Are anesthesia professional fee billing services supported by an external practice or billing vendor? \*

Select your answer



172. Name of anesthesia billing vendor/practice #1 \*

Enter your answer

173. Which roles does this group support for billing services? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

174. Does this billing vendor support all sites? \*

Yes

No

175. Please specify which sites this billing vendor supports: \*

Enter your answer

176. Do you have an additional anesthesia billing vendor/practice? \*

Yes

No

177. Name of anesthesia billing vendor/practice #2 (if applicable) \*

Enter your answer

178. Which roles does this group support for billing services? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

179. Please specify which sites this billing vendor supports (#2 - Adding Sites): \*

Enter your answer

180. Do you have an additional anesthesia billing vendor/practice? \*

Yes

No

181. Name of anesthesia billing vendor/practice #3 (if applicable) \*

Enter your answer

182. Which roles does this group support for billing services? Select all that apply. \*

Anesthesiologists

CRNAs

AAs

183. Please specify which sites this billing vendor supports (#3 - Adding Sites): \*

Enter your answer

184. Anesthesia Professional Fee Billing Comments

Enter your answer

Section 36

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## SUBMIT

By clicking the submit button, you attest that you have reviewed all content included in this application and have the authorization to submit this form on behalf of your organization.