



GHA MEDICAL TRAVEL FACILITATOR REQUIRED DOCUMENTS

Required Documents List

The documents and data below (evidence of compliance) should be submitted to GHA for review as part of the certification process. The list of documents and data below (evidence of compliance) should be submitted to GHA 's portal for review as part of the certification process.

Please review the following instructions carefully with respect to uploading and organizing the documentation.

- Please include a Master list with the names of the documents being submitted and related Program Element numbers.
- Required documentation can be included in one document (e.g. as a long pdf) or as separate documents related to each program element. If you choose the second option, please create sub folders for each program element to include the relevant documentation.
- When submitting the documents, please upload to the relevant folder (Element #) and label each with the number and title of the required document. For example: "2. Documentation of roles, responsibilities and accountabilities of company leaders and Staff."
- Additionally, if the document being submitted has multiple pages, with ancillary information not necessarily related to what is required or specified by the program elements, please refer to the specific page and section that the reviewer should examine (eg.. See page 3, paragraph 4 of X document). Documents without a title or reference will not be reviewed

Element #1. Leadership and Management Roles and Responsibilities

Please submit:

- Documentation of roles, responsibilities and accountabilities of company leaders
- Copy of Organizational structure of the facilitator company.
- Copy of the mission statement of the facilitator company.

Element #2. Facilitator Commitment Statement

Please submit:

- A statement signed by Leadership noting the commitment of the organization and team to Medical Travel Facilitator Certification Elements and to providing a highquality medical travel client experience.
- A sample email or screenshot of an email or other communication of the commitment statement sent to staff.

Element #3. Client Services

Please submit:

- A description of your business model.
- A description of the services provided directly or indirectly to clients at each phase of the medical travel care continuum (as per the facilitator's business model).
- Aggregate data from the last 25 clients on their satisfaction/opinion on how well the services met their needs.

Element #4. Strategic Planning – Goals, Objectives, and Targets

Please submit:

- Copy of the company strategic plan or other document that identifies the goals, objectives, and targets to be achieved and in what timeframe.
- A description of the measures to be used to measure success and data collected during the previous 6 months (if data is not available during the first certification, it can be provided during re-certification).

Element #5. Oversight of Outside Contracts and Agreements

Please submit:

- Copy of the list of all outside contractors and vendors.
- Copy of the document or policy that describes how outside contractors and vendors are selected (criteria for selection) and monitored.
- A Standard Operating Procedure or process describing how healthcare providers are selected for inclusion in the facilitator's provider network.
- Sample of signed healthcare provider agreement template or de-identified agreement.

Element #6. Sustainability and Quality Improvement

Please submit:

- Copy of the facilitator company's quality improvement plan, having at least one client satisfaction measure (e.g., satisfaction with hospitality arrangements) and one internal work process measure (e.g., time to respond to inquiries).
- Copy of the client satisfaction survey and aggregate data for the past 6 months.
- List of the key indicators used to monitor continued compliance with the elements of the Facilitator Certification.

Element #7. Risk Management

Please submit:

- A copy of the medical travel facilitator company risk management plan including business and client risks and risk mitigation strategies.
- A copy of the register of risk occurrences during the previous 6 months, mitigation strategies employed and analysis of the results.
- A list of all the processes for which a Standards Operating Protocol or Procedure (SOP) has been developed and a sample of a SOP.
- Sample patient contract where legal liability is addressed.

Element #8. Business Ethics

Please submit:

- Copy of the ethics policy/code of conduct of the facilitator company.
- A document clearly stating the scope of services offered and that you do not provide medical advice (unless qualified to do so).
- Policy that describes the process to resolve disputes and disagreements.

Element #9. Cultural Competency and Language Assistance

Please submit:

- Examples initiatives implemented by the medical travel facilitator to ensure that staff and client services are culturally appropriate and meet the language needs of clients. Examples might include a website with information available in multiple languages; referring clients to healthcare providers that offer culturally appropriate menu items; and providing staff orientation on the culture and/or religious backgrounds of your target clients.
- Examples of forms, email templates and website information with language options relevant to the target patient populations.
- Copy of the client satisfaction questionnaire.
- Aggregate data from the client satisfaction or opinion surveys related to their satisfaction or opinion on how well the facilitator company staff and destination health care services met their expectations and needs related to cultural appropriateness and language needs.

Element #10. Staffing, Staff Training and Competency

Please submit:

- Employee handbook or employee Standard Operating Procedures.
- Examples of at least two job description (e.g., case manager or travel coordinator)
- A policy or standard operating procedure on how new staff orientation and ongoing staff training are provided.
- A copy of the policy or procedure for the competency review of facilitation staff.
- A description of how the facilitator company collects health system and health care treatment knowledge and how this information is communicated to staff.

Element #11. Financial Transparency

Please submit:

- A description of the payment process for clients who are engaging with the facilitator company including how the facilitator company is renumerated for its services. E.g., Are clients charged a flat fee? Are commissions being charged to a hospital?
- A copy of any financial contracts between the facilitator and the client.
- A copy of the policies and procedures followed by the facilitator company to ensure financial transparency
- Aggregate data from 25 previous clients on their satisfaction with payment arrangements and any payment processes that could be improved. If this data is not available during the first certification review, an example of a client satisfaction form with a related question or questions will suffice.

Element #12. Marketing Transparency

Please submit:

- A copy of any policy or position statement regarding the accuracy and transparency of marketing communications.
- Examples of types of marketing communications with prospective clients.

Two examples of marketing information available on the facilitator company website. A pdf, screenshot or links can be provided.

Element #13. Client Communication and Education

Please submit:

- Any procedures or protocols for how inquiries and other client communications are managed.
- Sample care plan and travel itinerary sent to patients.
- One sample of an email or education materials provided patients prior to travel regarding the healthcare provider and physicians.
- One sample of an email or education materials provided patients prior to travel regarding the support services provided by your company.
- One sample of an email or education materials provided patients prior to travel regarding the Destination, recommended hotels.

Element #14. Safeguarding Clients' Protected Personal Information

Please submit:

- Copy of the policy or procedures used to protect client information.
- Description of the company technology and safeguards in the transfer of client health information between the company and destination providers. Examples might include the use of a secure web portal, secure email platforms or communications to clients advising regarding the use of safe methods of information transfer.

Element #15. Documentation Management

Please submit:

- A copy of the policy or procedures for the control of documents and client documentation.
- A copy of any minutes of management meetings in which documentation issues are discussed.

See Example Below:

Document Name:	Purpose
For Example:	
Strategic Planning – Goals, Objectives, and Targets	Logs goals, objectives, and targets to support business operations and client services.
Staffing, Staff Training and Competency	Logs of all training of staff to ensure all employees /contractors are trained properly, new/ furloughed employees are trained quickly, and the company has appropriate documentation available if there is a question on employee training.

Scoring Methodology & Decision Rules

GHA Medical Travel Facilitator Certification Scoring Methodology uses a consistent approach to measurement based on compliance with the 15 elements in this handbook and submission of the required number of documents for each of the elements.

There are 15 elements and 49 required documents within these elements. (Note: it is acceptable that some documents may cover additional document requirements and therefore less documents may be submitted). It is important to distinguish between the scoring at the element level (which determines the final score) and scoring at the **document level** (to produce the element score).

Scoring Elements and Documents

Each element can receive one of the following scores:

• Full Compliance: 6.67

• Partial Compliance: Between 3.33 and 6.66

• Non-Compliance: less than 3.33

Each of the 15 elements is worth 6.67 points (100 divided by 15).

To determine the score for each element, we first divide 6.67 by the number of required documents in a particular element (keep in mind that the number of required documents may vary by element).

This gives us the value/score of each required document in a particular element. Required documents can receive a rating of:

- Fully Compliant (full score)
- Partially Compliant (50% or more of the full document score, but not a full score)
- Non-Compliant (less than 50% of the full document score).

The following examples should assist to better understand the scoring methodology:

Element #5 has three required documents.

Therefore, each document is worth 2.22 (6.67 \div 3). If all three documents are submitted and rated fully compliant, element #3 would be scored as 6.67 (Fully compliant). (Note if one document covers the required three documents, full credit would be given).

However, if one of the three documents (Table 1.) was found to be partially compliant (0.93), the element would receive a score of 5.55 (2.22 + 2.22 + 1.11), which is partially compliant (between 3.33 and 6.66).

Table 1.

Program Element #8	Score	Rating
Document 1	2.22	Fully Compliant
Document 2	2.22	Fully Compliant
Document 3	1.11	Partially Compliant
Element level Score	5.55	Partial Compliance

If, on the other hand (Table 2.), one document was rated fully compliant (2.22), and the two remaining documents were rated non-compliant (0.0), the element would receive a score of 2.22 (2.22 + 0.0 + 0.0), which is non-compliant (less than 3.33). To determine a final report score, all 15 elements would be scored in the same manner and the total added up.

Table 2.

Program Element #8	Score	Rating
Document 1	2.22	Fully Compliant
Document 2	0.0	Non-Compliant
Document 3	0.0	Non-Compliant
Element level Score	2.22	Non-Compliance

Certification: is achieved with a score of 75% or greater and no non-compliant elements.

Certification-pending is achieved with a score of 60% - 74%. The organization will have 60 days to resubmit the necessary documentation to achieve a score of 75% or greater.

Certification not achieved: if the score is below 60%. The organization must wait 3 months to re-apply for the Medical Travel Facilitator Certification.