Exhibit A

1. Registry Data Ownership

Each practice entity (hospital, physician group, or physician) owns the data that is submits to the SNIS PSO, and is entitled to specify and control the use of its data in the manner set forth in the contract. Any use of a practice entity’s identifiable patient, hospital, or provider data by the SNIS PSO for purposes other than quality improvement or any of the standard quality assurance functions performed by the SNIS PSO shall require the prior consent of the practice entity, in the manner set forth in the contract. SNIS owns the SNIS PSO and all databases, datasets, and aggregate data contained therein, as well as all reports, analyses, and studies of such data performed by SNIS or the SNIS PSO. The SNIS PSO may use de-identified data for any purposes consistent with the purposes of the PSO.

2. Policies

The following principles guide the function of the SNIS PSO and must be adhered to by all participants.

a. All activities of the SNIS PSO must be consistent with the purpose of the PSO, as stated in its governing documents.

b. Each physician member must submit data for all consecutive procedures in the modules in which they participate that are recorded by the SNIS PSO and must agree to submit office claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.

c. Each member hospital agrees to submit ICD-9 based claims data on a periodic basis to allow an audit to ensure accurate and complete data entry.

d. Each member hospital and physician must submit complete data forms, including all elements of the SNIS PSO registry for all eligible procedures, using a web-based system approved by the SNIS PSO, including follow-up data at one year, or other time points established by the SNIS PSO.

e. Each member hospital and physician agrees that the Patient Safety Work Product including any comparative data can never be disclosed or used for competitive marketing. Hospitals and physicians own their own data, and can download and publish such data and indicate that it was derived from their participation in the SNIS PSO. However, they may not publish Patient Safety Work Product provided in benchmarking reports that compares their hospital or practice with other groups in the SNIS PSO.

f. Each SNIS PSO hospital and physician member agrees to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPPA), as amended, and the Patient Safety Quality Improvement Act (PSQIA), and all regulations issued thereunder. This includes, but is not limited to, not disclosing any patient, hospital or provider identifiable information.

g. Failure to adhere to these policies may result in loss of membership in the SNIS PSO for a hospital or physician, if so determined by a majority vote of the Governing Council.
3. Non-identifiable Data Release

The SNIS PSO may prepare non-identifiable datasets for research or quality improvement activities as set forth in the Patient Safety Quality Improvement Act. Non-identifiable datasets may be used for research and any other purposes consistent with the purposes of the PSO.