

	Questioner	Insurance Plan	Topic	Question:	Response
*	DOH	NA	Requirements of the law	."	The insurance and public health laws require insurance plans to add a specific organ donor question to enrollment forms, re-enrollment forms and forms completed by insured when establishing access to the insurers portal(s).
**			Wording of the Question	Do we have to ask the question a certain way?	The insurance and health laws require that the following be stated in a clear and conspicuous space and type: "You must fill out the following section: Would you like to be added to the Donate Life Registry? Check the box for 'Yes' or 'Skip this question'."
***			Adding an explanation of the question	Can we add language to the forms that explains what saying yes to the question means?	Yes, the insurer can add language to the forms that explains what saying yes to the organ donor question means, however it is not mandated that insurer do this. It is important to remember that DFS requires the paper and electronic enrollment and re-enrollment forms be exactly the same. If the insurer adds the language to the electronic form, then it must also be added to the paper version of the forms. Also note that any changes to the forms must be approved by DFS prior to using the forms. If adding explanatory language, DOH recommends the following: "By clicking yes, you are: Certifying you are 16 years of age or older; Consenting to donate your organs and tissues for transplantation and research upon your death; Authorizing XYZ Insurer to share your name and identifying information to the NYS Donate Life Registry for enrollment and; Authorizing the Registry to allow access to this information by persons allowed by law and the decision of the Commissioner of Health."
		EmblemHealth			
1			Audit & Liability	Do we need an audit requirement for proving member consent to join the Donate Life Registry, and whether the organization is liable to confirm the member's intent? (portal only, paper submissions will serve valid)	The insurer does not need to confirm the members intent to join the Registry. Once their registration information is received into the Registry they will be sent a notification of enrollment/"welcome letter/email" confirming their enrollment. Insurers must comply with the records retention requirements of 11 NYCRR Part 243.
2			Broker Authorization	Are brokers authorized to complete the Donate Life Registry selection on behalf of members, especially for small group enrollments ?	No, only individual insureds are authorized to give consent for themselves to join the Registry. It is acceptable for data from forms completed and signed by individual insureds to be entered by the insurer's representatives into a database of file used for transfer of that data to the Registry.
3			Paper From Data Handling	Do we need to establish data from paper enrollment forms regarding Donate Life Registry can be sent to the state, and if not, what changes are needed ?	I am not sure what is being asked here. Paper enrollment and re-enrollment forms should be same as electronic forms and both must have the organ donor question prescribed in the law on the forms. There are two ways to transmit paper enrollment info to the Registry. These include: sending a copy of the paper form or the original if it separate from the rest of the form to the Registry or preferably, creating a file with the info of the insured who consented to join the Registry and submitting that via SFTP.
4			Data Storage	Does EH need to store the member's Donate Life selection internally as proof of member consent or if the responsibility lies with the state ?	The insurer does not need to confirm the members intent to join the Registry. Once their registration information is received into the Registry the enrollee will be sent a notification of enrollment/"welcome letter/email" confirming their enrollment. Insurers must comply with the records retention requirements of 11 NYCRR Part 243.
		VSP			

5			Data Use Agreement (DUA)	VSP expects to have a data sharing agreement in place prior to providing reporting information to the Department. Does the Department have a data sharing agreement template that it plans to utilize for carriers like VSP to sign prior to sharing the requested information? If so, could you please provide a copy for VSP to review? Additionally, which entities will be viewing our data? For example, NY Donate Life, INETZ, Sterling and/or other parties involved.	<p>A DUA has been drafted by DOH legal council and reviewed by Donate Life NYS's counsel. We shared the proposed template of the DUA with the insurance plans and DFS the week of 09.15/2025.</p> <p>We request that you share the proposed template of the DUA with your legal council and provide the Department with feedback by October 6, 2025.</p> <p>Our goal is to received signed agreements back from the insurer before each insurer initiates transfer of production data to the Registry with a goal date to receive signed agreements from the insurer by mid-November.</p> <p>As far as who sees your data, this will vary depending on the transfer method utilized. Data of the insurer using an API for data transfer goes directly from the insurer to Registry. Data from the insurer using SFTP for transmission of data is sent in an encrypted format to the NYS ITS Sterling servers to a "mailbox" just for each insurer. Sterling staff will move the file from your designated box to a location from which Inetz can pick it up and process it into the Registry. Sterling staff does not "access the data". A select number of Inetz staff has access to the data of enrollees when it processed into the Registry and working with the servers where the data is stored.</p> <p>Additional entities that have access to the Registry include a very limited number of DOH, Donate Life NYS (the department's Registry contractor) and staff of organ procurement organizations, eye and tissue banks who are legally responsible to ensure consent to donation is obtained prior to donation.</p>
6			API vs SFTP	By DUA, do you mean a Data Use Agreement, or something else? As an insurance company, it appears that VSP is required to send the application data by API; however, our partner who also processes applications will send the data by SFTP. As we understand the impacts to the two systems, we will advise on what you can expect to receive.	<p>DUA does stand for data use agreement.</p> <p>As far as API vs SFTP, although we originally thought that the portal would require implementation of the API, Inetz was able to come up with a way that SFTP could also be used for portal applications if the insurer want to do it that way.</p> <p>Data from electronic enrollment and renewal forms can be submitted either by SFTP or API. Paper form data would best be captured in a file that could be transferred by SFTP.</p>
7				1. When will the SOURCE CATEGORY and ENTITY NAME values to be provided by the registry technology team?	1. The Source category and Entity Name will be provided by the technology team when the insurer is contacted by the implementation process.
8				2. If a member's address changes or if a member from New York moves to another state (e.g., CA) after completing enrollment, do we need to update or send anything on the file regarding the member no longer residing in NY?	No, the insurer does not need to provide address changes or updated information on registrants who move out of state.
		Excellus/BC/BS			
9			Web forms	We have questions regarding the inclusion of Web registration forms, for which we need your guidance: 1. Please confirm if the mandate requires compliance on Web registration forms by January 1, 2026?	The effective date of all the requirements of the law is 1/1/26.
10			Web forms	2. Is there an anticipated date by which the API service will be in production and ready to use?	<p>If you are asking the same question as above—it is 1/1/26.</p> <p>If you are asking when the API can be pushed to production for the insurer, it depends on where your insurer is on the implementation schedule. This depends on if/when your insurer submitted their intake form.</p>
		HealthFirst			
11				1) Is Healthfirst required to provide an option for members to register for the donate for life registry on our member portal OR can Healthfirst collect all registration requests via the application and renewal application?	The statute requires inclusion of the question about joining the Registry on enrollment and renewal forms as well as on forms used by the insurer that enable the customer to access/establish portal access.
12				2) Is Healthfirst required to manage changes to a member's donate life registration OR are these changes managed on the state's registration portal?	The insurer is not required to manage changes to member's donate life registration. New registrants/enrollees receive a notification of their enrollment via email or US mail after their enrollment is processed. Included in that letter is instructions on how to make changes to their enrollment and to recind their consent to donation in the Registry.
		Independent Health			

13			Target Dates for UAT & Production Files	When should we target the delivery of the first UAT and first production (PROD) files?	To my knowledge this will depend on where you fall in the implementation schedule. Inetx and DLNYS are working with insurer pretty much in the order in which they received insurer intake forms. If you are looking for specific information on when your implementation is scheduled please email: registry_tech_support@dlnys.org .
14			Transaction Date	Can you confirm if the "transaction date" should be sourced from the receive date/time of the inbound file, or if a different value is expected?	Transaction date is the date that the transaction is carried out by the insured member. In other words, the date/time that the member selects to join the registry. If this information is not discernable or available, this can be worked out during the implementation phase of each insurer with Inetx and DLNYS.
15			Member Name Suffix	The schema provided does not explicitly reference a suffix field. Should the suffix (e.g., Jr., Sr., III) be appended to the last name, or will there be a separate field?	The suffix field was originally excluded in error. The specific clarification about the suffix field was added on website September 9th.
16			Member Portal API Requirement	We do have a member portal; however, it is not used for enrollment. Based on the statutory language provided, we believe an API may not be required since enrollment is not performed through our portal. Can you confirm if this interpretation is correct?	The statute did not limit requiring addition of the Registry question just to portals through which enrollments and re-enrollments occurred. If you have a portal and there are "forms" per se that the insured must complete in order to gain access to the portal then the Registry question must be placed on those forms or screens.
		Metro Plus Health			
17			Member portal	The intake form implies insurers must offer the donor registration option not only for new enrollments and renewals, but also for existing members through any portal. We'd like to clarify if this applies to member portals like ours, or only to EHR portals (e.g., EPIC's MyChart) that include lab results, medical records, etc. as originally outlined in the kick-off presentation (screenshot below)? We're not a clinical facility so we don't have an EHR portal. Our portal only shows coverage, benefits, claims, and authorization history, so we're unsure if this falls within scope.	The statute we are currently implementing with the insurers requires the addition of the Registry question to all insurer portals including portals through which enrollments and re-enrollments occur as well as portals where the insured can access the insurer's plan information such as rates. If you have a portal and there are "forms" per se that the insured must complete in order to gain access to the insurer's portal then the Registry question must be placed on those forms or screens. The insurance laws and public health law we are implementing under this initiative does not relate to electronic health records or EHR portals. However, for your information, there is a separate statute that does require that portals through which electronic health records used by hospitals in NYScan be accessed does require the EHR portals to include the ability for EHR portal users to directly enroll in the Registry.
18			Insurer Storage Requirement	Is there a requirement for insurers to store member selection information internally, beyond sending it to the Donate Life registry? Based on the kick-off guidance, my understanding is the API should simply pass demographic information already available in the portal to the Donate Life registry whenever a member selects "Yes." Can we confirm there's no additional requirement to store or report on member selections?	Insurers must comply with the records retention requirements of 11 NYCRR Part 243.
1	Questions raised during calls		Intake application	Do we need to submit whitelist info if using SFTP to submit data?	Yes
2			Publication of Insurance Plan Implementation Info.	Will DOH/Registry the progress insurance plans are making in implementing the law?	No, we don't plan to do this.

3			Information about what insureds are signing up for when answering "yes".	<p>Are we allowed to put information about what the insured is signing up for if/when they say yes the organ donor Registry question?</p> <p>You are allowed to add explanatory language if the insurer decides to do so but it is not mandated by the law. Please keep in mind that DFS requires electronic forms and paper forms to be exactly the same, so if you add it to one you have to add it to the other. Also note that any changes to the forms must be approved by DFS prior to using the forms. If adding explanatory language, DOH recommends the following:</p> <p>"By clicking yes, you are:</p> <p>Certifying you are 16 years of age or older;</p> <p>Consenting to donate your organs and tissues for transplantation and research upon your death;</p> <p>Authorizing XYZ Insurer to share your name and identifying information to the NYS Donate Life Registry for enrollment and;</p> <p>Authorizing the Registry to allow access to this information by persons allowed by law and the decision of the Commissioner of Health."</p>
4			Use of Data	<p>How is Registry data used?</p> <p>Registry data is used to evaluate the percentage of the eligible population is signed up to be an organ donor, differentiate counties with lower enrollment rates than others and target education/promotion to those areas, etc.</p> <p>No reports that identify individual enrollees are available.</p>