

**NYS Department of Health  
Electronic Plan of Correction Information for Provider  
June 2017**

**Electronic Plan of Correction (EPOC) Information for Providers:**

You will receive the Statement of Deficiency (SOD) report within 10 business days via the Health Commerce System (HCS) Electronic Plan of Correction (ePOC) application. SODs are no longer sent via hard copy mail or faxed.

You will have **10 calendar days from receipt of the SOD** to submit the ePOC.

**HCS Roles for ePOC:**

Administrator, Director of Patient Services, HCS Coordinator, ePOC Editor, Governing Body Chair or Member, and Operator roles can read the SOD and the corresponding POC for their agency.

Administrator, Director of Patient Services, HCS Coordinator, and ePOC Editors can write the POC for their agency.

Administrator may submit the ePOC for their agency

**ePOC Resources:**

[http://www.health.ny.gov/professionals/nursing\\_home\\_administrator/docs/epoc\\_fac\\_train.pdf](http://www.health.ny.gov/professionals/nursing_home_administrator/docs/epoc_fac_train.pdf)

[http://www.health.ny.gov/professionals/nursing\\_home\\_administrator/docs/2013-07-26\\_epoc\\_ques.pdf](http://www.health.ny.gov/professionals/nursing_home_administrator/docs/2013-07-26_epoc_ques.pdf)

The ePOC Facility User Manual (in PDF) is available on Health Commerce System:

<https://commerce.health.state.ny.us/hpn/ctrl/docs/epoc/NY%20Facility%20Users%20Manual.pdf>

**To assist you in starting your POC, the plan of correction for each deficiency cited must contain the following elements:**

1. The corrective action(s) that will be accomplished/put into place for those patients found to have been affected by the deficient practice and the time frame for completion;
2. How you will identify other patients having the potential to be affected by the same deficient practice and what corrective action will be taken and the time frame for completion;
3. What measures will be put in place or what systemic changes will be made to ensure the deficient practice does not recur and the time frame for completion;
4. How the corrective actions will be monitored (For example the percentage of record to audit) to ensure the deficient practice will not recur, including the target compliance goals that will indicate effectiveness of the corrective action(s), and what steps will be taken if the target goals are not met; and
5. The target dates for the corrective actions and the title of the person responsible for the correction of each deficiency.