Ontario

Ministry of Health

Claims Services Branch
Provider Registry Unit
PO Box 68
Kingston ON K7L 5K1

Vendor Application for Conformance Testing
Acceptable Use Policy

Software used to access the Ministry of Health (the ministry) service(s) must pass a conformance test. The ministry's Conformance Testing Service (CT Service) will confirm your software meets the ministry's specifications and will protect the ministry's production environment from external influences.

NOTE: The ministry will not be responsible for the validity, completeness, accuracy or functionality of your software, its features or functions.

Conformance Testing Acceptable Use Policy

Please read and accept the following Acceptable Use Policy:

1. I, the applicant, shall only use my own credentials to access the CT Service.

2. I shall safeguard and not disclose my access credentials to anyone, including users within my organization and other users of the CT Service.

3. I shall access the ministry's CT Service only for the purposes of conformance testing.

4. I shall ensure that files submitted through the CT Service conform to the applicable ministry technical specification(s).

5. I have implemented industry standard security measures for my network infrastructure and software to ensure that government services are not exposed to misuse, malicious attacks or viruses via my connection.

6. I shall not allow others to use the CT Service while I am connected to the CT Service.

7. In the event that I suspect that the security of my credentials has been compromised, I will contact the ministry immediately.

8. I acknowledge that all my conformance testing activity, including access to and use of the CT Service, will be logged and audited by the ministry.

9. I acknowledge that all failed attempts to connect to the CT Service will be logged by the ministry.

10. I understand that I shall work within the defined time allocated to me for conformance testing and if testing is not successful I can reapply for further testing.

11. I understand that upon completion of the conformance testing my credentials will be revoked and any attempt to access the CT Service will constitute a violation of this Acceptable Use Policy.

12. I understand that the ministry may, in its sole discretion, revoke and/or suspend my access to the CT Service at any time if I breach this Acceptable Use Policy or where necessary for the security of the CT Service.

13. I shall cooperate with the ministry if asked to assist in any investigation of any suspected breach of this Acceptable Use Policy.

14. The ministry may revise this Acceptable Use Policy from time to time in its sole discretion.

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Section 1 - Ministry Services

Check the applicable box(es) for the software which you are requesting to be tested:

- ☐ **Health Card Validation (HCV) Web Service**
- ☐ **Medical Claims Electronic Data Transfer (MC EDT) Web Service**

Section 2 - Applicant Information

Name of Organization / Company

Software Name	Version to be Tested

If any changes are made to the version of your software listed above, you must complete and submit another form to request conformance testing on the revised software. For further information on conformance testing, refer to the ministry's website at: http://www.health.gov.on.ca/english/providers/pub/pub_menus/pub_ohip.html

Please ensure your email address is provided below. Upon successful conformance testing, the ministry will email you a letter which will include the production conformance key(s) for the requested service(s).

Business Contact

First Name		Last Name	
Telephone Number	**ext.**	**Email**	**Fax Number**

Address

Unit No.	Street Number	Street Name	PO Box

City/Town	Province	Postal Code

By signing below, I acknowledge that I have read this Acceptable Use Policy and agree to comply with this policy and to only use the ministry's Conformance Testing Service in accordance with this policy.

Applicant's Signature	Date (yyyy/mm/dd)

Return the completed signed form to the Service Support Contact Centre at:

SSContactCentre.MOH@ontario.ca

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