

IQVIA Third Party Program Vendor Operational Guide

The **Third Party Program** is specifically for IQVIA licensed syndicated data and custom studies originating from IQVIA claims, prescription, direct response, and reference information offerings. **It does not permit access to IQVIA Technology platforms.**

IQVIA THIRD PARTY ACCESS PROGRAM

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BACKGROUND

When a client wishes to share IQVIA licensed data assets with a third party service provider (“vendor”) they are required to ensure a third party limited license agreement is in place between Our Company and the vendor prior to being permitted to share the data offering(s) they license.

To initiate the process to put a third party limited license agreement in place, the client submits a third party access request that identifies the vendor they wish to work with, what they wish the vendor to do for them (called a “Use” within the third party program), and the licensed offerings they wish to share.

In order to complete the request for IQVIA review and processing, the vendor will be asked to provide additional information relevant to the request. The intent of this document is to provide Vendors guidance on how to complete a third party access request and on their role in the signature process.

The **Third Party Program** is specifically for IQVIA licensed syndicated data and custom studies originating from IQVIA claims, prescription, direct response, and reference information offerings. It does not permit access to IQVIA Technology platforms.

IQVIA Third Party Access Program steps...

1. Client initiates the request in the IQVIA Third Party Access Portal
2. Vendor will receive a link by way of email to complete the remaining questions of the request such as where the data will be stored and where, if prescriber information will be shared what elements will be provided, etc.
3. Once the Vendor completes/submits the request it then comes back to IQVIA for review, approval and release of the Third Party Limited License Agreement and AMA Agreement (if applicable) to be signed by the Vendor Authorized signer
4. Once the signed agreements are returned to IQVIA we will send a Data Release Notification to both Client and Vendor saying that it is now permissible to share the data based on the signed agreement(s).

COMPLETING THIRD PARTY ACCESS REQUESTS

As part of the Third Party Access request process, Third Party Vendors identified by IQVIA clients are responsible for providing information in order to receive a limited-use license also known as a Third Party Agreement for the sole purpose of meeting the client's defined project.

An email notification will be sent to the person who was specified by the client as the vendor contact. The subject will be '**New Client Request for Utilization of IQVIA Licensed Offerings**'. Use the hyperlink in this email to access the request. You are expected to supply the following information:

- Vendor Information
- Vendor Contact/Authorized Signer Information
- Additional Vendor Information, if applicable
- Prescriber Level Data, if applicable / Delivery Details
- Finalize

Instructions for completing these sections are given below. The only exception is for Prescriber Level Data. Please refer to **Appendix A: United States Prescriber Level Data** for more information on this section.



The entries in the entire request will only be "saved" upon confirming the submission

NAVIGATION

There are two buttons that allow you to navigate through each section of a request:

Previous

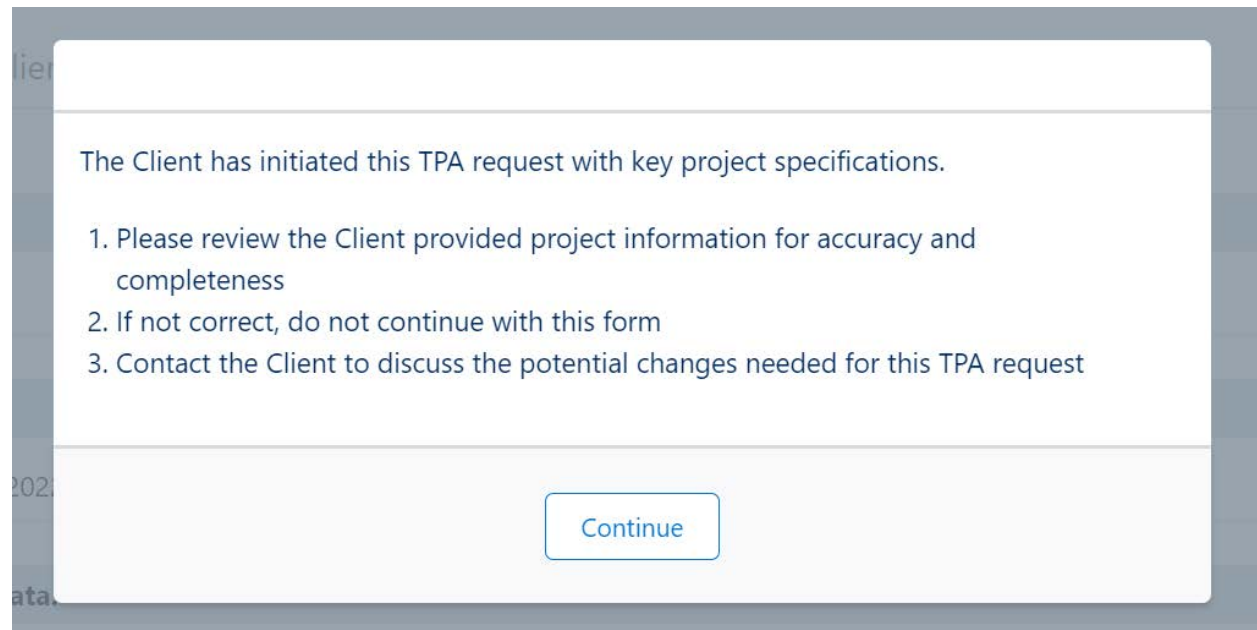
Next

Return to the previous
request section

Proceed to the next section
of the request

MULTILANGUAGE SUPPORT: When you first enter the Third Party Access portal, you may be able to select the language in which you want to complete the request. English and Japanese are currently available, with more languages to be supported over time.

Upon clicking the TPA link received via email, you will be given opportunities to review IQVIA Privacy Policy, Vendor Message Board, and expectations as noted below before continuing on to complete your portion of the TPA request form...



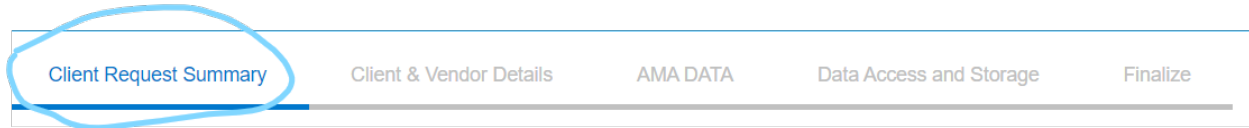
The Client has initiated this TPA request with key project specifications.

1. Please review the Client provided project information for accuracy and completeness
2. If not correct, do not continue with this form
3. Contact the Client to discuss the potential changes needed for this TPA request

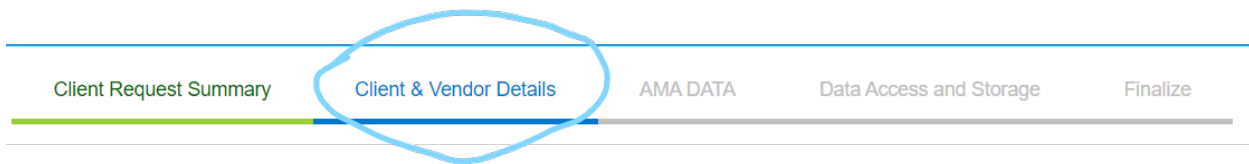
Continue


VENDOR COMPANY

Client Request Summary: This section summarizes the client entries regarding the project. If you note any inaccuracies, please contact the client so they can be corrected prior to you completing the request.



Search Vendor Accounts: Select the search vendor account button, enter the legal name of your company, and select the country in which your company is located from the drop down menu.





IMPORTANT!

- Use the valid legal entity name of your company
- Use valid, accurate official office location
- Check spelling for correctness
- Do not use abbreviations

Click to Select **Company Branded Name**

Select Company Branded Name

Click to search for your Company Branded Name and Country

Select Company Branded Name and Country

Please enter the Company Branded Name:

Choose the Contracting Country for the Third Party Agreement:

Search

If not listed, scroll to the bottom of the list and select 'Not Listed/New Vendor'

<input type="radio"/>	Test_AMA Z3	USA
-----------------------	-------------	-----

Cancel/Return

Not Listed/New Vendor

Continue

Now Select your Legal Entity Company Name

Click the **Show Vendor Accounts** button; when results appear, select the radio button that corresponds to your company/location, and then click **Continue**. The vendor name and address fields will autofill.

This section of the request is asking for general information including:

- Legal entity name of your company
- Legal entity address
- Company website

Select Legal Entity

Select One	Legal Entity Name
<input type="radio"/>	Test_TPA Vendor Account

Cancel/Return

Not Listed/New Vendor

Continue

If your company is **not** listed, select the **Not Listed/New Vendor** button, which will take you to the vendor information section.



Avoid Delays! Provide consistent, accurate name and address information!

VENDOR CONTACT INFORMATION/AUTHORIZED SIGNER INFORMATION

The vendor contact is the point of contact between the vendor, the client and Our Company as it pertains to a specific third party request. The authorized signer should be an individual within the vendor organization who has signature authority for the vendor legal entity. The vendor contact and authorized signer can be the same individual if that individual is the client point of contact on the project and has signature authority for the vendor. Information for both parties will need to be provided in this section including:

- Full name
- Company title
- Company email address



You should use your company's email address when completing these forms. Email addresses assigned to you by the client should *not* be used.

VENDOR COMPLIANCE CONTACT INFORMATION

Vendor TPA Compliance Contact Information

Please provide the name and contact information of the Vendor employee most directly responsible for contract compliance and Vendor compliance with this TPA Agreement. It should generally not be the same person as the Authorized Signer.

* First Name	<input type="text"/>	* Last Name	<input type="text"/>
* Job Title	<input type="text"/>	* Email	<input type="text"/>
* Street Address(no P.O. Box)	<input type="text"/>	* City	<input type="text"/>
* Country	<input type="text"/>	* State (country equivalent if not USA)	<input type="text"/>
* Zip Code (country equivalent if not USA)	<input type="text"/>		



The vendor contact may be contacted by Our Company to confirm the vendor address and/or to clarify address information in the event discrepancies are encountered with prior addresses on file.

ADDITIONAL VENDOR INFORMATION

This section needs to be completed if you will be working with or sharing data with additional vendors who are not part of your legal entity (e.g., sub-contractors).

If this is the case, answer **Yes** to the question **Will the primary vendor be working with or sharing data with any additional third parties?** Otherwise, select **No**

The client has indicated no additional vendors will be utilized. Please contact the client to ensure you have written confirmation from the client to share IQVIA Data. Please also confirm that individual third party agreements are in place for the entities you intend to share data with, for the length of time in which the data sharing is expected to occur.

OK

Additional Vendors (Vendor Response)

As the primary vendor identified by the client, do you intend to share the IQVIA licensed data assets with any additional vendors?

☐ Yes
☒ No



ACTION REQUIRED: If you will be working with other vendors

Notify your client of *all* vendors you will be working with!
The client *must* submit a separate Third Party Access Request for each vendor.

SERVICES RELATED TO IQVIA OFFERINGS

Appropriately select Yes or No in response to the question posed.

Services Related To IQVIA Offerings

Does the Vendor have (please check all that apply):

A product or service that competes with the IQVIA Data that is the subject of this TPA request (i.e., a product or service that the Vendor markets, promotes or makes available to address the same customer needs as the IQVIA Data)?

☒ Yes
☐ No

A competitive product or service as described above but is still being designed, developed or prepared for commercial release?

☐ Yes
☒ No

A product or service that contains similar data elements as the IQVIA Data that is the subject of this TPA request?

☐ Yes
☒ No

ADDITIONAL VENDOR CONTACTS

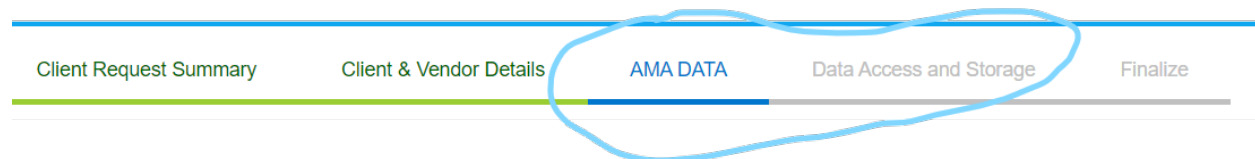
This feature provides the vendor requestor the ability to include additional vendor contacts on subsequent email notifications from the system.

If your company requires central notification, that centralized contact information should be added in this section for all third party requests being completed by your company.

Please keep in mind: All persons you include as additional vendor contacts will receive every electronic vendor communication related to this request.

AMA DATA / DATA ACCESS AND STORAGE

This section only applies if United States prescriber level details are included within the TPA request. **Please see Appendix A** for instructions related to these tabs.



FINALIZE

A summary of selections from previous sections will be provided in the Finalize submission area. If any of this information is incorrect, use **Previous** to revisit previous sections and make your corrections. When all the updates are complete, use **Next** to return to the Finalize section. Please be aware that the data you enter cannot be changed once the request is submitted. If changes are necessary before the TPA request is finalized, please notify your Client Contact.

ACKNOWLEDGE

- I acknowledge that the above information is correct and consent to share this information with others within IQVIA to use and process for IQVIA's internal business operations.
- A fully executed Third Party Access Limited License Agreement resulting from this request will permit you to access only the IQVIA Data identified in this access request. It will not permit you to access or share any other IQVIA materials, software or technology. Access to some IQVIA data assets may require additional licenses / fees.

Acknowledgement

☒ I acknowledge that the above information is correct and consent to share this information with others within IQVIA to use and process for IQVIA's internal business operations.

☒ A fully executed Third Party Access Limited License Agreement resulting from this request will permit you to access only the IQVIA Data identified in this access request. It will not permit you to access or share any other IQVIA materials, software or technology. Access to some IQVIA data assets may require additional licenses / fees.

Once all the acknowledgments have been selected, the **Submit Request** button will appear. Your entries will *not* be saved until the request is submitted.

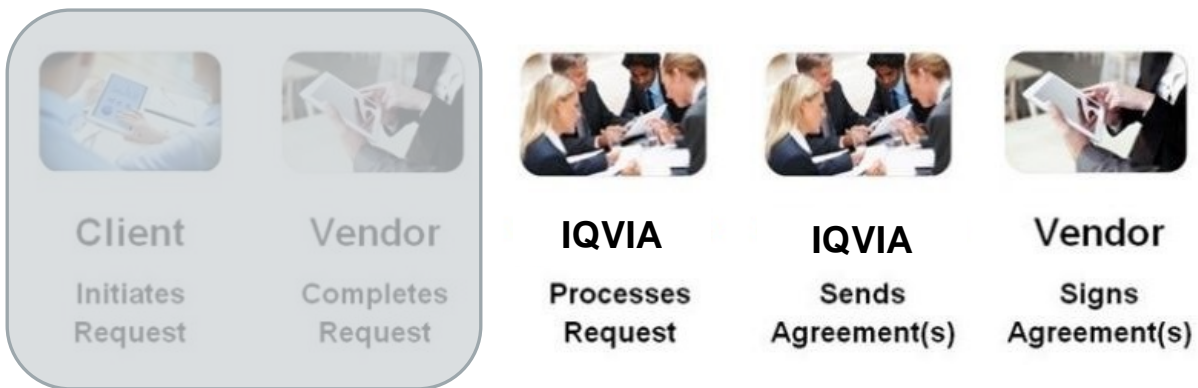


It may take up to 30 seconds for the request to submit.
Please take your hand off the mouse during this time to ensure the process completes successfully.

Once the submission is complete, a screen thanking you for your submission will appear.

UNDERSTANDING THIRD PARTY ACCESS REQUEST PROCESSING

Once you submit the Third Party Access Request, it will be reviewed by Our Company. If approved, a request for signature notification will be sent to the authorized signer's email address specified on the request. The request for signature email will provide access to the formal Third Party Agreement document and provide the ability to electronically sign and return it. This is the preferred and fastest method. If necessary, it also provides the ability to print the Third Party Agreement document and to provide a hand-written signature.



SIGNING THIRD PARTY AGREEMENTS

To finalize the Third Party Agreement, the last step is to complete the electronic signature process. Our Company utilizes the services of DocuSign, a global leader in electronic signature management (www.docusign.com) to manage this process. More information and training related to DocuSign functionality can be found on their web site at <https://www.docusign.com/support/classic>. To find out about the legality of digital signatures in any country, visit <https://www.docusign.com/how-it-works/legality/global>.

DOCUSIGN

DocuSign provides electronic signature technology and digital transaction management services for facilitating electronic exchanges of contracts and signed documents. DocuSign manages the Third Party Agreement signature process as outlined below:

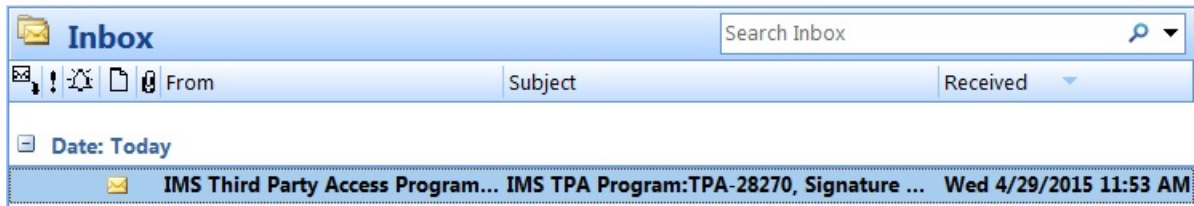
1. Attaches the agreements within a DocuSign Envelope and sends an email that references the envelope to the designated authorized signer
2. The recipient has the ability to sign the agreement electronically, transfer signature authority or sign a hard copy
3. A digital copy of the completed agreement is forwarded electronically to the appropriate parties

DOCUSIGN EMAIL NOTIFICATIONS

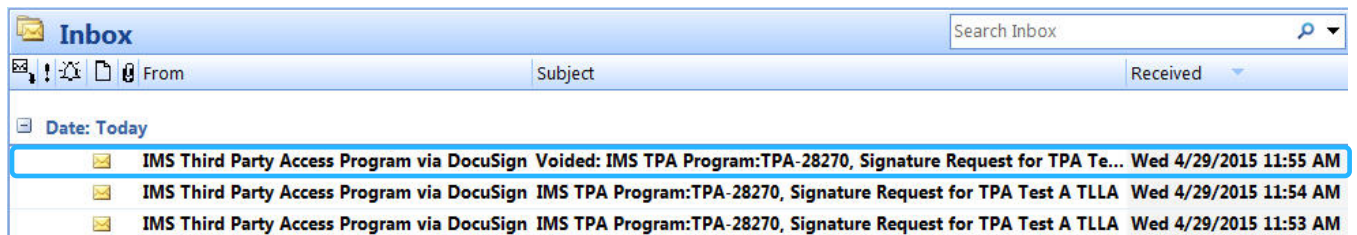


In order to receive all emails from DocuSign, please ensure **@docusign.net** is permitted via your company's firewall for each individual email account

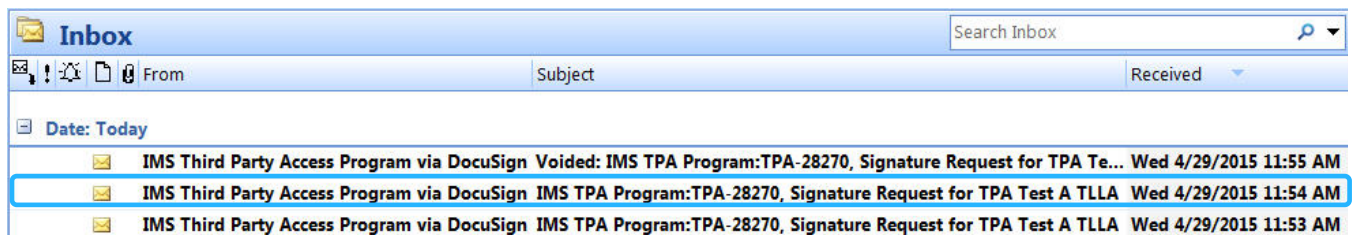
The initial agreement will be sent from DocuSign. This request is asking you to review and sign the agreement. Let's look at an authorized signer's inbox with an email notification related to the initial DocuSign envelope:



In the event the original request has been edited, an updated DocuSign envelope is created and an email notification is sent. The previous envelope is automatically voided. The email that was previously sent that references the voided DocuSign envelope *still remains* in the in-box and cannot be recalled. Once the DocuSign envelope is *voided* it can *no longer* be viewed or signed in DocuSign. Let's look at an authorized signer's inbox with email notifications relating to a voided DocuSign envelope:



Which email references the active DocuSign envelope? The answer is ALWAYS the email *received immediately before* the last Voided email:



If an attempt is made to view documents in a voided envelope, a notification similar to the one shown below will be received:

Envelope Unavailable

The envelope you are attempting to access has been voided

ELECTRONICALLY SIGN THIRD PARTY AGREEMENTS



The Authorized Signer Should Sign As Soon As Possible!

1. Select **View Documents** in the email received from DocuSign
2. If **you** are duly authorized by your company and have legal capacity to execute and deliver the Contract Document(s), proceed with the signing process: Click to check
I agree to use Electronic Records and Signatures
3. Select **Continue**
4. The contract appears
 - a. If you would like to print a hard copy, please refer to the Pen-and-Paper Signatures section
5. Review the entire contract
6. Select **Sign**
7. Enter signature
 - a. Using a computer generated signature OR
 - b. Drawing your own signature
8. **Adopt** the signature
 Please be aware that if there is more than one signature block, you will need to use the Next button to sign each one individually.
9. **Finish** the process

TRANSFER SIGNATURE AUTHORITY

If you are *not* the authorized signer and need to transfer signature authority:

1. Select **View Documents** in the email received from DocuSign
2. Select **Other Actions** to access more options
3. Select **Assign to Someone Else**
4. A new window will open. Provide the new signer's name, job title and email address. Optionally, you can also provide the reason you are transferring authority.
5. Select **Assign to Someone Else**
6. Email notifications will be sent to:
 - a. The person to whom you assigned this envelope
 - b. The original sender
 - c. You as a Carbon Copy (CC) recipient

PEN-AND-PAPER SIGNATURES



If your country does NOT allow electronic signatures, you **MUST** use this option

1. Select **View Documents** in the email received from DocuSign
2. Select **Other Actions** to access more options
3. Select **Print & Sign**
4. Download the contract
5. Print, review and sign the hard copy
6. **Scan** the signed copy
7. Select the **Return Document** button
8. Select the **Upload a File** button; select the scanned copy of the signed agreement from your files
9. Select **Finish; Exit** out of DocuSign login window
10. Select **Continue** at bottom right of your screen to complete the process

DATA DESTRUCTION / DATA HANDLING

There is one other responsibility for the Vendor once the agreement end date for the project is reached. If the Client has not renewed the Third Party Agreement request prior to the expiration date, the Vendor will receive email notifications generated by the TPA Portal requesting confirmation that the data covered by the request has been destroyed or returned to the Client.

According to the terms of the IQVIA Third Party Limited License Agreement between IQVIA and Vendor, at expiry, all IQVIA Intellectual Property must be: 1) returned, or 2) destroyed, or 3) Access to client-managed licensed offerings has been revoked, or 4) Vendor Never Received IQVIA Data, or 5) Modified New TPA: Executed New (Modified) TPA with Client Company

ACTION STEPS:

The email subject headers will contain the terms 'Expiration Notice For Client Request' and reminder notices with 'Data Destruction / Data Handling'. In the email, you will see text for action as shown below.

To confirm that the IQVIA Intellectual Property has been

Returned: All IQVIA data in Vendor's possession or control has been returned to Client
Destroyed: All IQVIA data in Vendor's possession or control has been destroyed.
Access Revoked: Access to IQVIA Data through Client Environment has been revoked.
Vendor Never Received Access
Modified New TPA: Executed New (Modified) TPA

1. Select the link within the email notification. The resulting screen summarizes the request details.
2. At the bottom of the screen, enter the requested contact information

Vendor Return or Destroy Confirmation

Action Required: Entering your name, email address and title to acknowledge you are authorized to confirm compliance with the items and conditions agreed to in the Third Party Access Limited Agreement.

Vendor Name


* Vendor Return or Destroy Confirmation - First Name

* Vendor Return or Destroy Confirmation - Last Name

* Vendor Return or Destroy Confirmation - Title

* Vendor Return or Destroy Confirmation - Email

3. In the Action Taken field, select appropriate action taken.

* Action Taken 

--None--

Returned: All IQVIA data in Vendor's possession or control has been returned to Client
 Destroyed: All IQVIA data in Vendor's possession or control has been destroyed.
 Access Revoked: Access to IQVIA Data through Client Environment has been revoked.
 Vendor Never Received Access
 Modified New TPA: Executed New (Modified) TPA

4. Acknowledgements.

☐ In my above role with Vendor, I am able and authorized to make this certification on its behalf.

☐ Excluding Retained Data, Vendor: (a) has no further access to, (b) has returned to Client, or (c) has destroyed any and all IQVIA Data in its possession or control.

☐ Vendor shall restrict access, use and dissemination of Retained Data.

☐ After reasonable investigation, the foregoing is true and correct to the best of my knowledge, information and belief.

Retained Data includes: a) IQVIA Data that is contained in an archived computer system back-up in accordance with Vendor's security and/or disaster recovery procedures, or b) Copies of Vendor deliverables provided to Client.

Capitalized terms not defined herein have the meaning set forth in the TPA Agreement.

SUPPORT

Send an email to IQVIATPPProgram@IQVIA.com to submit your questions and issues.

Asking a Question

- Enter **the key topic of your question** in the subject line
- In the email body:
 - Describe your specific question in detail
 - If applicable:
 - Include the name of the tab your question is related to
 - Include the name(s) of the field(s) that your question is related to
 - Provide a screenshot of the area in question

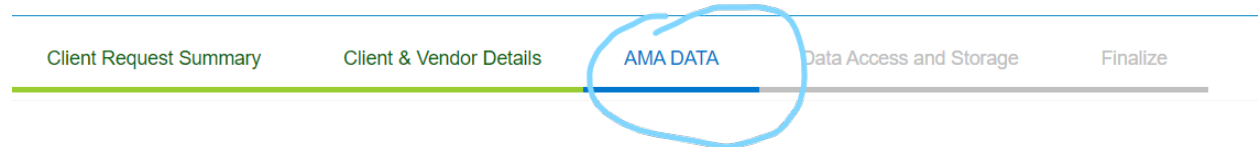
Reporting an Issue

- Enter **Third Party Program Issue** in the subject line
- In the email body:
 - Describe your specific issue
 - Describe step by step what you did prior to encountering the issue
 - Please provide screenshots
 - Include any error messages you received
 - What did you expect to happen?
 - What actually happened?

APPENDIX A: UNITED STATES PRESCRIBER LEVEL DATA

When United States (US) prescriber level data is requested, an additional section will appear in the Third Party Access Request. Please find the information you must provide in this section below:

- Will the US prescriber level data be accessed or stored via a location outside the US? If yes, which countries and provide your company's ex-US full Legal Entity Company Name.
- Country the vendor employee accessing IQVIA data will be located in
- Longest period of time the vendor will have access to AMA data for any one specified use per project
- If collecting response data, how will it be collected; if applicable?
- How response data will be returned or destroyed; if applicable?



IMPORTANT:

1. The AMA must approve prior to release of agreements for signature.
2. AMA Fees may apply. You will be responsible for the fee and invoiced accordingly (payable within 30-days of invoice receipt). Please see the "Understanding AMA Data and Fees" Job Aid within the Vendor Resources and Materials SharePoint site.

Client Selected U.S. Provider Level Attributes

Does this request include any of the following prescriber variables, if so, select all that apply, if not, select 'no' ?

- ☒ Yes
☐ No

The following are Provider Level Attributes

<input type="checkbox"/> Address Type	<input type="checkbox"/> Birth Year	<input type="checkbox"/> Census Data Codes	<input type="checkbox"/> CMS UPIN ⓘ
<input type="checkbox"/> Fax Number	<input type="checkbox"/> Former Name	<input type="checkbox"/> Gender Code	<input type="checkbox"/> Geographic Codes
<input type="checkbox"/> Graduate Medical Training	<input type="checkbox"/> Graduation Data	<input type="checkbox"/> Historical Licensure Data	<input type="checkbox"/> Hospital Affiliation
<input checked="" type="checkbox"/> IQVIA Prescriber ID ⓘ	<input type="checkbox"/> License State Abbreviation	<input type="checkbox"/> M.D., D.O. Indicator	<input type="checkbox"/> Major Professional Activity
<input checked="" type="checkbox"/> Medical Education Number (ME#)(Not permitted for Lettershop uses)	<input type="checkbox"/> Name	<input type="checkbox"/> No Contact Indicator	<input type="checkbox"/> No Web Flag
<input type="checkbox"/> NPI Number	<input type="checkbox"/> Office Address	<input type="checkbox"/> PDRP Flag	<input type="checkbox"/> Physician Recognition Award Recipients
<input type="checkbox"/> Preferred Mailing Address	<input type="checkbox"/> Present Employment	<input type="checkbox"/> Presumed Dead Flag	<input type="checkbox"/> Primary Office Address
<input type="checkbox"/> Specialty	<input type="checkbox"/> Specialty – Primary Secondary	<input type="checkbox"/> State License Expiration Date	<input type="checkbox"/> State License Number
<input type="checkbox"/> State License Type	<input type="checkbox"/> Telephone Number	<input type="checkbox"/> Type of Practice	<input type="checkbox"/> Undeliverable Address Flag

Please indicate the project USE(s) specifically related to the AMA prescriber identifiable data included in the TPA request

<input type="checkbox"/> Analysis of market research results*	<input type="checkbox"/> Assembly*	<input type="checkbox"/> Banner Ads	<input type="checkbox"/> Call Reporting / Planning	<input type="checkbox"/> Distribution and mailing*
<input type="checkbox"/> E-Detailing	<input type="checkbox"/> Email broadcasting*	<input type="checkbox"/> Engineering/System Architecture	<input type="checkbox"/> Expert Analysis for legal or governmental purposes	<input type="checkbox"/> Focus groups*
<input type="checkbox"/> Incentive Compensation	<input type="checkbox"/> Inserting*	<input type="checkbox"/> Labeling*	<input type="checkbox"/> Maintain data for reporting or archiving	<input type="checkbox"/> Market Forecasting
<input type="checkbox"/> Market Opportunity Assessment and sizing	<input type="checkbox"/> Market Segmentation and situation analysis	<input type="checkbox"/> Market research projects that include prescriber perception and attitude studies*	<input type="checkbox"/> Packaging*	<input type="checkbox"/> Personalized letters*
<input type="checkbox"/> Positioning and messaging studies*	<input type="checkbox"/> Prescriber Authentication / Verification	<input checked="" type="checkbox"/> Prescriber List Match only for overlap analysis, no prescriber communication	<input type="checkbox"/> Prescriber Recruitment*	<input type="checkbox"/> Printing*
<input type="checkbox"/> Production of reports	<input type="checkbox"/> Provide a supplemental sales force	<input type="checkbox"/> Sales Reporting	<input type="checkbox"/> Salesforce Automation	<input type="checkbox"/> Sample Fulfillment / Distribution
<input type="checkbox"/> Statistical Analysis	<input type="checkbox"/> Targeting Reports	<input type="checkbox"/> Technical Support	<input type="checkbox"/> Tele-Detailing	<input type="checkbox"/> Telemarketing*
<input type="checkbox"/> Territory Alignment				

*Lettershop use - ME# cannot be provided

What is the longest period of time the Vendor will have access to the AMA data for any one specified Use?

90 days or less

What is the frequency of the delivery to the Vendor?

One-time

Does Test_TPA Client Account store the prescriber level IQVIA data outside of the United States?

- ☐ Yes
☒ No

ACKNOWLEDGE

Please read and check for your understanding of the Acknowledgement:

“Based on the responses provided regarding the data to be shared under this Third Party Access request, as the data recipient, you will be required to sign an AMA Agreement that may incur AMA royalty fees. Any royalty fees, if apply, will be expressed clearly in the AMA Agreement that will be provisioned upon approval of this request. These fees are the responsibility of the Vendor to pay upon receipt of IQVIA Health invoice.”

Acknowledgement

☐ Based on the responses provided regarding the data to be shared under this Third Party Access request, as the data recipient, you will be required to sign an AMA Agreement that may incur AMA royalty fees. Any royalty fees, if apply, will be expressed clearly in the AMA Agreement that will be provisioned upon approval of this request. These fees are the responsibility of the Vendor to pay upon receipt of IQVIA Health invoice.

AMA DATA ACCESS AND STORAGE

Client Request Summary

Client & Vendor Details

AMA DATA

Data Access and Storage

Finalize

Remote Access for Non-U.S. Location

- Requires permission to access U.S. prescriber level data stored on U.S. servers; downloading and printing in the offshore environment is strictly prohibited.
- System infrastructure must be approved by AMA IT Security

Your will need to know:

- Will Vendor employee(s) require remote access from a non-U.S. location?

- Provide Vendor Employee country location(s) where the IQVIA Data will be remotely accessed
- Please select the secure technology(s) that will be used for remote access
- Vendor Ex-U.S. Legal Entity For Remote Access
- Your organization's Ex-US Legal Entity Company Name and full address.

Data Access and Storage

Remote Access for Non-U.S. Location:

- Requires permission to access U.S. prescriber level data stored on U.S. servers; downloading and printing in the offshore environment is strictly prohibited.
- System infrastructure must be approved by AMA IT Security

Will Vendor employee(s) require remote access from a non-U.S. location?

- ☐ Yes
☐ No

AMA Offshore Storage

- Requires direct AMA license to utilize, access, and/or store U.S. prescriber level data.
- Offshore locations are limited related to storage permissions.

Your will need to know:

- Will Vendor employee(s) require storage permissions from a non-U.S. location?
- Provide Vendor Employee country location(s) where the IQVIA Data will be stored:
- Vendor Ex-U.S. Legal Entity For Offshore Storage
- Name and title of the individual who has legal authority to sign the agreement for your Ex-US organization and who will be asked to sign the TPA if it is approved. We will send the AMA Offshore Storage agreement to this person for signature.

IMPORTANT:

1. The AMA must approve the country location prior to release of agreements for signature.
2. AMA Fees may apply for an AMA Foreign License Agreement [offshore storage]. The Ex-US Entity will be responsible for the fee and invoiced accordingly (payable within 30-days of invoice receipt).

AMA Offshore Storage:

- Requires direct AMA license to utilize, access, and/or store U.S. prescriber level data.
- Offshore locations are limited related to storage permissions.

Will Vendor employee(s) require storage permissions from a non-U.S. location?

- ☐ Yes
- ☐ No

APPENDIX B: HELPFUL RESOURCES

Click this link for [Job Aids](#) listed below:

Data Destruction Handling

Signing Third Party Agreements with DocuSign

Submitting Third Party Program Questions and Issues

Third Party Requests Quick Start Guide

Understanding AMA Data and Fees

Submitting Third Party Program Questions and Issues

ONLINE TRAINING VIDEOS (BRAINSHARK)

[Signing Third Party Agreements with DocuSign](#): This module describes how to use DocuSign to execute Third Party Limited License Agreements electronically. It also explains DocuSign email notifications.