



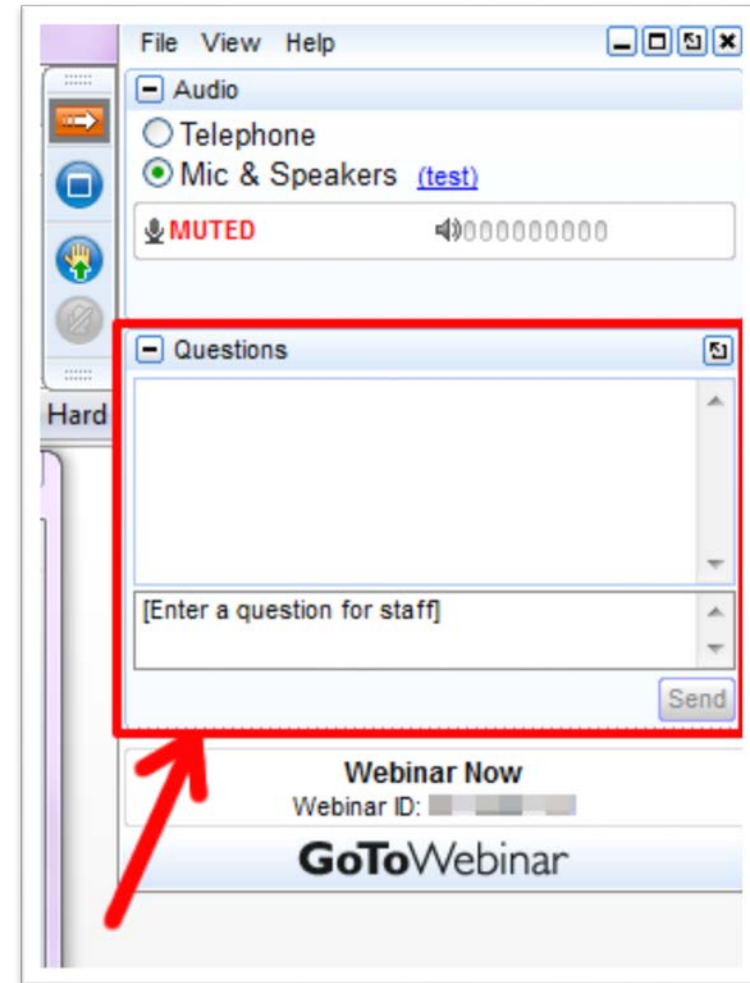
NEW YORK eHEALTH
COLLABORATIVE



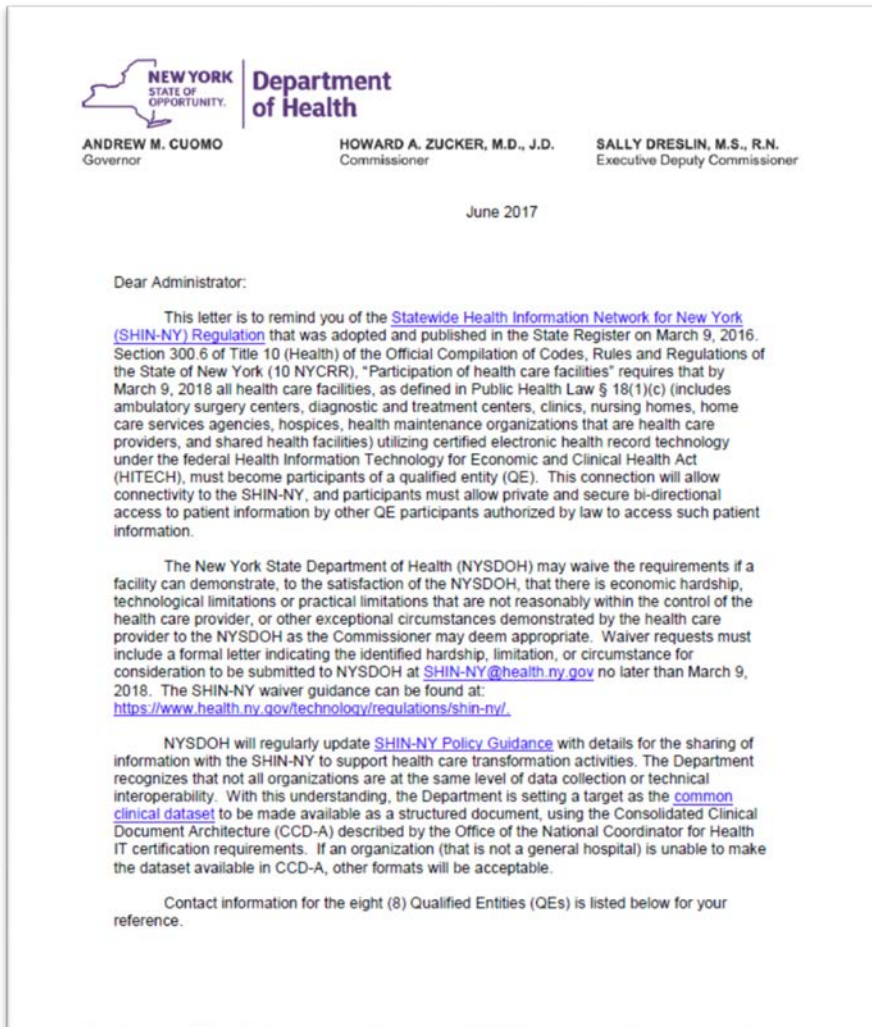
Statewide Health Information Network for NY (SHIN-NY): Its Value to New Yorkers and What Regulated Facilities Need to Know

Webinar Housekeeping

- Please note this webinar is being recorded
- Webinar recording will be posted on NYeC's website www.nyehealth.org
- Slides will be shared with all attendees via email
- Submit or Ask Questions
 - Submit your text questions using the Questions Panel



SHIN-NY Regulation – A Primer

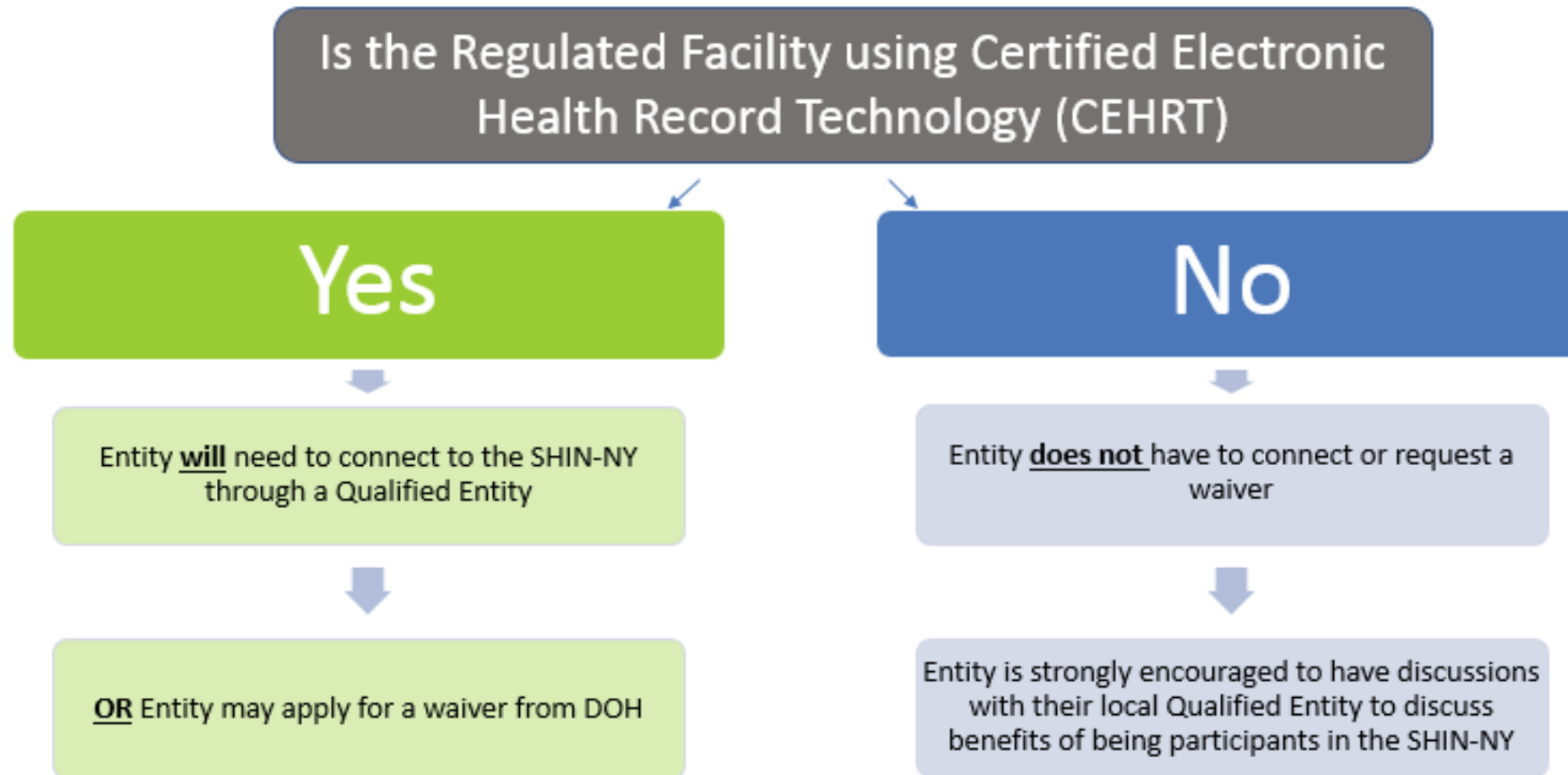


To continue advancing the SHIN-NY, on March 9, 2016 NYS Department of Health codified the SHIN-NY Regulation (Addition of Part 300 to Title 10 NYCRR (Statewide Health Information Network for New York (SHIN-NY)). Pursuant to the Regulation:

- **Article 28 Hospitals** are to be connected and contributing data to the SHIN-NY by March 9, 2017
- The following entities are to participate and contribute data to the SHIN-NY by March 9, 2018:
 - **Article 28** nursing homes and diagnostic treatment centers
 - **Article 36** certified home health care agencies, long term home health care programs
 - **Article 40** hospices

SHIN-NY Regulation

Is Your Facility Subject to the Regulation?



Certified Electronic Health Record Technology (CEHRT) refers to an EHR system that has been Certified by the Office of the National Coordinator for Health IT (ONC). Status of Certified EHRs may be found here <https://chpl.healthit.gov/>

Contributing Data to the SHIN-NY

- The Department of Health is concerned with increasing the **quantity and quality** of data that is contributed to the SHIN-NY.
- It is the goal to have providers contribute a minimum set of clinical data to the SHIN-NY
 - The minimum data set is defined as the “Common Clinical Data Set” as promulgated by the Office of the National Coordinator under the Meaningful Use program
- At this time the DOH is not mandating a specific transport method or mechanism (e.g. HL7 v2, HL7 v3, C-CDA) for contributing data to the SHIN-NY, however contributing the Common Clinical Data Set in CCD or C-CDA is **strongly encouraged**
 - Doing so allows providers to align with various other health care transformation initiatives in NYS. In the future, a specific transport mechanism may be required.

Common Clinical Data Set

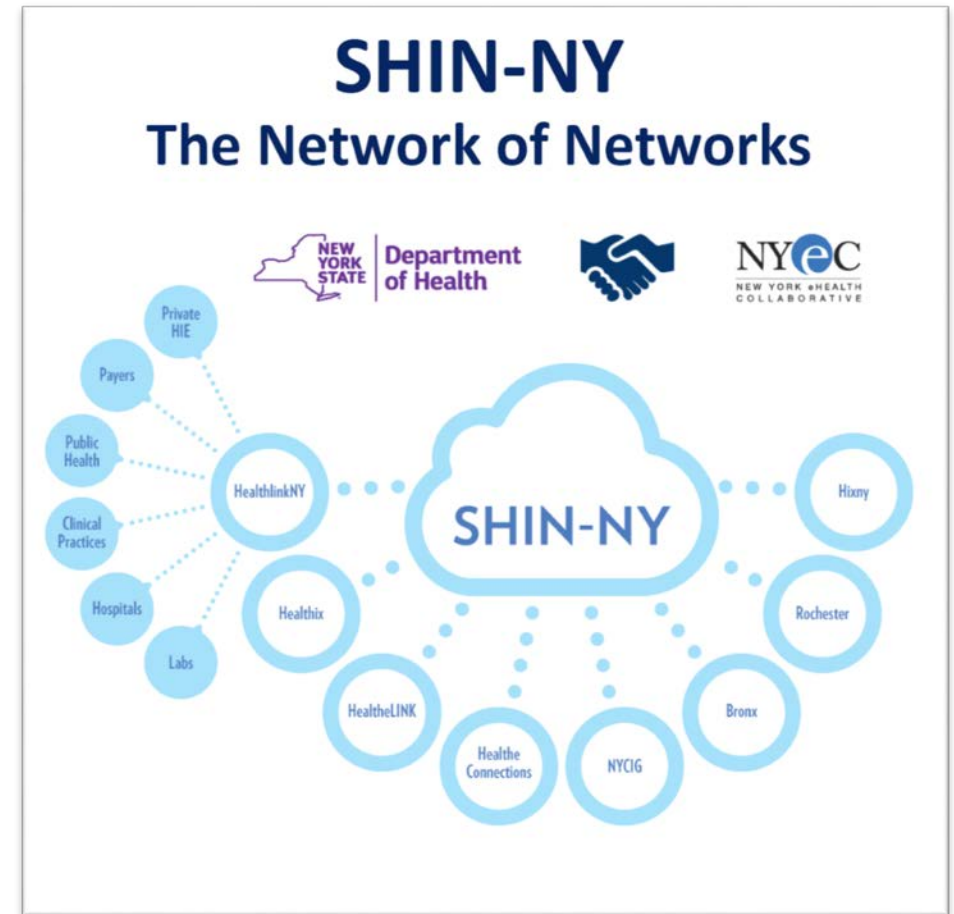
1. Patient name
2. Sex
3. Date of birth
4. Race
5. Ethnicity
6. Preferred language
7. Smoking status
8. Problem
9. Medications
10. Medication Allergies
11. Laboratory test(s)
12. Laboratory value(s)/result(s)
13. Vital signs – height, weight, blood pressure, BMI
14. Care plan field(s), including goals and instructions* (* Or Plan of Care/Plan of Treatment as alternative)
15. Procedures
16. Care team member(s)

This list reflects the 2014 Certification Edition (ONC) elements of the Common Clinical Data Set. The 2015 Edition varies slightly. Participants are encouraged to contribute data consistent with the Common Clinical Data Set. The Certification Edition of a Participant's EHR may determine the exact data elements available. More information can be found online

https://www.healthit.gov/sites/default/files/commonclinicaldataset_ml_11-4-15.pdf

The SHIN-NY in a Nutshell

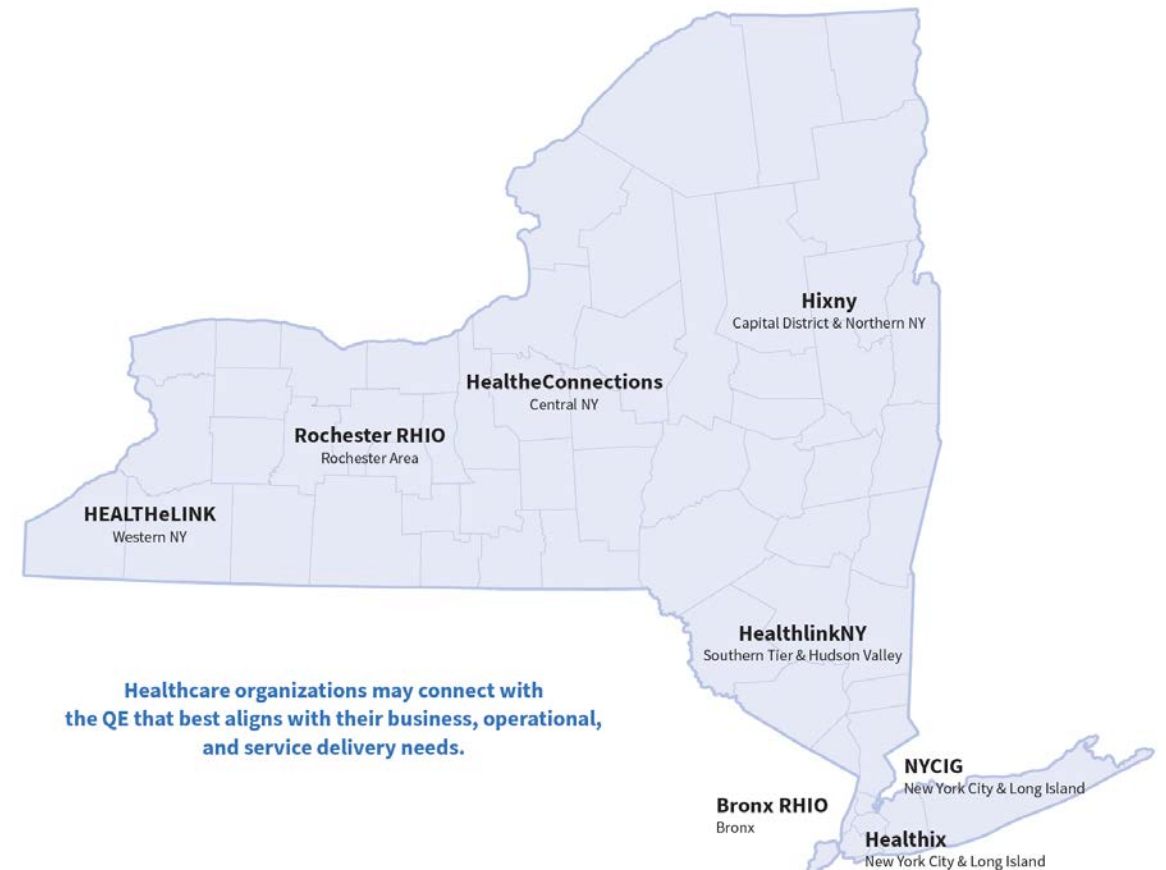
- A secure network for sharing electronic clinical records
 - The SHIN-NY consists of the eight regional RHIOs (also known as QEs)
- Records are accessed and exchanged securely between healthcare providers with appropriate consent
- Patients decide which entities can access or see their records
- Efficient access to clinical records helps providers better manage patient care
- The SHIN-NY can help reduce healthcare costs, improve healthcare coordination, and increase the quality of care for patients in New York State



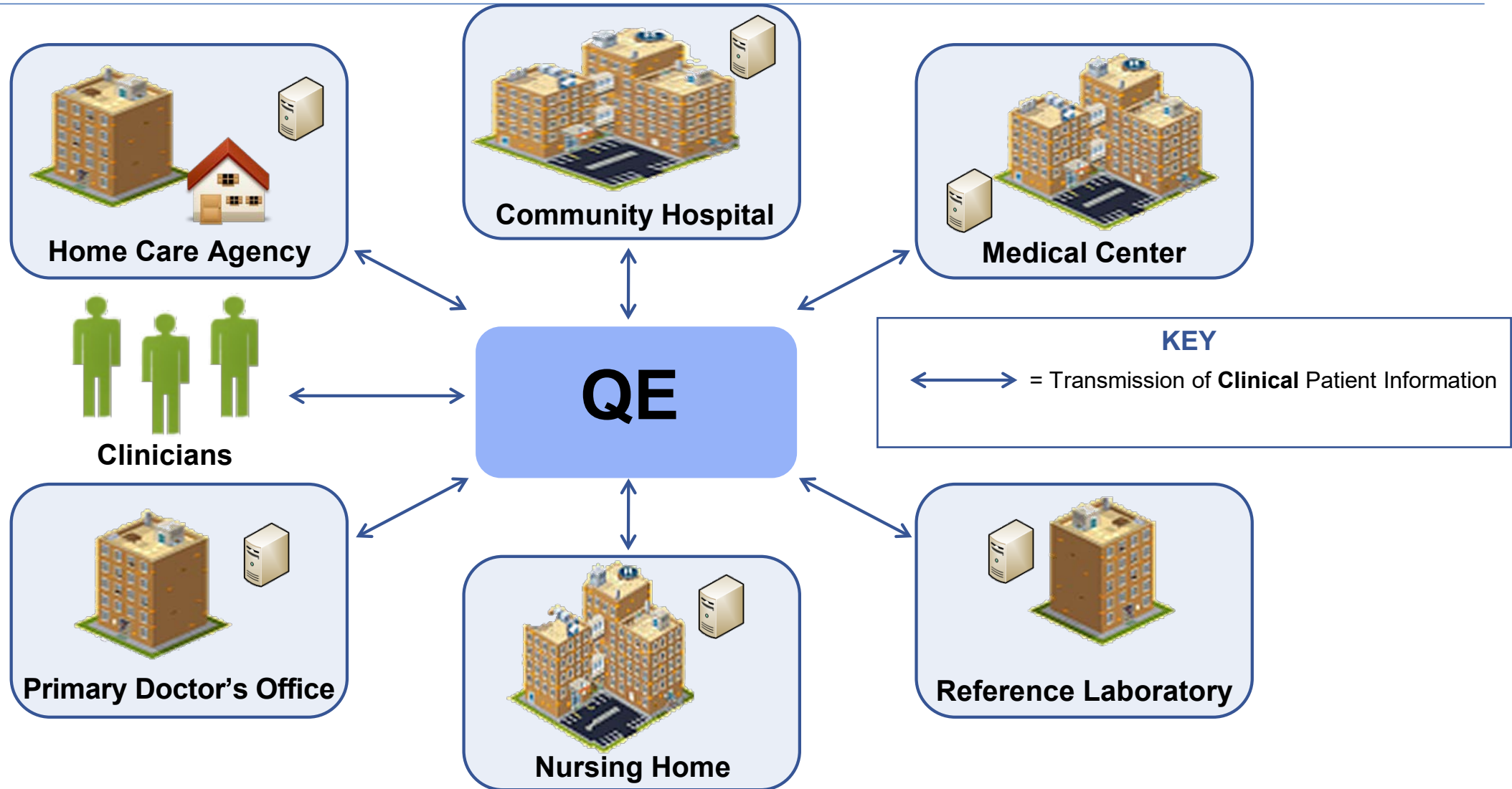
Regional Health Information Organizations (RHIOs) or Qualified Entities (QEs)

The QEs are the backbone of the SHIN-NY, providing the services that make secure, vital access to a patient's health information possible statewide.

While QEs are primarily established within geographical regions (Upstate more so than downstate), healthcare organizations may connect with the QE that best aligns with their business, operational, and service delivery needs.



How does a QE connect providers today?



The SHIN-NY Core Services

Since March 2015, all RHIOs must provide the following **Core Services** to Participants

1. Statewide Patient Record Lookup
2. Statewide Secure Messaging (Direct)
3. Notifications (Alerts / Subscribe and Notify)
4. Provider & Public Health Clinical Viewers
5. Consent Management
6. Identity Management and Security
7. Public Health Reporting Integration
8. Lab Results Delivery

No charge for these services beyond initial setup

SHIN-NY Value Studies, Whitepapers, Videos and other Resources:

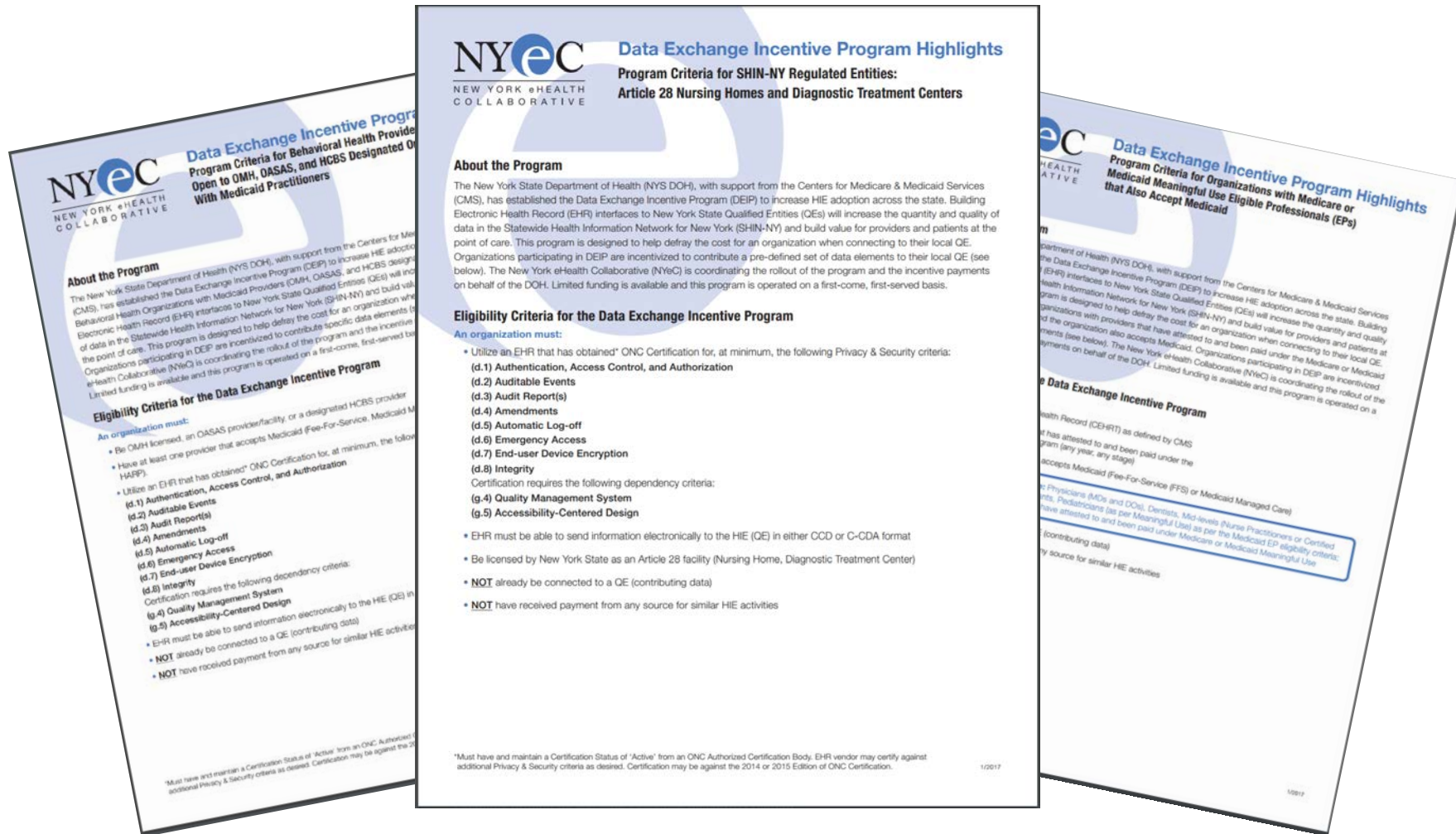
<http://www.nyehealth.org/shin-ny/value-of-hie/>

Available Funding to Regulated Facilities

- The New York State Department of Health (NYS DOH), with support from the Centers for Medicare & Medicaid Services (CMS), has established the **Data Exchange Incentive Program (DEIP)** to increase HIE adoption across the state
- This program is designed to help defray the cost for an organization when connecting to their local QE
- Organizations participating in DEIP are incentivized to contribute a pre-defined set of data elements to their local QE
- Limited funding is available and this program is operated on a first-come, first-served basis.

DEIP provides **\$13,000** in funding to organizations/providers in order to offset the cost of connecting to a QE

Overview documents Available Online



<http://www.nyehealth.org/deip>

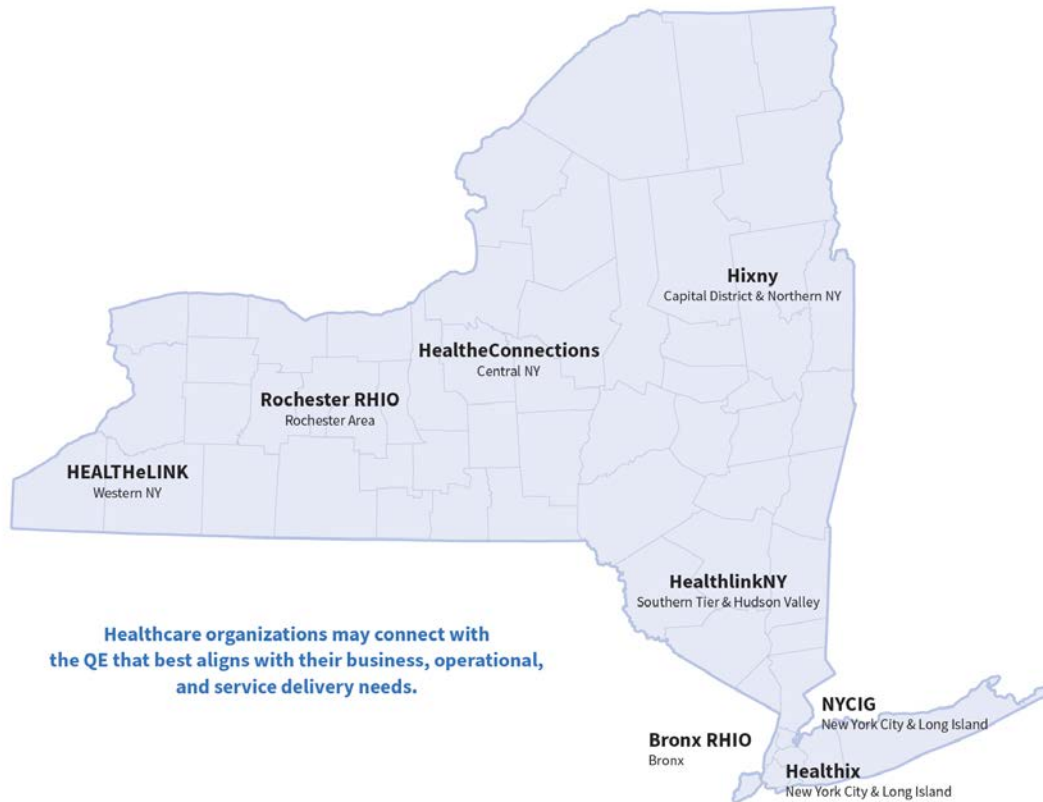
How to Get Connected to the SHIN-NY – Where to Start

1. Contact your QE to understand appropriate services for your organization
2. Sign a data sharing/Participation agreement
3. Sign up for Clinical Viewer/Portal to search patients and their clinical data through the web
4. Explore the use of DIRECT secure messaging
5. Enroll in Alerts (admit, discharge, transfer for inpatient and ED settings)
6. Plan for bi-directional exchange between your EHR and the QE
 - a) Send clinical data to the QE
 - b) Receive data automatically into your EHR (e.g. TOC, labs, alerts)
7. Check opportunities for funding through DSRIP, DEIP, or others
8. Work with your referral sources to determine the workflow and content to improve TOCs

To find information on QEs, visit

<http://www.nyehealth.org/shin-ny/qualified-entities/>

QE Points of Contacts



QE	Contact	Email
Bronx RHIO	Charles Scaglione	cscaglio@bronxrhio.org
HealthConnections	Danielle Wert	dwert@healthconnections.org
HEALTHeLINK	Stephen Gates	sgates@wnyhealthelink.com
Healthix	Kathleen Kahn	kkahn@healthix.org
HealthlinkNY	Staci Romeo	sromeo@healthlinkny.com
Hixny	Bryan Cudmore	bcudmore@hixny.org
NYCIG	Nick VanDuyne	Nick.VanDuyne@nycig.org
Rochester RHIO	Denise Dinoto	denise.dinoto@grrhio.org

Additional Contact Information

Deirdre Depew

Office of Quality and Patient Safety

New York State Department of Health

deirdre.depew@health.ny.gov

Elizabeth Amato

Senior Director, Statewide Services

New York eHealth Collaborative (NYeC)

eamato@nyehealth.org



NEW YORK eHEALTH
COLLABORATIVE

nyehealth.org

STAY CONNECTED WITH NYeC

Sign up for our newsletter, follow us on Facebook and Twitter, and join our LinkedIn group.



40 Worth Street, 5th Floor New York, New York 10013
80 South Swan Street, 29th Floor Albany, New York 12210