Letter from NYeC Executive Director, Valerie Grey

Dear NYeC Community,

Hello and happy spring! It's been a few months since my last letter and I wanted to share some updates on NYeC and the progress we're making to move our state's HIE forward.

We have been busy working towards the goals outlined in the **SHIN-NY 2020 Roadmap**, working closely with our stakeholders and partners to implement the strategies we identified to ensure that the SHIN-NY fulfils its vision of transforming healthcare and the health of our communities.

New York State continues to support healthcare transformation through health information exchange and included **funding for the SHIN-NY in the 2018-19 State Budget**. This critical, sustained support allows for the continued advancement of the SHIN-NY and its growing role in improving patient outcomes and experiences. We would like to again thank Governor Cuomo and the Legislature for their support.

We also recently announced the **appointment of four new members** to our Board of Directors, expanding the board's expertise and range of experiences. The new members are Jordanna Davis, President of healthcare consulting firm Rockingstone Group, Rochester Regional Health Chief Information Officer John Glynn, Onondaga County Commissioner of Health Dr. Indu Gupta, and HealthNow New York Inc. Chief Medical Officer Dr. Thomas Schenk.

We're excited to continue to expand our provider assistance programs to help providers optimize care delivery. These programs, including the **Data Exchange Incentive Program (DEIP)** to increase HIE adoption, **Medicaid Eligible Professional Program (EP2)** to achieve Meaningful Use, and the new **New York State Patient-Centered Medical Home (NYS PCMH) Recognition Program**, are key to our efforts to increase connectivity and support the SHIN-NY's overarching goals. Updates about these programs can be found in the newsletter below.

Finally, I wanted to keep you up to date on our work at the Federal level, specifically our response to the call for comments on the draft Trusted Exchange Framework and Common Agreement (TEFCA). When final, TEFCA will serve as a blueprint for creating a national health information exchange network to share health data. We asked for feedback from stakeholders in our community in an effort to provide a cohesive comment on the January 2018 draft. You can read the comment letter we submitted to the ONC **here**. Additionally, the Health IT Advisory Committee (HITAC) set up task forces, one for the draft trusted exchange framework (TEF) and one for the U.S. Core Data for Interoperability (USCDI) structure and process, to recommend standards which will eventually flow into TEFCA. Both task forces submitted recommendations that were accepted and sent to ONC for consideration. In March, the TEF task force sent **26 recommendations on the draft framework**. The USCDI Task Force recently voted to approve **nine recommendations** on updating the list of data elements that vendors must exchange to be considered interoperable.

Thank you for your ongoing collaboration!

Take care,

Valerie Grey
Executive Director
New York eHealth Collaborative

The Case for Payer Participation in Health Information Exchange

HIE is an important tool in improving the quality of patient care and outcomes, increasing accuracy and speed of diagnosis, eliminating unnecessary or duplicative tests and procedures, and reducing healthcare expenditures. Payers who participate in HIEs can experience greater oversight and can be better equipped to manage and coordinate patient care.

Our new white paper, **The Case for Payer Participation in Health Information Exchange**, details the value of health information exchange for payer organizations.

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Introducing the New York State Patient-Centered Medical Home (NYS PCMH) Recognition Program

The National Committee for Quality Assurance (NCQA), the accrediting organization of the nation's leading patient-centered medical home (PCMH) program, worked with the New York State Department of Health to develop a customized PCMH Recognition Program that supports the state's initiative to improve primary care through the medical home model and promote the Triple Aim: better health, lower costs, and better patient experience.

The PCMH model emphasizes care coordination, population health, evidence-based guidelines, and effective use of health information technology to meet patient needs. NYS PCMH Recognition Program helps practices put in place the structure, systems, and processes to be effective in this model.

Focused on small and medium-size practices who are struggling to navigate the changing landscape, **NYeC's NYS PCMH services** help practices deliver high-quality, coordinated care, earn payment incentives, prepare to thrive under value-based payment arrangements, and achieve New York State Patient-Centered Medical Home recognition. NYeC supports practices in Western New York, Westchester, Rockland, New York City, and Long Island. Contact our NYS PCMH team to learn more.

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Join PCIP & NYeC on May 15th to Learn More About the Utilization of Health Information Exchanges

Please join us for the next Primary Care Information Project (PCIP) ACO Roundtable focused on HIE integration for ACO Leadership and providers on **Tuesday, May 15th from 8:30 am – 3:30 pm**.

The December ACO Roundtable served as part one of this event, where NYeC and PCIP provided an overview of the Statewide Health Information Network for New York (SHIN-NY) and Qualified Entities (QE). **Click here to access the recorded webinar** and select *Playback*.

Based on feedback from participants, PCIP has invited NYeC, Bronx RHIO, Healthix, and the NY Care Information Gateway (NYCIG) to cohost a live event. The event will help support ACOs' goal to drive effective population health efforts and their providers' understanding of practically integrating QEs into their daily workflow.

The morning session will be focused on providers, including:

- Provider panel discussing best practices and learning opportunities for those utilizing QEs
- Live demonstration from each QE to address provider questions and concerns
- Meaningful Use MEIPASS and Stage 3 updates

The afternoon session is for ACO leadership and management teams, including:

- Presentations from QEs to demonstrate their population health capabilities
- Case study from a peer organization on the benefits of QE analytics to ACOs

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Participate in Our 2018 Gala & Awards!

Reach over 250 executives, leaders, and policymakers from New York State's largest and most prominent health systems, health plans, associations, and public-sector organizations at the November 27th **Gala & Awards** in New York City.

Hosted by **NYeC's Board of Directors**, the Gala & Awards recognizes and honors the achievements of those leading the mission to improve healthcare through technology.

Sponsoring our Gala & Awards allows you to gain access to key influencers & stakeholders, showcase thought leadership, network with your peers, and position your organization to meet the needs of New York State's premier healthcare organizations.

Learn how to participate in this year's event!

Hixny and Alliance for Better Health: Working Together

Hixny and the performing provider system (PPS) Alliance for Better Health are working together to increase connectivity and innovation. PPSs are part of New York State's Delivery System Reform Incentive Payment (DSRIP) program, which is an effort to restructure healthcare delivery in a way that will reduce avoidable hospital use by 25% by 2020. The Alliance recently launched the Transformation and Innovation Funds that provide incentives for high-quality performance and encourage innovation among partners. Recipients can, among other things, use the funds to connect with Hixny—an effort that Alliance supports.

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(Source: Hixny)

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NYCIG Opens Access to Providers for Minor Patient Data

NYCIG's participating providers are now able to access data securely through the clinical viewer for minor patients 10–17 years of age (excluding SAMHSA data). This expansion of access is in direct response to a change in New York State policy that went into effect in March of 2016.

Previously, with affirmative consent on file from a parent or legal guardian, it was permissible for providers to access data for children from birth until the age of 10. With this new policy change, the consent window opens to include seven more years (birth to 17 years of age). At the age of 18, the child's consent value on the NYCIG platform defaults back to a value of "no consent" so that they can provide a consent decision for themselves.

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(Source: NYCIG)

Hixny and Alliance for Better Health: Working Together

Rochester RHIO recently announced that more than 500 data sources are now part of its Contribute service, representing hundreds of healthcare organizations that serve more than a million residents each year.

Through Rochester RHIO's Contribute service, organizations achieve bi-directional exchange, meaning that with patient consent, they can share data that helps caregivers provide better care for their patients. Contribute is used by hospitals, healthcare organizations, private practices and other ambulatory care sites to improve healthcare quality, coordination, and efficiency.

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(Source: Rochester RHIO)

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Why Apps for Managing Chronic Disease Haven't Been Widely Used, and How to Fix It

In an era where nearly every consumer good and service—from books and groceries to babysitting and shared rides—can be purchased through an electronic transaction on a mobile device, it seems reasonable to think that more and more of our healthcare can also be managed using apps on mobile devices. Proponents of these apps see the potential of digital technologies to shift care provision from physicians' offices and hospitals to the patient's home or anywhere with reasonable Wi-Fi connectivity. The potential benefits of digital health seem particularly compelling for managing chronic conditions such as diabetes and hypertension.

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(Source: *Harvard Business Review***)**

NYeC Healthcare Advisory Professional Services

Meaningful Use Update

If you are a New York State Medicaid provider and plan on attesting for the 2017 reporting year in NY's Medicaid EHR Incentive Program, NYeC can help!

NYeC's Medicaid Eligible Professional Program (EP2)
provides free consulting services that assist you with achieving various stages of Meaningful Use. Please note, services for this program are limited to providers outside of the five boroughs of NYC.

Please contact the EP2 Team at **EP2Info@nyehealth.org** for more information.

NYS HIMSS Chapter Conference

Beyond our Reach is Now Healthcare on Broadway

The NYS HIMSS Annual Conference will include comprehensive discussions on healthcare now & in the future. Keynote Speaker: Peter Fleischut, MD, Chief Transformation Officer, NewYork-Presbyterian

ACT I: Interactive debate with New York State healthcare leaders on the current regulatory environment and the impact on improving care statewide.

ACT II: Interactive debate with some of the top state leaders with regards to the challenges of interoperability, security, and the leveraging of innovation to position New York as a best-in-class environment.

ACT III: A dynamic debate of the real applicability of technologies (e.g. AI, telehealth, predictive modeling & mobility solutions) and where they can make or have made a difference.

ACT IV: The last debate features both state and national leaders discussing the future of healthcare and the role innovation will play.

Featured conference speakers include Valerie Grey, Dr. Eugene Heslin, Cletis Earle, and Vicki Tiase, among others.

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June 13 | New York, New York

Health & Biotechnology Summit

Join the Executive Council & the New York Venture Capital Association for their 5th Annual Health & Biotechnology Summit. Speakers will include the CEOs of EmblemHealth, Tivity, Prognos, AiCure, among others! Plus, execs from Merck, Pfizer, PAIGE.AI, and more.

NYeC Community Discount: To receive your 25% discount, enter code **HBTS25** at checkout.

LEARN MORE AND REGISTER

June 13 | New York, New York