

Letter from NYeC Executive Director, Valerie Grey



Welcome to the seventh issue of the *SHIN-NY Spotlight*, our update on the progress the state is making in advancing New York's health information exchange (HIE), the [Statewide Health Information Network for New York](#).

We have been busy working towards the goals outlined in the [SHIN-NY 2020 Roadmap](#), collaborating with our stakeholders and partners to implement the Roadmap's strategies to ensure that the SHIN-NY fulfills its vision of transforming healthcare and the health of our communities, ultimately helping facilitate patient-centered care and supporting New York State in achieving better care for patients, lower costs, and healthier communities.

We are excited to share that one of our programs, the [Data Exchange Incentive Program \(DEIP\)](#) was recently granted a funding extension. This program provides SHIN-NY connection funding to eligible healthcare organizations and supports the flow of clinical information, improving connectivity and helping more people, providers, and health plans! More information on the program and the funding extensions can be found in this update.

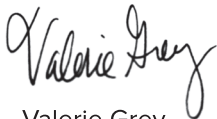
We also recently submitted the SHIN-NY as an innovation to improve patient outcomes through social determinants of health and NYeC was selected to participate in a [poster board presentation session to showcase our proposal](#) to approximately 500 attendees during New York State Department of Health's Social Determinants of Health Innovation Summit. Learn more about our submission and review our poster below.

Since the last *SHIN-NY Spotlight*, representatives of the SHIN-NY Policy Committee met with experts to explore the use of clinical data for research purposes to determine if the Privacy and Security Policies and Procedures for Qualified Entities and their participants in New York State (the "SHIN-NY Policies") need to be revised to promote research.

Additionally, our [Healthcare Advisory Professional Services \(HAPS\)](#) and [DEIP](#) teams hosted a Promoting Health Information Exchange for Medicaid MU & PCMH Providers event in Buffalo, NY. The collaborative event highlighted several of NYeC's provider assistance programs and provided information on how healthcare professionals can become SHIN-NY participants and continue on a path towards achieving value-based care.

We're excited to continue working together to ensure that the SHIN-NY reaches its maximum potential and dramatically transforms healthcare into a system where health information exchange is universally used as a tool to make lives better. Thank you for your ongoing collaboration!

Take care,



Valerie Grey
Executive Director
New York eHealth Collaborative

What is the SHIN-NY?

The [Statewide Health Information Network for New York \(SHIN-NY\)](#) connects eight regional networks, or [Qualified Entities \(QEs\)](#), that allow participating healthcare professionals, with patient consent, to quickly access electronic health information and securely exchange data statewide.

The regional networks enroll participants within their community, including those from hospitals, clinics, FQHCs, home care agencies, payers, and ambulatory practices, among others, so they can access and exchange electronic health information with participants in their region.

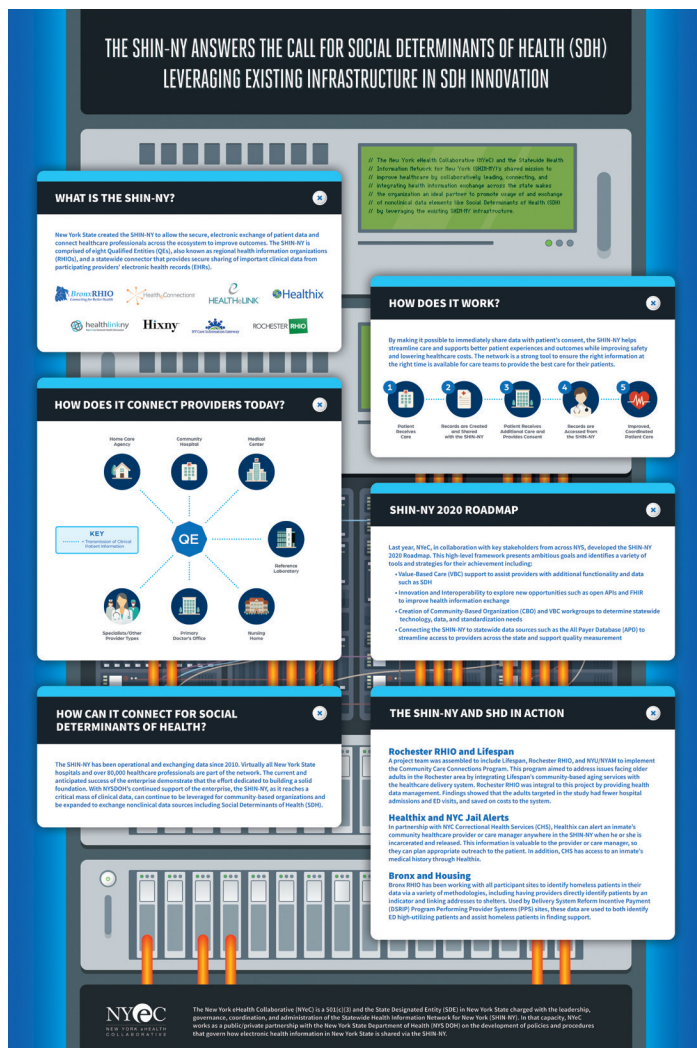
The SHIN-NY enables collaboration and coordination of care to improve patient outcomes, reduce unnecessary and avoidable tests and procedures, and lower costs.

Data Exchange Incentive Program (DEIP) Funding Extended

The New York State Department of Health, with support from the Centers of Medicare & Medicaid Services, recently granted a two-year funding extension for the [Data Exchange Incentive Program \(DEIP\)](#). The program provides funding to eligible healthcare providers to connect to one of the state's Qualified Entities and exchange health data through the SHIN-NY.

Since its launch in 2015, DEIP has enrolled over 650 organizations and has distributed close to \$5 million in incentives to New York providers reaching data sharing milestones. NYeC manages DEIP and administers the payment of incentives to providers on behalf of the New York State Department of Health.

The SHIN-NY Answers the Call for Social Determinants of Health



NYeC recently submitted the SHIN-NY as a creative way to improve patient outcomes through social determinants of health as a part of the New York State Department of Health's Social Determinants of Health "Call for Innovations" Initiative. Out of over 200 applications, NYeC was selected to participate in a [poster board presentation session to showcase our proposal](#) to approximately 500 attendees during the Social Determinants of Health Innovation Summit.

NYeC and the SHIN-NY's shared mission with the Qualified Entities to improve healthcare by collaboratively leading, connecting, and integrating health information exchange across the state makes the organization an ideal partner to promote usage of and exchange of nonclinical data elements like Social Determinants of Health by potentially leveraging the existing SHIN-NY infrastructure.

Insights from Subject Matter Expert Roundtable on SHIN-NY Policies and Research

In August, representatives of the SHIN-NY Policy Committee Research Tiger Team, NYeC, and the New York State Department of Health (DOH) met with research experts to explore the use of SHIN-NY clinical data for research purposes. A diverse group of experts participated, representing academia, clinical public health, pharma, and SPARCS research areas and use of both identifiable and de-identified data was discussed.

The goal of the roundtable was to determine if the SHIN-NY Privacy and Security Policies and Procedures for Qualified Entities and their Participants in New York State (the “SHIN-NY Policies”) need to be revised to promote research and, if so, how the SHIN-NY Policies should be revised. Participants agreed that data available in the SHIN-NY can be useful to research and that, depending on the project, either identifiable data or de-identified data can be useful.

Outcomes from the research expert roundtable were shared with the Policy Committee Research Tiger Team and included three options for consideration:

- (1) More limited QE Committee Review Regarding De-identified Data
- (2) Waiver of Authorization for Patient Recruitment related to Research
- (3) Waiver of Authorization for Retrospective Research.

Recommendations from the Research Tiger Team were presented to the SHIN-NY Policy Committee and, after much discussion, consensus was reached on a set of research policy recommendations that were presented and approved at the November NYeC Board of Directors meeting. They revised research policies will be published by NYS DOH in the updated SHIN-NY Policies V3.6 in January 2019.

Those revisions are: (1) Research Involving De-identified Data and Limited Data Sets; (2) Research Involving PHI for Patient Recruitment for Research; and (3) Research Involving PHI for Retrospective Research. Additionally, the Board approved two policy clarifications as additions to the SHIN-NY Policies that will (1) allow disclosure of HIV information to Medicaid Managed Care Organizations and allow QEs to disclose HIV information to a provider treating a patient for purposes of connecting the patient to needed services and (2) allow disclosure of Medicaid data to NYS DOH when necessary for calculating performance under quality measures adopted by the NYS Medicaid program and to determine payments to be made under the NYS Medicaid program.

Stay tuned for full details of these policy changes in the V3.6 of the SHIN-NY Privacy and Security Policies and Procedures for QEs and their Participants sometime in January 2019!

Behavioral Health Information Technology Implementation in New York State

In May 2018, NYeC concluded their work on the New York State Department of Health’s Behavioral Health Information Technology (BHIT) program. The BHIT program provided technical assistance and support to Adult Behavioral Health—Home and Community-Based Services (BH HCBS) providers in the transition to and adoption of health information technology.

[Our report](#) details the strategic approach taken by NYeC, highlighting key activities, achievements, and lessons learned through the successful completion of this program. Through the BHIT program, 114 organizations, representing over 2,000 HCBS staff members, adopted, or upgraded an electronic medical record and billing system to capture their case documentation in real-time and bill for their services to Medicaid Managed Care.

Promoting Health Information Exchange (HIE) for Medicaid MU & PCMH Providers

In September, our [Healthcare Advisory Professional Services \(HAPS\)](#) and [Data Exchange Incentive Program \(DEIP\)](#) teams hosted a Promoting Health Information Exchange (HIE) for Medicaid MU & PCMH Providers event in Buffalo, NY. This collaborative event highlighted some of NYeC's provider assistance programs, including [Medicaid Eligible Professional Program \(EP2\)](#) and [Patient-Centered Medical Home \(PCMH\)](#), all of which aim to help providers reach their HIE potential through Promoting Interoperability (formerly known as Meaningful Use) education, EHR utilization and optimization, and practice transformation. The event was a success and each team was able to reach out to eligible providers in the area, detailing services offered and how we collectively enable providers with the skills to become active participants in the [Statewide Health Information Network for New York \(SHIN-NY\)](#), connect with a [Qualified Entity \(QE\)](#), and continue on a path towards achieving value-based care.

SHIN-NY Support for PCMH

Practices can leverage [Statewide Health Information Network for New York \(SHIN-NY\)](#) services to meet certain [New York State Patient-Centered Medical Home \(PCMH\)](#) standards and achieve their transformation goals. NYS PCMH success will require access to patient data, coordinated communication between care team providers, timely notification of critical patient events, and the ability to exchange patient information to support care coordination.

Bold Commitments Result in Bold Change: New York State PTN Awarded Challenge Coin for QIIG Successes

On June 4, 2018, the [New York State Practice Transformation Network \(NYSPTN\)](#) was awarded a challenge coin for successes in quality improvement from Dennis Wagner, Director of the Centers for Medicare and Medicaid Services Quality Improvement and Innovation Group (QIIG). NYSPTN is a collaboration led by the New York eHealth Collaborative (NYeC), Common Ground Health, and New York State Department of Health, along with numerous organizations committed to ensuring that physician practices are prepared for major changes in how healthcare will be delivered and reimbursed. Within this structure, regional subcontractors with unique expertise provide technical assistance services and curriculum to enrollees and data analysis support. The subcontractors included: Mount Sinai, PCIP, New York State Council on Behavioral Health, Strategic Interests, EHR Advisory Group, and, up until year 3, HANYS.

As of May 2018, NYSPTN had 352 enrolled practices (153 primary care; 199 specialty care) and 4,328 enrolled clinicians (1,007 primary care; 3,321 specialty care).

Core Services Offered through the SHIN-NY

All QEs offer [free, basic services](#) to participating members.

Patient Record Lookup

Patient Record Lookup functions like a highly secure search engine, **allowing participants to retrieve individual patient records from across the state after receiving consent from the patient.** Participants can easily look up patient records, no matter where patients have received care in the state.

Alerts

Alerts allow participants to **receive real-time updates about their patients.** For example, if a patient enters or is discharged from a hospital, a subscribing provider can receive an Admittance, Discharge, Transfer alert. Similarly, a hospital can instantly be alerted if discharged patients subsequently visit another emergency room.

In short, this **automatic subscription service keeps providers informed of the status of their patients, further enhancing care coordination efforts** and creating an integral resource in reducing readmissions statewide.

Secure Messaging

Secure Messaging gives participants the ability to **seamlessly exchange authenticated and encrypted clinical data.** It's similar to highly secure email between providers.

Results Delivery

Results Delivery **provides diagnostic results and reports to ordering clinicians** and others designated to receive results.

Provider & Public Health Clinical Viewers

A Clinical Viewer allows participants or authorized public health officials to **search for patient records** across all data sources on identifying information (demographics, medical identification number, etc.) The Clinical Viewer is web-based, eliminating the need to integrate with EHRs.

Consent Management

Consent Management **tracks and verifies that a patient has provided consent** to share their records per New York State and federal law and other requirements defined by HIPAA.

Usage of Core Services Over the Past Year (Oct 2017 - Oct 2018)



46.7 MILLION

alerts delivered to clinicians

(e.g. emergency room visit, inpatient discharge)



15.5 MILLION

patient record retrievals

(via EHR and Clinical Viewer)



110.9 MILLION

**diagnostic and
lab results delivered**

QEs may provide additional services above and beyond the Core Services and may charge for these “value-added services”. EHR vendors may also charge a connection fee. Providers are encouraged to talk to their [local QE](#) for more information.

HEALTHeLINK Medical Minute on the SHIN-NY



As a part of their Medical Minute video series, [HEALTHeLINK](#) Executive Director Dan Porreca discusses HIE connectivity across the state through the [Statewide Health Information Network for New York \(SHIN-NY\)](#).

[WATCH THE VIDEO](#)

What You Need to Know About the SHIN-NY



[Hixny](#) is a health information exchange, or HIE serving patients in the Capital District, Northern New York, and the Mohawk Valley. HIEs are the fastest and most secure way to share patient health information. HIEs help reduce repeat testing, lower costs, and speed up workflow—all while increasing patient satisfaction and improving quality of care.

[WATCH THE VIDEO](#)

HealthConnections: Importance of Data-Driven Care: Dr. Indu Gupta, MD, MPH



Dr. Indu Gupta discusses the critical importance of data in healthcare for the provider, the patient, and population health improvement efforts. Hear what she has to say about how [HealthConnections](#) is helping to transform the health and healthcare delivery landscape and future opportunities for change.

[WATCH THE VIDEO](#)



Healthix Case Study: Catholic Health Services of Long Island

Catholic Health Services of Long Island (CHS) is committed to enriching clinical data in order to identify gaps in care, improve care coordination, and reduce unnecessary ED and inpatient admissions. To achieve these goals, CHS has incorporated data into their existing workflows, implemented a handheld application to make data truly actionable, and integrated community providers into a larger data network.

Integrating Healthix Clinical Information Seamlessly into Epic

CHS takes incoming CCD data and displays the diagnosis, encounters, medications, and allergies within their Epic system. The Healthix HIE data displays alongside their own network data, giving providers a more complete patient view.

Healthix Alerts are Routed Directly into a Handheld Application

CHS is now using a handheld application to route Healthix alerts directly to providers who can intervene with patients in the ER before they are admitted. This crucial intervention ensures that the patient receives the appropriate care, without unnecessary admissions to the ED or hospital.

Integrating Community Providers into CHS

The goal of free-flowing data amongst community providers is challenged by varying levels of technology at the providers sites and the need for patient consent. CHS is proactively addressing these challenges by using one-to-one exchange in order to assist in the flow of patient data and by helping the 400 community practices in their IPA to connect with Healthix.

In the first six months of 2018, CHS has Already exchanged almost 1 million patient records with Healthix.

Catholic Health Services (CHS) is the largest faith-based healthcare system on Long Island, encompassing some of the region's finest health and human services agencies. CHS offers a wide range of services backed by quality care and delivered by dedicated, compassionate professionals.



Three Ways Absolut Care of Endicott Uses HealthlinkNY to Reduce Readmissions

Reducing the number of preventable hospital readmissions within 30 days is one of the biggest goals in healthcare quality. It's also one of the hardest to reach.

So, it's quite an achievement that Absolut Care of Endicott had zero readmissions in the first quarter of 2018. And according to the 160-bed rehabilitation and skilled nursing facility, HealthlinkNY deserves a lot of the credit.

"HealthlinkNY is such a key part of us staying on top of everything," explains Donna Grover, Medical Records Director. "We can access things so fast, and catch things so fast, we had zero readmissions, which is almost unheard of."

Grover says that she and her colleague Amanda Curtis, who works at the facility five days a week as a nurse practitioner with UnitedHealthcare, continually use HealthlinkNY to protect residents from preventable hospital readmissions. Here's their advice on how to do it.

1. Make sure the patient is ready to be discharged.

Find out if the hospital has completed all tests before a patient is discharged. In one case, Curtis looked up a patient's record and saw one test was missing. She contacted the hospital, and the test was immediately done. The results were fine, and the patient was discharged as planned. If that had not been the case, the resident would have remained in the hospital until he was truly ready to come home.

2. Arrange follow-up care.

When hospitals request follow-up visits to a specialist after discharge, Grover can use HealthlinkNY to find out which specialist had seen the resident in the hospital. "If the doctor did the consult in the hospital, that's who the resident should follow up with because residents are more comfortable seeing doctors they know," she says. If the follow-up exam involves lab work or diagnostic imaging, Grover can find the results in HealthlinkNY and compare to earlier test results.

3. Look for trends.

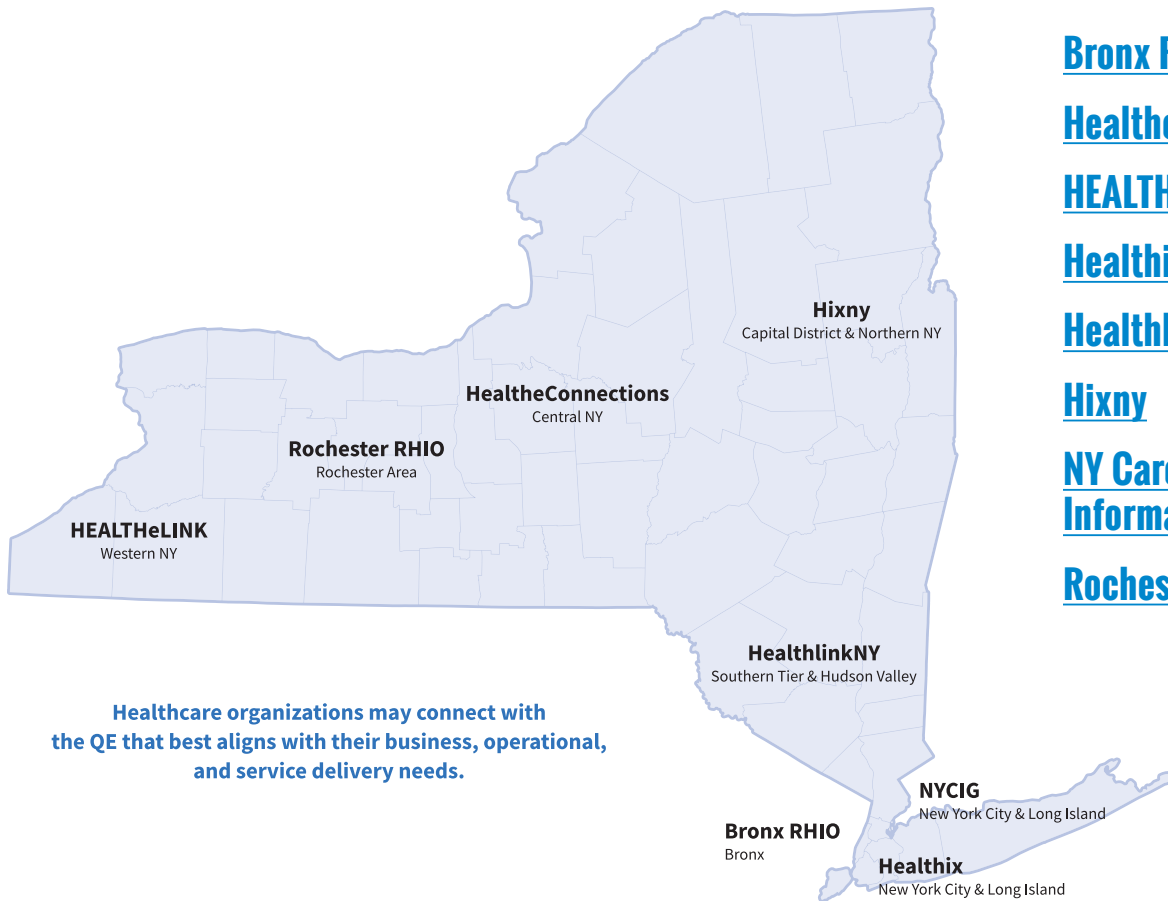
After a resident returns from the hospital, Absolut Care will regularly test the resident's blood and conduct urine, stool, and wound cultures as necessary. Grover says she can find the results in HealthlinkNY even before the reports arrive at Absolut Care. She notes that laboratories will call the facility only if the results are alarming, but HealthlinkNY allows Grover to spot changes over time. "A white blood count may be trending slowly up, from 7,000 to 8,000 to 9,000," she says. "Nine thousand is not critical, but it's telling you that something is going on there and it needs attention."

Grover adds that with the flu season upon us, she depends on HealthlinkNY to see if the hospital gave patients a flu and/or pneumonia shot. "HealthlinkNY is an awesome resource to find out if patients received flu shots or Pneumovax® in the hospital," Grover says. "I see what they gave them, when they gave it to them, and the lot number, which I enter into our system so there is no duplication."

Grover explains that she's on HealthlinkNY every day. "I have a list a mile long of what I use it for," she says.

Who is Connected to the SHIN-NY?

Each QE enrolls a diverse set of participants within their community, based on the community's unique needs and patterns of care. QEs maintain complete and up-to-date lists of participants on their website, per NYS requirements.



TO FIND OUT WHICH PROVIDERS IN YOUR REGION ARE CONNECTED TO THE SHIN-NY, PLEASE FOLLOW THE LINKS BELOW:

[Bronx RHIO](#)

[HealtheConnections](#)

[HEALTHeLINK](#)

[Healthix](#)

[HealthlinkNY](#)

[Hixny](#)

[NY Care Information Gateway](#)

[Rochester RHIO](#)

Contact Information

If you are interested in learning more please contact one of the State's QEs:

Bronx RHIO	Charles Scaglione, Executive Director	cscaglio@brnxrhio.org
HealtheConnections	Rob Hack, President and CEO	rhack@healtheconnections.org
HEALTHeLINK	Dan Porreca, Executive Director	dporreca@wnyhealthelink.com
Healthix	Tom Check, President and CEO	tcheck@healthix.org
HealthlinkNY	Staci Romeo, Executive Director	sromeo@healthlinkny.com
Hixny	Mark McKinney, Chief Executive Officer	mmckinney@hixny.org
NY Care Information Gateway (NYCIG)	Nick VanDuyne, Executive Director	nick.vanduyne@nycig.org
Rochester RHIO	Jill Eisenstein, Executive Director	jeisenstein@grrhio.org