

NYeCNews

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NYeC 2020 Year-End Report Released



2020 was a year of uncertainty and challenge, and every industry was faced with a need to change course or find new ways to do things. Our healthcare community in particular faced seemingly insurmountable obstacles as it navigated the COVID-19 response. NYeC remains in awe of the dedication, perseverance and true heroism displayed by so many in the field and is thankful the SHIN-NY has been able to support providers and public health departments across the state as they continue to manage the impact of this pandemic.

Despite the unanticipated hurdles encountered over the past year, we are proud of what the organization and the SHIN-NY network have accomplished and encourage you to review our *2020 Year-End Report* highlighting that great work. We graciously thank all of our committed supporters and look forward to another year of strengthening healthcare delivery in new ways through health information exchange.

Read the full report at the button below.

[READ THE REPORT](#)

WATCH: New SHIN-NY Video Now Available in English and Spanish



NYeC has released a new video explaining how the SHIN-NY works and how it helps providers treat and manage patients across the state! The video highlights how use of the network improves patient outcomes and reduces healthcare spending.

The SHIN-NY enables providers to access comprehensive patient records, supporting coordinated care, collaboration, and ultimately better-informed patient care.

Watch this new video to learn more about health information exchange in New York State!

[WATCH VIDEO IN ENGLISH](#)

[EN ESPAÑOL](#)

NYeC CEO Val Grey Reappointed to HITAC



NYeC is pleased to announce that CEO Val Grey has been reappointed by Senator Chuck Schumer for a second three-year term as a member of the Office of the National Coordinator (ONC)'s Health Information Technology Advisory Committee (HITAC), which she has served on since 2018.

HITAC was established by the 21st Century Cures Act, and its purpose is to “recommend policies, standards, implementation specifications, and certification criteria relating to the implementation of a health information technology infrastructure” that helps to advance health information exchange both locally and nationally.

During her first term, Val was a member of several HITAC subcommittees including the Interoperability Standards Priorities Task Force, the Information Blocking Task Force, and the U.S. Core Data for Interoperability (USCDI) Task Force. NYeC looks forward to her ongoing involvement in the important advancements HITAC will continue to facilitate over the next three years.

[LEARN MORE ABOUT HITAC](#)

WATCH: SHIN-NY Spotlight Video: FLCH Delivers Quality, Coordinated Care with HIE



In the most recent SHIN-NY Spotlight installment, NYeC featured Finger Lakes Community Health, a Federally Qualified Health Center (FQHC) providing a full spectrum of medical and behavioral health services to patients in their region.

Finger Lakes Community Health Chief Medical Officer, Dr. Jose Canario, and Chief Quality Officer, Ellen Hey, NP, speak about the significant value to patient care they find by using the SHIN-NY, primarily through Rochester RHIO. Watch the video at the button below.

[WATCH VIDEO](#)

NYeC Submits Comments to CMS on the Prior Authorization and Patient Access Proposed Rule

On January 4, 2021 NYeC submitted comments to the Centers for Medicare and Medicaid Services (CMS) in response to the [Reducing Provider and Patient Burden by Improving Prior Authorization Processes and Promoting Patient Access to Electronic Health Information Proposed Rule](#), which included several related requests for information (RFIs).

NYeC's comments on the proposed rule support CMS' goals to advance interoperability through standards based APIs, but caution that APIs in and of themselves will not solve all of the challenges to seamless data exchange. Meaningful exchange via APIs requires robust data governance, coordination, and a foundation of reliable data. Health Information Exchanges (HIEs) and Health Information Networks (HINs), like the SHIN-NY, have a demonstrated history of providing these services and should be central to any nationwide interoperability strategy.

The RFIs sought insight on areas that NYeC has significant interest and investment in, including appropriate levels and roles of control over patient data, improving electronic prior authorization, the use of fax technology, the exchange of behavioral health information, and accelerating the adoption of social determinants of health data. NYeC responded, encouraging consensus on data segmentation methods to foster better control over data sharing, supporting solutions that eliminate the need for fax machines in a way that doesn't have unintended consequences for providers, calling for continued focus on support for behavioral health and other left behind sectors, and echoing the need for clarity and standardization around the collection and exchange of social determinants of health data.

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EMS & Pharmacies: Connect to the SHIN-NY! Time and Funds Still Available

The Data Exchange Incentive Program (DEIP) in New York State has historically supported a variety of healthcare organizations including practices with meaningful use providers, long-term care licensed facilities, diagnostic and treatment centers, behavioral health organizations and now EMS agencies and pharmacies. The program offers organizations who meet DEIP requirements up to \$13,000 to help offset the cost of connecting and contributing a pre-defined set of data to the SHIN-NY.

The following deadlines apply for each organization type with the understanding that each organization enrolled in Milestone 1 will meet Milestone 2:

EMS Agencies and Pharmacies

March 2, 2021: Milestone 1 - Enrollment: \$2,000

August 31, 2021: Milestone 2 - Go Live: \$11,000
(per connection)

Enrolled Organizations in Milestone 1: Practices with Meaningful Use Providers, LTC licensed facilities, DTCs, and BHOs

May 31, 2021: Milestone 2 - Go Live: \$11,000
(per connection)

For more information on your eligibility or whether you have been previously enrolled please visit our website [here](#) or email deip@nyhealth.org.

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Relationships, Relationships, Relationships: How HealthConnections Delivers Value Through Partnerships



With access to comprehensive, community-wide collections of patient information, clinicians can better address the needs of their patients — individually and as a population — to provide improved quality of care, support patient safety, and a better care experience.

The New York Medical Group Management Association (NYMGMA) recently published an article featuring HealthConnections in their newsletter *The New York Beat* about the value of community-wide data at the point of care, for patient population health, and quality programs.

Read the article at the button below.

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Rochester-Finger Lakes Region Pioneers Use of Electronic Medical Records for Population Health



Rochester RHIO partnered with [Common Ground Health](#) and University of Rochester Medical Center's [RocHealthData.org](#) to provide a snapshot of patients' health in the Rochester-Finger Lakes region. This unique collaboration has managed to navigate the hurdles that have sometimes kept digital medical records from being fully leveraged for population health reporting. This collaborative work over the past year has resulted in making a more robust patient health dataset accessible to the public.

Now in its second year, this data release provides a snapshot of county and regional rates for four key health measures: smoking, high blood pressure, diabetes, and adult obesity. These measures are pulled from more than a million patient observations securely stored by Rochester RHIO. At no time is personally identifiable information made available to the research and data teams.

"The ability to use electronic medical records for improving public health is a game changer, with our region paving the way for others across the U.S.," said Jill Eisenstein, Rochester RHIO President and CEO.

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Hixny: A Message from the CEO



As we enter 2021, we have a year of unprecedented uncertainty ahead of us. COVID-19 will continue to affect people's lives and the economy. It will continue to create opportunities for health information networks (HINs) to demonstrate the value and utility we offer to providers, patients, and public health agencies alike.

In supporting the state's efforts over the last year, we made tremendous strides, accomplishing a lot that we had on our agenda and a lot that we didn't. As we have in years before, we spent time creating the building blocks that we need to be able to accelerate the development of our services to improve provider workflow and patient engagement, and to convert data into useful information.

Read the rest of Hixny CEO Mark McKinney's message at the button below.

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NY Leads Initiative powered by Healthix Data is Live



Antimicrobial resistance (AR) is on the rise globally, accelerated by overuse and misuse of antibiotics. These threats are becoming commonplace in health-care facilities and significantly impact medically fragile populations. To address the infectious spread, New York State Department of Health and Healthix are working collaboratively with an industry partner, Infectious Disease Connect Inc, to deliver a sustainable and flexible reporting, tracking and surveillance system for AR and other infections, that can later be applied across healthcare facilities in New York State. Currently, Northwell and NYU Langone facilities are contributing and participating in the initiative, with more facilities coming online in 2020-21.

The NY Leads Initiative is an effort to: (1) Protect vulnerable populations (2) Keep healthcare facilities free of transmission and (3) Keep AR from spreading.

The purpose of this initiative is to effectively identify patients with AR organisms (e.g., CRE, Candida Auris, MDR-Acinetobacter, MDR-pseudomonas, MCR-a, VRSA/VISA), and other infectious diseases in order to help clinicians quickly intervene, improve care and, above all, prevent further spread.

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Learning Opportunities

PY 2021 Security Risk Assessment Overview

Date: Thursday, April 22 at 1:00 pm

Description: We will discuss what constitutes, or defines, a security risk analysis and the importance of conducting this analysis to identify and mitigate risks. We will then review resources and other related information as part of a practice's next step to implementing a security risk assessment plan and discuss the SRA changes for PY2021 and how to apply them in MEIPASS.

[REGISTER TODAY](#)

Prepare Now for Condensed PY2021

Payment Year 2021 is the final participation year for the NY Medicaid EHR Incentive Program. To comply with Federal Program Guidelines, the NY Medicaid EHR Incentive Program will operate on a condensed timeframe, requiring Eligible Providers to meet Stage 3 Objective and Measure thresholds and attest in MEIPASS by August 31st, 2021.

There are items that can be accomplished early in the calendar year to lessen the burden of this condensed timeframe (**bolded are new or adjusted for PY2021**):

- Calculate a Medicaid Patient Volume (90-days) using the Previous Calendar Year method.
- **Complete or schedule a Security Risk Assessment**
 - **Providers can attest to a future SRA date in 2021, however they are required to complete the SRA by 12/31/2021. We suggest completing this requirement prior to attesting.**
- Update the provider's intent to submit data to a Public Health Registry in MURPH. Confirm active engagement is correctly reflected using the MURPH Audit Report Card.
- **Set a timeline for success and build in extra time — NYS DOH will not be offering Attestation Deadline Extensions (ADEs) for PY2021.**
- Schedule time to work with your Technical Agent to prepare and receive all the updates on requirements for the final year of the program.