New York Association of Psychiatric Rehabilitation Services
SHIN-NY Overview and Update

Valerie Grey

April 27, 2017
What is the Statewide Health Information Network New York?
A Network of Networks – The Health Information Exchange (HIE) Ecosystem
8 Qualified Entities (QEs) Throughout the State

Qualified Entities Core Services (funded by government) include:

- Secure messaging
- Notifications & alerts
- Results delivery
- Patient record lookup & clinical viewer
- Consent management
- Public health access

QEs offer different value-added services (for a charge)
The History (About a Decade) with SHIN-NY and NYeC

New York’s Investment in the HIE Ecosystem

- NYeC Established
- SHIN-NY Launched
- HEAL 1
- HEAL 5
- HEAL 10
- HEAL 17
- HEAL 22
- ONC HISPC
- ONC NHIN Trial Implementation
- CDC Biosurveillance UPHN
- ONC Statewide HIE Award
- ONC REC Award
- ONC Beacon Award
- HITECH Signed
- MU Stage 1 Released
- MU Stage 2 Released
- ONC Standards & Interop Framework Initiative Launched

Source: NYS Office of Health Information Technology Transformation
Strong Governance & Oversight

SHIN-NY Regulation Adopted March 2016
10 NYCRR Part 300
Detailed policy guidance

• Hospitals with certified EHRs were required to connect by 3/9/17
• Health care facilities* with certified EHRs required to connect by 3/9/18
• Other providers should consider connecting given all the benefits to their patients, their practices, and vital role in VBC

QEs must go through rigorous review to obtain certification

* ambulatory surgery centers, diagnostic and treatment centers, clinics, nursing homes, home care services agencies, hospices, health maintenance organizations that are health care providers, and shared health facilities.
Why Do We Need SHIN-NY & NYeC?

Patients are Mobile & EHRs are Not Interoperable

<table>
<thead>
<tr>
<th>QE</th>
<th>% of Patients Overlapping other QEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTHeLINK</td>
<td>13</td>
</tr>
<tr>
<td>Rochester</td>
<td>12</td>
</tr>
<tr>
<td>HealtheConnections</td>
<td>20</td>
</tr>
<tr>
<td>Hixny</td>
<td>11</td>
</tr>
<tr>
<td>HealthlinkNY</td>
<td>32</td>
</tr>
<tr>
<td>Bronx</td>
<td>40</td>
</tr>
<tr>
<td>Healthix</td>
<td>13</td>
</tr>
<tr>
<td>NYCIG</td>
<td>53</td>
</tr>
</tbody>
</table>

Statewide Patient Record Lookup
Implemented in 2015 & Working

Allows QEs to query and get important clinical information from other QEs to share with providers

Cross QE Alerts
Being fully implemented in 2017

Allows QEs to receive, without querying, important clinical information from other QEs to share with providers
Who is Hooked up to the SHIN-NY?

- **97%** of FQHC
- **98%** of Hospitals
- **81%** of Public Health Departments
- **55%** of Long-Term Care Facilities
- **47%** of Home Care Agencies*
- **57%** of Physicians

All data above as of March 18, 2017 ... Data continuously being updated, improved, & refined

*Unduplicated licensed Article 36 organizations. Earlier data was more broadly inclusive and included duplication across QEs
Provider Assistance

**DEIP**

- Building EHR interfaces to NYS RHIOs to support data quality in the SHIN-NY
- $10k or more in incentives for connecting to a RHIO

**BHIT**

- Adult BH-HCBS provider organizations will receive payment assistance & technical support for adopting a BHIT qualified EHR / EBS & up to 2 yrs. of user licensing fees
- Those with a qualified system receive technical support & upgrade at no cost and up to two years of user licensing fees

For more information please visit: [http://www.nyhealth.org/explanation-of-services](http://www.nyhealth.org/explanation-of-services)
How is SHIN-NY being used?

Core Services in Past Year

- **OVER 3.5 MILLION** alerts delivered to clinicians (e.g. emergency room visit, inpatient discharge)
- **ALMOST 5 MILLION** patient record retrievals
- **OVER 20 MILLION** diagnostic and lab results delivered
### Consent in New York State

#### Percent of Total New Yorkers with Unique Consents

<table>
<thead>
<tr>
<th>Year</th>
<th>% Adult New Yorkers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>38%</td>
</tr>
<tr>
<td>2016</td>
<td>45%</td>
</tr>
<tr>
<td>2017</td>
<td>55%</td>
</tr>
</tbody>
</table>

**Aspirational Goal**: 95%

Note: Percentage shown is of the adult population of New York State (>18 years old) in 2016. This is approximately 15,618,300 adults out of 19,770,000 total living resident populations.

The numerators for each year have been adjusted to account for deceased residents with consent records, and residents that have moved out of state. The Statewide Master Patient Index was used as a guide to determine potential overlap for consented patients, and was used for deduplication. Methods used are approximate, are subject to change upon additional analysis.

*Updated NYS Consent total as of March 31, 2017*
Vision & Mission

SHIN-NY
Our mission is to improve healthcare through the exchange of health information whenever and wherever needed

Shared Vision
Our vision is a dramatically transformed healthcare system where health information exchange is universally used as a tool to make lives better

NYeC
Our mission is to improve healthcare by collaboratively leading, connecting, and integrating health information exchange across the State
What Is The SHIN-NY Value Proposition?

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

**Value-Based Care**

- Improve patient outcomes
- Less time testing and more on patient care
- Shared savings opportunities and penalty avoidance*
- Improve accuracy and speed of diagnosis

*SHIN-NY is a critical tool for health homes and VBC under DSRIP, MACRA, ACP, and others and can directly and indirectly help avoid penalties under MIPS

Hospitalization Event Notifications and Reductions in Readmissions of Medicare Fee-for-Service Beneficiaries in the Bronx, New York

Journal of the American Medical Informatics Association
October 7, 2016

An Empirical Analysis of the Financial Benefits of Health Information Exchange in Emergency Departments

Journal of the American Medical Informatics Association
June 27, 2015
How Can SHIN-NY Help With DSRIP?

- 2.a.i: Create an Integrated Delivery System Focused on Evidence-Based Medicine / Population Health Management
  - Requirements include partners hook up to QE/RHIO
- 2.b.iv: Care Transitions Intervention Model to Reduce 30-Day Readmissions of Chronic Health Conditions
- 2.b.ix: Implementation of Observational Programs in Hospitals
- 3.b.i: Cardiovascular Health Evidence-Based Strategies for Disease Management in High-Risk / Affected Populations
Strategic Planning

YEAR 1

IMPLEMENTATION OF TO BE DETERMINED PRIORITIES

NYEC GOVERNANCE CHANGES THROUGH SEPTEMBER

NYEC/RHIO CONTRACTING THROUGH OCTOBER 2017

STAKEHOLDER ENGAGEMENT THROUGHOUT

ORIENTATION & LISTENING TOUR
9/16 - 11/16

LONG-TERM VISION
12/16 - 3/17

MULTI-YEAR ROADMAP
12/16 - 7/17
What Are We Hearing Providers Want?

- Simplicity & ease of use (SSO)
- Speedy relevant information
- Better quality & complete data
- “Search – ability”
- Finish the basics
- Information that goes across borders
- Alignment & Standardization
- Easy reporting
- Output that matters
- EHR integration
- Highest privacy & security
- Consent policy changes
- Help educating patients
What Are The SHIN-NY Long-Term Objectives?

- Optimize Maximum Potential
- Integrate SDOH and other Data & Ensure Access
- Sustainability
Future Considerations & Trends

- Data Quality Assurance
- Patient Engagement & Customer Needs
- Quality Reporting
- All Payer Database
- Social Determinants of Health
- Population Health
The Road Ahead

Better Health for the Population
Better Care for Individuals
Lower Cost Through Improvement
# QE Contact Information

<table>
<thead>
<tr>
<th>Organization</th>
<th>Contact Person</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronx RHIO (Greater NYC)</td>
<td>Charles Scaglione, Executive Director</td>
<td><a href="mailto:csaglio@bronxrhio.org">csaglio@bronxrhio.org</a></td>
</tr>
<tr>
<td>Rochester RHIO (Rochester &amp; Finger Lakes Region)</td>
<td>Jill Eisenstein, Executive Director</td>
<td><a href="mailto:jeisenstein@grrhi.org">jeisenstein@grrhi.org</a></td>
</tr>
<tr>
<td>HealtheConnections (Central New York Region)</td>
<td>Rob Hack, President and CEO</td>
<td><a href="mailto:rhack@healtheconnections.com">rhack@healtheconnections.com</a></td>
</tr>
<tr>
<td>HEALTHeLINK (Western New York Region)</td>
<td>Dan Porreca, Executive Director</td>
<td><a href="mailto:dporreca@wnyhealthelink.com">dporreca@wnyhealthelink.com</a></td>
</tr>
<tr>
<td>Healthix (Greater NYC &amp; Long Island)</td>
<td>Tom Check, President and CEO</td>
<td><a href="mailto:tcheck@Healthix.org">tcheck@Healthix.org</a></td>
</tr>
<tr>
<td>HealthlinkNY (Southern Tier Region)</td>
<td>Christina Galanis, President and CEO</td>
<td><a href="mailto:cgalanis@healthlinkny.com">cgalanis@healthlinkny.com</a></td>
</tr>
<tr>
<td>Hixny (Capital Region)</td>
<td>Mark McKinney, CEO</td>
<td><a href="mailto:mmckinney@hixny.org">mmckinney@hixny.org</a></td>
</tr>
<tr>
<td>New York Care Information Gateway (Greater NYC Area &amp; Long Island)</td>
<td>Nick VanDuyne, Executive Director</td>
<td><a href="mailto:nick.vanduyne@nycig.org">nick.vanduyne@nycig.org</a></td>
</tr>
</tbody>
</table>
Sharing Health Information in the VBP Arena

- ED alerts support increased network care coordination
- Improved outcomes and risk stratification
- Ability to send referrals to all providers
- Effectively manage transitions of care
- Robust consent feature to manage data sharing