Everything SHIN-NY
Healthcare Dynamics, State of the Enterprise & Draft 2020 Roadmap

Val Grey
Executive Director
June 19, 2017
The Healthcare Debate Rages

• An estimated 2.7 million New Yorkers would lose health coverage
• Major fiscal impacts

• Passed the House with slim majority
• The bill is in play in the Senate
Federal & State
What Do I Mean?

States are Pushing Back

NYS has long history and special Constitutional provisions

• Unlikely to significantly unravel health insurance coverage
More Pressure On Healthcare Spending

Significant pressure on State Budget from Repeal & Replace (ACHA-House version):

- Decreases federal Medicaid match
- Per capita Medicaid cap
- Eliminates Medicaid local shares
- Eliminates Essential Plan
- Impact on Medicaid waivers (1115/DSRIP)

State Budget could get hit big-time in 2019-20 & 2020-21 and beyond
Federal HIT Policy Landscape Priorities

Top 3 Federal Priorities:

- Interoperability
- Usability
- Payment Reform (value based care)

Meaningful Use Stage 3 will change Transparency & patient engagement interest
Patients are Mobile and EHRs are Not Interoperable
SHIN-NY Is A Network Of Networks
8 Qualified Entities (QEs) + NYeC

QEs provide free core services, using government funding, to provide:

- 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)

Statewide Patient Record Lookup Fully Implemented
Cross QE Alerts will be fully implemented in 2017
SHIN-NY Evolution
Over the Last Decade or So . . .

Tremendous public benefit
• Supports Triple Aim, levels playing field, addresses non-interoperability

Idea became reality
• Local HIEs (QEs)
• Statewide connectivity

Fewer QEs & more sophisticated services
• But variation across the State

Strong government support
• Significant NYS and federal funding
• NYS regulatory requirements & policy decisions push connections
**Overarching vision** is a dramatically transformed healthcare system where health information exchange is universally used as a tool to make lives better

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

**NYeC mission** is to improve healthcare by collaboratively leading, connecting & integrating health information exchange across the State
SHIN-NY Is Open for Business...
It’s Working

Statewide Participation as of May 2017

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Organization</th>
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<tbody>
<tr>
<td>95%</td>
<td>FQHC</td>
</tr>
<tr>
<td>98%</td>
<td>Hospitals*</td>
</tr>
<tr>
<td>79%</td>
<td>Public Health Departments</td>
</tr>
<tr>
<td>55%</td>
<td>Long-Term Care Facilities</td>
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<tr>
<td>47%</td>
<td>Home Care Agencies</td>
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<tr>
<td>57%</td>
<td>Physicians</td>
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Last 12 Months Core Services

<table>
<thead>
<tr>
<th>Services</th>
<th>Count</th>
</tr>
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<tbody>
<tr>
<td>Alerts Delivered</td>
<td>OVER 6.5 MILLION</td>
</tr>
<tr>
<td>Patient Record Returns</td>
<td>OVER 4.9 MILLION</td>
</tr>
<tr>
<td>Results Delivered</td>
<td>OVER 33.1 MILLION</td>
</tr>
</tbody>
</table>
Minimum Data Set & Patient Consent

Key Components

Only about ½ of New Yorkers have provided written consent

First year of new minimum data set target (CCDA) low numbers of providers contributing full set today

NYeC has made number of policy recommendations to promote HIE use to improve healthcare

<table>
<thead>
<tr>
<th>Common Clinical Data Set</th>
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</thead>
<tbody>
<tr>
<td>Patient Name</td>
</tr>
<tr>
<td>Sex</td>
</tr>
<tr>
<td>DOB</td>
</tr>
<tr>
<td>Race</td>
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<tr>
<td>Ethnicity</td>
</tr>
<tr>
<td>Preferred Language</td>
</tr>
<tr>
<td>Smoking Status</td>
</tr>
<tr>
<td>Problems</td>
</tr>
<tr>
<td>Medications</td>
</tr>
<tr>
<td>Medication Allergies</td>
</tr>
</tbody>
</table>
Lots Of Listening
Customer & Stakeholder Input

And QEs + many individual providers, health plans, & health systems . . .
SHIN-NY 2020 Roadmap Draft
Optimizing, Integrating, Preparing

Top Priorities

Connecting Quantity & Quality Of Clinical Data
Supporting Value Based Care

Consistent Complete Accurate
Data Quality
• Ambitious targets
• Emphasis on standards
• Performance-based contracting
• Consistent data-driven decision-making
• Continuous feedback loop from all
• Promoting partnerships and learning
• Roadmap that can be calibrated given uncertainties
• Strong education and advocacy for SHIN-NY
What Are The SHIN-NY Infrastructure Goals?

HIE UNIVERSALLY USED TO IMPROVE HEALTHCARE

- MAXIMUM PARTICIPATION
- COMPLETE & HIGH QUALITY DATA
- HIGH VALUE & SATISFACTION
- EFFICIENT & AFFORDABLE

ACCOUNTABILITY, TRUST & RELIABILITY
The Basic Foundation
What Does Success Look Like?

- 100% of hospitals participating and contributing full data (CCDA)
- 70% of all other providers participating and contributing full data (CCDA)
- 95% of patients consent
- Elevate security via HITRUST
- New measurement metrics for
  - highest quality data
  - meaningful use of core services
  - SHIN-NY enterprise-wide availability
  - customer satisfaction
Use of the SHIN-NY to access patient information is associated with:

- 57% reduction in patient readmissions within 30-days after hospital discharge
- 30% fewer emergency department admissions
- 52% reduction in laboratory tests & a 36% reduction in the estimated number of radiology exams
- 25% fewer repeat images within 90-days of first imaging procedure

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

Critical component of DSRIP, DSRIP VBP, APC, MACRA/MIPS, ACOs, etc.
Some Examples: MACRA/MIPS & DSRIP
VBC . . . What Are We Striving For?

Goals and Possibilities

Enhanced Functionality
- Single Sign On for Health Commerce System (I-STOP, others), smarter alerts, MACRA/MIPs compliance, care plans, common data elements, data quality measurement, exploration of patient centered data home

Integration of Other Important Data
- Claims, eMOLST, Rx, EDRS, Registries, Social Determinants of Health

Innovation Experiments to Test Highest Value
- Quality measurement reporting, smarter alerts, FHIR, Blockchain, AI, machine learning, patient engagement
Successful Value Based Care Needs . . .

Current SHIN-NY Infrastructure and Effective Usage of Core Services +

- Social Determinants of Health Information
- Quality Measurement Reporting
- Data Integration
- Patient Engagement
- Interoperability & Standards

Interoperability is almost universally seen as a major obstacle to effectively using and meeting the potential of health IT.
• Usability, usability, usability

• Lack of interoperability and standards often cited as major barrier in value based care

• NYS and the Roadmap want interoperability standards
  o CCD/C-CDA & common clinical data set
  o RSNA

• SHIN-NY roadmap will promote interoperability standards to meet the goals of NYS
  o Government subsidies only support CERTIFIED

• Responsiveness to EHR customers & QEs

• Need to build more consistent hubs & gateways to QEs
Continuous Feedback
Value, Satisfaction & Usage

Customer (providers & plans)
Satisfaction Surveys

Best Practices & Learning Forums

Additional New Advisory Groups

HIE Value Studies
Value Engineering SHIN-NY Operations
Efficiency & Affordability

- Group Purchasing
- Specialization
- Shared Services
- Standardization
- Potential Mergers
- “Wire Once” Policy
Roadmap Tools & Levers

- Government Funding
- Policy
- Advocacy
- Communication
- Best Practices
QE Performance Contracts

**Core Infrastructure Funding**
- Reasonable payment for basic components of HIE

**Performance Payments**
- Gap to Goal payments on achieving metrics & milestones

**Innovation Pool**
- Investments in process or technology innovations

BUILDING THE SUPER-CHARGED PLATFORM
Provider Assistance Services
NYeC’s HAPS Team Can Help!

- **NYSPTN**
  - Need help with transformation and getting ready for value based care?

- **EP2**
  - Have a certified EHR but need assistance with meeting MU requirements?

- **BHIT**
  - Are you a behavioral health provider and don’t have a certified EHR yet and need help?

- **DEIP**
  - Do you already have a Certified EHR and need funding assistance to connect to a QE/SHIN-NY?

- **APC**
  - Are you a primary care provider looking to participate in advance primary care transformation?
## Get Connected!!

### QE Contact Information

<table>
<thead>
<tr>
<th>RHIO</th>
<th>Area</th>
<th>Website URL</th>
</tr>
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<tbody>
<tr>
<td>Bronx RHIO</td>
<td>(Bronx)</td>
<td><a href="http://bronxrhio.org">http://bronxrhio.org</a></td>
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<tr>
<td>Rochester RHIO</td>
<td>(Rochester Area)</td>
<td><a href="http://www.grrhio.org">http://www.grrhio.org</a></td>
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<tr>
<td>HealtheConnections</td>
<td>(Central New York)</td>
<td><a href="http://www.healtheconnections.org">http://www.healtheconnections.org</a></td>
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<tr>
<td>HEALTHeLINK</td>
<td>(Western New York)</td>
<td><a href="http://wnyhealthelink.com">http://wnyhealthelink.com</a></td>
</tr>
<tr>
<td>Healthix</td>
<td>(NYC &amp; Long Island)</td>
<td><a href="http://healthix.org">http://healthix.org</a></td>
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<td>HealthlinkNY</td>
<td>(Southern Tier)</td>
<td><a href="http://healthlinkny.com">http://healthlinkny.com</a></td>
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<tr>
<td>Hixny</td>
<td>(Capital Region &amp; Northern NY)</td>
<td><a href="https://hixny.org">https://hixny.org</a></td>
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<tr>
<td>New York Care Information Gateway</td>
<td>(NYC &amp; Long Island)</td>
<td><a href="http://nycig.org">http://nycig.org</a></td>
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Always Remember The Ultimate Goal!

Better Health for the Population
Better Care for Individuals
Lower Cost Through Improvement
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