

Criteria for New York State Patient-Centered Medical Home (NYS PCMH) Enrolled Practices

The New York State Department of Health, with support from the Centers for Medicare & Medicaid Services, has established SHIN-NY Connections Initiative (SCI) to increase health information exchange (HIE) adoption across the state by building electronic health record (EHR) interfaces to New York State’s HIE, the Statewide Health Information Network for New York (SHIN-NY). The SHIN-NY connects eight regional networks, or Qualified Entities (QEs). This program is designed to help offset the cost for primary care practices connecting to a QE.

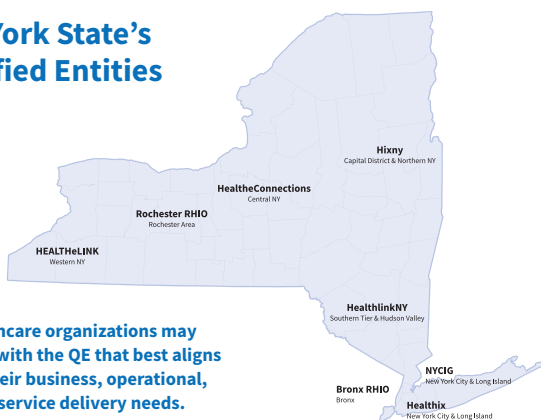
The completion of an eligible EHR interface to a QE will satisfy the requirements of New York State Patient-Centered Medical Home (NYS PCMH) standard CC 21.

Eligibility Criteria

Participation is open to all NYS PCMH Recognition Program enrolled practices.

Note: If a practice has providers that have attested to and been paid under the Medicare or Medicaid Promoting Interoperability Program (formerly Meaningful Use), they will be enrolled in the Data Exchange Incentive Program (DEIP) instead. DEIP offers identical payments to offset one-time cost for connecting to the SHIN-NY.

New York State’s Qualified Entities



Healthcare organizations may connect with the QE that best aligns with their business, operational, and service delivery needs.

An organization must:

- Have a Certified Electronic Health Record (CEHRT) for, at a minimum, the Privacy & Security criteria (d)(1)-(d)(8) as defined by CMS*

OR

Have an EHR that possess HITRUST Certification, NIST CSF validation, or SOC2, Type II Audit (with no material findings) with additional attestation from the EHR vendor related to Privacy & Security capabilities within the EHR product**

- Have an EHR that can send information electronically to a QE in C-CDA format
- **NOT** already be connected to a QE and contributing data
- **NOT** have received payment from any source for similar HIE activities (i.e. TCPI, DSRIP/ PPS-supported PCMH, MU, DEIP, etc.)

*The EHR vendors must have and maintain a Certification Status of 'Active' from an ONC Authorized Testing & Certification Body (ONC-ATCB). EHR vendor may certify against additional Privacy & Security criteria as desired. Certification may be against the 2014 or 2015 Edition of ONC Certification. Additionally, the ONC-ATCB may also require (g.4) Quality Management System and/or (g.5) Accessibility Centered Design.

**The EHR vendor must provide NYeC with an attestation that demonstrates their product’s ability to meet the requirements 45 CFR 170.314(d)(1) through 170.314(d)(8) which represent the EHR features, functions, and behaviors related to privacy and security. SOC 2, Type II audit will only be acceptable through September 30, 2019, at which time the vendor must be certified or assessed and compliant with ONC Privacy & Certification criteria, HITRUST, or NIST.



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Conditions of Participation

Organizations participating in SCI are incentivized to contribute specific data elements to the SHIN-NY.

Sign a QE Participation Agreement with the QE on or after 12/1/17	<p>Contribute to the QE the Common Clinical Data Set in C-CDA format, which include, at a minimum, the following data expressed, where applicable, according to the standards as defined in the Summary of Care Record specifications.¹</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Patient Name</td> <td style="width: 50%;">9. Medications</td> </tr> <tr> <td>2. Sex</td> <td>10. Medication Allergies</td> </tr> <tr> <td>3. Date of Birth</td> <td>11. Laboratory Test(s)</td> </tr> <tr> <td>4. Race</td> <td>12. Laboratory Value(s)/Result(s)</td> </tr> <tr> <td>5. Ethnicity</td> <td>13. Vital Signs (height, weight, blood pressure, BMI)</td> </tr> <tr> <td>6. Preferred Language</td> <td>14. Care Plan Field(s), including Goals and Instructions</td> </tr> <tr> <td>7. Smoking Status</td> <td>15. Procedures</td> </tr> <tr> <td>8. Problems</td> <td>16. Care Team Member(s)</td> </tr> </table>	1. Patient Name	9. Medications	2. Sex	10. Medication Allergies	3. Date of Birth	11. Laboratory Test(s)	4. Race	12. Laboratory Value(s)/Result(s)	5. Ethnicity	13. Vital Signs (height, weight, blood pressure, BMI)	6. Preferred Language	14. Care Plan Field(s), including Goals and Instructions	7. Smoking Status	15. Procedures	8. Problems	16. Care Team Member(s)
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Must be able to electronically receive a Summary of Care Record in a C-CDA format (via QE web portal, DIRECT secure messaging, or EHR interface)																	
Attests to continue data exchange for one year. Failure to continue data exchange for one year could result in a claw back penalty.																	

¹Details on the Common Clinical Data Set can be found here: https://www.healthit.gov/sites/default/files/commonclinicaldataset_ml_11-4-15.pdf

Incentive Payments

NYeC is coordinating the rollout of the program and administering the incentive payments to NYS PCMH enrolled practices on behalf of the DOH. **Limited funding is available and this program is operated on a first-come, first-served basis.** All milestones must be completed by **January 31, 2019** to receive funding.

NYS PCMH Standard Alignment	Required Documentation	Measurement	Payment
Standard CC21 Enrollment	SCI Milestone 1 Attestation: Participation Agreement	Organization attests they have signed a QE participation agreement on or after 12/1/17	\$2,000
	Appendix 1	Document listing practice providers and corresponding NPI numbers	
Standard CC21 Go Live	SCI Milestone 2 Attestation: Go Live	Organization attests they are able to receive a Summary of Care Record electronically AND a connection is established to the QE and they are contributing all required data elements.	\$11,000 (per connection)