

New York State Data Exchange Incentive Program (DEIP)

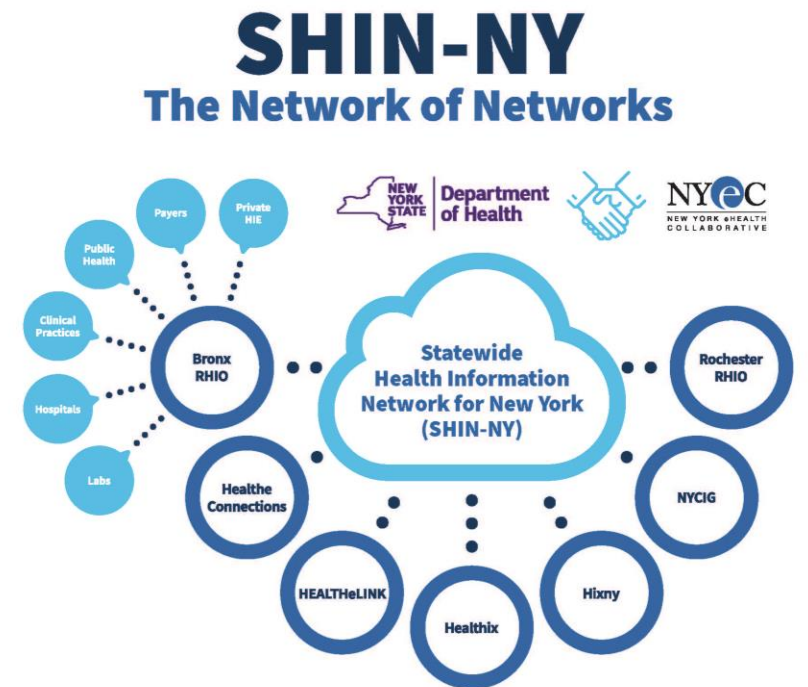
November 2019

Agenda

- I. SHIN-NY & DEIP program basics
- II. Eligibility Requirements
- III. Data Contribution Requirements
- IV. Program and Payment Milestones
- V. QE Contacts
- VI. How to Get Started

The SHIN-NY in a Nutshell

- The **SHIN-NY** is a secure network of networks consisting of the Regional Health Information Organizations (also known as Qualified Entities (QEs))
 - Provides efficient access to clinical records helps providers better manage patient care
 - The SHIN-NY can help reduce healthcare costs, improve healthcare coordination, and increase the quality of care for patients in New York State
- Since March 2015, all RHIOs must provide the following **Core Services** to Participants
 - Statewide Patient Record Lookup*
 - Statewide Secure Messaging (Direct)*
 - Notifications (Alerts / Subscribe and Notify)*
 - Provider & Public Health Clinical Viewers*
 - Consent Management
 - Identity Management and Security
 - Public Health Reporting Integration
 - Lab Results Delivery*



DEIP Basics

- **Data Exchange Incentive Program (DEIP)** was established by the New York State Department of Health (NYSDOH), with support from the Centers for Medicare & Medicaid Services (CMS), to increase HIE adoption across the state by helping to defray the cost for an organization when connecting to their local QE
- The New York eHealth Collaborative (NYeC) is coordinating the rollout of the program and the incentive payments on behalf of the DOH
- Electronic Health Record (EHR) interfaces to New York State Qualified Entities (QEs) increases the quantity and quality of data in the SHIN-NY and build value for providers and patients at the point of care
 - In order to receive the full funding amount, \$13,000, a provider needs to have a live connection of this type with their QE
- Organizations participating in DEIP are incentivized to contribute a pre-defined set of data elements to their local QE
- Limited funding is available and this program is operated on a first-come, first-served basis

DEIP Eligibility Requirements

An organization must meet one of the following criteria:

Regulated Facilities

- Be licensed as one of the following:
 - Article 28 Nursing Homes (SNFs) and Diagnostic & Treatment Centers (DTCs)
 - Article 36 Home Health agency/program
 - Article 40 Hospice

Behavioral Health

- Be licensed by:
 - OMH
 - OASAS
- Or be a designated HCBS provider

EPs

- Have at least one provider who has attested to and been paid under Medicare MU or Medicaid MU (any year, any stage)

DEIP Eligibility Requirements- continued

An organization must meet all of the following criteria:

EHR

- Have an EHR that meets the Privacy & Security criteria set forth by NYeC and NYSDOH (see next slide)
- Have an EHR that is able to send data to the QE as either CCD or C-CDA
 - *EPs must send as C-CDA*

Medicaid

- Organization must accept Medicaid, in one of the following forms:
 - Fee-for-Service
 - Managed Care
 - HARP (for BH)

Other

- Organization/provider must not already be connected to/contributing data to a QE
- Must not have received payment from any source for similar HIE activities

NEW EHR Privacy & Security Requirements

- For purposes of DEIP, an EHR product and version must have obtained one of the following Privacy & Security Assurance(s) (A, B, and/or C):

A

- ONC Certification for, at a minimum, the following Privacy & Security criteria:
- **(d.1) Authentication, Access Control, and Authorization**
- **(d.2) Auditable Events**
- **(d.3) Audit Report(s)**
- **(d.4) Amendments**
- **(d.5) Automatic Log-off**
- **(d.6) Emergency Access**
- **(d.7) End-user device encryption**
- **(d.8) Integrity**
- Certification may also require the following dependency criteria:
- **(g.4) Quality Management System**
- **(g.5) Accessibility-Centered Design**

B

- Current SOC 2, Type II audit with no material findings**

C

- Current, validated HITRUST assessment or NIST cybersecurity framework assessment**

**If the EHR product and version meets requirement 'B' or 'C', vendor must provide additional attestation form related to EHR features, functions, and behaviors related to privacy and security

DEIP Data Contribution Requirements

Article 28 DTCs

- Contribute the **Common Clinical Data Set** in C-CDA:
- Patient name, sex, DOB, race, ethnicity, preferred language, smoking status, problems, medications, medication allergies, lab tests, lab values/results, vital signs (height, weight, blood pressure, BMI), procedures, care team members
- **Additional recommended data elements:** care plans, incidents & accidents (I&A), nurses notes, progress notes, orders, pain and skin assessments, Advance Directives/MOLST

Article 28 SNFs, Art. 36, & Art. 40

- Contribute the **Common Clinical Data Set** in CCD or C-CDA:
 - Patient name, sex, DOB, race, ethnicity, preferred language, problems, medications, medication allergies, vital signs (height, weight, blood pressure, BMI), care team members
 - **Additional recommended data elements:** lab tests, lab values/results, procedures, smoking status, care plans, incidents & accidents (I&A), nurses notes, progress notes, orders, pain and skin assessments, Advance Directives/MOLST

Behavioral Health

- Contribute **five specified Core elements**, plus three additional data elements, in CCD or C-CDA:
 - *Core (required):* encounters, demographics, procedures/service, individualized service plans, diagnoses
 - *Additional recommended data elements:* Medications, labs, allergies

Medicare & Medicaid EPs

- Contribute the **Common Clinical Data Set** in C-CDA:
- Patient name, sex, DOB, race, ethnicity, preferred language, smoking status, problems, medications, medication allergies, lab tests, lab values/results, vital signs (height, weight, blood pressure, BMI), procedures, care team members, care plans

Program & Payment Milestones

Milestone/Activity	Deadline	Incentive Payment
<p>Milestone 1: Attest to enrolling in DEIP:</p> <ul style="list-style-type: none"> - Be a QE participant - Commit to meeting Milestone 2 requirements 	<ul style="list-style-type: none"> - Participant must attest to meeting Milestone 2 by 9/30/2020 as long as funding is not exhausted before this time 	\$2,000 per organization
<p>Milestone 2: Attest to the following:</p> <ul style="list-style-type: none"> - Have the ability to receive a summary of care document in C-CDA - Have established a connection to the QE and that the organization is contributing the required clinical data as per the program requirements 	<ul style="list-style-type: none"> - Attesting to Milestone 2 must occur within six months after connectivity/ data contribution go-live - Participant must attest by 9/30/2020 as long as funding is not exhausted before this time 	\$11,000 per connection

How to Get Started

- ✓ Check your organization's eligibility against the program requirements
- ✓ Contact your local QE
- ✓ Talk to your EHR vendor
- ✓ Contact NYeC or your local QE with any questions deip@nyehealth.org

QE	Contact	Email
Bronx RHIO	Keela Shatzkin	keela@shatzkinsystems.com
HealthConnections	Tamie Kiniry	tkiniry@healthconnections.org
HEALTHeLINK	Stephen Gates	sgates@wnyhealthelink.com
Healthix	Charlene Prismy	cprismy@healthix.org
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NYCIG	Sue-Ann Villano	sue-ann.villano@nycig.org
Rochester RHIO	Denise Dinoto	denise.dinoto@grrhio.org

Overview documents Available Online



For more information, please visit our website:

<http://www.nyehealth.org/deip>



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