

New York eHealth Collaborative Policy Committee Meeting
Feb. 26, 2020
12 p.m. – 4 p.m.
Meeting Notes

A meeting of the NYeC Policy Committee was held on Feb. 26, 2020. Present either in person or via telephone were:

Art Levin, Center for Medical Consumers, Chair of Policy Committee
Steve Allen, HealthLink
Jill Eisenstein, Rochester RHIO
Taiymoor Naqi, Hixny
Geraldine Johnson, NYS DOH
James Kirkwood, NYS DOH
Jonathan Karmel, NYS DOH
Dan Schiller, NYS DOH
Dr. Virginia Scott-Adams, NYS OPWDD
David Nardolillo, NYS OPWDD
Carmen Barber, NYS OMH
Dr. John-Paul Mead, Cayuga Medical Associates
Dr. Raul Vazquez, Urban Family Practice
Dr. Tom Mahoney, Common Ground Health
Dr. David Cohen, Maimonides Medical Center
Dr. Glenn Martin, Queens Health Network
Chuck Bell, Consumer Reports
Laura Alfredo, GNYHA
Zeynep Sumer King, GNYHA
Tom Hallisey, HANYS
Linda Adamson, NYSTEC
Val Grey, NYeC
Cindy Sutliff, NYeC
Nate Donnelly, NYeC
Alexandra Fitz Blais, NYeC
Sam Roods, NYeC
Bob Belfort, Manatt
Alex Dworkowitz, Manatt

The meeting was called to order by Mr. Levin at 12 p.m.

I. Welcome and Introductions

Mr. Levin welcomed the Committee members and introduced the new members of the Committee.

II. DOH Update

Mr. Kirkwood said the updated version 3.7 of the SHIN-NY Policies was going through approval. He said he expected the new version to be official on the NYS DOH website in the next few weeks.

III. Executive Director Update

Mr. Levin introduced Ms. Grey to provide an update. Ms. Grey noted that since the SHIN-NY is government funded, the state budget process is very important. She said that funding was included for the SHIN-NY in the governor's proposal, and that it was important to get that funding through the legislature.

Ms. Grey said she was pleased that some of NYeC's comments were recognized in the final DSRIP 2.0 proposal that was sent to the federal government, but that the federal government ultimately declined to endorse DSRIP 2.0.

On the federal side, Ms. Grey said that everyone was anxiously waiting for the interoperability rules to be released. Ms. Grey explained that the efforts of the federal government revolved around four themes, one of which is to modernize HIPAA and to make data sharing the norm. Ms. Grey provided an overview of NYeC's comments on the interoperability rules.

Mr. Allen asked how this would be applied to entities not subject to meaningful use requirements. Mr. Belfort responded that they would have to find a way to share information. Dr. Vazquez asked how the rules would apply to the state, and Ms. Grey answered it would apply in the same way that the rule applies to providers.

Ms. Sumer King said one of the biggest wins of the regulations would be to reduce fees imposed on providers. Dr. Mahoney observed that some electronic health record vendors are still charging high prices.

Ms. Grey described the latest occurrences with the national health information network proposal known as TEFCA. She noted that the Sequoia Project had been selected as the recognized coordinating entity (RCE), and that NYeC was exploring an application to become a Qualified Health Information Network (QHIN). Mr. Levin asked if TEFCA is really voluntary. Ms. Grey answered that while there is no requirement to join, the federal government is planning on using levers where they can to promote participation.

IV. Overview of 2019 Policy Changes

Ms. Sutliff provided an overview of the 2019 policy changes that were adopted by the Policy Committee. She noted that a lot of discussion had occurred on the consent transferability issue, and that has led to a conversation about the ways to make consent forms more efficient. This process led to the proposal for a new form that would be implemented during a two-year rollout period. Ms. Sutliff described this as an exciting step going forward. Mr. Dworkowitz provided an overview on the changes to the policies regarding death notification and disclosures to death investigators.

Ms. Sutliff explained that a new policy on authentication requirements was also being adopted, as the old version referred to single factor authentication when today dual factor authentication is the standard. Mr. Bell asked how this change would impact older users. Mr. Allen responded that the change applied to providers, not patients.

V. 2020 Areas of Focus

Ms. Sutliff presented the 2020 area of focus for the Policy Committee, which she explained resulted from leadership planning at the end of 2019. Ms. Sutliff described how the areas of focus tracked the SHIN-NY 2020 roadmap. Mr. Levin added that the Committee used to be very reactive and in recent years had become more proactive to address policy issues of central importance to the SHIN-NY.

Ms. Sutliff said that the SHIN-NY consent framework will be a big part of what the Committee focuses on this policy cycle.

Dr. Mahoney asked how the work of the QEs was interacting with the All Payer Database. Mr. Donnelly said that the QEs are doing a lot of work on claims integration generally, as many of the QEs are working to get data directly from the plans.

VI. Community-Based Organization (CBO) Participation

Mr. Donnelly explained that NYeC had conducted stakeholder outreach on the proposed CBO principles. He said that CBOs were generally supportive of the principles. The CBOs agreed they should be subject to the HIPAA security rule, and they felt strongly that they needed to adopt such security practices if they are going to be taken seriously.

Mr. Dworkowitz described the proposed definition of a CBO. Mr. Allen asked if CBOs could access services completely independently of covered entities. Mr. Belfort said there is no requirement that the CBOs provide services in concert with covered entities. Mr. Bell said they could incentivize a network of CBOs to work together. Mr. Allen expressed concerns about organizations demanding access to the SHIN-NY based on a claim that they are CBOs. Mr. Belfort responded that CBOs are subject to the same rules as every other participant, and they need to have a relationship with the patient. A homeless shelter may need information about a patient but may not be working in tandem with a health care provider. Dr. Vazquez noted that there are 7,000 nonprofits in the Buffalo area, and asked how they would narrow the network.

Ms. Sumer King asked if there is a board that reviews new participants. Mr. Allen said it might be reasonable to get a reference, and Mr. Naqi thought some due diligence could be appropriate. Mr. Belfort said they could add language to the Policies indicating that QEs have the discretion to accept new CBO participants based on how they meet the definition outlined in the policies. Mr. Belfort said there could be objective criteria, such as requirement for every CBO to submit a risk analysis under the HIPAA security rule.

Ms. Alfredo suggested that the policies be amended to allow for heightened auditing of CBOs.

Dr. Martin asked if a reproductive health CBO could view information in the SHIN-NY searching for women who are pregnant, expressing concern that doing so would be an abuse of the SHIN-NY. Mr. Allen responded that CBOs would have the same limitation as other SHIN-NY participants, in that they would need to have a relationship with patients and patient consent for access.

Mr. Donnelly said he worried about a narrow definition of a CBO that would result in low participation of CBOs in the SHIN-NY.

Mr. Dworkowitz explained how the definition of care management was being revised to take into account CBO participation. Dr. Mahoney said in many cases, the CBO is providing a social service, not simply managing a service. Mr. Belfort suggested the definition be revised to include a provision about delivering or coordinating a social service.

Mr. Kirkwood said they could adopt a rule listing exactly what could be shared with CBOs. Mr. Belfort said they had thought about this approach, and that there was a concern that a preset list of data elements was too rigid. Mr. Kirkwood said the proposal did not go far enough to give people comfort.

Ms. Grey said 200 CBOs are already connecting to the SHIN-NY, and that they could do more to establish how information was being presently shared with CBOs. Ms. Sutliff said they would do some more research and would revise the draft CBO language accordingly.

VII. Closing

Mr. Levin thanked the Committee members for their time and effort and adjourned the meeting.