

New York eHealth Collaborative Policy Committee Meeting
February 26, 2019
2 p.m. – 4 p.m.
Meeting Notes

A meeting of the NYeC Policy Committee was held on February 26, 2019. Present either in person or via telephone were:

Art Levin, Center for Medical Consumers, Co-Chair Policy Committee
Steve Allen, HealthLink
Tom Check, Healthix RHIO
Amy Warner, Rochester RHIO
Deirdre Depew, NYS DOH
James Kirkwood, NYS DOH
Jonathan Karmel, NYS DOH
Jennie Law, NYS DOH
Christie Hall, NYS DOH
Lynn Dicerbo, NYS OMH
David Nardolillo, NYS OPWDD
Dr. Virginia Scott-Adams, NYS OPWDD
Dr. John-Paul Mead, Cayuga Medical Associates
Dr. Tom Mahoney, Common Ground Health
Zeynep Sumer King, GNYHA
Val Grey, NYeC
Eric Boateng, NYeC
Cindy Sutliff, NYeC
Jeannette Rossoff, NYeC
Nathan Donnelly, NYeC
Alison Birzon, NYeC
Gamble Heffernan, NYeC
Bob Belfort, Manatt
Alex Dworkowitz, Manatt

The meeting was called to order by Mr. Levin at 2 p.m.

I. Welcome and Introductions

Mr. Levin welcomed the Committee members and described the meeting agenda. Mr. Levin introduced Mr. Kirkwood to provide an update.

II. DOH Update

Mr. Kirkwood said the revisions to the SHIN-NY policies and procedures were being reviewed by the Department of Health. He said that he expects final approval of the revisions to occur soon.

III. Executive Director Update

Mr. Levin introduced Ms. Grey to provide an executive director update.

Ms. Grey explained that the executive budget has proposed to fund the SHIN-NY at current levels. She noted that the 30-day amendment, that had included reductions in the health care field, did not propose a change to SHIN-NY funding. She said NYeC was remaining vigilant in its advocacy efforts to make sure legislators understand the value of the SHIN-NY.

On the federal side, Ms. Grey noted that 45,000 people had recently attended the HIMSS conference where ONC and CMS unveiled two long awaited regulations on interoperability. She said that NYeC is still reviewing those proposals, but it is difficult to put all the pieces together since the revised TEFCA proposal has not yet been released.

Ms. Grey said at the highest level, the two proposed rules are very encouraging, as the intent is to push interoperability more quickly and in a more aggressive way. She observed that the ONC rule was implementing many requirements of the 21st Century Cures Act, including the information blocking proposed rule. She said the requirement to use a standardized FHIR API and the U.S. Core Interoperability Data Set could also have an important impact. Ms. Grey noted the CMS rule requires plans to support the exchange of data and participate in a trusted exchange network. She added that CMS is also encouraging hospitals to share admission and discharge data, which is something that hospitals in New York already do.

Mr. Levin agreed the rules are very important, and said things are changing fast. Ms. Sutliff said these rules provided one context for the Policy Committee's agenda for 2019.

Ms. Sumer King agreed that it was a heartening set of proposed regulations, and that she was excited but in some cases dismayed. She noted that the goal is to unleash data, and that the SHIN-NY is for the most part a closed network within New York State, and therefore SHIN-NY policies may need to be reframed for external health information exchange. Ms. Grey agreed.

IV. HIPAA RFI comment letter

Ms. Birzon noted that NYeC had submitted a comment letter to the Office of Civil Rights in response to its request for information for changes to the HIPAA regulations. Ms. Birzon provided an overview of NYeC's comments, which addressed issues such as mandated disclosures, sharing data with non covered entities, accounting of disclosures, and substance use disorder information sharing.

Mr. Check said it was unclear as to whether QEs in New York would be able to participate in the exchanges described in the letter without a change in SHIN-NY policy. Mr. Belfort responded that it depends on whether the policies are driven by state law or are discretionary, and that if the policies go beyond state law then this was a potential issue. Mr. Dworkowitz observed that ONC's proposed information blocking rule may ultimately govern this issue.

V. Disclosure of Patient Death Information

Mr. Levin introduced Mr. Allen to address the issue of disclosure of death notifications. Mr. Allen noted that providers had said it would be helpful if they could receive notices of their patients' deaths, since that would help ensure that such providers do not engage in patient scheduling and follow up care for the deceased. Mr. Allen said this is permitted under the current policies only if there is patient consent.

Dr. Mahoney asked if insurers would be interested in receiving such notifications, saying that in his experience insurers would find this information to be a significant plus. Mr. Allen said he had contemplated that the notice could go to insurers. Mr. Belfort said this information would be helpful for Medicaid managed care, since it can take a while for such plans to determine that an enrollee has died given that no premiums are paid to such plans.

Mr. Levin asked if anyone had an objection to this proposal. Mr. Allen noted the proposal would just allow for disclosure of demographics and date of death. Ms. Grey agreed that this was the right approach, since if cause of death was disclosed then it may create more issues.

Ms. Sutliff said policy language would be drafted on this issue and put forward at the next meeting.

VI. 2019 Policy Priorities

Mr. Levin said that the leadership team held a meeting a few weeks ago, and the group had concluded that the SHIN-NY policies need to be nimble and flexible while protecting privacy and security. Ms. Sutliff said the goal was to modernize the SHIN-NY policies in accordance with what was occurring at the federal level and in keeping with the SHIN-NY 2020 Roadmap priorities. She said that such modernization could include ensuring that data exchange occurs statewide, allowing non covered entities to participate in data exchange, and increasing the participation of health plans. Mr. Dworkowitz said the first step was to assess barriers to statewide data sharing, and the solution to such barriers may or may not involve policy changes.

Ms. Sutliff explained that as part of the Policy Committee work several stakeholder groups including QEs would be asked for input on the key issues.

Mr. Check said it would be helpful to analyze the completeness and quality of the data held by the SHIN-NY. Ms. Grey cautioned that they did not want to overcommit, as this is one of the issues being addressed with performance based contracting. Mr. Check agreed.

Mr. Check said that health plan participation is very important, and that they should work to encourage health plans to contribute data as well as receive data. Ms. Sutliff agreed.

VII. Closing

Ms. Sutliff said their next meeting would be a conference call on March 19 from 2-4pm. Mr. Levin thanked the Committee members for their time.

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