New York eHealth Collaborative Policy Committee Meeting October 18, 2023 12:00 p.m. – 1:30 p.m. Meeting Notes

A meeting of the NYeC Policy Committee was held on October 18, 2023. Present via telephone or videoconference were:

Policy Committee Voting Members

Dr. Lawrence Brown, Addiction Medicine and Public Health

Alan Cohen, JASA

Dr. David Cohen, Maimonides

Dr. Sabina Lim, Mount Sinai Health System

Taiymoor J. Naqi, Hixny

Todd Rogow, Healthix

Ex-Officio

Patti Burandt, HealtheLink (BOC Rep)

Deirdre Depew, NYS DOH

Christie Hall, NYSTEC

Thomas Hallisey, HANYS

Puja Khare, GNYHA

Jim Kirkwood, NYS DOH (OQPS)

Meredith Locke, OHIP

Leilani Prusky, NYSTEC

Chelsea Sack, NYS DOH (OQPS)

Jennifer Unser, NYS DOH (OQPS)

Meg Vijayan, Esq., OPWDD

Rinzin Wangmo, NYS DOHMH

Ken Wieczerza, NYS DOH

Other

Steve Allen, HealtheLink

Elizabeth Amato, HealtheConnections

Carmen Barber, NYS OMH

Robert Belfort, Manatt

Olivia Beltrani, NYSTEC

Marlene Bessette, Rochester RHIO

Bianchi, Alison, NYeC

Nicole Casey, NYeC

Jessica Chanese NYSTEC

Rebecca Coyle, NYeC

Vivienne DeStefano, Healthix

Alexander Dworkowitz, Manatt

Charlie Feldman, NYeC

Jen Freeman, RD, CDN, OPWDD David Horrocks, NYeC Donald Juron NYeC Rachel Kramer, HealtheConnections Mat Langlois, NYSTEC Kathryn Lucia, NYeC Isaac Lutz, NYSTEC Magdalena Mandzielewska, Healthix Astrid Marz, NYeC Kathy Miller, Bronx Dan Porreca, HealtheLink Liana Prosonic, HealtheConnections Samuel Roods, NYeC Wendy Saunders, Hinman Straub Nance Shatzkin, Bronx Matthew St. Pierre, NYSTEC Cynthia Sutliff, NYeC

The meeting was called to order by Dr. Cohen at 12:00 p.m.

I. Welcome and Introductions

Dr. Cohen welcomed the Committee members and outlined the meeting agenda.

II. Federal and State Update

Mr. Roods explained that Senator Bill Cassidy had recently issued a request for information seeking input on ways to improve the privacy of health care data. Mr. Roods noted that NYeC had contributed to the Civitas response to the RFI.

Mr. Roods also noted that the Epic Qualified Health Information Network (QHIN) under the Trusted Exchange Framework and Common Agreement (TEFCA) had announced that 45 health systems had indicated they would join their QHIN, up from 23 a few months earlier.

III. DOH Update

Mr. Kirkwood said that DOH was still working through negotiations with CMS about the 1115 waiver. He added that he hoped that expected approval would come within the next couple of weeks.

Mr. Kirkwood also noted that the SHIN-NY regulation was being updated. He said the revised regulation recognizes the state designated entity (SDE), is more specific on technical interoperability standards, and references the data lake and statewide consent. He said the regulation would be subject to a 60-day comment period.

IV. Gravity Project

Ms. Kathy Miller of the Bronx RHIO provided a presentation about the Bronx RHIO's work with the Gravity Project. She explained that the Gravity Project was funding QEs' efforts to bring social needs screening data into the SHIN-NY in a standardized manner.

Ms. Miller noted that social needs data previously has not been coded, and now subject matter experts are working to assign ICD 10 and other codes to domains such as food instability and housing issues. She said that screening data coming to the SHIN-NY from health systems or federally qualified health centers (FQHCs) are likely to be coded, but that similar data coming from community-based organizations (CBOs) will likely be in need of codes.

Ms. Miller said the efforts of this pilot initiative with the Gravity Project would help address important use cases. For example, a food insecurity positive screening could include a code indicating a person was a diabetic, which would result in that person being referred to a medically tailored meal provider instead of a food bank.

Dr. Brown said he was really impressed and that this work had been a long time coming. Ms. Sutliff said the Committee should keep this information in mind as they continued to look at ways to modernize SHIN-NY policy.

V. Approval of Minutes

With a quorum established, the Committee voted to approve the prior meeting's minutes.

VI. Statewide Community Consent

Ms. Sutliff noted that several members of the Committee had submitted comments with recommendations on the statewide community consent form prior to the meeting and in response to the request for comments sent to members following the September meeting. She noted that the form had been revised to address those comments. Mr. Dworkowitz outlined the comments, which addressed issues such as identification of other health information networks and disclosures to the Department of Health for Medicaid purposes. Mr. Dworkowitz described the language changes to the form to address the comments.

Mr. Rogow questioned the reference to TEFCA in the form, noting that few people know what TEFCA is. Ms. Sutliff said a link could be added to an electronic version of the form that provided more background.

Mr. Rogow said that certain Healthix participants use the core required elements/language in the SHIN-NY consent form and want the flexibility to be able to continue to develop their own forms with such core language. Mr. Naqi agreed with Mr. Rogow, and Ms. Khare said that

GNYHA members would appreciate that flexibility as well. Ms. Sutliff said this was a policy issue to be addressed.

Dr. Cohen asked if there were any other comments on the form. Hearing none, the Committee adopted a motion to approve the form. The recommendation on the statewide community consent form will be presented to the NYeC Board at their November 14th Board meeting.

VII. CBO Policies

Ms. Liana Prosonic presented HealtheConnection's proposal to modify the policies related to CBO access. Ms. Prosonic noted that Section 8.3.1 of the policy currently prohibits CBOs that are not subject to HIPAA from directly accessing the SHIN-NY and that they can only receive the minimum necessary amount of data. Ms. Prosonic said she wholeheartedly supported the minimum necessary standard, but it was possible to meet this standard while granting CBOs' log-in access.

Ms. Prosonic presented three use cases related to how the revised policy might work. Under one use case, the "MyReferrals" page would allow CBOs to see patient health information sent by other participants making referrals to the CBOs, but the CBOs only would have access to limited demographic data and not the full medical record. She noted that CBOs need login access in order to see such information, which would require a policy change.

Mr. Rogow said he supported the examples that were presented. Dr. Brown agreed, saying he loved the proposed approach for CBOs. Ms. Khare said she was not against the proposal either, but noted that TEFCA does not envision CBOs as participants.

VIII. Closing

Dr. Cohen thanked the Committee members and adjourned the meeting. The next meeting is scheduled for November 20, 2023 beginning at 1:30 pm.