

**New York eHealth Collaborative Policy Committee Meeting**  
**March 25, 2024**  
**1:00 p.m. – 2:00 p.m.**  
**Meeting Notes**

A meeting of the NYeC Policy Committee was held on March 25, 2024. Present via telephone or videoconference were:

*Policy Committee Voting Members:*

Dr. David Cohen, Maimonides Health Center (Chair)  
Elizabeth Amato, HealtheConnections  
Kate Beck, HealthFirst  
Dr. Lawrence Brown, Weill Cornell Medical College  
David Finkelstein, RiverSpring Living  
Natasha Pernicka, Food Pantries for the Capital District  
Dr. Ram Raju, Health Disparities Consultant  
Todd Rogow, Healthix  
Paul Uhrig, Bassett Health

*Ex-Officio Members:*

Jillian Annunziata, DOH OHIP  
Carmen Barber, OMH  
Patti Burandt, HealtheLink (BOC Representative)  
Samantha Delia, OASAS  
Deirdre Depew, NYS DOH OQPS  
Molly Finnerty, OMH PSYCKES  
Thomas Hallisey, HANYS  
Geraldine Johnson, NYS DOH (Public Health)  
Meredith Locke, DOH OHIP  
Chelsea Sack, NYS DOH OQPS  
Alana Stelling, NYS Office for the Aging  
Jennifer Unser, NYS DOH OQPS  
Meg Vijayan, OPWDD  
Rinzin Wangmo, NYCDOHMH  
Ken Wiczerza, NYS DOH OQPS

*Other:*

Olivia Beltrani, NYSTEC  
Marlene Bessette, Rochester RHIO  
Alison Bianchi, NYeC  
Nicole Casey, NYeC  
Rebecca Coyle, NYeC  
Vivienne Destefano, Healthix  
Alex Dworkowitz, Manatt, Phelps & Phillips, LLP  
Nicolas Elcock, NYCDOHMH

Charlie Feldman, NYeC  
Jen Freeman, OPWDD  
David Horrocks, NYeC  
Don Juron, NYeC  
Astrid Marz, NYeC  
Kathryn Miller, Bronx RHIO  
Alison Mitchell, OASAS  
Dan Porreca, HealtheLink  
Liana Prosonic, HealtheConnections  
Leilani Prusky, NYSTEC  
Sam Roods, NYeC  
Elisa Sacco, NYSTEC  
Wendy Saunders, Hinman Straub  
Nance Shatzkin, Bronx RHIO  
Jen Spencer, Rochester RHIO  
Cindy Sutliff, NYeC

The meeting was called to order by Dr. Cohen at 1:00 p.m.

### **I. Welcome and Introductions**

Dr. Cohen welcomed the Committee members. Dr. Cohen introduced Kate Beck from Healthfirst, the newest Committee member. Dr. Cohen outlined the meeting agenda.

The Committee approved the minutes from the February 2024 meeting.

### **II. Federal Update**

Mr. Roods noted that version 2.0 of the TEFCA Common Agreement has been published, and that two more organizations have become Qualified Health Information Networks under TEFCA.

Mr. Roods said that the final HIPAA reproductive health rule has been subject to review from the Office of Management and Budget for more than a month, and that a new Health Data, Technology and Interoperability rule has not yet been published.

### **III. DOH Update**

Ms. Depew said the new SHIN-NY regulation is in the public comment period, and so far the DOH had received only one comment. She said DOH was waiting to post the new version of the SHIN-NY Policies and Procedures until the public comment period closes.

#### **IV. Duration of Consent**

Mr. Dworkowitz explained that the newly proposed model statewide consent form indicates it expires upon death, instead of expiring 50 years after death as permitted under the current model consent form. He explained that Qualified Entities were concerned about this change given that they do not often know when an individual has died. Mr. Dworkowitz described two policy options for the Committee's consideration intended to address these concerns: (1) permitting a QE to continue to rely on a consent form until the QE receives notice that an individual has died, or (2) establishing a new consent exception that permits disclosures for quality improvement and utilization review purposes after death.

Ms. Burandt said they needed to consider how to implement the consent exceptions. She noted that a major cancer institute in her area examines SHIN-NY data to determine cause of death, and the policy change might prevent such institute from continuing to access the data for this purpose. Ms. Sutliff responded that the consent expiration would not impact the ability of participants to access data for research purposes. Ms. Amato agreed on the implementation questions, but added that she did not have any strong objections to the policy change.

Dr. Raju asked if public health agencies would have access to an individual's data after the individual had died. Mr. Dworkowitz responded that public health agencies would continue to have such access since they may access SHIN-NY data without consent.

Ms. Miller said there are difficulties in obtaining accurate data on deaths. She said such data often comes from the hospitals and nursing homes. For example she noted that there was a case where due to a quirk in an EMR hundreds of people were mistakenly categorized as expired. She added that the New York City vital statistics cannot share death data, claiming doing so would violate their regulations. She said New York State has agreed to provide death files but will only provide the data once every six months. Ms. Depew added that the state files do not include any death data from New York City. Ms. Amato noted that there is a Data Use Agreement with the Bureau of Vital Statistics that allows the state death data to be used for only certain purposes.

Mr. Dworkowitz noted that the proposed language does not require QEs to have perfect information about who has died, but instead only requires QEs to have a process in place to obtain death records. Ms. Amato agreed that the QEs were on a path to figuring out when an individual has died.

Dr. Cohen said final draft language on the duration of consent issue would be presented to the Committee at the next meeting.

#### **V. Utilization Review Policies**

Dr. Cohen introduced the discussion regarding modifications to the utilization review policies. Mr. Dworkowitz described potential policy options: (1) requiring health plans to inform the health care providers prior to making a utilization review denial; (2) requiring such notice plus

the disclosure from the health plan to the provider of the data the health plan has reviewed; and (3) the status quo.

Ms. Beck expressed support for the first option. Dr. Raju supported the second option, saying it was more transparent.

Ms. Burandt said she was supportive of either the first or the second option so long as there was no obligation of the QE to audit or enforce the rule.

Dr. Brown said he favored the second option, since it would give providers the opportunity to review the information.

Dr. Cohen said there was some consensus for either the first or second options, with more favoring the second option. He said formal draft language would be presented at the following meeting.

## **VI. Closing**

Dr. Cohen thanked the Committee members and adjourned the meeting. He noted the next meeting was scheduled for April 17, 2024 beginning at 2 pm.