Statewide Health Information Network for NY (SHIN-NY)
The SHIN-NY in a Nutshell

- A secure network for sharing electronic clinical records
  - The SHIN-NY consists of eight Regional Health Information Organizations (also known as QEs)
- Records are accessed and exchanged securely between healthcare providers with appropriate consent
- Patients decide which entities can access or see their records
- 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
Qualified Entities (QEs)

The QEs are the backbone of the SHIN-NY, providing the services that make secure, vital access to a patient’s health information possible statewide.

While QEs are primarily established within geographical regions (Upstate more so than downstate), healthcare organizations may connect with the QE that best aligns with their business, operational, and service delivery needs.
How does a QE connect providers today?

KEY

- Transmission of Clinical Patient Information
Current Core Services Delivery and Participation

- **OVER 24 MILLION** Alerts Delivered
- **99%** of Hospitals
- **63%** of Diagnostic and Treatment Centers

- **OVER 7 MILLION** Patient Record Returns (Via EHR & Clinical Viewer)
- **50%** of Physician Practice Sites
- **71%** of Long-Term Care Entities*, including Residential Facilities and Home Health

- **OVER 63 MILLION** Results Delivered
- **73%** of Hospice*

*Minimal data contribution due to not being traditional Meaningful Use providers; vast majority only have access to clinical viewer
The SHIN-NY Core Services

Since March 2015, all RHIOs must provide the following Core Services to Participants

1. Statewide Patient Record Lookup
2. Statewide Secure Messaging (Direct)
3. Notifications (Alerts / Subscribe and Notify)
4. Provider & Public Health Clinical Viewers
5. Consent Management
6. Identity Management and Security
7. Public Health Reporting Integration
8. Lab Results Delivery

No charge for these services beyond initial setup
Consent Across the State

Over ½ of New Yorkers have provided written consent

New York State is an Opt-In state. That means patients must specifically affirm their desire to have their data accessed in the SHIN-NY. This is referred to as **affirmative consent** and is required for non-emergency treatment. Patient consent is not required for the provider to load data to the QE.

*Data as of March 2018*
Recent Updates to SHIN-NY Consent Policy

- **Patient Care Alerts:** Allow for patient care alerts to flow more easily to help care teams improve healthcare. QEs will be allowed to send patient care alerts containing limited patient information without written affirmative patient consent if the recipient has a treatment or care management relationship to the patient. Restrictions on alerts from facilities subject to the mental hygiene law or 42 C.F.R. Part 2 still apply.

- **Alternative Consent Forms:** Modernize SHIN-NY consent and allow use of alternative consent forms so patients can more easily provide permission to access their clinical information.
### Clinical Data Available in the SHIN-NY

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<th>Types of information that may be available in the SHIN-NY</th>
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SHIN-NY Supports Value-Based Care

Use of the SHIN-NY to access patient information is associated with:

- 57% reduction in patient readmissions within 30-days after hospital discharge
- 30% fewer emergency department admissions
- 52% reduction in laboratory tests and a 36% reduction in the estimated number of radiology exams
- 25% fewer repeat images within 90-days of first imaging procedure

http://www.nyehealth.org/shin-ny/value-of-hie/
One SHIN-NY QE recently completed an initial phase of an implementation project with a large dialysis provider that crosses several regions of NYS

- Provider operates 21 dialysis centers in 4 QE communities

The QE and dialysis provider’s EHR vendor established a single interface to allow for bi-directional exchange of patient identifiers, patient consent, and contribution of clinical data from all locations/centers to the HIEs

The data interface also allows for dialysis providers to pull clinical information from the HIE into their EHR
What’s the 2020 SHIN-NY Vision?

- Network hits critical mass & vast majority of providers are satisfied users
- Dramatically improved healthcare – better health and lower costs
- Functionality & usability is enhanced and data/information is expanded
- Consistent level of high quality service is provided throughout the State
- Re-engineered system that avoids duplication and inefficiencies
- Modern technology is incorporated and digital health is advanced
- Policy changes are made and financial stability is possible because everybody is in and important clinical information is reliable and usable
- Collective advocacy results in positive change
2020 Roadmap -- Five Basic Strategies

1. Ensuring Strong HIE Foundation
2. Supporting Value-Based Care (Tools, Supports, and Services)
3. Enabling Interoperability and Innovations
4. Promoting SHIN-NY Efficiency and Affordability
5. Advocating Collectively

Approved by NYeC Board and DOH
How to Get Connected to the SHIN-NY – Where to Start

1. Contact your QE to understand appropriate services for your organization
2. Sign a data sharing/Participation agreement
3. Sign up for Clinical Viewer/Portal to search patients and their clinical data through the web
4. Explore the use of DIRECT secure messaging
5. Enroll in Alerts (admit, discharge, transfer for inpatient and ED settings)
6. Plan for bi-directional exchange between your EHR and the QE
   a) Send clinical data to the QE
   b) Receive data automatically into your EHR (e.g. TOC, labs, alerts)
7. Check opportunities for funding through DSRIP, DEIP, or others

To find the QE in your region and obtain contact info, visit [http://www.nyehealth.org/shin-ny/qualified-entities/](http://www.nyehealth.org/shin-ny/qualified-entities/)
Data Exchange Incentive Program

- Established by NYS DOH, with support from the Centers for Medicare & Medicaid Services (CMS), to increase HIE adoption across the state
- This program is designed to help defray the cost for an organization when connecting to their local 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 provides $13,000 in funding to organizations/providers in order to offset the cost of connecting to a QE
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