

Multi-Sector Associations Meeting

April 18, 2025

Agenda

- Statewide Common Participation Agreement (SCPA) Rollout
- Accelerated SHIN-NY Reform
- Next Steps & Questions

Statewide Common Participation Agreement (SCPA)

Implementation Timeline

- **Mandatory SHIN-NY Participants** (*Regulated entities*)
 - Required to sign by 9/30/25
- **Voluntary SHIN-NY Participants**
 - Have a longer period to sign
 - Current expectation is that SCPA take full effect by 1/1/26
 - For Voluntary Participants that do not sign a new SCPA, current processes (e.g., DUCA) would continue to apply for a period of time

SCPA Execution Strategy

Phase 1: Targeted Health System SCPA Execution

- QE & NYeC Partnering to prioritize health system signatures
- Socialize SCPA to unaffiliated voluntary participants & make SCPA execution available

Phase 3: Focus on Voluntary Participants

- Assess remaining unsigned participants & tailor strategy accordingly

Phase 2: Push to Execute SCPA with all Regulated Entities

- Tailor efforts based on health system status and response & concerns/feedback from OREs or Voluntaries that have not yet signed

Accelerated SHIN-NY Reforms

DOH sent NYeC a letter directing us to accelerate SHIN-NY efficiencies in the short term.

Some concepts were already in the works, but this letter indicates we will need to work quickly to take steps to prepare for potential funding cuts.

Strategy Acceleration

Change the Consent Model

- Support the Dept. on exploring alternative options
- Opt-out

Scenario Planning

- Provide a recommendation to the Dept. on a reduced funding scenario

Accelerate Statewide Services

- Encounter Alerting services
- Efficient and statewide Encounter Alerting services are foundational to future state
- Complementary to the national networks

Define Data Standards

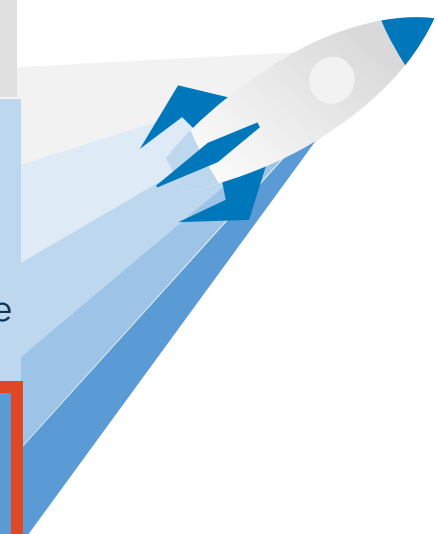
- Define data contribution for different providers
- Determine technical standards for priority data elements
- Adopt statewide data curation plan to support Dept's use and more consistent data quality for participants

Reduce Redundancies

- Reduce State's investment in redundant infrastructures in FY 2025-2026.
- Begin eliminating/reducing cost burdens while developing longer term plans.

Unify Data Statewide

- Pursue a path to unify statewide data in FY 2025-2026
- 1115 Waiver data (screenings, assessments, referrals) is now unified in the SHIN-NY data lake
- Encounter Alerting plan will unify encounter data through a single ADT hub.



Discussion & Questions

Proposed Updated Implementation Plan for SCPA

NYeC will continue to discuss SCPA drafts and feedback with DOH throughout process to ensure alignment.

- **July - Sept 2024:** Draft SCPA term sheet and concept paper distributed and discussed with QEs, ad hoc workgroup and Policy Committee; SCPA form agreement drafted, incorporating feedback received
- **September 17, 2024:** NYeC Board approves posting draft SCPA for public comment
- **September - October 2024:** Public comment period (est. 9/18-10/17)
- **October 2024 - January 2025:** Analysis of public comment; revisions to SCPA and discussion with stakeholders
- **February 2025:** NYeC Board recommends finalized SCPA to DOH for approval
- **March 2025:** DOH approves SCPA
- **April 2025:** SCPA execution and implementation begins
- **September 30, 2025:** *SCPA execution deadline for Regulated Participants*

Appendix

SHIN-NY Reforms

Challenges Being Addressed



Statewide service gaps: The SHIN-NY's ability to deliver statewide services or to aggregate statewide data is limited, and the existing QEs often resist such efforts. The structure limits the SHIN-NY's usefulness to DOH and capacity to support state health reform programs.



National industry change: National networks are beginning to efficiently support activities for which the state is currently paying QEs, and federal TEFCA strategy will do increasingly more without full-function intermediaries as in New York's model.



Limited market competition: Despite encouraging competition in theory, the existing QE model is functioning as a "walled garden" in practice, shutting out innovative organizations, leaving participants with few choices, and trapping data in regional data silos.



Funding uncertainty: The future of state and federal financial support for HIE is unclear, and the type of work which can be funded is likely to change.

Strategic Priorities

A

The SHIN-NY needs to provide seamless and consistent statewide services, to public health agencies, for statewide program support, and to those addressing health related social needs and disparities.

B

The SHIN-NY needs to be more efficient, reduce costs and redundancy, and take advantage of national marketplace developments.

C

The SHIN-NY must meet local community needs and support organizations in underserved communities.

Elevator Pitch

Successful SHIN-NY Reform will free the data, moving beyond the model in which only the local QE has access to the health records customers need. It will let every healthcare organization choose their QE and let them choose a second or third QE for specific services.

Reform will facilitate statewide services, such as those to support the NYHER 1115 waiver, placing decisions about data use with a Statewide Data Use Committee comprised of participants. For NYeC, the reforms will allow us to select just the best QE for any given service we fund on behalf of the State.

The reforms will be good for SHIN-NY participants and patients. And they are now required in the SHIN-NY regulations.

Vision for SHIN-NY Transformation

In July 2024, the New York State Department of Health (DOH) adopted changes to the Statewide Health Information Network for New York's (SHIN-NY) governing regulations, allowing it to adapt to an evolving national HIE landscape, improve interoperability, effectively support statewide information sharing, better serve participants, and support the state's public and population health data needs.

The regulatory changes allow for the SHIN-NY to adapt to a changing HIE landscape and better serve participants and the state's health data needs by enabling:



Transitions from proprietary connections and file-based exchange to more efficient, query-based exchange. Streamlined administrative burden for consent for patients and participants.



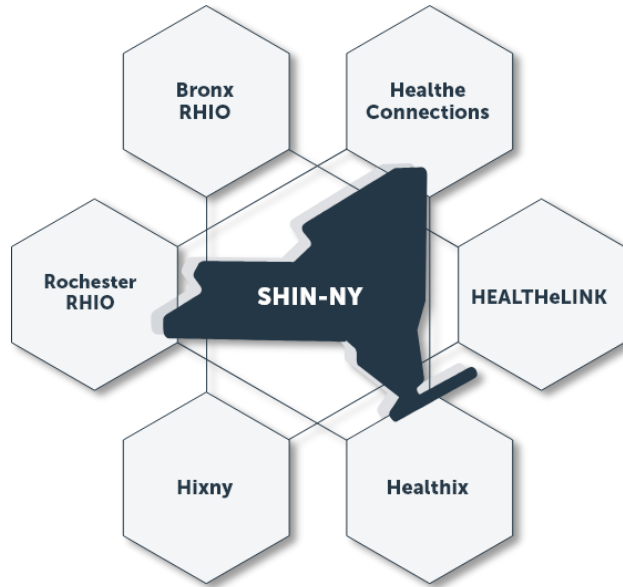
Alignment with the federal Trusted Exchange Framework and Common Agreement (TEFCA).



Strengthened capacity to efficiently support the modernization of statewide public and population health data collection and use to meet state needs for statewide data sets.



A dynamic environment where QEs have opportunities and are motivated to support SHIN-NY Participants' HIE needs.



Key Participant-Facing Components of Regulatory Changes

Statewide Data Infrastructure

Require that certain health data is delivered to a statewide data repository for public health and Medicaid purposes

Statewide Common Participation Agreement (SCPA)

Institute a common SHIN-NY participation agreement that applies across QE regions

Statewide Collaboration Process (SCP)

Reimagine SCP to inform recommendations on policy guidance & technical standards

Core Services

Enable the state to modernize QE service expectations with a focus on value-added services

Statewide Consent

Establish centralized patient consent framework to further enhance patient privacy & reduce burdens on patients and providers

Big Elements of Post-regulation Reform



“Statewideness”

- Statewide Common Participation Agreement (SCPA)
- Data gateways refactoring (sPRL, Cross QE Alerting)
- RFP for statewide Encounter Notification services
- Statewide consent registry
- Statewide Collaboration Process redesign (TAC & SDUC)
- Core SHIN-NY Data definition



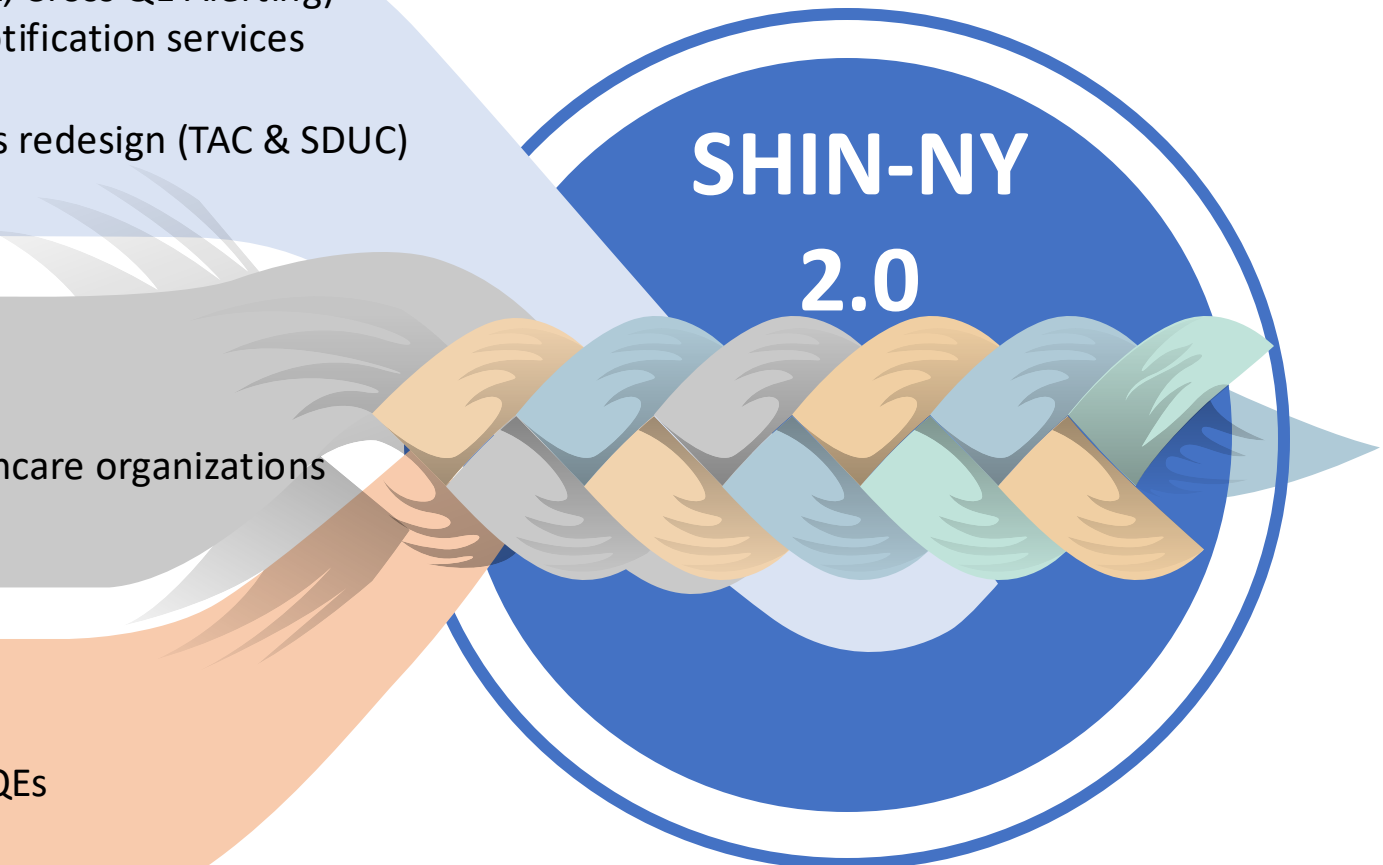
Efficiency

- QE contracting refocus
- QE Certification streamlining
- Interoperability waiver for healthcare organizations
- TEFCA connections



Serving Communities

- NYC Strategy
- Dedicated Projects directed to QEs
- DOH data strategy project



SHIN-NY
2.0



NEW YORK eHEALTH
COLLABORATIVE

nyehealth.org

Sign up for our newsletter • Follow us on social media



115 Broadway • Suite 1601 • New York • NY • 10006

99 Washington Ave • Suite 1750 • Albany • NY • 12210