

Criteria for SHIN-NY Regulated Entities: Article 28 Nursing Homes and Diagnostic Treatment Centers

The New York State Department of Health (NYS DOH), with support from the Centers for Medicare & Medicaid Services (CMS), has established the Data Exchange Incentive Program (DEIP) to increase health information exchange (HIE) adoption across the State. Building electronic health record (EHR) interfaces to New York State Qualified Entities (QEs) will increase the quantity and quality of data in the Statewide Health Information Network for New York (SHIN-NY) and build value for providers and patients at the point of care. This program is designed to help defray the cost for an organization when connecting to their local QE.

Eligibility Criteria

An organization must:

- Utilize an EHR that has obtained **at least one** of the following Privacy & Security Assurances (A, B, **or** C):

A. ONC Certification* for, at a minimum, the following Privacy & Security criteria:

- (d.1) Authentication, Access Control, and Authorization
- (d.2) Auditable Events
- (d.3) Audit Report(s)
- (d.4) Amendments
- (d.5) Automatic Log-off
- (d.6) Emergency Access
- (d.7) End-user device encryption
- (d.8) Integrity

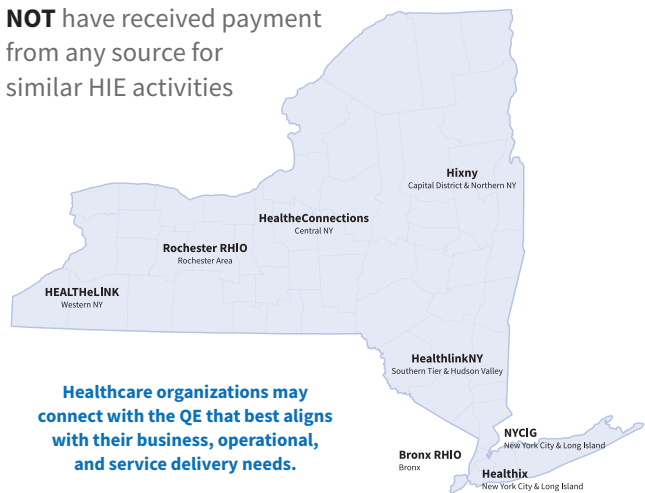
Certification requires the following dependency criteria:

- (g.4) Quality Management System
- (g.5) Accessibility-Centered Design

B. Current SOC 2, Type II audit with no material findings**

C. Current, validated HITRUST assessment or NIST cybersecurity framework assessment**

- EHR must be able to send information electronically to the HIE (QE) in either CCD or C-CDA format
- Be licensed by New York State as an Article 28 facility (Nursing Homes, Diagnostic Treatment Centers)
- NOT** already be connected to a QE and contributing data
- NOT** have received payment from any source for similar HIE activities



*If the EHR vendors meets requirement 'A', they must have and maintain a Certification Status of 'Active' from an ONC Authorized Certification Body. EHR vendor may certify against additional Privacy & Security criteria as desired. Certification may be against the 2014 or 2015 Edition of ONC Certification.

**If the EHR vendor meets requirement 'B' or 'C', they must also provide NYeC with an attestation that demonstrates their product's ability to meet the requirements 45 CFR 170.314(d)(1) through 170.314(d) which represent the EHR features, functions, and behaviors related to privacy and security. SOC 2, Type II audit will only be acceptable through September 30, 2019, at which time the vendor must be certified or assessed and compliant with ONC Privacy & Certification criteria, HITRUST or NIST.



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www.nyehealth.org/deip

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Conditions of Participation

Organizations participating in DEIP are incentivized to contribute specific data elements.

Sign a QE Participation Agreement with the QE on or after 10/1/16	<p>Contribute to the QE the Common Clinical Data Set in C-CDA format, which include, at a minimum, the following data expressed, where applicable, according to the standards as defined in the Summary of Care Record specifications.¹</p> <table border="0"> <tr> <td>1. Patient Name</td> <td>11. Laboratory Test(s)</td> </tr> <tr> <td>2. Sex</td> <td>12. Laboratory Value(s)/Result(s)</td> </tr> <tr> <td>3. Date of Birth</td> <td>13. Vital Signs (height, weight, blood pressure, BMI)</td> </tr> <tr> <td>4. Race</td> <td>14. Care Plan Field(s), including Goals and Instructions</td> </tr> <tr> <td>5. Ethnicity</td> <td>15. Procedures</td> </tr> <tr> <td>6. Preferred Language</td> <td>16. Care Team Member(s)</td> </tr> <tr> <td>7. Smoking Status</td> <td>17. Encounter Diagnosis</td> </tr> <tr> <td>8. Problems</td> <td>18. Immunizations</td> </tr> <tr> <td>9. Medications</td> <td>19. Functional and Cognitive Status</td> </tr> <tr> <td>10. Medication Allergies</td> <td>20. Discharge Instructions</td> </tr> </table> <p>Additional data elements, if available and appropriate: Incidents & Accidents (I&A), Nurse Notes, Progress Notes, Orders, Pain and Skin Assessment, Advance Directives/MOLST</p>	1. Patient Name	11. Laboratory Test(s)	2. Sex	12. Laboratory Value(s)/Result(s)	3. Date of Birth	13. Vital Signs (height, weight, blood pressure, BMI)	4. Race	14. Care Plan Field(s), including Goals and Instructions	5. Ethnicity	15. Procedures	6. Preferred Language	16. Care Team Member(s)	7. Smoking Status	17. Encounter Diagnosis	8. Problems	18. Immunizations	9. Medications	19. Functional and Cognitive Status	10. Medication Allergies	20. Discharge Instructions
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Must be able to electronically receive a Summary of Care Record in a C-CDA format (via QE web portal, DIRECT secure messaging, or EHR interface)																					
Attests to continue data exchange for one year. Failure to continue data exchange for one year could result in a claw back penalty.																					

¹If EHR is Certified in 2014, the requirements are found in §170.314; if EHR is Certified in 2015, refer to 45 CFR 170.102

https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/downloads/Stage2_EPCore_15_SummaryCare.pdf

Milestone Payments

The New York eHealth Collaborative (NYeC) is coordinating the rollout of the program and the incentive payments on behalf of the DOH. **Limited funding is available and this program is operated on a first-come, first-served basis. In order to receive funding, all milestones must be completed by September 30, 2018.**

Milestones	Documentation	Measurement	Payment
Milestone 1 Enrollment	Milestone 1 Attestation	Organization submits Milestone 1 Attestation Attesting that they have signed a QE participation agreement on or after 10/1/16	\$2,000* *If agreement is signed after 10/1/16
Milestone 2 Go Live	Milestone 2 Attestation	Organization submits Milestone 2 Attestation Attesting that they are able to receive a Summary of Care Record electronically AND a connection is established to the QE and they are contributing all required data elements, as available and appropriate.	\$11,000 (per connection)