

MSSNY Health Information Technology Committee
October 3, 2019

Donald Moore, MD, Chair
Brian Blaufeux, MD
Deepak Buch, MD
Renee Solomon, MD
Jef Sneider, MD
Zebulon Taintor, MD

Phil Schuh, MSSNY staff
Moe Auster, MSSNY staff

The meeting commenced at 7:30 AM.

The minutes of the February 1, 2019 HIT Committee meeting were approved, and there was a discussion of whether new members have been added to the Committee since the last time it met.

SHIN-NY Consents

Dr. Sneider discussed his concerns with a potential change under discussion by the Statewide Health Information Network (SHIN-NY) whereby patients' "opt-in" consents to have their information shared through the SHIN-NY to other practitioners would also be made available through that consent to that patient's health insurance plan. Concerns were expressed that this could lead to physicians being bombarded with often unnecessary or clinically repetitive information from the patient's insurer regarding aspects of treatment provided by other practitioners who have treated that patient.

It was noted that this potential change with discussed by the Physician's Advisory Committee to the New York E-Health Collaborative (NYeC). It was then also discussed by the NY-ACP HIT Committee. There is a monthly call between NYeC representatives and various health care provider associations including MSSNY, but this proposed new form was not discussed there. Dr. Buch asked what was wrong with a patient's health insurer having this information. It was noted that there are instances where their access to this information from the SHIN-NY could be helpful, but that it could also lead to numerous unnecessary contacts that will take time away from treating patients.

Dr. Blaufeux noted that the intent is for the insurers to risk-stratify their insured populations to help their bottom line. Dr. Buch asked about potential physician liability for not adequately responding to such information that would be provided by the insurer.

Dr. Sneider offered to draft a resolution for the Committee to consider advancing for the next MSSNY House of Delegates to oppose this change to the consent form. It was also suggested that MSSNY staff, together with MSSNY HIT Committee leaders, meet with NYeC and the SHIN-NY to review the proposed form and, if necessary, raise concerns, and that the Committee remain informed about these efforts.

NYeC Presentation

Carianne Borut and Elizabeth Amato from NYeC gave a presentation to the Committee members. Generally, they noted the important role NYeC as a connector between health care practitioners/entities and EHR vendors. They also highlighted the \$13,000 available in public funding for physician practices towards adoption of interoperable health record systems through the Data Exchange Incentive Program (DEIP). Specifically, they noted the 3 priorities of the NYeC's advocacy efforts are:

- Advocate for high quality data exchange from EHRs to the SHIN-NY
- Promote affordability and cost-effective connections
- Ensure strong relationships with vendors and communication pathways on behalf of providers

They discussed a survey NYeC collaborated with NYACP & MSSNY on the development of a provider EHR survey. They received 338 responses to the survey, of which a large majority of respondents work in a private

practice setting. There was generally equal representation of primary and specialty care, with emergency medicine and hospital medicine as well.

The survey showed that EPIC and Allscripts were the most used vendors among survey respondents. While the survey responses noted that the best feature of EHRs was the ability to access patient health information remotely, others raised concerns regarding the cumbersome nature of their systems. Among the notable general themes:

- Over half of respondents were not involved in selecting their EHR system
- Main challenges include workflow, vendor responsiveness to issues & ability to exchange data with other physicians/treating providers
- Many respondents are unaware of QE and/or vendor costs
- Many respondents either are not participants of a QE or are unaware if they are

In response to the survey findings, NYeC staff noted that they would be seeking to approach EHR vendors to begin to work to address concerns addressed in the survey, such as:

- Providers being unaware of costs - focus on vendors providing greater price transparency.
- Continued QE/SHIN-NY awareness efforts
- Explore potential for EHR user groups

Dr. Moore thanked the NYeC staff and noted the survey results reinforced recurring comments he has experienced and the Committee has heard regarding the challenges of EHR implementation. Dr. Sneider suggested that NYeC conduct a survey of administrators for more detailed technical answers, and liked the idea of working towards greater EHR vendor transparency.

NYeC staff also discussed their ongoing efforts to promote participation in the DEIP program. Right now, there are over 7,000 practitioners across private physician practices and health care entities across the State that are participating and receiving funding from the program. However, they indicated that the funding would only be available for one more year.

New Business

Dr. Taintor discussed a recent article in the *New York Times* regarding “work arounds” in health care. He noted that patients should be told how their information will be shared, and should not be surprised by how their personal health information is used.

There was also discussion regarding the work of MSSNY’s Telemedicine Work Group, and that its discussions should be coordinated with the efforts of MSSNY’s HIT Committee

The meeting ended at 8:30 AM