



# Health Information Exchange

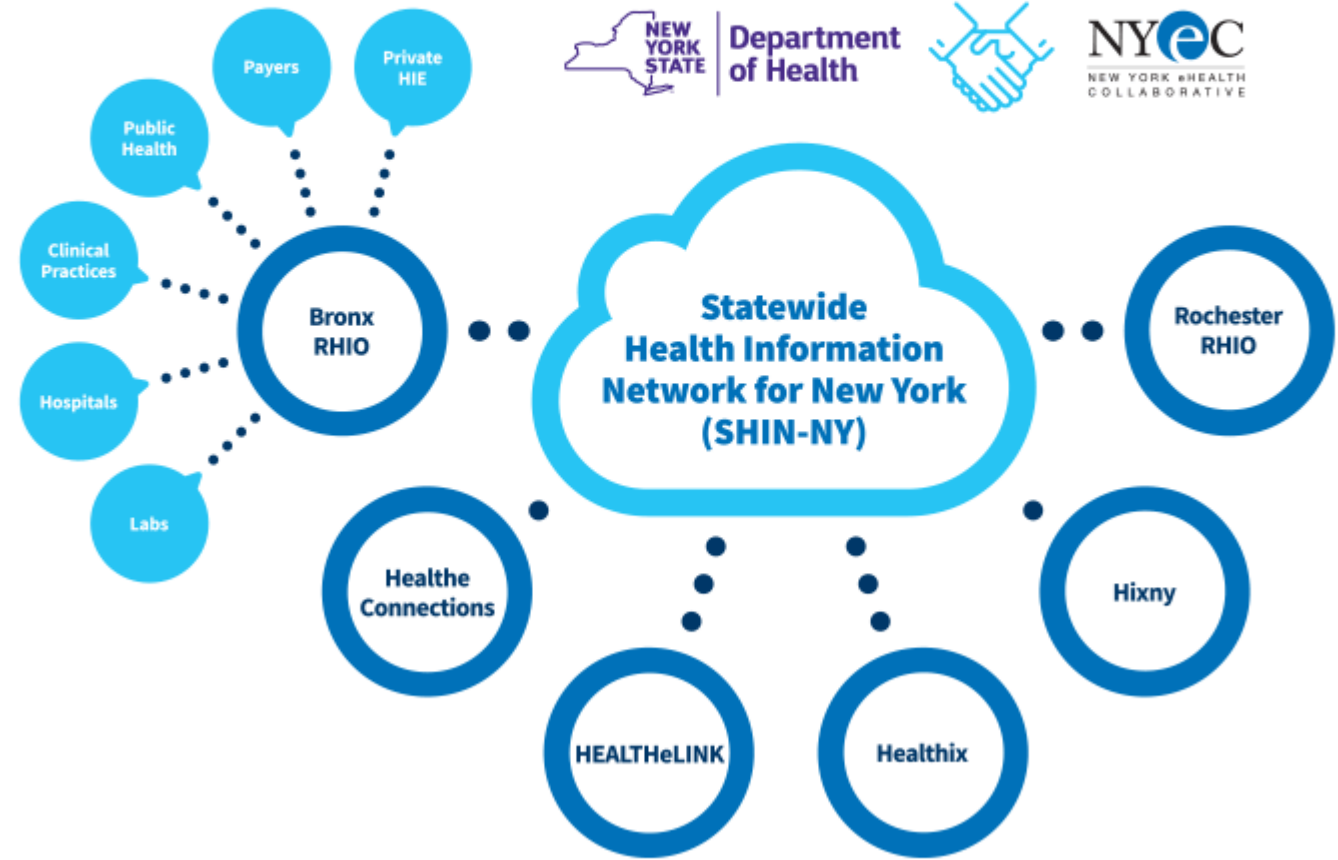
CHCANYS

Session 1

3/11/2022

# HIE Organizations in NY State

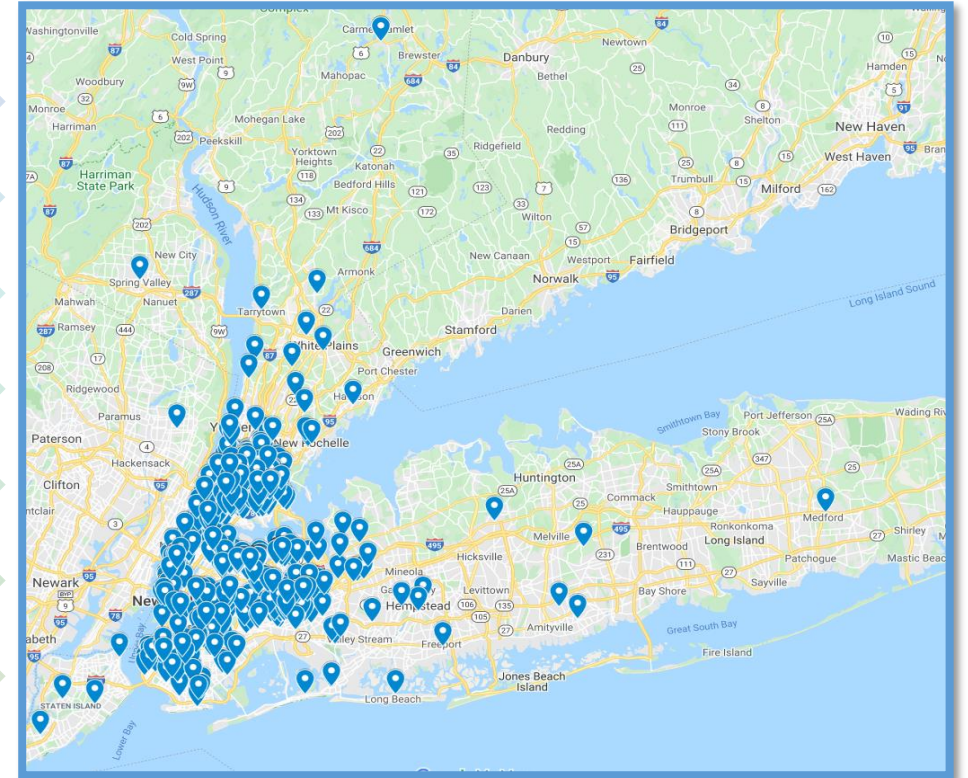
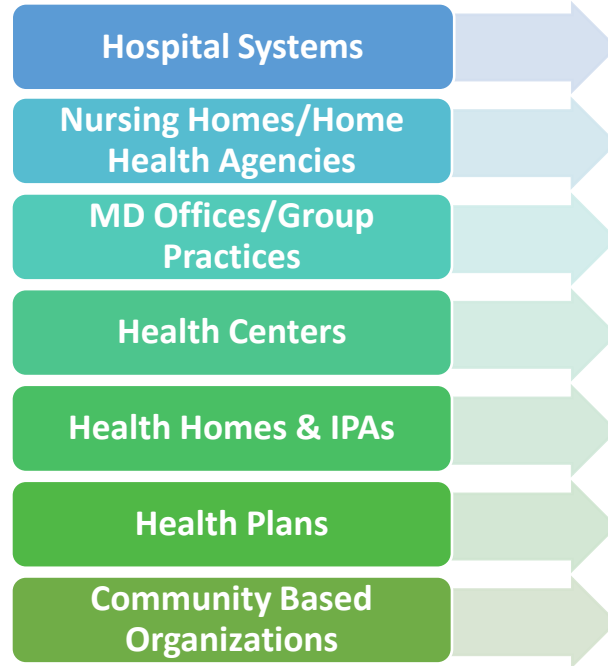
# SHIN-NY The Network of Networks



# Bronx RHIO

## Membership and Data Providers

Bronx RHIO's network includes nearly 250 members with over 1000 locations



# Available Data

Data in the Bronx RHIO is constantly growing, expanding and improving\*

Data flows in real time to the Portal and for analytics



Demographics  
Encounters  
Diagnoses  
Procedures  
Laboratory Data  
Allergies  
Radiology Reports  
Cardiology Reports  
Text Reports (Progress Notes, Discharge Summaries)  
Care Plans  
Medications  
Observations (Vitals, Assessments)  
Eligibility  
Claims/Billing

HealtheConnections &  
Bronx RHIO  
Provider Portals &  
Analytics Databases

# HealthConnections participants and data sources



*More than 1,600 organizations across  
4,200 locations are connected!*

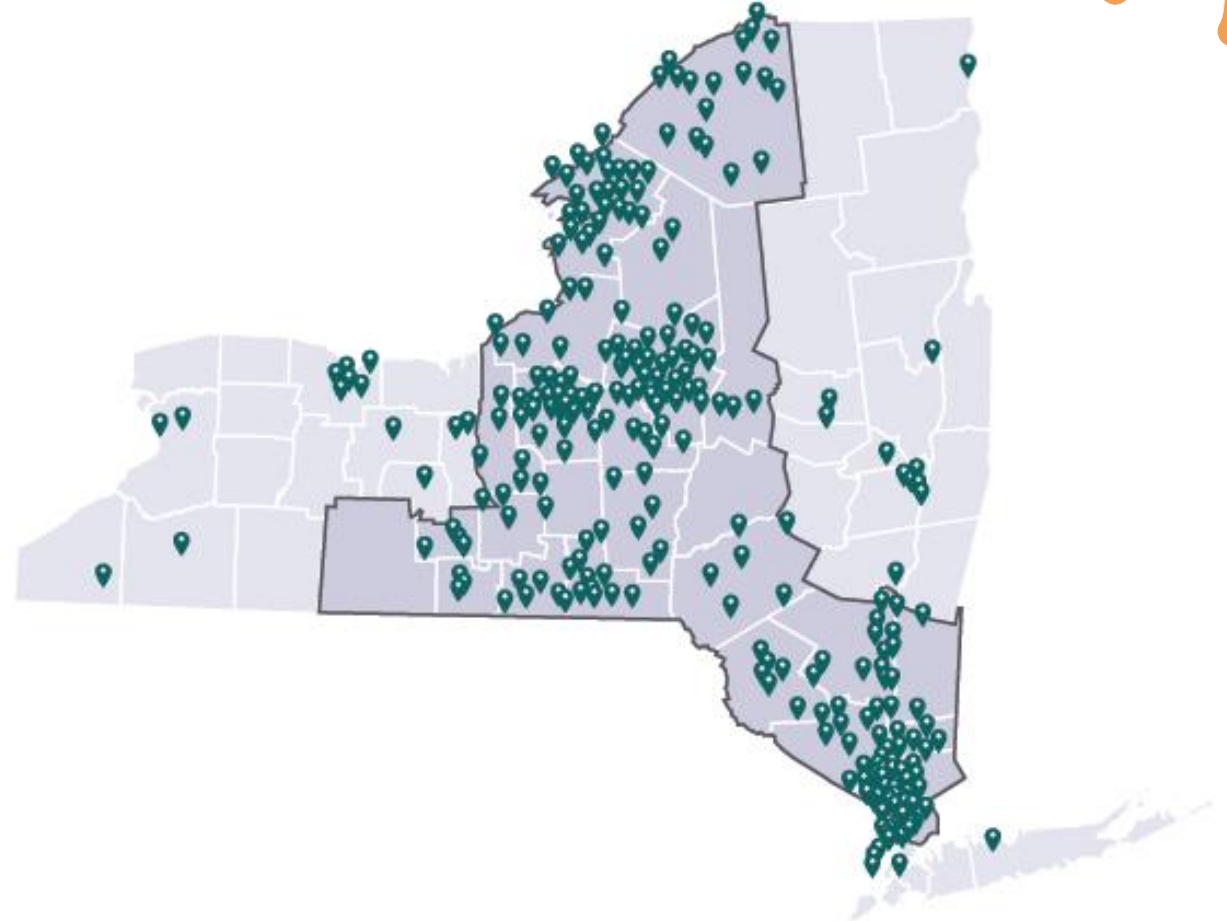
**9 million patients  
are able to receive  
better care**

**26-county service  
area**

**420,000 unique  
patients accessed  
per month**

**4 million clinical  
summary  
documents received  
each month**

**More than 600  
organizations  
providing data**

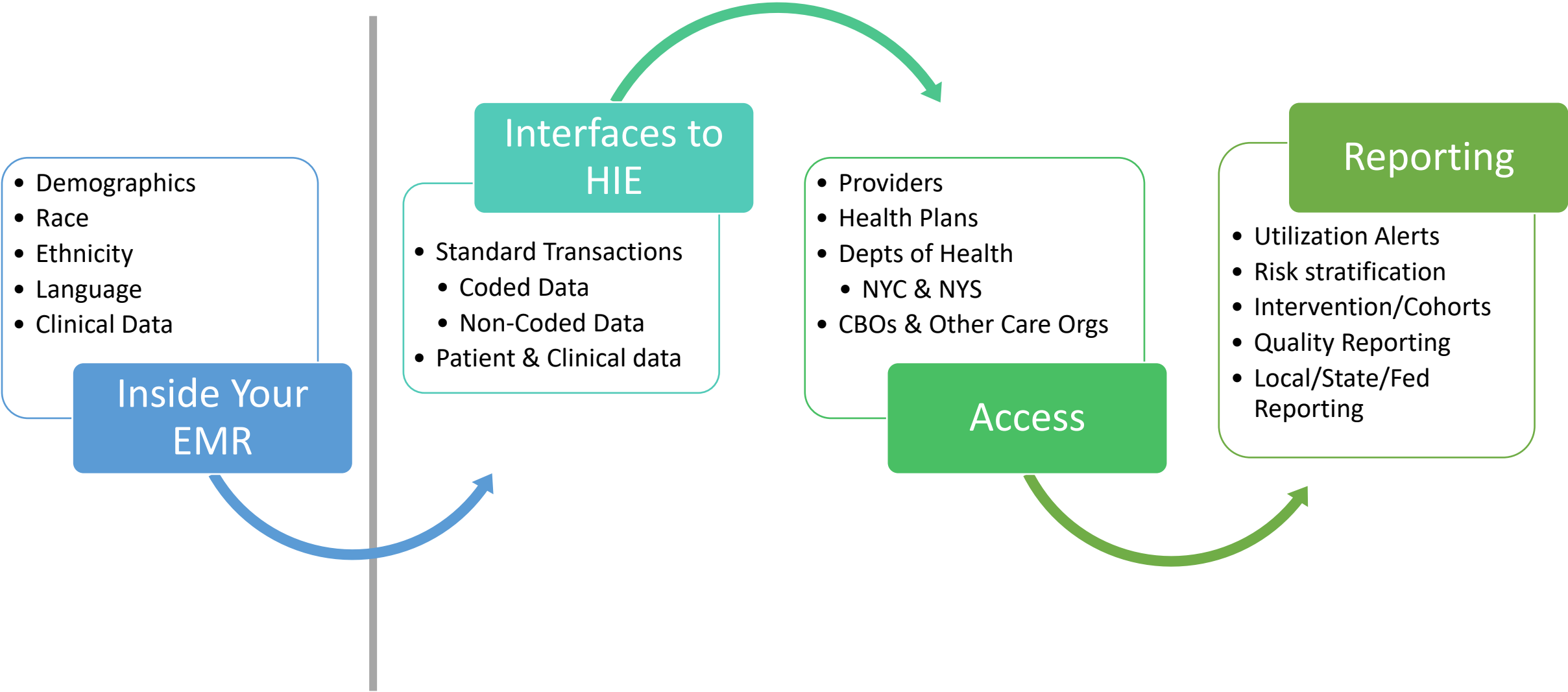


# Project Background

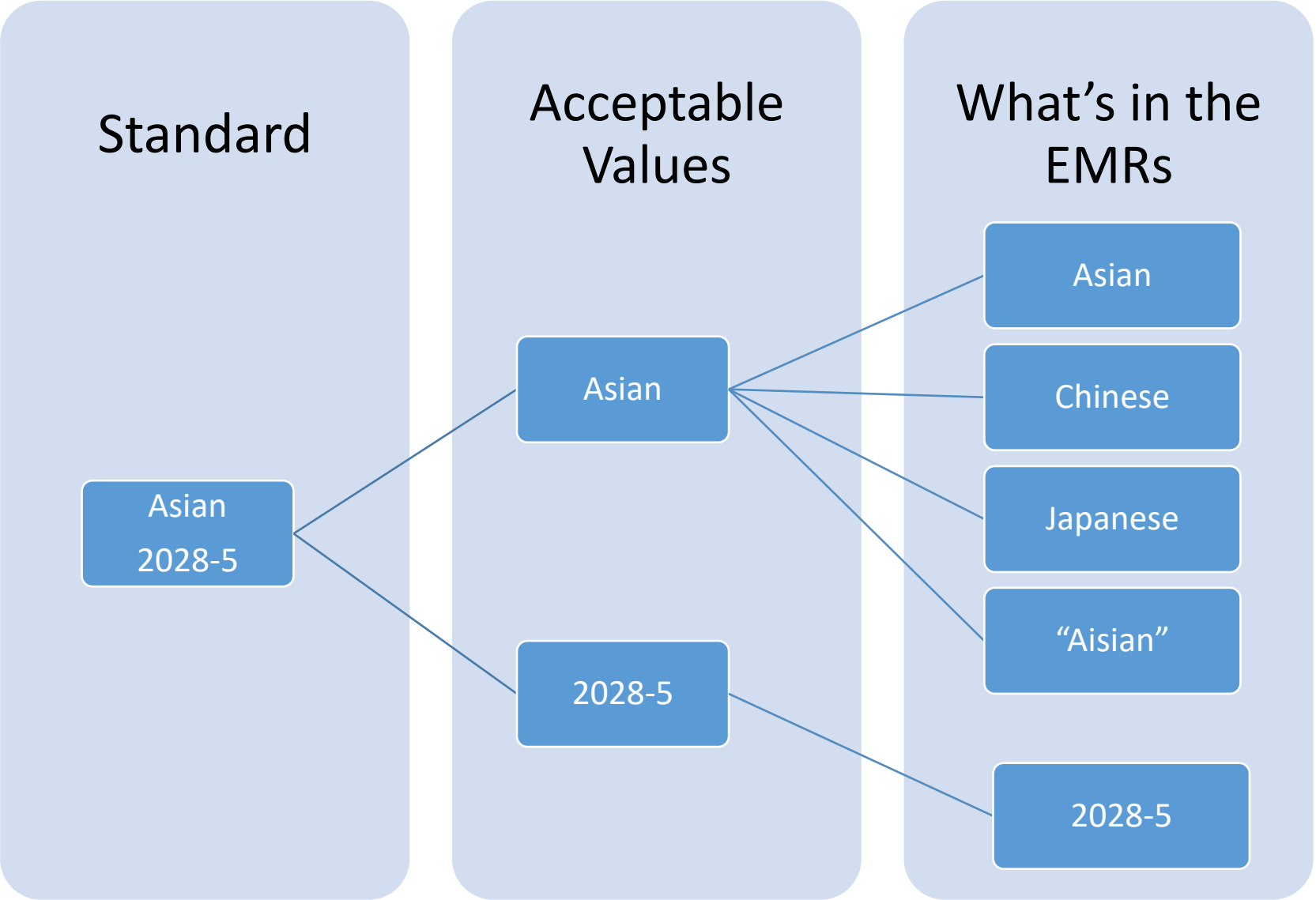
<b>Problems</b>	<ul style="list-style-type: none"><li>• Gaps in race &amp; ethnicity data, including capture of valid “unknown” code make it impossible to accurately stratify at-risk populations</li><li>• Can SDOH data in “Z-Codes”, be exchanged to help identify risk factors for populations?</li></ul>
<b>Goals</b>	<ul style="list-style-type: none"><li>• Improve data capture at participants; volume and standards</li><li>• QE facilitated data exchange between organizations and across QEs to help close data gaps and improve ability to stratify risk groups</li></ul>

- HealtheConnections and Bronx RHIO collaborating on improving race, ethnicity and SDOH data in health equity focus
  - Institute for Family Health leading pilot for best practices
  - Identification of data capture challenges and nuances, FQHC reporting impacts
- Improved data needed for:
  - Clinician use at the point of care
  - Patient cohort identification for interventions, stratification based on risk factors
  - Improving public health reporting
  - Post-COVID focus on impacts of SDOH

# Where is data going?

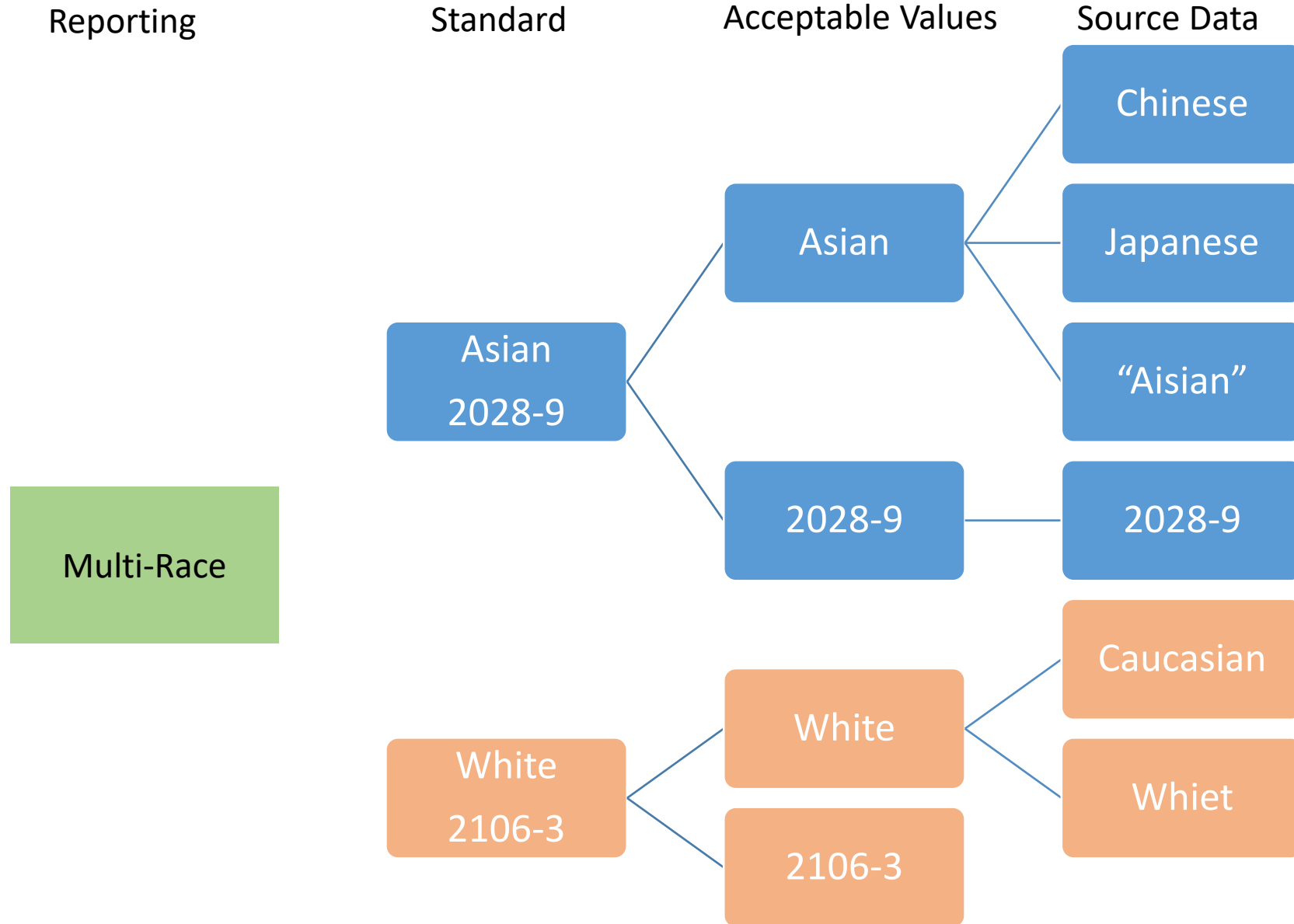


# Why the content matters

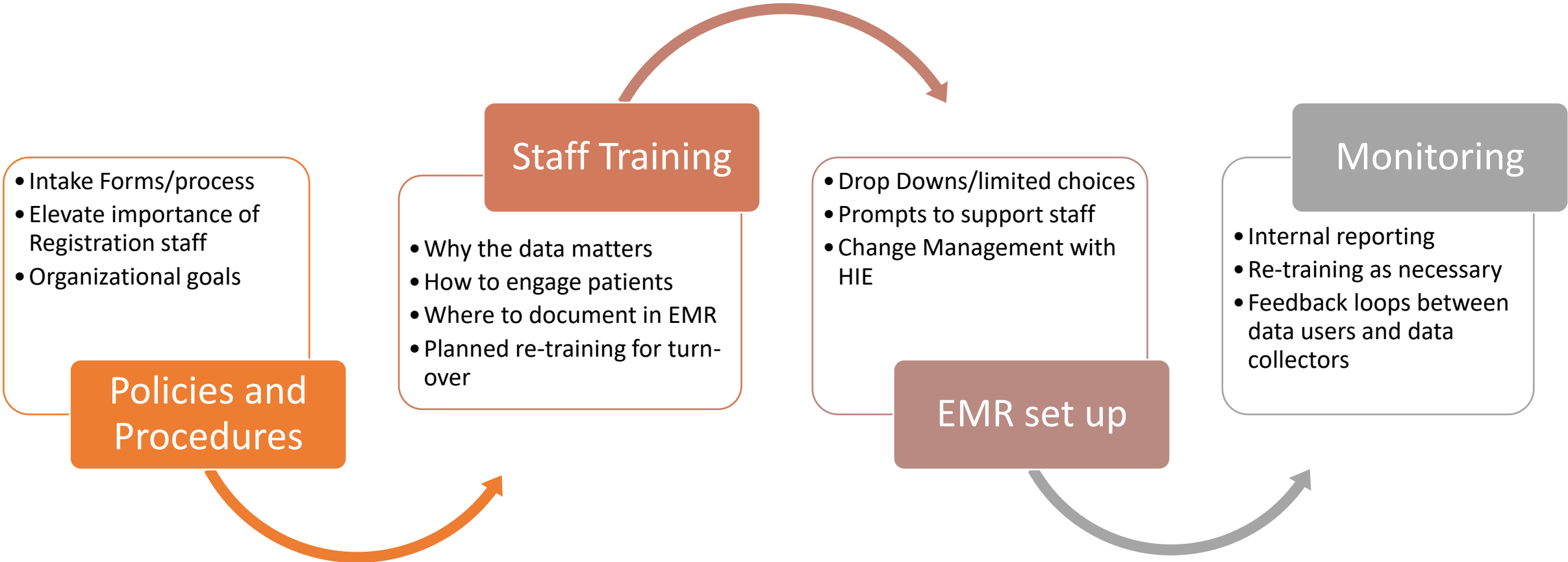




# Complexity of the data



# Where are the opportunities to improve?



# Contact Information



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