COMMUNITY HEALTH CARE ASSOCIATION of New York State

CHCANYS NYS-HCCN presents

RHIO Conversations

HIXNY

Healthix

Bronx RHIO

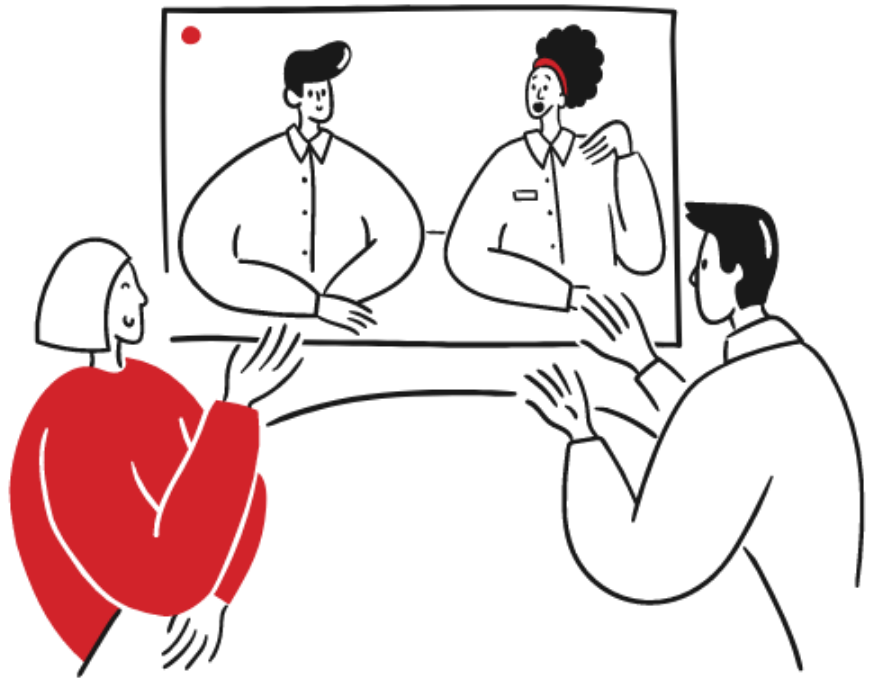
Day 2
November 16, 2023

For more information, please email Anita Li at ali@CHCANYS.org

This resource is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award to CHCANYS' New York State Health Center Controlled Network (NYS-HCCN) totaling $3,666,000 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.

Zoom Guidelines

- You have been muted upon entry. Please respect our presenters and stay on mute if you are not speaking.
- Please share your questions in the chat. CHCANYS staff will raise your questions to our speakers and follow up as needed if there are unanswered questions.
- The workshop is being recorded and will be shared after the session along with the slide deck.



Agenda

- Introductions
- HIXNY FHIR App
- Healthix Focus360°
- Bronx RHIO Overview
- Q&A
- Closing & Evaluations

New York State HCCN Objectives

Project Period 2022-2025

1. **Clinical Quality**
2. **Patient-Centered Care**
3. **Provider and Staff Wellbeing**

2022-2025 Project Period

- Patient Engagement
- Patient Privacy & Cybersecurity
- Social Risk Factor Intervention
- Disaggregated Patient-level Data (UDS+)
- Interoperable Data Exchange & Integration
- Data Utilization
- Leveraging Digital Health Tools
- Health IT Usability & Adoption
- Health Equity and REaL Data Collection*
- Improving Digital Health Tools- Closed Loop Referrals*

** - Applicant Choice Objective*
Bold- Objective Carried over into 2022-2025

Schedule of Events

Day 1 (11/1)

- Interoperability Overview & Readiness

Day 2 (11/8)

- Data for Better Health
- Closing Care Gaps and Transitions of Care Promising Practices

Day 3 (11/15)

- RHIO Conversations
  - HEALTHeLINK
  - Rochester RHIO
  - HealtheConnections

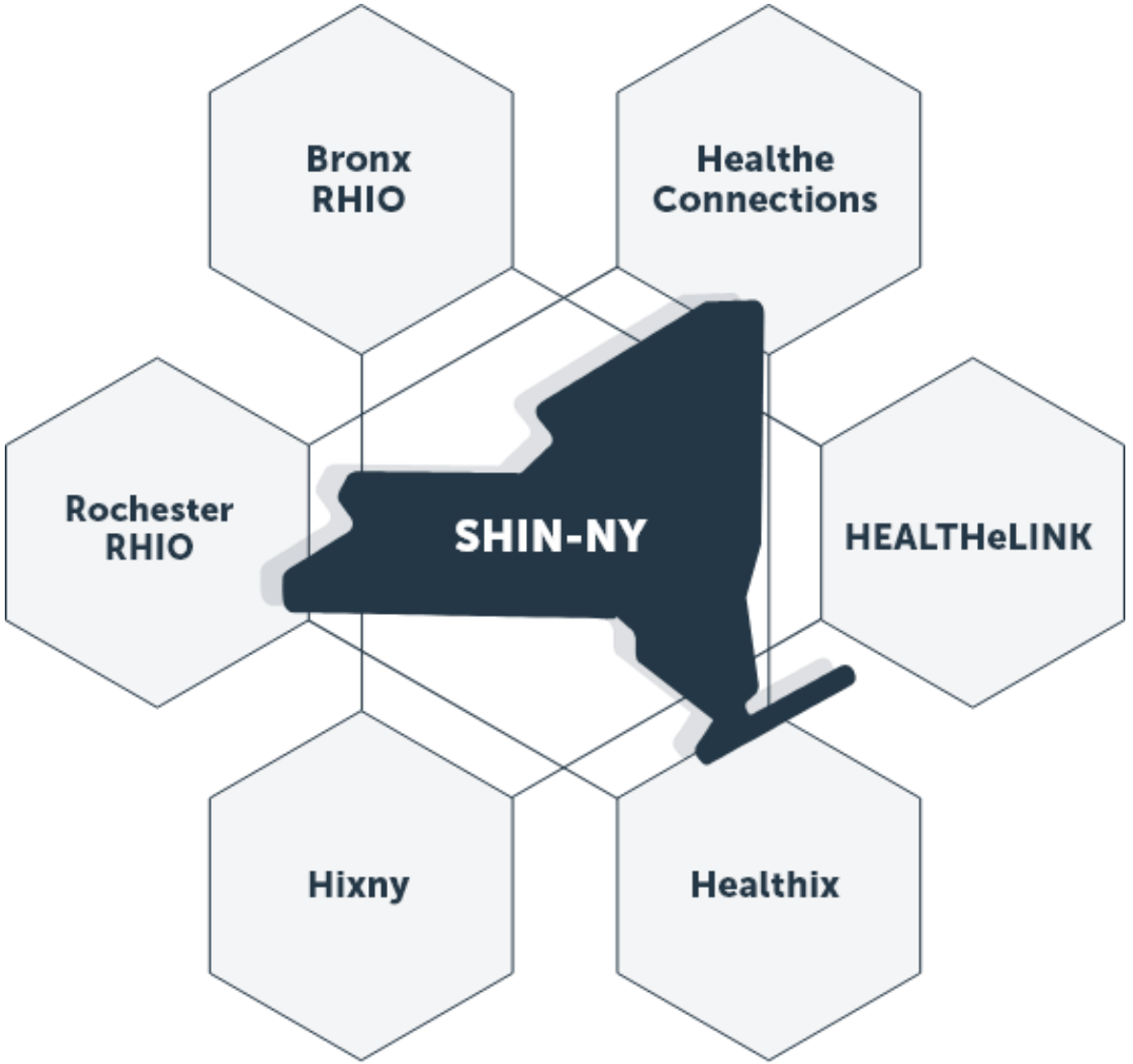
Day 4 (11/16)

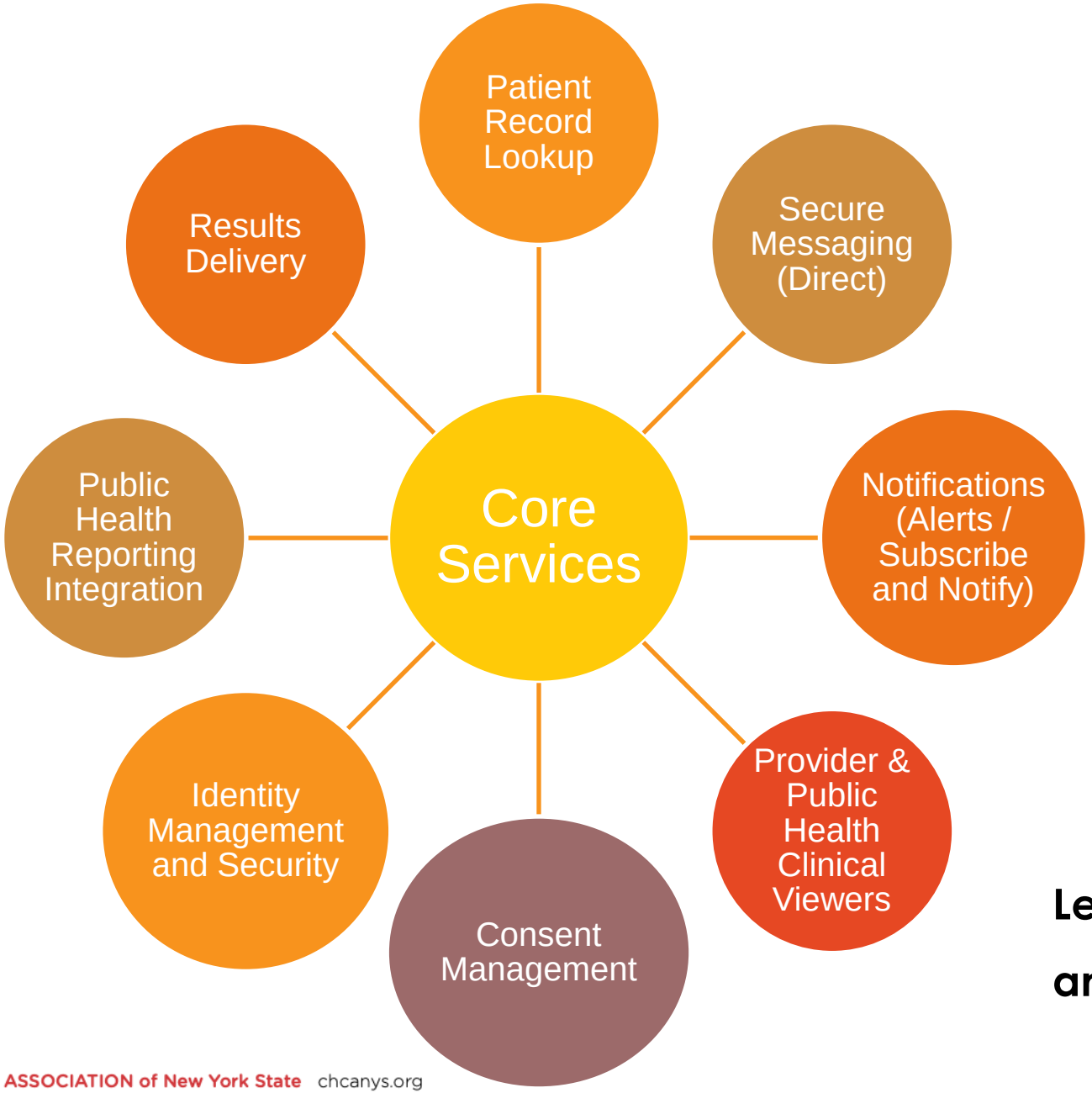
- **RHIO Conversations**
  - **HIXNY**
  - **Healthix**
  - **Bronx RHIO**

New York State Health Information Exchange

- RHIO = Regional Health Information Organization
- QE = Qualifying Entities
- HIE = Health Information Exchange

- NYeC = New York eHealth Collaborative
- SHIN-NY = Statewide Health Information Network for New York





Learn more about the SHIN-NY and their Services

https://www.nyehealth.org

Hixny®

Bryan Cudmore

Vice President, Account Management

Tessia Bekelja

Product Specialist

Hixny®

Interoperability Workshop

BRYAN CUDMORE
Vice President, Account Management

TESSIA BEKELJA
Product Specialist

Hixny®

Agenda

- Introduction to Hixny
- Learn how Hixny's FHIR-enabled app integrates into EHR systems like eCW
- Review Hixny's FHIR-enabled app and tools: screenings, referrals, care management flag, and the NYS Prescription Monitoring Program (PMP)
- Stand-alone PMP app available across NYS
- Upcoming Integration with PSYCKES

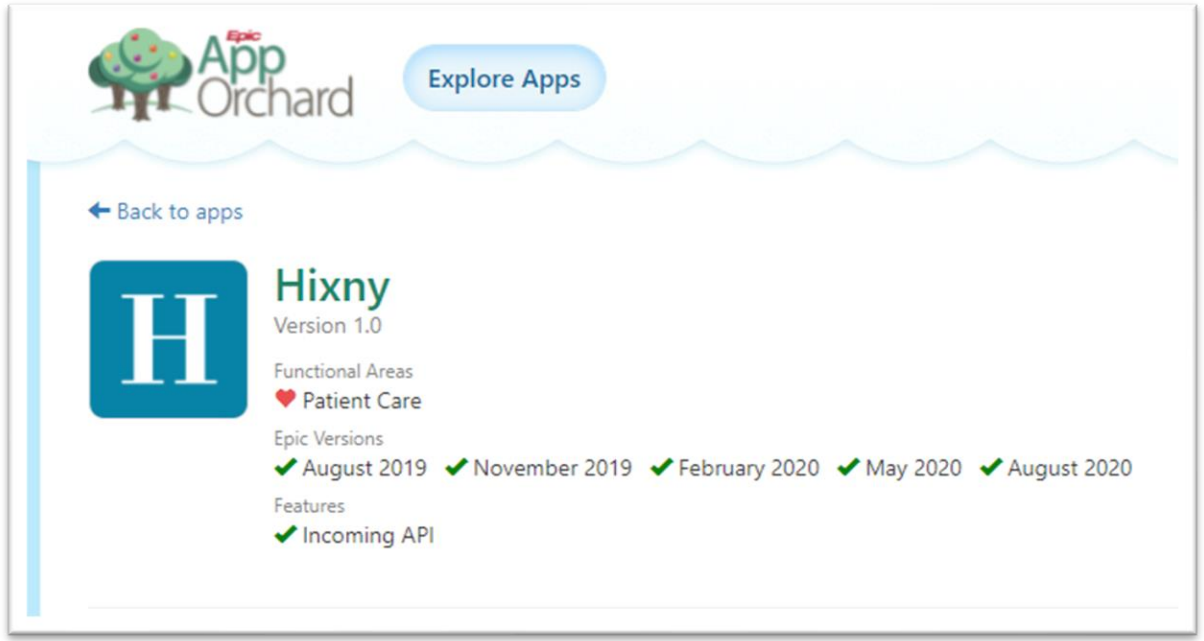
Why Snapshot App?

Other Access Methods today:

- CCDA Pull or Push
- Web Portal
- Single Sign On

Snapshot App

- Designed by healthcare professionals
- Available to Hixny and Healthix Participants



Cerner

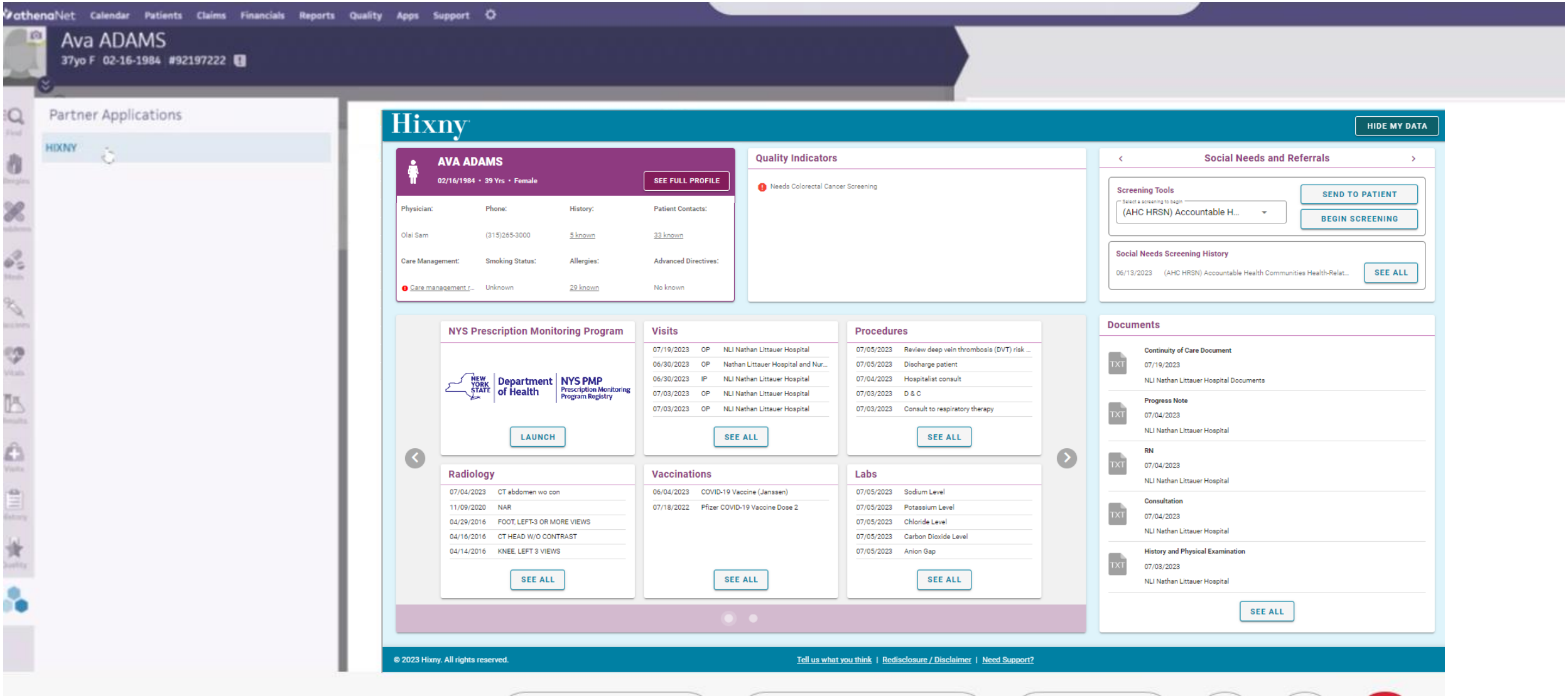
Epic

MEDITECH

eClinicalWorks
Improving Healthcare Together

athena health

ATHENA


athenaNet
Calendar
Patients
Claims
Financials
Reports
Quality
Apps
Support
Ava ADAMS
37yo F 02-16-1984 #92197222
Partner Applications
HIXNY
Hixny
HIDE MY DATA
AVA ADAMS
02/16/1984 • 39 Yrs • Female
SEE FULL PROFILE
Physician:
Phone:
History:
Patient Contacts:
Olai Sam
(315)265-3000
5 known
33 known
Care Management:
Smoking Status:
Allergies:
Advanced Directives:
Care management r...
Unknown
29 known
No known
Quality Indicators
Needs Colorectal Cancer Screening
Social Needs and Referrals
Screening Tools
(AHC HRSN) Accountable H...
SEND TO PATIENT
BEGIN SCREENING
Social Needs Screening History
06/13/2023
(AHC HRSN) Accountable Health Communities Health-Relat...
SEE ALL
NYS Prescription Monitoring Program
Department of Health
NYS PMP
Prescription Monitoring Program Registry
LAUNCH
Visits
07/19/2023 OP NLI Nathan Littauer Hospital
06/30/2023 OP Nathan Littauer Hospital and Nur...
06/30/2023 IP NLI Nathan Littauer Hospital
07/03/2023 OP NLI Nathan Littauer Hospital
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07/05/2023 Sodium Level
07/05/2023 Potassium Level
07/05/2023 Chloride Level
07/05/2023 Carbon Dioxide Level
07/05/2023 Anion Gap
SEE ALL
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Tell us what you think | Redisclosure / Disclaimer | Need Support?

Health-Related Social Needs Screenings

HRSN Screening Tool

- We added this functionality to support the 1115 waiver and close gaps for providers who do not have a digital mechanism for completing screenings
- Utilizes the Accountable Health Communities Health-Related Social Needs (AHC HRSN) screening tool
- Allows user to conduct screening or send the screening to the patient, then view the question/response history

Hixny

HIDE MY DATA

Sean Darcy

10/23/1959 • 63 Yrs • Male

SEE FULL PROFILE

Physician:	Phone:	History:	Patient Contacts:
Olai Sam	(315)265-3000	5 known	33 known
Care Management:	**Smoking Status:**	**Allergies:**	**Advanced Directives:**
Care management r...	Unknown	29 known	No known

Quality Indicators

Needs Colorectal Cancer Screening

Social Needs and Referrals

Screening Tools

Select a screening to begin: (AHC HRSN) Accountable H...

SEND TO PATIENT

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NYS Prescription Monitoring Program

NEW YORK STATE Department of Health | NYS PMP Prescription Monitoring Program Registry

LAUNCH

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04/14/2016	KNEE, LEFT 3 VIEWS

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06/04/2023	COVID-19 Vaccine (Janssen)
07/18/2022	Pfizer COVID-19 Vaccine Dose 2

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07/05/2023	Sodium Level
07/05/2023	Potassium Level
07/05/2023	Chloride Level
07/05/2023	Carbon Dioxide Level
07/05/2023	Anion Gap

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NLI Nathan Littauer Hospital

Consultation
07/04/2023
NLI Nathan Littauer Hospital

History and Physical Examination
07/03/2023
NLI Nathan Littauer Hospital

SEE ALL

Screening Tool

CLOSE

(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool

- Living Situation
- Food
- Transportation
- Utilities
- Safety
- Financial Strain
- Employment
- Family and Community Support
- Education
- Physical Activity
- Substance Use
- Mental Health
- Disabilities
- Confirm & Submit

Living Situation

1.) What is your living situation today?

- (●) I have a steady place to live
- ( ) I have a place to live today, but I am worried about losing it in the future
- ( ) I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)

2.) Think about the place you live. Do you have problems with any of the following? Choose all that apply.

- [x] Pests such as bugs, ants, or mice
- [ ] Mold
- [ ] Lead paint or pipes
- [ ] Lack of heat
- [x] Oven or stove not working
- [ ] Smoke detectors missing or not working
- [x] Water leaks
- [ ] None of the above

PREV NEXT

Hixny

HIDE MY DATA

Sean Darcy

10/23/1959 • 63 Yrs • Male

SEE FULL PROFILE

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Care Management:	**Smoking Status:**	**Allergies:**	**Advanced Directives:**
Care management r...	Unknown	29 known	No known

Quality Indicators

- Needs Colorectal Cancer Screening

Social Needs and Referrals

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Consultation
07/04/2023
NLI Nathan Littauer Hospital

History and Physical Examination
07/03/2023
NLI Nathan Littauer Hospital

SEE ALL

Screening History

CLOSE

Search

Date	Facility	Screening Title
05/23/2023	Albany Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool
05/15/2023	Albany Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool
05/12/2023	Westchester Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool
05/12/2023	Westchester Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool
05/11/2023	Albany Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool
05/11/2023	Albany Medical Center	(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool

Rows per page: 10 1-6 of 6

(AHC HRSN) Accountable Health Communities Health-Related Social Needs Screening Tool

EXPORT AS PDF

Date screening completed: 05/23/2023
Provider: Julia Prusik
Facility: Albany Medical Center

Living Situation

What is your living situation today?
Response: I have a steady place to live

Think about the place you live. Do you have problems with any of the following? Choose all that apply.

- Pests such as bugs, ants, or mice
- Oven or stove not working
- Water leaks

Food

Some people have made the following statements about their food situation. Please answer whether the statements were OFTEN, SOMETIMES, or NEVER true for you and your household in the last 12 months.

Within the past 12 months, you worried that your food would run out before you got money to buy more.
No response

Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.
No response

Social Referrals

Social Referrals

- We created the social referral tool in partnership with Healthy Alliance IPA, giving users the ability to make referrals
- This helps close the gap at facilities who do not have an existing platform for social referrals
- The user has access to HAIPA's care coordination network of hundreds of organizations covering 21 types of services
- Hixny saves referral history and details in the app

Hixny

HIDE MY DATA

Sean Darcy

10/23/1959 • 64 Yrs • Male

SEE FULL PROFILE

Physician:	Phone:	History:	Patient Contacts:
Physician TestAMB	(315)265-3000	4 known	16 known
Care Management:	**Smoking Status:**	**Allergies:**	**Advanced Directi...**
Care manageme...	Unknown	6 known	No known

Quality Indicators

Needs Colorectal Cancer Screening

Social Needs and Referrals

Referrals	Housing & Shelter	09/19/2023	Care Coordination ...
	Clothing & Househ...	08/15/2023	Care Coordination ...
History	Homeless		Ce...

SEE ALL

CREATE HRSN REFERRAL

NYS Prescription Monitoring...

NEW YORK STATE Department of Health | NYS PMP Prescription Monitoring Program Registry

LAUNCH

Visits

05/23/2023	IP	Westchester Medical Center
05/04/2023	OP	UVMHN Monitor
07/19/2022	OP	NYS Immunization Informati...
06/30/2022	ED	Albany Medical Center
03/15/2022	OP	CPH Depts at 80 E Main

SEE ALL

Procedures

11/09/2020	POCT GLUCOSE, BLOOD
11/09/2020	ED ABDOMINAL ULTRASOUND

SEE ALL

Radiology

11/09/2020	NAR
04/29/2016	FOOT, LEFT-3 OR MORE VIEWS
04/16/2016	CT HEAD W/O CONTRAST
04/14/2016	KNEE, LEFT 3 VIEWS
04/09/2016	CT CERVICAL SPINE W/O CONT

SEE ALL

Vaccinations

07/18/2022	Pfizer COVID-19 Vaccine Dose 2

SEE ALL

Labs

09/10/2021	Complete Blood Count Auto Diff
11/09/2020	Lab Interpretation
05/02/2016	HEMOGRAM,NO DIFF
05/02/2016	Urate [Mass/volume] in Serum or ...
04/17/2016	Ethanol [Mass/volume] in Serum o...

SEE ALL

Documents

Continuity of Care Document
04/26/2022
RRHDOC

Continuity of Care Document
08/25/2021
Mayfield Primary Care Center

DischargeSummary
07/23/2021
St Marys Healthcare Amsterdam SMHA

Continuity of Care Document
04/02/2021
St Peters Hospital Documents

Continuity of Care Document
04/02/2021
St Peters Hospital Documents

HRSN Referral

CLOSE

1 Refer to our care coordination network *or* Search for organizations of your choice

2 User attestation

3 Submit referral details

4 Confirmation

Choose your referral method

Have our care coordination network find the best match for your patient's need by clicking the "Refer to Network" button, or make a referral to your organization of choice using the search function below.

Option 1: Skip searching and refer to our care coordination network REFER TO NETWORK

Option 2: Search for an organization of your choice

Search by name, county, state, or description

SERVICE TYPE

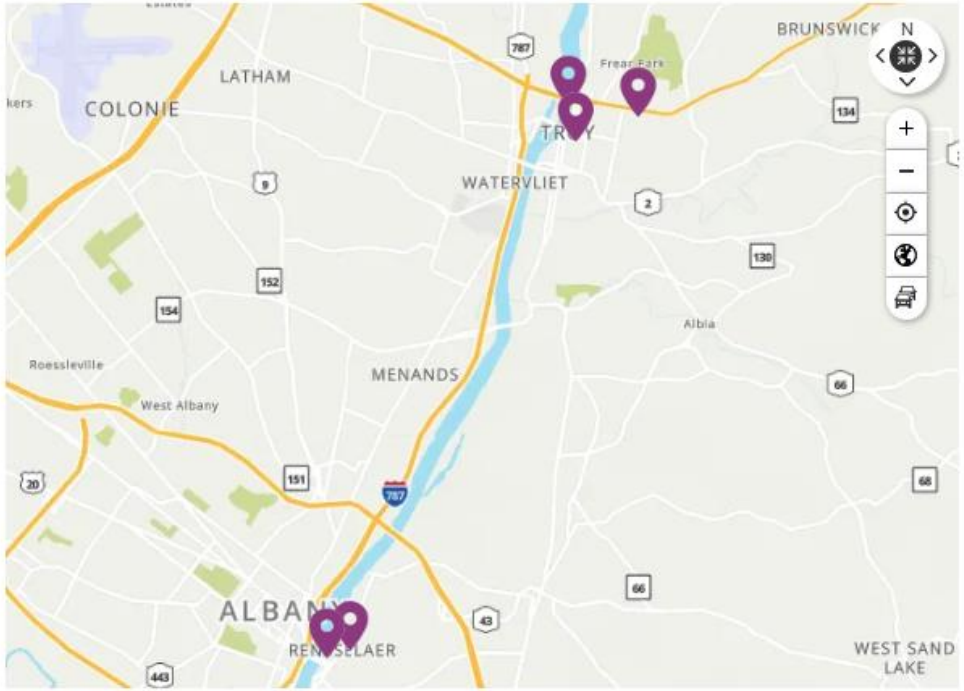
COUNTY (1)

Rows per page: 5 1-5 of 41

Organization	Service Type	Address	
Accu Care Home Health Services, Inc.	Physical Health	87 Washington St, Rensselaer, NY, 12144	REFER
Boys & Girls Clubs of the Capital Area	Individual & Family Support	1700 7th Ave, Troy, NY, 12180	REFER
Capital District Educational Opportunity Center (EOC)	Employment	431 River St, Troy, NY, 12180	REFER
Capital Region Health Connections Medicaid Health Home (St. Peter's Health Partners)	Physical Health	2212 Burdett Ave, Troy, NY, 12180	REFER
Catholic Charities Registered Dietician	Food Assistance	50 Herrick St, Rensselaer, NY, 12144	REFER

* Any links provided in a location's description field will redirect you to a website not controlled or managed by Hixny. Please proceed with

Rensselaer, NY



Hixny

HIDE MY DATA

SEAN DARCY

10/23/1959 • 63 Yrs • Male

SEE FULL PROFILE

Physician:	Phone:	History:	Patient Contacts:
Olai Sam	(315)265-3300	3 known	26 known
Care Management:	**Smoking Status:**	**Allergies:**	**Advanced Directives:**
Care managemen...	never	29 known	No known

Quality Indicators

- Needs Colorectal Cancer Screening

Social Needs and Referrals

Referrals	Education	05/18/2023	Care Coordination...
	Benefits Navigation	04/10/2023	Care Coordination...
History	Homelessness	06/30/2022	Albany Medical C...

SEE ALL

CREATE HRSN REFERRAL

Referral Instructions

Visits

05/04/2023	OP	UVMHN Monitor
12/15/2022	IP	NLI Nathan Littauer Hospit...
07/19/2022	OP	NYS Immunization Inform...
06/30/2022	ED	Albany Medical Center
03/15/2022	OP	CPH Depts at 80 E Main

SEE ALL

Procedures

11/20/2020	IP CONSULT TO CRITICAL CARE
11/20/2020	POC GLUCOSE
11/20/2020	IP CONSULT TO GENERAL SURGE...
11/20/2020	DISCHARGE PATIENT
11/20/2020	FOLLOW UP PRIMARY PHYSICIAN

SEE ALL

Conditions

06/30/2022	Homelessness
11/20/2020	Acute systolic (congestive) heart ...
09/24/2020	Problem
09/03/2020	Alcohol drinking problem
	Anemia, unspecified

SEE ALL

Radiology

11/09/2020	NAR
04/29/2016	FOOT, LEFT-3 OR MORE VIEWS
04/16/2016	CT HEAD W/O CONTRAST
04/14/2016	KNEE, LEFT 3 VIEWS
04/09/2016	CT CERVICAL SPINE W/O CONT

SEE ALL

Vaccinations

07/18/2022	Pfizer COVID-19 Vaccine Dose 2

SEE ALL

Labs

01/04/2023	Vancomycin [Mass/volume] in Ser...
09/10/2021	Complete Blood Count Auto Diff
07/24/2021	Leukocyte Reduced RBC
11/09/2020	Lab Interpretation
05/02/2016	HEMOGRAM,NO DIFF

SEE ALL

Documents

TXT **Emergency Department Report**
03/11/2023
NLI Nathan Littauer Hospital

TXT **Continuity of Care Document**
04/26/2022
RRHDOC

TXT **Continuity of Care Document**
11/09/2021
St. Marys Healthcare Amsterdam SMHA Documents

TXT **Continuity of Care Document**
10/19/2021
St. Marys Healthcare Amsterdam SMHA Documents

TXT **Continuity of Care Document**
08/25/2021
Mayfield Primary Care Center

Health-Related Social Needs

CLOSE

Search

HRSN Referrals

Referral Date	Referring Provider	Referring Provider Facility	Service type	Service subtype	Referred to
05/23/2023	Julia Prusik	Albany Medical Center	Food Assistance	Emergency Food	Care Coordination Network
05/18/2023	Julia Prusik	Albany Medical Center	Education	Early Childhood Education	Care Coordination Network
04/10/2023	Julia Prusik	Albany Medical Center	Benefits Navigation	Benefits Eligibility Screening	Care Coordination Network
03/29/2023	Julia Prusik	Albany Medical Center	Housing & Shelter	Emergency Housing	Care Coordination Network
03/28/2023	Julia Prusik	Albany Medical Center	Transportation	Ride Coordination	Care Coordination Network

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Search

HRSN History

Date	Health-Related Social Need	Provider	Facility
06/30/2022	Homelessness		Albany Medical Center

Rows per page: 5 1-1 of 1

EXPORT AS PDF

Care Management Tool

Care management tool

- Created in partnership with the North Country Care Coordination Collaborative (NCCCC) to provide actionable data in Hixny about the patient's potential need for care management (CM)

- NCCCC helped guide what key factors drive someone's need for CM, such as chronic conditions, major mental health conditions, ED/IP utilization, and SDOH issues

- Depending on how many factors the patient has, they will be flagged as being at risk for needing care management

Hixny

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07/05/2023	Chloride Level
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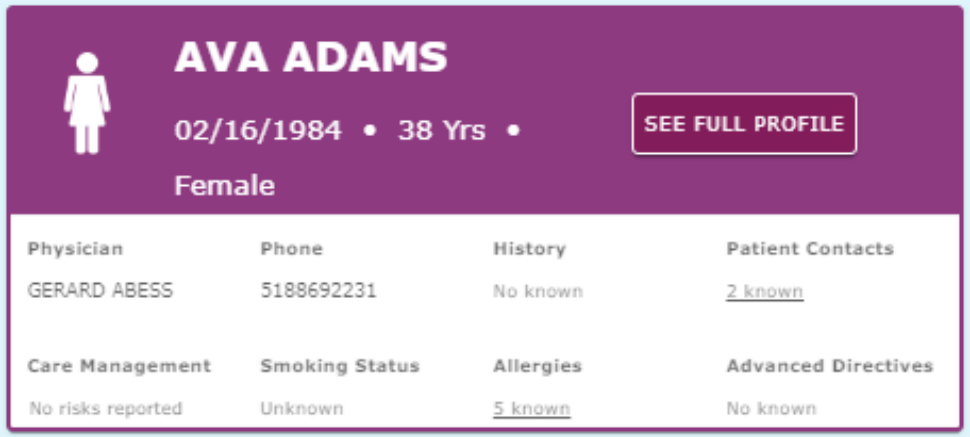
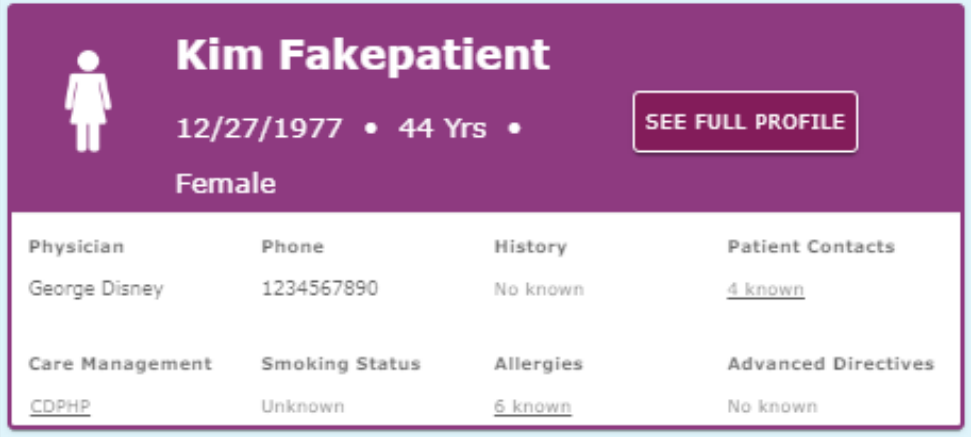
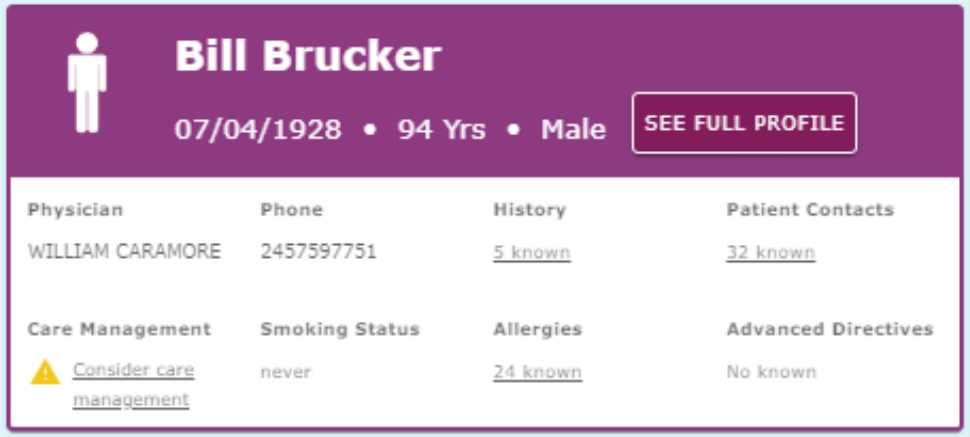
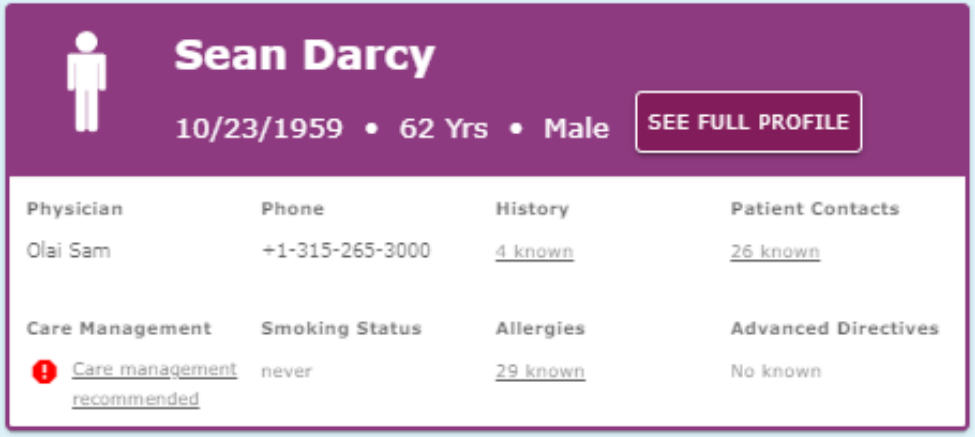
07/03/2023
NLI Nathan Littauer Hospital

SEE ALL


AVA ADAMS
02/16/1984 • 38 Yrs •
Female
SEE FULL PROFILE
Physician
GERARD ABESS
Phone
5188692231
History
No known
Patient Contacts
2 known
Care Management
No risks reported
Smoking Status
Unknown
Allergies
5 known
Advanced Directives
No known


Kim Fakepatient
12/27/1977 • 44 Yrs •
Female
SEE FULL PROFILE
Physician
George Disney
Phone
1234567890
History
No known
Patient Contacts
4 known
Care Management
CDPHP
Smoking Status
Unknown
Allergies
6 known
Advanced Directives
No known


Bill Brucker
07/04/1928 • 94 Yrs • Male
SEE FULL PROFILE
Physician
WILLIAM CARAMORE
Phone
2457597751
History
5 known
Patient Contacts
32 known
Care Management
Consider care management
Smoking Status
never
Allergies
24 known
Advanced Directives
No known


Sean Darcy
10/23/1959 • 62 Yrs • Male
SEE FULL PROFILE
Physician
Olai Sam
Phone
+1-315-265-3000
History
4 known
Patient Contacts
26 known
Care Management
Care management recommended
Smoking Status
never
Allergies
29 known
Advanced Directives
No known

Care Management

CLOSE

Enrollments

Date	Type	Details
08/03/2023	Medicaid	Member ID AE21212V

Rows per page: 5 –

Chronic Conditions

Date	Condition Description	Facility
06/30/2022	Homelessness	Albany Medical Center
	Essential (primary) hypertension	St Marys Healthcare Amsterdam SMHA

Rows per page: 5 1-2 of 2

Major Qualifying Conditions

Date	Condition Description	Facility
	Major depressive disorder, single episode, unspecified	UVMHN Monitor
	MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, UNSPECI	SPHP Memorial and Samaritan

Rows per page: 5 1-2 of 2

Emergency and Inpatient Admissions in the Past Year

EXPORT AS PDF

Code mapping for SDOH

Code mapping for SDOH

- In support of a SHIN-NY Interoperability and Innovation project, Hixny will map screening questions and responses to SDOH codes by the end of 2023
- Mapping will adhere to Gravity Project standards (such as LOINC codes)
- Once mapped, the snapshot FHIR objects will be updated to include any associated SDOH codes when transmitted downstream

NYS Prescription Monitoring Program (PMP)

PMP Integration

- Allows users to access controlled medication data from the NYS Prescription Monitoring Program (NYS PMP) in the snapshot app without leaving their workflow

- PMP is generally available to all Hixny users and is in the process of being rolled out to Healthix users.

- Hixny has also created a standalone version of PMP which will be made available to across NYS regardless of the QE each facility works with.

Hixny

HIDE MY DATA

Sean Darcy

10/23/1959 • 63 Yrs • Male

SEE FULL PROFILE

Physician:	Phone:	History:	Patient Contacts:
Olai Sam	(315)265-3000	5 known	33 known
Care Management:	**Smoking Status:**	**Allergies:**	**Advanced Directives:**
Care management r...	Unknown	29 known	No known

Quality Indicators

- Needs Colorectal Cancer Screening

Social Needs and Referrals

Screening Tools

Select a screening to begin: (AHC HRSN) Accountable H...

SEND TO PATIENT

BEGIN SCREENING

Social Needs Screening History

06/13/2023 (AHC HRSN) Accountable Health Communities Health-Relat...

SEE ALL

NYS Prescription Monitoring Program

NEW YORK STATE Department of Health | NYS PMP Prescription Monitoring Program Registry

LAUNCH

Visits

07/19/2023	OP	NLI Nathan Littauer Hospital
06/30/2023	OP	Nathan Littauer Hospital and Nur...
06/30/2023	IP	NLI Nathan Littauer Hospital
07/03/2023	OP	NLI Nathan Littauer Hospital
07/03/2023	OP	NLI Nathan Littauer Hospital

SEE ALL

Procedures

07/05/2023	Review deep vein thrombosis (DVT) risk ...
07/05/2023	Discharge patient
07/04/2023	Hospitalist consult
07/03/2023	D & C
07/03/2023	Consult to respiratory therapy

SEE ALL

Radiology

07/04/2023	CT abdomen wo con
11/09/2020	NAR
04/29/2016	FOOT, LEFT-3 OR MORE VIEWS
04/16/2016	CT HEAD W/O CONTRAST
04/14/2016	KNEE, LEFT 3 VIEWS

SEE ALL

Vaccinations

06/04/2023	COVID-19 Vaccine (Janssen)
07/18/2022	Pfizer COVID-19 Vaccine Dose 2

SEE ALL

Labs

07/05/2023	Sodium Level
07/05/2023	Potassium Level
07/05/2023	Chloride Level
07/05/2023	Carbon Dioxide Level
07/05/2023	Anion Gap

SEE ALL

Documents

Continuity of Care Document
07/19/2023
NLI Nathan Littauer Hospital Documents

Progress Note
07/04/2023
NLI Nathan Littauer Hospital

RN
07/04/2023
NLI Nathan Littauer Hospital

Consultation
07/04/2023
NLI Nathan Littauer Hospital

History and Physical Examination
07/03/2023
NLI Nathan Littauer Hospital

SEE ALL

Hixny

NYS Prescription Monitoring Prog

CLOSE

Log on to the Health Commerce System - Google Chrome

uathcsauth.health.ny.gov/hcsauthenticationendpoint/login.do?client_id=xHFBulwjMTYazetKIEgZAASfzfYa&commonAuth...

NEW YORK STATE

Services News Government

PLEASE LOGIN TO BEGIN USING THE HEALTH COMMERCE SYSTEM (HCS)

NEW YORK STATE Health Commerce System

User ID

User ID

Password

Password

Forgot Your User ID or Password Remember User ID

LOGIN

Don't Have An Account? Sign Up Here

Department of Health

Important Site Notices System Requirements Site Policies/Terms of Use

Tell us what you think | Redisclosure / Disclaimer | Need Support?

New York State Prescription Monitoring Program

Search Terms: Kringle, Crystal 12/25/1945 **Search Date:** 06/13/2023 1:04:34 PM

The Drug Utilization Report below displays all of the controlled substance prescriptions, if any, that your patient has filled in the last twelve months. The information displayed in this report is compiled from pharmacy submissions to the Department, and accurately reflects the information as submitted by pharmacies.

This Report was requested by: Julia Prusik | **Reference #:** 66090

Patient Demographic information (PDI):

PDI	First Name	Last Name	Birthdate	Gender	Street Address	City	State	Zip Code
Patient_1	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_2	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_3	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_4	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_5	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_6	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_7	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021
Patient_8	Crystal	Kringle	11/24/1945	F	221B BAKER STREET EVERTYTOWN, NY ZZ021	EVERTYTOWN	NY	ZZ021

Hixny

NYS Prescription Monitoring Program

CLOSE

Search

PDI	RX Written	RX Dispensed	Drug	Quantity	Days Suppply	Prescriber Name	Payment Method	Dispenser
Patient_1	06/05/2023	05/28/2023	tramadol hcl 50 mg tablet	60	15	Snow, John MD	Insurance	Super A Pharmacy
Patient_2	06/03/2023	05/28/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy
Patient_3	05/03/2023	05/02/2023	tramadol hcl 50 mg tablet	60	15	Snow, John MD	Insurance	Super A Pharmacy
Patient_4	04/31/2023	04/31/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy
Patient_5	04/08/2023	04/02/2023	tramadol hcl 50 mg tablet	60	15	Snow, John MD	Insurance	Super A Pharmacy
Patient_6	04/05/2023	04/03/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy
Patient_7	03/08/2023	03/05/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy
Patient_8	02/19/2023	02/19/2023	hydromorphone 2 mg tablet	18	3	Stone, Sarah X CNM	Insurance	Super A Pharmacy
Patient_9	01/24/2023	01/19/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy
Patient_10	01/02/2023	00/29/2023	clonazepam 1 mg tablet	60	30	Snow, John MD	Insurance	Super A Pharmacy

Rows per page: 10 1-10 of 20

For questions regarding the content of a PMP report, contact the Bureau of Narcotic Enforcement at narcotic@health.ny.gov or call 1-866-811-7957. Include the reference number provided for you in the search results.

EXPORT AS PDF

Hixny

You are accessing a limited view of Hixny. To view all available information, have the patient sign a Hixny consent form.

KIM FAKEPATIENT

17 Street Road
South Glens Falls, NY 12803

12/27/1977 45 Years Female

NYS Prescription Monitoring Program

NEW YORK STATE | Department of Health | NYS PMP Prescription Monitoring Program Registry

LAUNCH

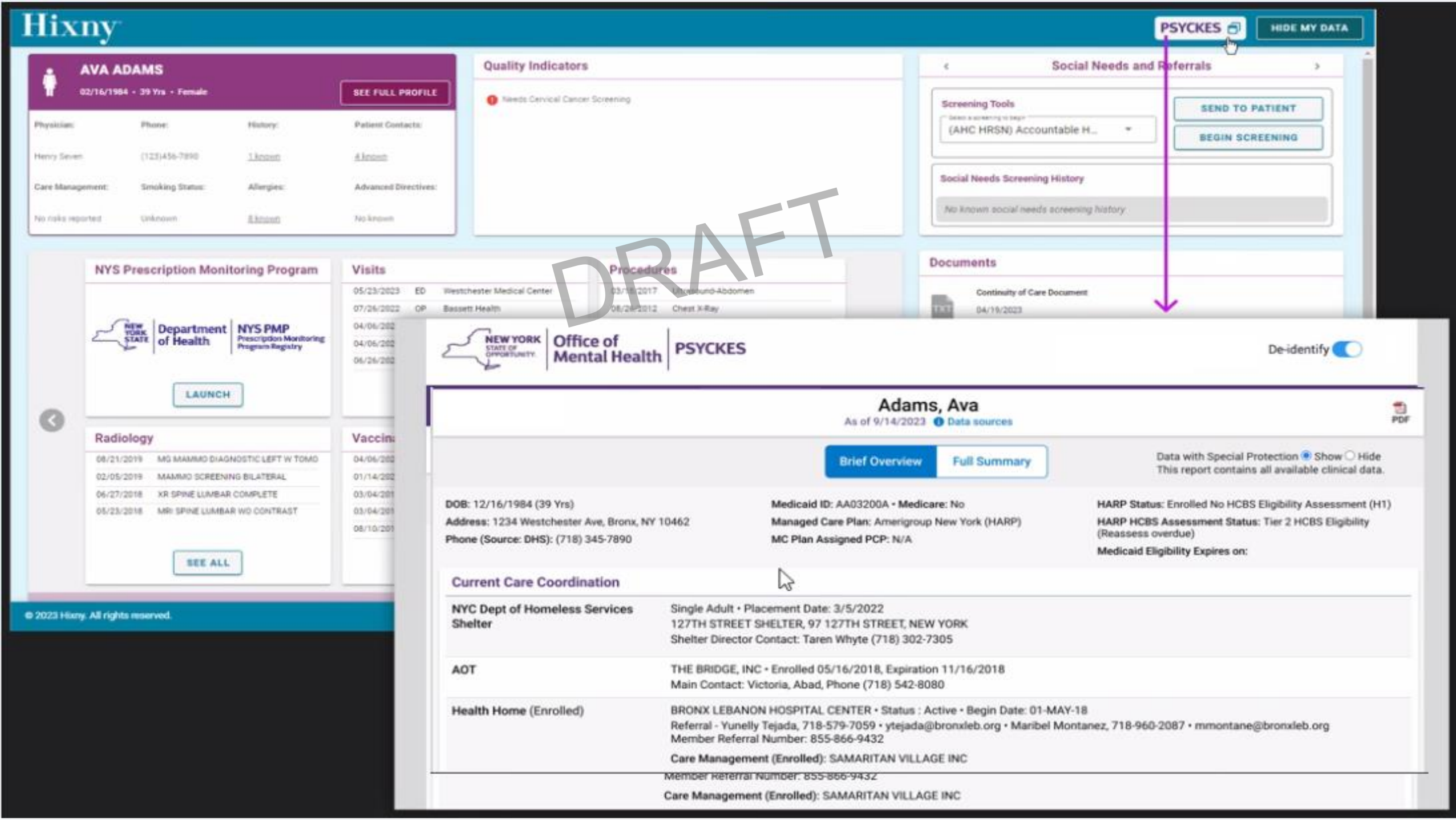
Upcoming: PSYCKES integration

PSYCKES Integration

- Hixny and PSYCKES are partnering to create a ‘one-click’ access feature, which will allow users who are logged in the Hixny platform access to a client’s PSYCKES clinical summary

- The goal will be to have users access PSYCKES Clinical Summaries for any Hixny consented patients

- Will provide easy access to compare PSYCKES rich clinical data (from over 10 different data sources) with Hixny without requiring separate login


Hixny
PSYCKES
HIDE MY DATA
AVA ADAMS
02/16/1984 - 39 Yrs - Female
SEE FULL PROFILE
Physician:
Phone:
History:
Patient Contacts:
Henry Seven
(123)456-7890
1 known
4 known
Care Management:
Smoking Status:
Allergies:
Advanced Directives:
No risks reported
Unknown
8 known
No known
Quality Indicators
Needs Cervical Cancer Screening
Social Needs and Referrals
Screening Tools
(AHC HRSN) Accountable H...
SEND TO PATIENT
BEGIN SCREENING
Social Needs Screening History
No known social needs screening history
DRAFT
NYS Prescription Monitoring Program
Department of Health
NYS PMP
Prescription Monitoring Program Registry
LAUNCH
Visits
05/23/2023 ED Westchester Medical Center
07/26/2022 OP Bassett Health
Procedures
Ultrasound-Abdomen
Chest X-Ray
Documents
Continuity of Care Document
04/19/2023
Radiology
08/21/2019 MG MAMMO DIAGNOSTIC LEFT W TOMO
02/05/2019 MAMMO SCREENING BILATERAL
06/27/2018 XR SPINE LUMBAR COMPLETE
05/23/2018 MRI SPINE LUMBAR WO CONTRAST
SEE ALL
Vaccin
© 2023 Hixny. All rights reserved.
NEW YORK STATE OF OPPORTUNITY.
Office of Mental Health
PSYCKES
De-identify
Adams, Ava
As of 9/14/2023
Data sources
PDF
Brief Overview
Full Summary
Data with Special Protection Show Hide
This report contains all available clinical data.
DOB: 12/16/1984 (39 Yrs)
Address: 1234 Westchester Ave, Bronx, NY 10462
Phone (Source: DHS): (718) 345-7890
Medicaid ID: AA03200A • Medicare: No
Managed Care Plan: Amerigroup New York (HARP)
MC Plan Assigned PCP: N/A
HARP Status: Enrolled No HCBS Eligibility Assessment (H1)
HARP HCBS Assessment Status: Tier 2 HCBS Eligibility (Reassess overdue)
Medicaid Eligibility Expires on:
Current Care Coordination
NYC Dept of Homeless Services Shelter
Single Adult • Placement Date: 3/5/2022
127TH STREET SHELTER, 97 127TH STREET, NEW YORK
Shelter Director Contact: Taren Whyte (718) 302-7305
AOT
THE BRIDGE, INC • Enrolled 05/16/2018, Expiration 11/16/2018
Main Contact: Victoria, Abad, Phone (718) 542-8080
Health Home (Enrolled)
BRONX LEBANON HOSPITAL CENTER • Status : Active • Begin Date: 01-MAY-18
Referral - Yunelly Tejada, 718-579-7059 • ytejada@bronxleb.org • Maribel Montanez, 718-960-2087 • mmontane@bronxleb.org
Member Referral Number: 855-866-9432
Care Management (Enrolled): SAMARITAN VILLAGE INC
Member Referral Number: 855-866-9432
Care Management (Enrolled): SAMARITAN VILLAGE INC

Thank you!

BRYAN CUDMORE
Vice President, Account Management
bcudmore@hixny.org

TESSIA BEKELJA
Product Specialist
tbekelja@hixny.org

Hixny®

Thomas Moore

Senior Vice President of Strategy and Partnerships

Maria F. Sanchez-Posada, PCMH-CCE

Senior Business Relationship Specialist

Healthix

EXCHANGING INFORMATION
TO TRANSFORM PATIENT CARE

Healthix Focus360° CHCANYS Presentation

Healthix is part of the Statewide Health Information Network of New York (SHIN-NY)

CIVITAS
Networks for Health

HITRUST
CSF Certified
Healthix platforms - InterSystems HealthShare, Health Insight, HBI Spotlight Analytics - have all earned HITRUST CSF® Certification

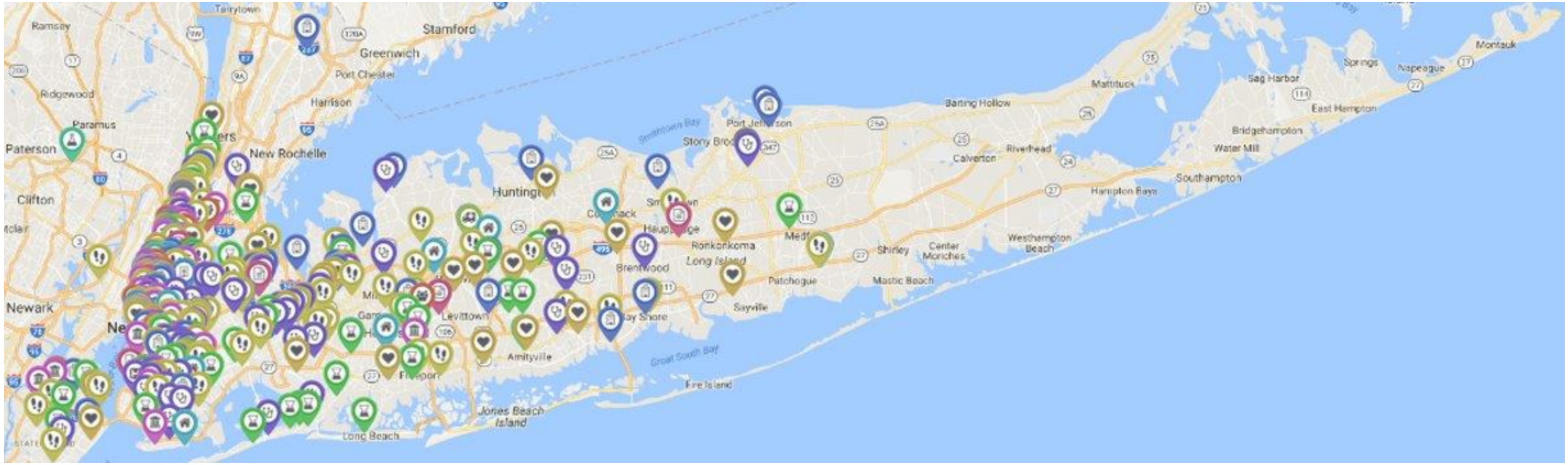
About Healthix

Healthix is the Largest Public Health Information Exchange (HIE) in the Nation

More Than 20,000,000 Patients

Healthix uses sophisticated software to reconcile over 100 million provider Medical Record Numbers (MRNs) into composite profiles of more than 20,000,000 patients who’ve had encounters in past 24 months.

Healthix NYC and Long Island



Over 28,000 participating customers with more than 22,000 contributing data.

- Hospitals
- OREs
- Physicians
- CBOs/BHOs
- Health Plans
- IPA, ACO, PPS
- Other

Healthix

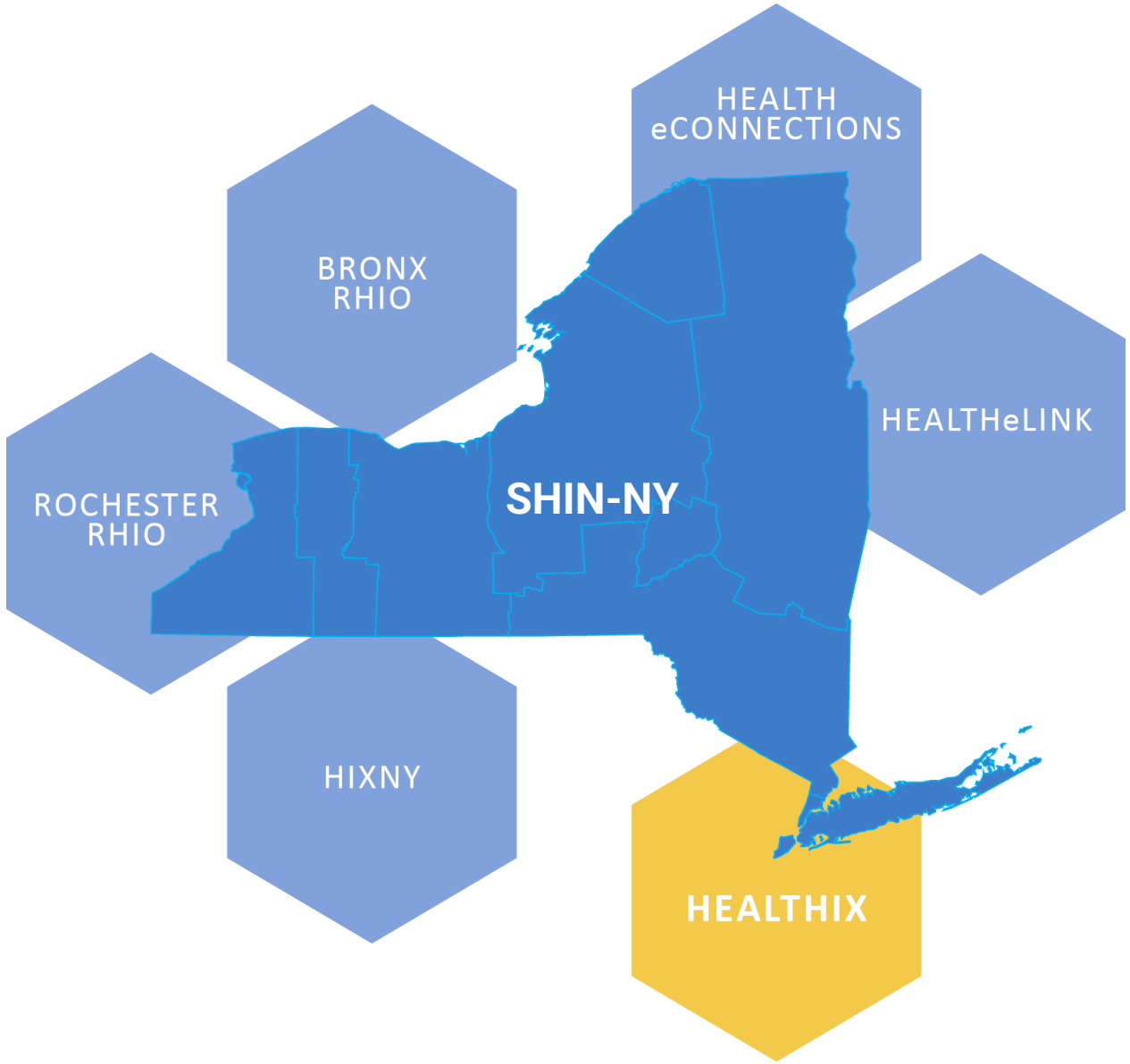
Healthix Exchanging Data to Support:

CLINICAL CARE	POPULATION HEALTH	PUBLIC HEALTH	RESEARCH	CONSUMER ENGAGEMENT
• Individual patient care • Emergency care • Chronic disease management • Care coordination	• Pay for performance • Quality measures • Disease management • Social Determinants of Health	• Clinical care in Public Health (HIV, homeless, BH and DD) • Public health investigations • Disaster response, bio-surveillance	• Cohort Identification • Retrospective analyses • Prospective studies • Clinical trial enrollment • Research validation	• Life Insurance health assessment • Consumer Access to their data

Healthix is one of six HIEs that make up the SHIN-NY

When a user queries data, Healthix automatically provides data from Healthix and statewide providers through the SHIN-NY.

Statewide Health Information Network of New York (SHIN-NY)



Healthix Focus360°

A toolkit developed to support our providers with value-based care efforts.

Healthix Focus360° Empowers Federally Qualified Health Centers (FQHCs) with Value-Based Care Toolkit

Pilot Market Segment: FQHCs

The Healthix Board identified a need to develop web-based solutions or tools to help providers with value-based care. Healthix interviewed 20 organizations to identify a core set of reports that would address FQHCs highest priorities.

Why Focus360°?

Focus360° uses the full clinical history *(360°),* but pinpoints areas of greatest importance *(Focus).*

Highlights

- Identifies unknown events that need follow-up.
- Prevents unnecessary follow-up when care was received elsewhere.
- Helps improve quality measures key to value-based care contracts.

Healthix Focus360°

This toolkit aims to answer the question, *"What is happening with my patients beyond my organization?"*

These reports leverage a 360° view of patients to provide insights such as identifying those in need of follow-up after a mental health crisis, for individuals with uncontrolled diabetes, or those who have undergone cancer screenings without requiring further follow-up.

Healthix Focus360° Overview

The Healthix Focus360° Dashboard features a facility summary of patient data and six segments by which to create in-depth reports. The dashboard is user friendly, fast and provides robust population health and patient data.

The dashboard specifically identifies quality measures met outside of the user's organization, patient populations at greatest risk and real-time support for prioritizing follow-up.

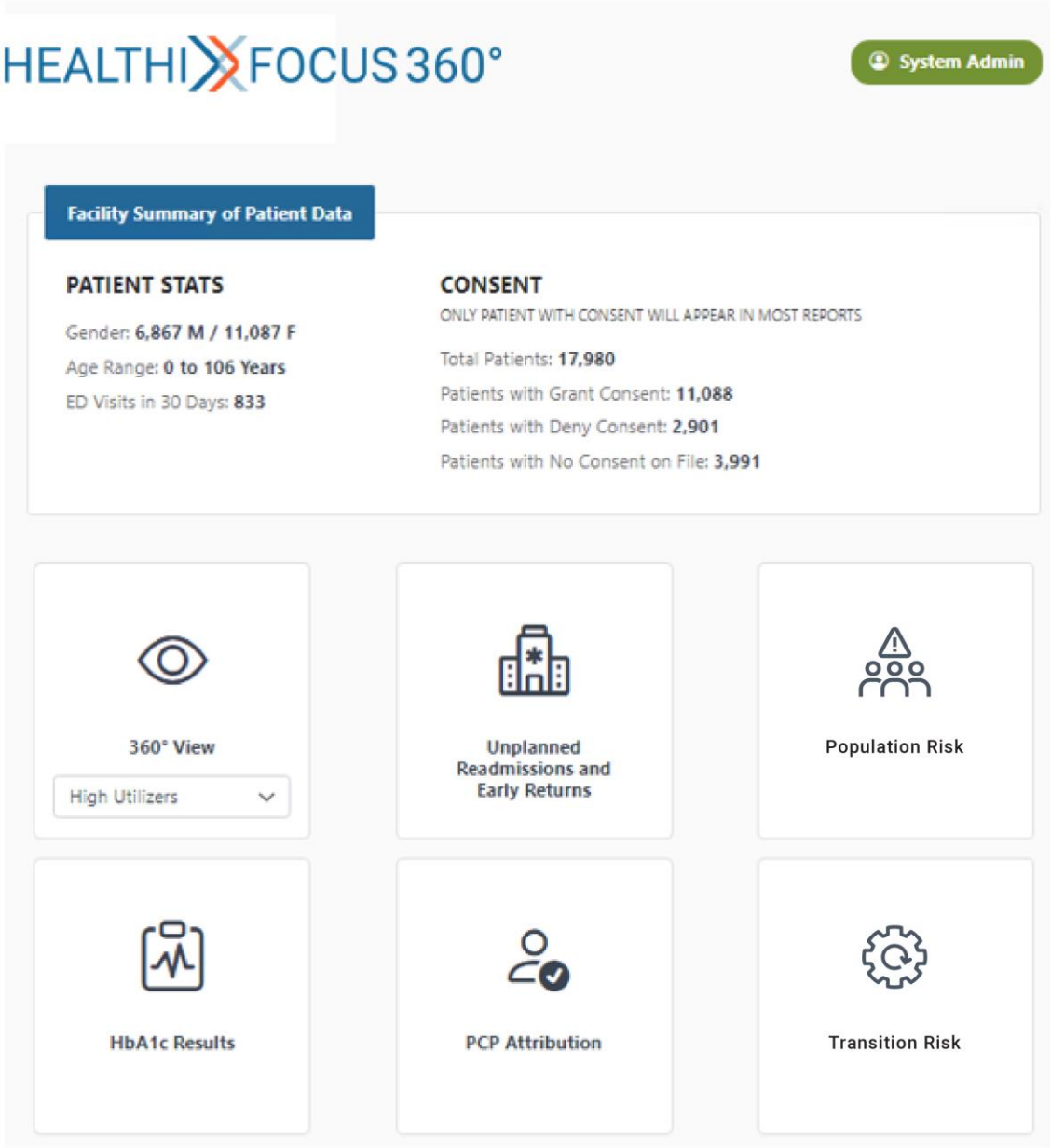
Initial Release 1.0 will include:

Reports

- 360° View
- HbA1c Results
- Unplanned Readmissions and Early Returns
- PCP Attribution

Dashboard Analytics

- Population Risk
- Transition Risk



Healthix

Healthix Focus360° Features

360° View
Care Outside My Institution

- All Patients
- High Utilizers
- Referral Reconciliation
- STI Encounters
- Childhood Disability Screening
- Follow-up After Hospitalization

Population Risk

- Asthma Exacerbation
- Suicide Attempt
- COPD
- Type 2 Diabetes
- Future Cost
- IP Admissions
- ED Visits
- Mortality

Transition Risk

- IP Readmissions in 30 Days
- ED Re-visits in 30 Days

Release 1.1: Quality Measures

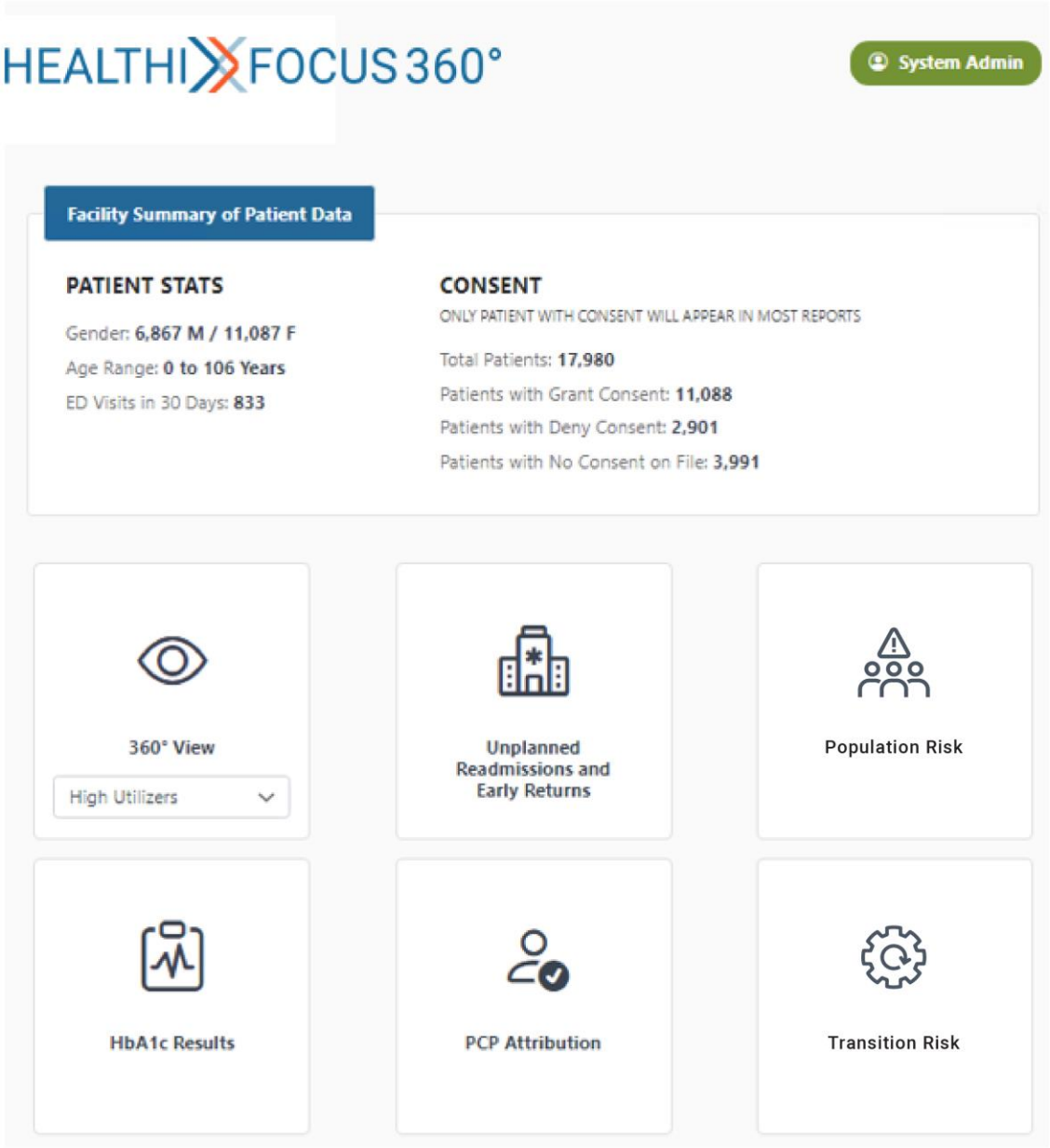
Delivers data for specific HEDIS quality metrics to aid in identifying and closing gaps in care.

Quality Measures
Encounter-Based

- Adult and Child Well Visits
- Follow-Up After Hospitalization for Mental Illness and Substance Abuse
- Transition of Care
- Prenatal and Postpartum Care

Quality Measures
Patient-Based

- Controlling Blood Pressure
- Breast Cancer Screening
- Cervical Cancer Screening
- Colorectal Cancer Screening
- Comprehensive Diabetes Care



Healthix

Demo

BronxRHIO

Connecting for Better Health

Kathryn Miller, MS

Chief Operating Officer

BronxRHIO
Connecting for Better Health

Bronx RHIO Overview

CHCANYS INTEROPERABILITY WORKSHOP 2023

Who We Are

A non-profit regional health information exchange organization established in 2005

Founded and lead by a consortium of healthcare institutions and providers

Established the Bronx Regional Informatics Center (BRIC) in 2012 to provide analytic/population health services

Expertise in clinical informatics, data quality, data aggregation & analysis, data visualization, intervention support, and reporting

Certified by NYS DOH as a Health Information Exchange/Qualified Entity

HITRUST Certified

BronxRHIO
Connecting for Better Health

Mission and Vision

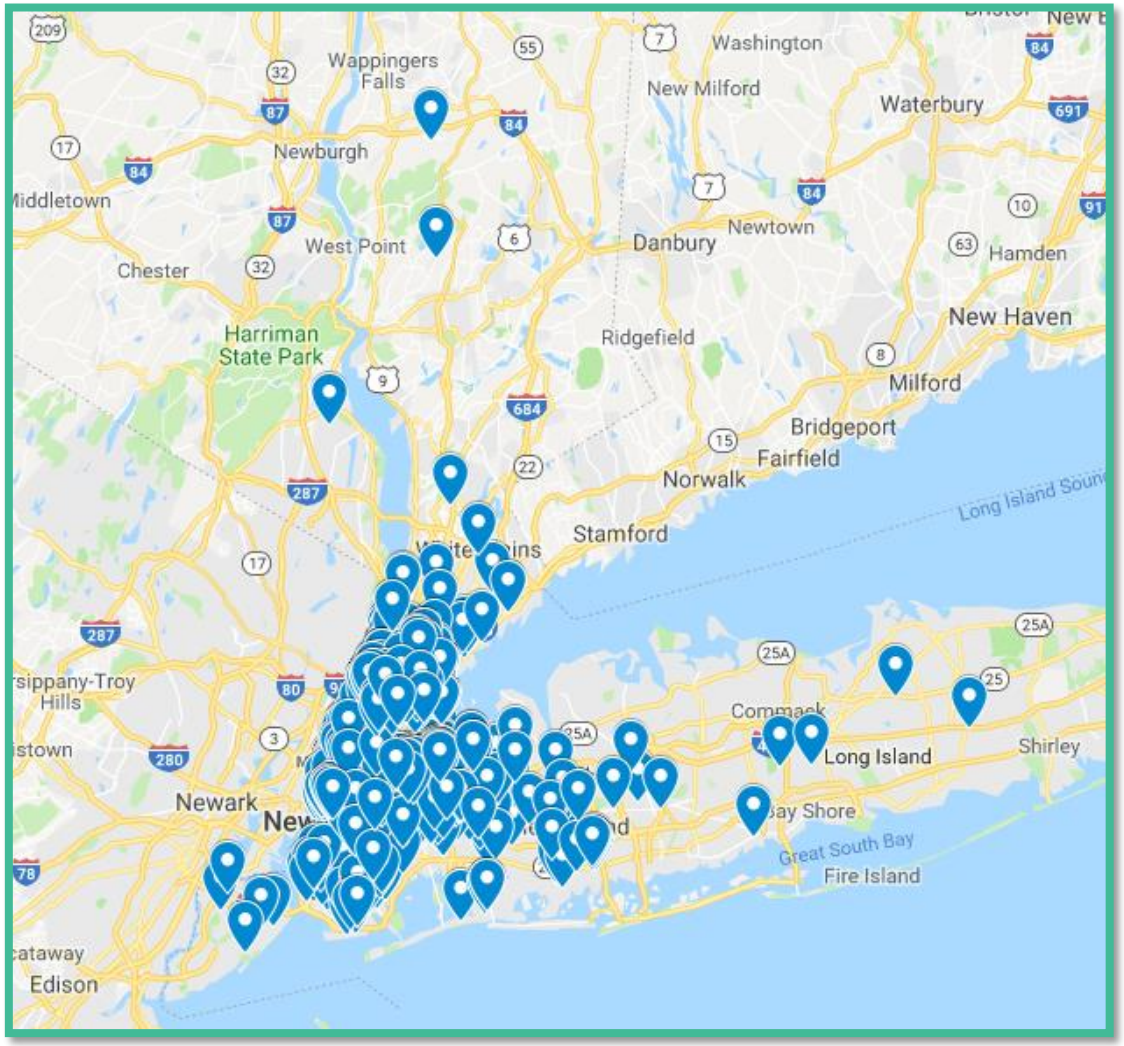
Mission:
To build a secure, interoperable health information exchange (HIE) that makes it possible for patients medical records to follow them wherever they present for healthcare services.

Vision:
To create a HIE that will transform healthcare delivery to a patient-centered, rational, cost-effective system.

BronxRHIO
Connecting for Better Health

Bronx RHIO Geographic Coverage

900+ healthcare organizations across New York City, Long Island, and the Hudson Valley.



Membership & Data Providers

Hospitals

BronxCare Health System

Montefiore Medical Center

St. Barnabas Hospital

James J. Peters VA Medical Center

Community Health Centers

Acacia Network

Bronx Community Health Network

Essen Health Care

Institute for Family Health

MedAlliance

MLK Health Center

Morris Heights Health Center

Union Community Health Center

Urban Health Plan

Other

Affinity Health Plan

Argus

Arms Acres

Hebrew Home (RiverSpring)

Housing Works

MJHS

Rising Ground

VNSNY

BronxWorks

For the most current list of participating organizations please visit: www.BronxRHIO.org

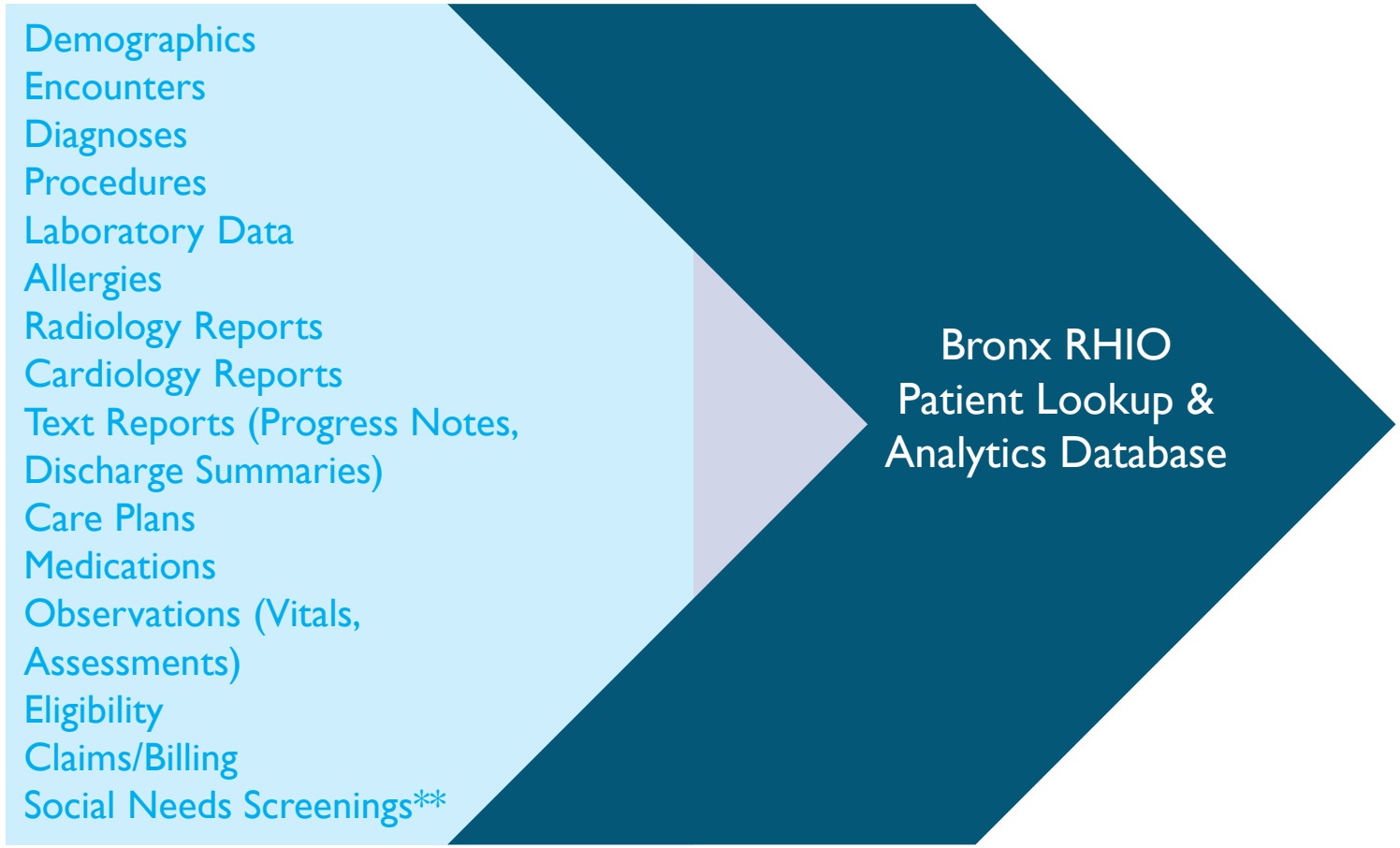
BronxRHIO
Connecting for Better Health

Available Data

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

Data flows in real time to the VHR and analytics.

*Master Patient Index= Over 9 million



**Coming soon!

What We Do

- Integrate data from different systems into a standardized, secure, interoperable clinical health information exchange.
- Allow authorized healthcare providers to access critical patient info by managing consent, authentication, and access.
- Help members manage and report on populations through the Bronx Regional Informatics Center (BRIC).
- Send alerts to providers and deliver key reports on behalf of members.
- Ensure member compliance with privacy, security, training, auditing, and use. Assist members in data quality management.
- Enable larger interoperability by serving as on-ramp to SHIN-NY (Network of all NY State HIE's).

BronxRHIO
Connecting for Better Health

Bronx RHIO Services

RHIO-Wide Data Integration & Management	SHIN-NY Patient Lookup & Alerts
User Access/Consent Management/Compliance	Population Health Analysis & Reporting
Virtual Health Record (VHR) Access	Registry Creation and Management
Registration Alerts via Subscriptions	Advanced Analytics
Referral Routing	Custom/Ad hoc Reporting
Data Availability Flags	Natural Language Processing
Care Team Tracking	Clinical and Incarceration Alerts
Direct Secure Messaging	Claims Data Integration – in process
Data Quality Management Assistance	Predictive Modeling – coming soon

BronxRHIO
Connecting for Better Health

HIE Organizations in NY State

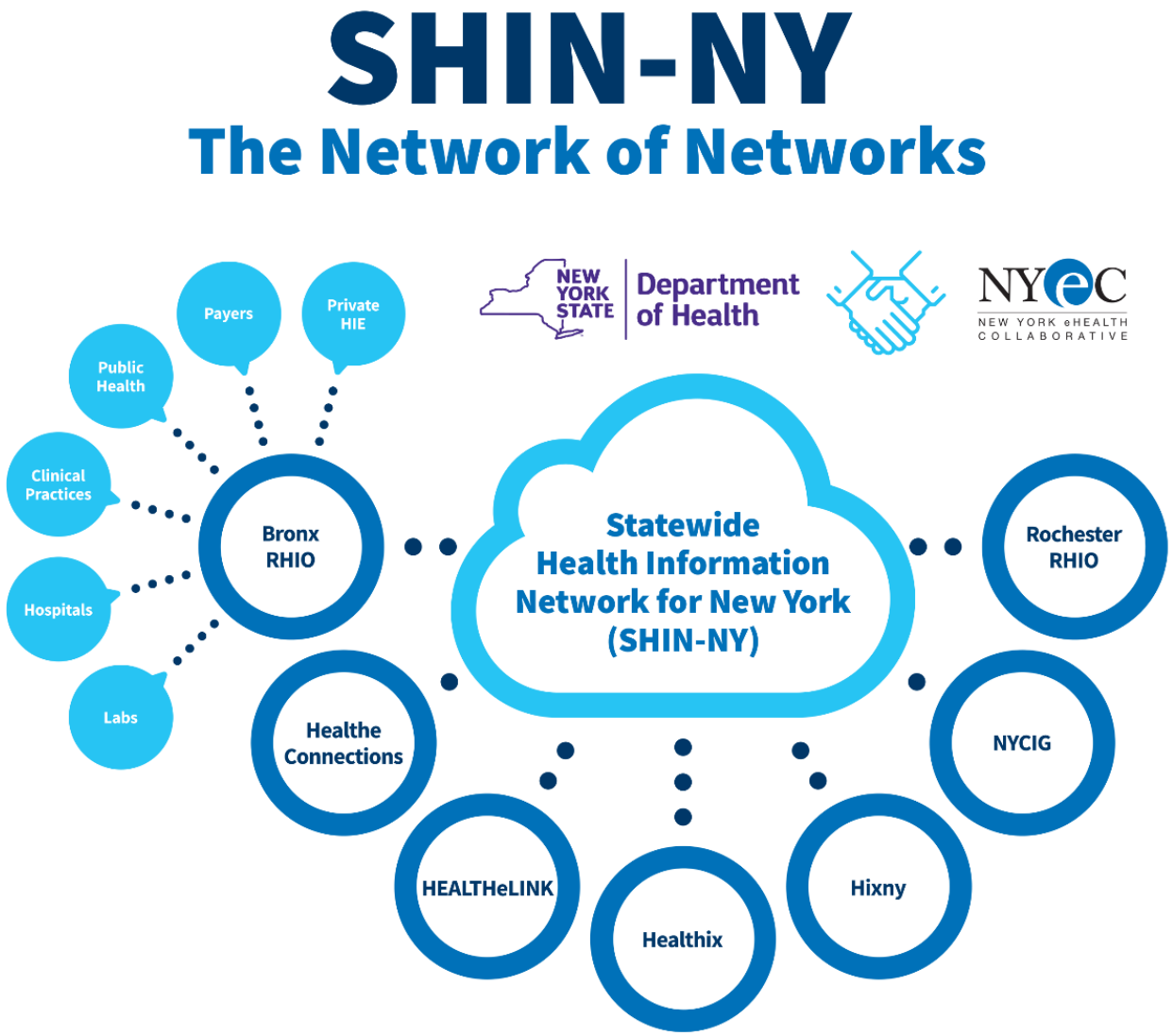
Statewide Services:

Cross-QE Alerting

Statewide Patient Record Lookup

Coming in 2024:

Health Related Social Needs Screening data from all QEs



Bronx RHIO Answers ??

CHCANYS PROVIDED QUESTIONS FROM HEALTH CENTERS:

THESE ARE OUR ANSWERS!

Bronx RHIO Membership and Consent

Contracting

- Bronx RHIO contracts with Independent Physician Associations (IPAs) to be members and shares data under various types of agreements, for example:
  - IPA has QSOA with Practice **AND** Practice has RHIO Consent of 'Yes' → RHIO will send data to the IPA.
  - RHIO can send ED/IP admission/discharge alerts to the IPA without consent based on the QSOA relationship with the practice.

Consent and Data Shared

- Consent applies to the entire patient record.
- Re-disclosure follows HIPAA rules, not QE rules.

BronxRHIO
Connecting for Better Health

Utilizing the RHIO for Quality

Closing Care Gaps with Plans

- We provide data to many payers for their use in calculating quality measures. Depending on the payer, they are getting monthly files of both DAV certified data and non-DAV certified data.
  - Note: We are allowed to provide that data to them without patient consent at the Plan.

BronxRHIO
Connecting for Better Health

Navigating Challenges

Data Exchange

- EHR Ingested Data v. RHIO Portal Data
  - Not all EHRs can ingest the same data.
  - Data that cannot be ingested, like discharge summaries, can be provided as reports, if requested.
    - May also be able to parse out certain data from discharge summaries, such as medications prescribed to be ingested.
  - We are happy to engage with any EHR vendor when there are problems.
    - Athena and eCW are two EHRs that do not ingest the patient information and clinical details.

BronxRHIO
Connecting for Better Health

Navigating Challenges *continued*

Staff Utilization and Portal Navigation

- Bronx RHIO's portal is searchable for any term, so if you are looking for one or two things, a quick search can be done that way.
- We recognize that portal searches can be inefficient ways to get required data in terms of staff time, we have some solutions for that:
  - Bronx RHIO can provide reports on groups of patients with specific data you need, and/or
  - FaceSheets with specific data on an individual patient that a particular program is looking for; they can be triggered by a registration event OR retrieved via the portal.
    - These can be ingested as data into the EHR if the EHR has the capability or are provided in PDF when it cannot be ingested.

BronxRHIO
Connecting for Better Health

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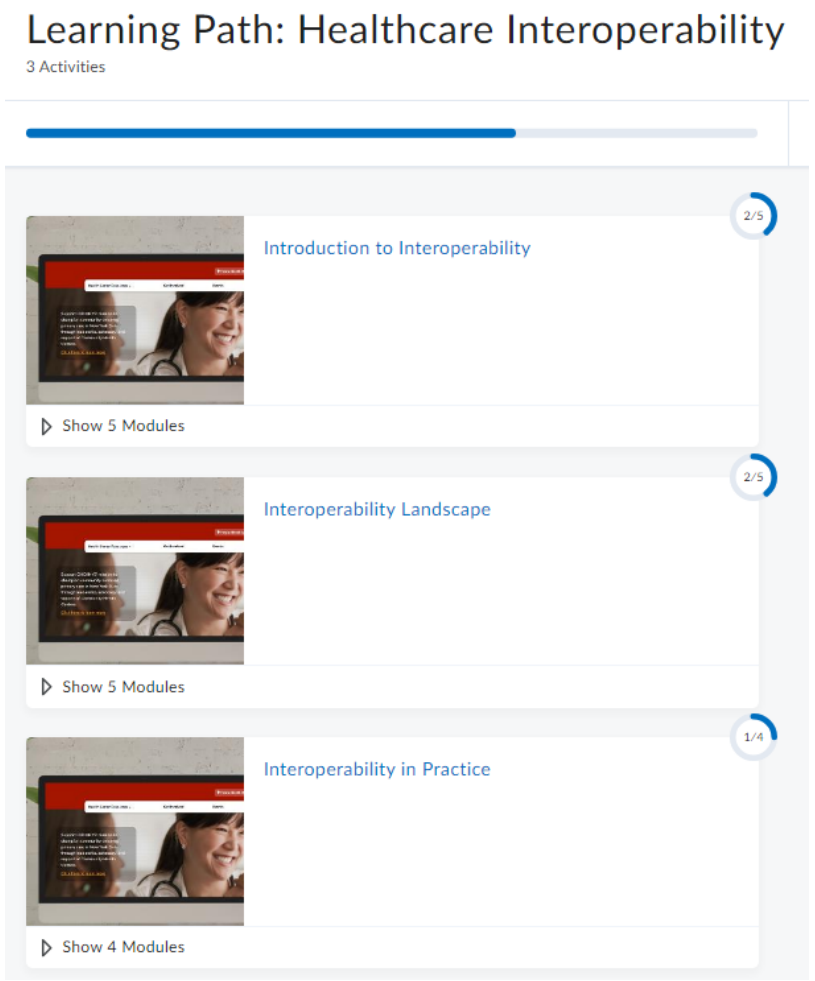
A

Continue the Conversation!

- Join the CHCANYS Hub
  - Interoperability 101 Course



Healthcare Interoperability

View Here

This **Healthcare Interoperability Learning Pathway** includes 3 courses and is designed for technology and EHR staff that are interested in learning the basics about interoperability in health care.

Thank you for joining us today. Please share your feedback using the survey link in the chat, the QR code below, or the link in the follow up email!

FEEDBACK