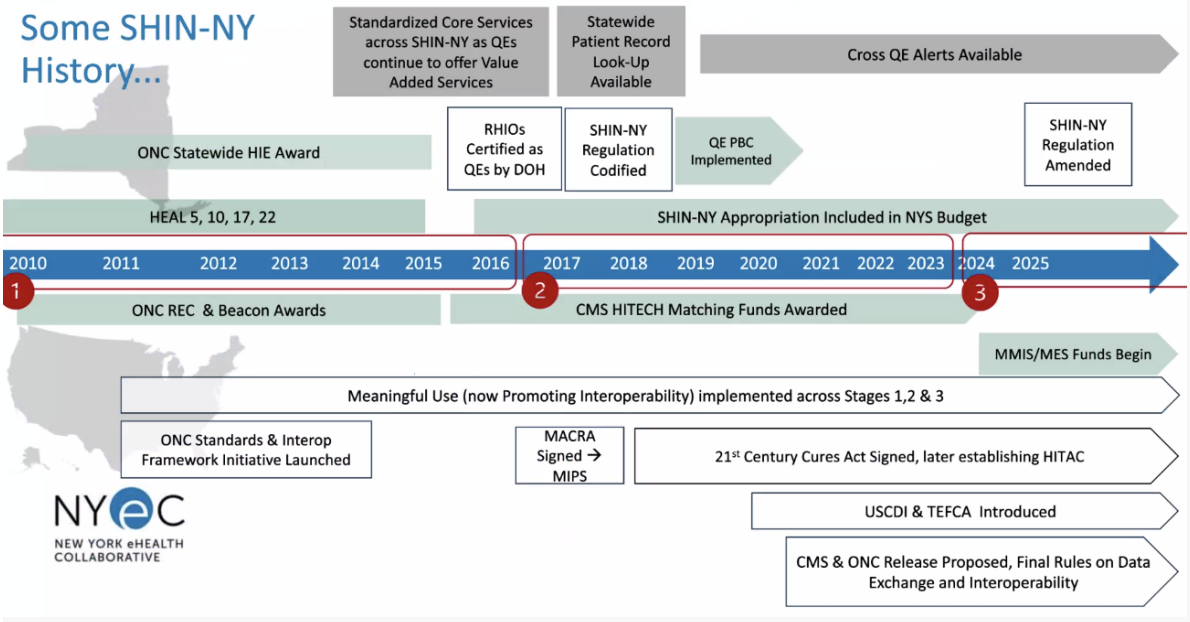
SHIN-NY Participant Facing Services

Since March 2015, all QEs (formerly known as RHIOs) have been required to provide the following **Core Services** to Participants:

1. Statewide Patient Record Lookup*
2. Statewide Secure Messaging (Direct)*
3. Notifications (Alerts / Subscribe and Notify)*
4. Provider & Public Health Clinical Viewers*
5. Consent Management
6. Identity Management and Security
7. Public Health Reporting Integration
8. Lab Results Delivery*

Some SHIN-NY History...



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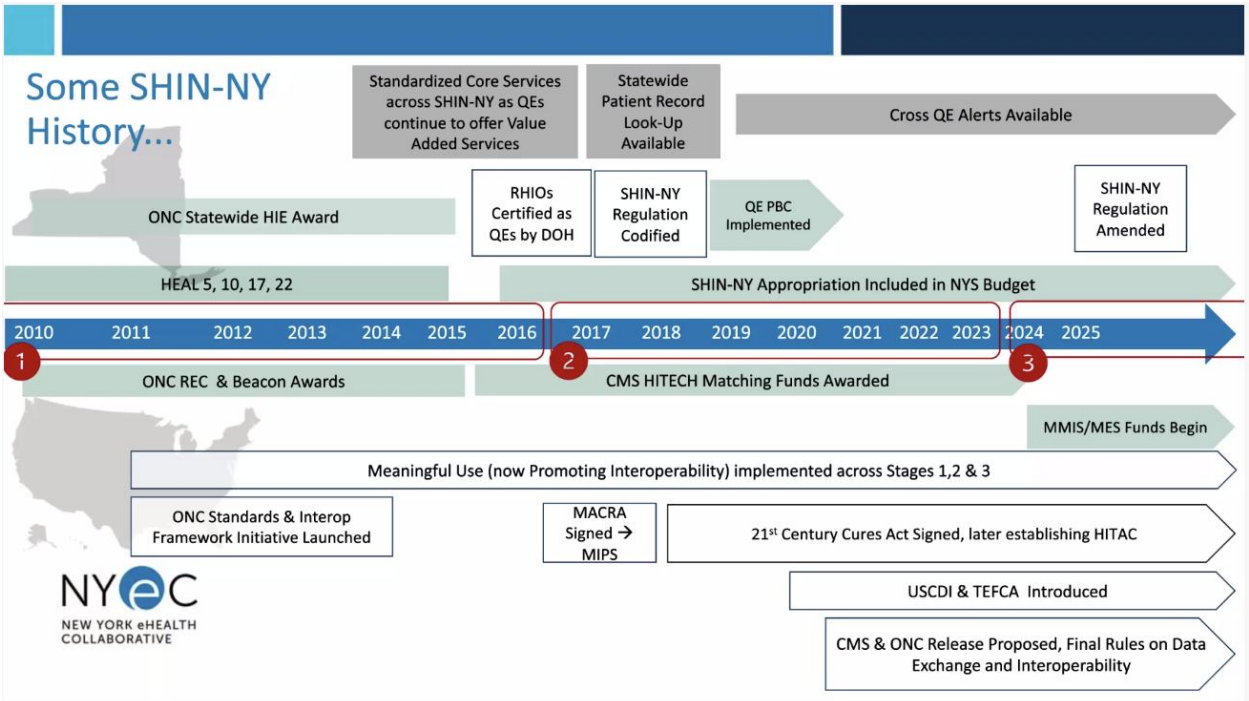

Over time, challenges emerged

Statewide service gaps: The SHIN-NY's ability to deliver statewide services or to aggregate statewide data has been limited, and efforts to date to resolve this have been largely unsuccessful. The structure is cumbersome and frustrating to providers, and 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.

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Strategic Priorities for a SHIN-NY 2.0

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.

Amended SHIN-NY Regulation

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:

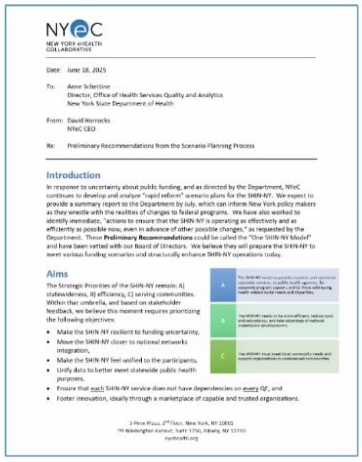
- Transitions from proprietary connections and file-based exchange to more efficient, query-based exchange. Streamlined administrative burden for consent for patients and participants.
- Alignment with the federal Trusted Exchange Framework and Common Agreement (TEFCA).
- Strengthened capacity to efficiently 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.

NYeC

In April 2025 the Department of Health sent a letter directing NYeC to accelerate SHIN-NY efficiencies in the short term. The letter indicates we need to work quickly to prepare for potential funding cuts. Some steps are already in motion.

Preliminary Recommendations: A unified SHIN-NY

1. Convert SHIN-NY services to statewide contracts, by **unifying data** and contracting to specific QEs competitively
2. Solve to be Compatible with and Complementary to National Networks
3. Create a unified "One SHIN-NY" customer experience, even as multiple QEs are providing a participant's services
4. Fund QEs for statewide contracts and to collect data, adjusting certification requirements to encourage value-added services



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Date: June 18, 2025

To: Anne Schettine
Director, Office of Health Services Quality and Analytics
New York State Department of Health

From: David Horrocks
NYeC CEO

Re: Preliminary Recommendations from the Scenario Planning Process

Introduction

In response to uncertainty about public funding, and as directed by the Department, NYeC continues to develop and analyze "rapid reform" scenario plans for the SHIN-NY. We expect to provide a summary report to the Department by July, which can inform New York policy makers as they wrestle with the realities of changes to federal programs. We have also worked to identify immediate, "actions to ensure that the SHIN-NY is operating as effectively and as efficiently as possible now, even in advance of other possible changes," as requested by the Department. These **Preliminary Recommendations** could be called the "One SHIN-NY Model" and have been vetted with our Board of Directors. We believe they will prepare the SHIN-NY to meet various funding scenarios and structurally enhance SHIN-NY operations today.

Aims

The Strategic Priorities of the SHIN-NY remain: A) statewideness, B) efficiency, C) serving communities. Within that umbrella, and based on stakeholder feedback, we believe this moment requires prioritizing the following objectives:

- Make the SHIN-NY resilient to funding uncertainty,
- Move the SHIN-NY closer to national networks integration,
- Make the SHIN-NY feel unified to the participants,
- Unify data to better meet statewide public health purposes,
- Ensure that each SHIN-NY service does not have dependencies on every QE, and
- Foster innovation, ideally through a marketplace of capable and trusted organizations.

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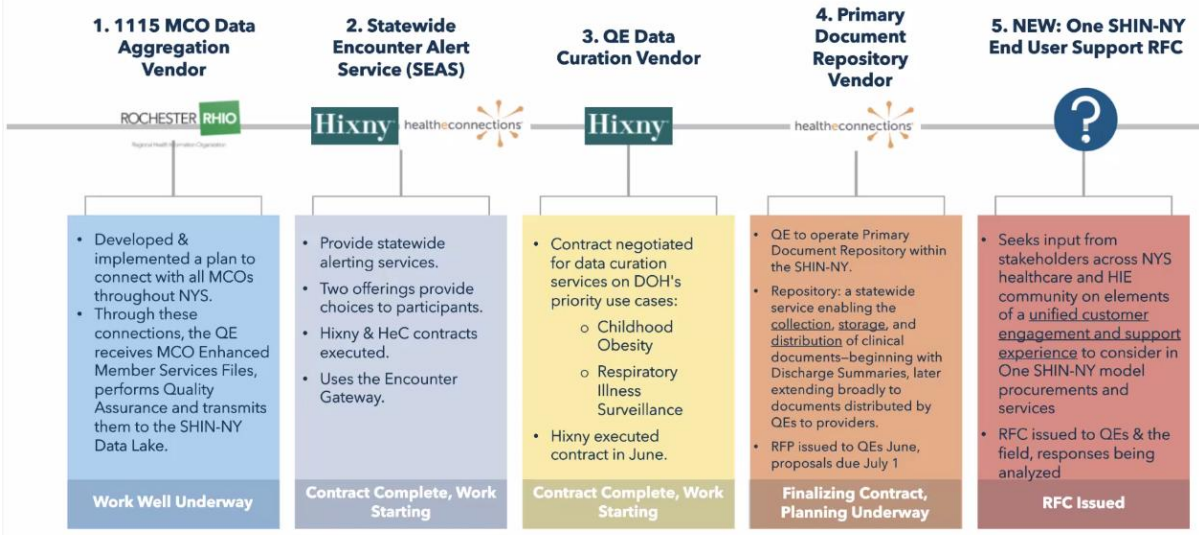
SHIN·NY
STATEWIDE HEALTH INFORMATION NETWORK FOR NEW YORK

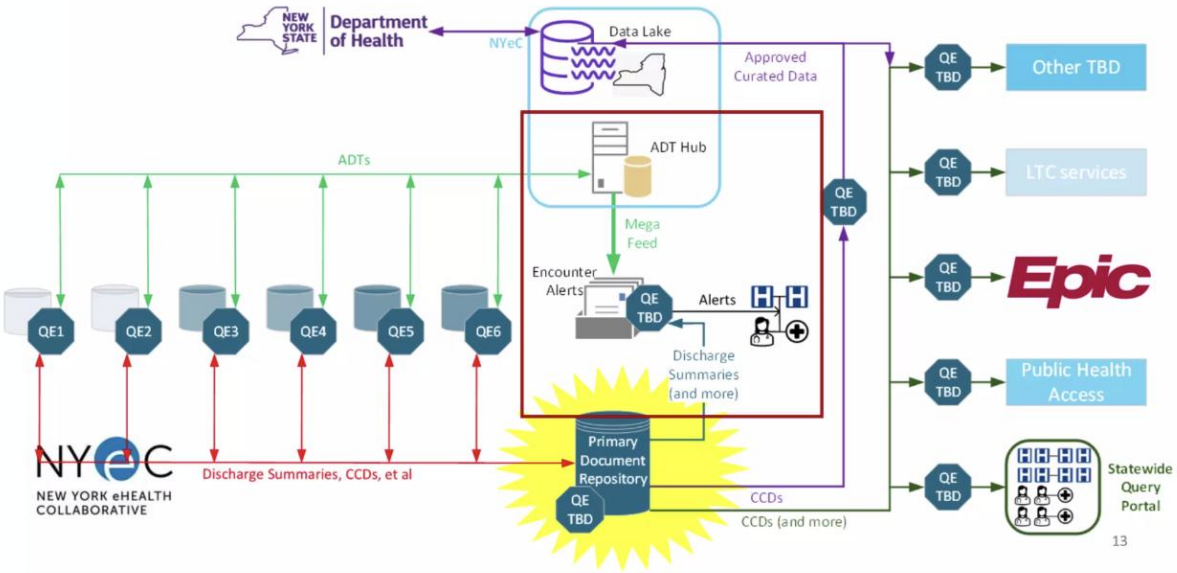


6. Hospital EHR Special Integration RFI: Requesting a second round of comments

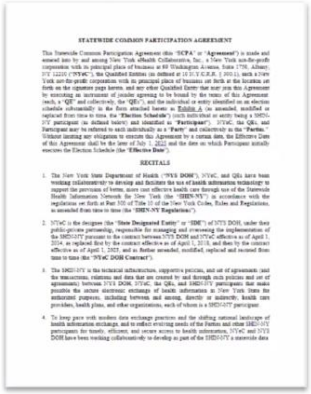
SHIN-NY Statewide Encounter Alerts

- **Problems:**
  - Encounter alerts lack uniform content or events statewide
  - Participants must often work with multiple QEs for ADTs
  - Alert fatigue (alerts are not all panel-based or leveraging smart logic)
  - Participants don't have choice amongst QEs for alerting services
  - ADT data quality is not consistently measured
  - There are not great statewide metrics
- **Solutions**:
  - Alerts based on data from all regions of the state w/ uniform content & delivered statewide
  - ADT data can be routed anywhere in the state
  - Leveraging QE model to operate core SHIN-NY technology and services
  - Panel-based alerts & innovative logic reduce fatigue and make data more usable
  - ADT data quality is consistently measured, baselined and can be improved

A modern technical architecture



SHIN-NY Transformation Initiatives: Statewide Common Participation Agreement (SCPA)



STATEWIDE COMMON PARTICIPATION AGREEMENT

This Statewide Common Participation Agreement (this "**SCPA**" or "**Agreement**") is made and entered into by and among New York eHealth Collaborative, Inc., a New York not-for-profit corporation with its principal place of business at 90 Washington Avenue, Suite 1750, Albany, NY 12210 ("**NYeC**"), the Qualified Entities (as defined at 10 N.Y.C.R.R. § 300.1), each a New York not-for-profit corporation with its principal place of business set forth at the location set forth on the signature page hereto, and any other Qualified Entity that may join this Agreement by executing an instrument of joinder agreeing to be bound by the terms of this Agreement (each, a "**QE**" and collectively, the "**QEs**"), and the individual or entity identified on an election schedule substantially in the form attached hereto as Exhibit A (as amended, modified or replaced from time to time, the "**Election Schedule**") (each individual or entity being a SHIN-NY participant (as defined below) and identified as "**Participant**"). NYeC, the QEs, and Participant may be referred to each individually as a "**Party**" and collectively as the "**Parties.**" Without limiting any obligation to execute this Agreement by a certain date, the Effective Date of this Agreement shall be the later of July 1, 2022 and the date on which Participant initially executes the Election Schedule (the "**Effective Date**").

RECITALS

1. The New York State Department of Health ("**NYS DOH**"), NYeC, and QEs have been working collaboratively to develop and facilitate the use of health information technology to support the provision of better, more cost effective health care through use of the Statewide Health Information Network for New York (the "**SHIN-NY**") in accordance with the regulations set forth at Part 300 of Title 10 of the New York Codes, Rules and Regulations, as amended from time to time (the "**SHIN-NY Regulation**").

2. NYeC is the designee (the "**State Designated Entity**" or "**SDE**") of NYS DOH, under their public-private partnership, responsible for managing and overseeing the implementation of the SHIN-NY pursuant to the contract between NYS DOH and NYeC effective as of April 1, 2014, as replaced first by the contract effective as of April 1, 2018, and then by the contract effective as of April 1, 2021, and as further amended, modified, replaced and restated from time to time (the "**NYeC DOH Contract**").

3. The SHIN-NY is the technical infrastructure, supportive policies, and set of agreements (and the transactions, relations and data that are created by and through such policies and set of agreements) between NYS DOH, NYeC, the QEs, and SHIN-NY participants that make possible the secure electronic exchange of health information in New York State for authorized purposes, including between and among, directly or indirectly, health care providers, health plans, and other organizations, each of whom is a SHIN-NY participant.

4. To keep pace with modern data exchange practices and the shifting national landscape of health information exchange, and to reflect evolving needs of the Parties and other SHIN-NY participants for timely, efficient, and secure access to health information, NYeC and NYS DOH have been working collaboratively to develop as part of the SHIN-NY a statewide data

- As the State Designated Entity (SDE) overseeing the SHIN-NY, NYeC is responsible for developing and executing on operational, legal, and policy reforms required by regulation.
- The first of NYeC's transformation initiatives is the state-required implementation of a **Statewide Common Participation Agreement (SCPA) – a new, common legal framework for all health care organizations which are part of the SHIN-NY.**
- The SCPA will replace the numerous contracts that presently govern data exchange between Qualified Entities (QEs) and Participants across the SHIN-NY.
- The SCPA is available for signature.

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