



Healthix FAQs

NYS Data Exchange Incentive Program (DEIP)

About the Program:

The New York State Department of Health (NYSDOH), with support from Centers for Medicare & Medicaid Services (CMS), has established the Data Exchange Incentive Program (DEIP) to encourage Health Information Exchange (HIE) adoption across NY State for Medicaid providers.

Participating organizations are incentivized to contribute a predefined set of data elements to the Statewide Health Information Network for NY (SHIN-NY) through a Qualified Entity (QE, previously referred to as a RHIO). The DEIP incentive is designed to help defray the cost for an organization when connecting to a QE. [Healthix.org/DEIP](https://www.healthix.org/DEIP)

Eligibility Criteria for Eligible Providers (EPs)

- Have at least one provider who has attested to and been paid under the Medicare or Medicaid Meaningful Use EHR Incentive program.
- Have at least one provider who accepts Medicaid (Fee-For-Service or Medicaid Managed Care).
- Use an electronic health record (EHR) that has obtained ONC Certification. For a list of ONC Certified EHRs and required Privacy & Security criteria: [healthit.gov/faq/faqs](https://www.healthit.gov/faq/faqs)
- Be able to send information electronically to a QE in C-CDA format. C-CDA is a flexible standard that defines the structure of certain medical records, such as discharge summaries and progress notes. It is a way to better exchange this information between providers and patients.

Note:

DEIP incentives are also available for Article 28 Nursing Homes, Article 36 Home Care Agencies, Article 40 Hospice Facilities and Behavioral Health Organizations. To learn more:

[nyhealth.org/services/hie-adoption/](https://www.nyhealth.org/services/hie-adoption/)

Data Criteria

Participants are responsible for contributing the following data elements, known as the Common Clinical Data Set:

- Demographics:
 - Patient Name
 - Gender
 - Date of Birth
 - Race
 - Ethnicity
 - Preferred Language
 - Smoking Status
- Allergies
- Care Team Member(s)
- Care Plans, Procedures
- Immunizations
- Laboratory Test(s)
- Laboratory Values/Results
- Medications
- Problems
- Vital Signs: hgt., wgt., blood pressure, BMI

For each patient encounter, clinicians should consistently complete these fields in their EHR.

When can a practice expect payment?

Healthix does not directly issue payment to eligible providers and organizations. Our role is to help you complete the appropriate documentation to help facilitate payments. Payments are made directly by NYSDOH through the New York eHealth Collaborative (NYeC). The timeline for payment varies (issued approximately 6-12 months after each milestone is approved). These are paid in two separate checks. Any delays in payment may be due to:

- Incomplete documentation
- Not meeting specific requirements for milestones (e.g. not sending the required data elements in the Common Clinical Data Set)
- Unforeseen circumstances on the part of NYeC or the NYSDOH
- Difficulty validating the data from your practice to Healthix

Once your practice has gone live with its feed, verify the status on the Healthix Data Source Grid: healthix.org/directory.

How long are DEIP incentive funds available?

Incentives will continue until 9/30/20 unless funding is exhausted (“first come first serve”). Contact Healthix if you have questions regarding availability of DEIP incentive funds.

To Learn More About DEIP:

- Contact your Healthix Representative
- Send an inquiry to info@healthix.org
- Visit the NYeC website: nyehealth.org

Can a practice earn \$2,000 to join Healthix, and \$11,000 more when data requirements are met?

Yes. The milestones must be achieved, demonstrated and validated before payments are made.

- **Milestone 1:**
QE Participation
For those who signed PA on/after 10/1/16
\$2,000
- **Milestone 2:**
Data Contribution and Access
\$11,000

If a practice terminates their Healthix Participation Agreement, and they received DEIP funding, will they owe back funds?

Yes. The spirit of DEIP is for eligible providers and regulated, licensed organizations to contribute data for patient care and coordination. If the Healthix contract is terminated less than one year after going live with Milestone 2 data connection, the eligible provider will be responsible for reimbursing NYSDOH for the DEIP incentives.

What if my practice cannot contribute some of the required data elements?

For example, my patients are children, so smoking status is not relevant? If you are not able to send the entire list of data elements listed in the Common Clinical Data Set, you will be asked to provide valid reasons for each data element you are unable to send. This will be reviewed by NYSDOH and may be taken into consideration, but it does not guarantee payment.