



Healthix Board of Director Meeting Minutes
March 24, 2021 | 4:00pm-5:30pm

Board Attendees via telephone:

- Thomas Early, Nassau Queens Performing Provider System
- David Leventhal, Pfizer
- Paul Casale, MD, New York Quality Care ACO
- Louise Cohen, Primary Care Development Co.
- Michael Bouton, MD, NYC Health + Hospitals
- Charles King, Housing Works
- Irene Koch, Hospital for Special Surgery
- Art Gianelli, St. Luke's Hospital
- Larry McReynolds, NYU Lutheran Family Health Centers
- David Schimel, New York Medical Staff Leadership Council
- Anup Vidyarthi, The Stepping Stones Group
- Michael Guarino, IPA of Nassau/Suffolk Counties, Inc.
- Alexander Izaguirre, PhD, MBA, NYC Health + Hospitals
- Fred S. Sganga, Long Island State Veterans Home

Absent:

- David Cohen, MD, Healthix Chair
- Matthew Siegler, NYC Health + Hospitals
- Robert Chaloner, Stony Brook Southampton Hospital

Healthix Management:

- Todd Rogow, President and CEO
- Vivienne Destefano, SVP Corporate Affairs
- Tom Moore, SVP, Innovation
- John Guastella, SVP, Finance & CFO
- Nick VanDuyne, SVP, CIO
- John Chow, CISO
- Magdalena Mandziewska, Privacy Officer, Senior Director of Compliance
- Kaitlin Flaherty, Executive Assistant

Call to Order: The meeting was called to order at 4:03pm by Acting Healthix Board Chair, Mr. Thomas Early. Ms. Kaitlin Flaherty recorded the meeting minutes. The meeting was concluded at 5:29pm.

Action Items:

Approve Minutes from December 14th Board Meeting: The meeting minutes of December 14th, 2020 were approved.

Approval of New Member, Dr. Donna Rey, to the Board of Directors: Board members voted to approve Dr. Rey, replacing Mitra Behroozi.

Approval of New DOH Policies into Healthix Policies: Board members voted to approve the new Policies.

Report of the Chairperson

Thomas Early facilitated the Board Meeting in Dr. David Cohen's absence. Mr. Early called the meeting to order. The minutes of the previous Board Meeting were approved. He provided a brief report reminding the Board of the three open Board positions and mentioned openings on several committees due to recent changes in Board membership. Mr. Rogow clarified that today's meeting would involve voting on a single candidate which was recommended by the Governance Committee and that Committee would review the remaining openings. Ms. Destefano discussed the

vacancies, which were left by Mitra Behroozi of 1199 SEIU Pension and Benefits Fund, Dr. Patrick O'Shaughnessy of Catholic Health, and Joe Lamantia of Northwell Health. Mr. Early acknowledged their contribution to the Healthix Board and wished them well in the future.

Mr. Early adjourned the Board of Directors meeting and called to order a meeting of the Healthix Members.

The Members reviewed the qualifications of candidate, Dr. Donna Rey, Executive Director of 1199SEIU Benefit and Pension Fund and CEO of Funds Administrative Operations. She would fill the role vacated by Ms. Behroozi. The Governance Committee previously reviewed Dr. Rey as a candidate and recommended her to the Board. The Members unanimously approved Dr. Rey.

Mr. Early closed the Members Meeting and Opened the Board of Directors meeting.

The Board unanimously approved Dr. Rey to the Healthix Board.

Guest Speaker – Val Grey, NYeC

Mr. Early introduced a guest speaker, Val Grey from NYeC. Ms. Grey highlighted some of the major accomplishments of NYeC over the past several years. The entire network has seen an increase in participation by regulated entities and physicians. Usage and satisfaction are being measured and results are going up. She noted that NYeC is HITRUST certified. During COVID, NYeC has played a critical role, working with health departments, and sharing vaccination data. Ms. Grey described what she sees as the most important goals of the SHIN-NY; being a trusted and supportive entity; providing highly valued data; having minimal variations and being reliable; and expanding participation. Looking forward, Ms. Grey focused on several topics of that will impact NYeC and the QEs, including funding constraints; focusing on government as a priority customer; providing quality data and services; consistent innovation; engaging patients as well as shifting national landscape. Ms. Grey recognized the progress Healthix has made and emphasized the need to focus on expediency in making greater progress going forward.

Mr. Early opened the floor for questions. Ms. Grey emphasized a focus on data quality, customer input and satisfaction, and using data to improve care. Mr. Gianelli asked about DSRIP 3.0. Ms. Grey's understanding is that it will be a blend of DSRIP 2.0 and hospital safety-net assistance. She hopes for a continued focus on value-based care and continued savings, while ensuring SHIN-NY's role. Dr. Izaguirre asked if Ms. Grey foresaw Healthix ever engaging directly with patients. She foresees future engagement, especially with the 21st Century Cures Act patient access requirements. Mr. Schimel asked how the HIE can use the immunization records to be a source of information for verification of vaccination. Ms. Grey understands that the Department of Health is in the process of selecting an app to allow consumers to prove they were vaccinated and there may be opportunities. Mr. Rogow asked for details regarding the upcoming Federal funding shift. Ms. Grey did not have specific details but discussed the possible range of funding change and some of the reduction may be offset by finding and providing more value to Medicaid.

NYeC 2020/ 2021 Goals & Funding

Mr. Rogow moved into a discussion of Healthix funding. In 2020, Healthix did well in meeting SHIN-NY goals, especially since it was considered two separate entities (Healthix and NYCIG). NYCIG missed meeting its Heartbeat Monitor goal for seven months, causing a loss in funding. Healthix earned half of the potential Customer Satisfaction funding, with NYCIG missing the full funding. In 2021 it will be important to improve in this area to earn full funding. The unallocated funds from all QEs will be pooled and will be reallocated. From a budgetary perspective Healthix earned more than was initially anticipated by the Finance Committee.

Regarding 2021 funding, the QEs have new Participation Goals based on OMH, OASAS, and CBOs. For Healthix, the gap is not large. However, the DFF physician goal is quite large. Mr. Rogow successfully lobbied for QEs to receive at least partial credit regarding this metric for those Participants that are only able to send some of the required data elements. Healthix has a plan in place to work on the DFF goals and earn the full funding amount. Mr. Guastella clarified the final closeout of the 2020 results will occur at the upcoming Finance Committee meeting.

A question was asked regarding a potential future lease on office space for Healthix. Mr. Rogow stated preliminary steps have been taken to explore next steps, including a survey of the Healthix staff. There is still a great deal of fear regarding the virus, but with time and further vaccine rollout, opinions may change. Healthix's needs have changed, with a focus

on looking for a smaller office footprint. Mr. Rogow feels Healthix needs to maintain a physical space somewhere in the five boroughs, in addition to the Long Island office. He does not want to lose the strong culture of Healthix. With prices and availability changing, Healthix should be able to find an ideal situation. Currently, with no office space, there has been a substantial savings in overhead. Members of the Board described their experiences with remote working as well as using hoteling spaces and other offerings for office space.

Approval of New DOH Policies into Healthix Policies

Mr. Sganga summarized proposed Healthix policy revisions, which were recommendations made the February 1st Privacy Committee meeting. Section 1.2.11 (Disclosure to Payer Organizations for Quality Measures) is a new provision. Section 1.2.14 (Telehealth) was adopted due to the COVID-19 Pandemic and is a SHIN-NY policy which has been adopted by Healthix for a one time only consent for each telehealth intervention. Under Section 7: Breach, 7.2.3 (Notifications in case of confirmed Breach), a revision in language was requested by Northwell Health and was accepted. Section 8 (Compliance) had several changes to Section 8, provision 8.4 (CBOs not subject to HIPAA). Ms. Destefano and Ms. Mandzielewska provided some additional detail regarding the CBOs and clarified these CBOs are not covered entities.

The Board voted unanimously to adopt the policy changes.

Mr. Rogow asked the providers on the call to review provision 1.2.11 and offer their perspective, as this policy allows a payer to have full access to the data set for HEDIS/QARR calculation without the barrier of patient consent. He feels these exceptions should be made for providers as well.

State DOH Goals

Mr. Rogow discussed the DOH data exchange goals in 2021. DOH has highlighted the need to provide data to QEs from the following State systems: ECLRS, NYSIIS, Vital Records – New York State Death Registry, and childhood data. Mr. Moore, who has focused on data from NYC DOHMH, shared information regarding the New York City Immunization Registry. Healthix has worked to provide vaccination data from its Participants as well as the ability of NYC DOHMH to query Healthix in real time.

eHealth Exchange Legal Concern

Mr. Rogow gave a summary of the latest legal position taken by eHealth Exchange for querying and retrieving data across states. Healthix has connected with HIEs in other states, including Florida, Texas, New Jersey, Pennsylvania, and California, enabling us to access data from these states, including, most recently, CVS pharmacy data. However, New York State consent policies do not allow Healthix to share data outside of New York State (i.e. policy does not allow bi-directional exchange). Similarly, Healthix has connected with the Veteran's Administration through the eHealth Exchange network, which is now in danger of being suspended, impacting thousands of veterans in our area. Attorneys from eHealth Exchange sent a letter stating as of April 5, 2021, the HIE will be out of alignment with the federal policies related to data blocking. By April 5, service may be terminated unless a compromise is reached, related to New York State policies.

Company Updates

Mr. Rogow highlighted some company updates. With regard to HITRUST, Healthix finished at 70% with 40 corrective action plans, ensuring that Healthix will receive HITRUST certification. Healthix work with contact tracing has helped NYCDOHMH and NYC H+H reach 136,000 individuals. Work is also being done with NYCDOHMH & Maimonides to increase COVID testing across the city by targeting high risk patient populations. After Governor Cuomo's Executive Order in December regarding Lab Connections, Healthix has done a great deal of work to comply with the order. As of March 23rd we have completed 39 implementations with 10 additional still in progress. Healthix is the most successful QE regarding this order. Mr. Moore gave an update on the Healthix Vendor Interoperability Program (VIP). These vendors will work only with Healthix participants and will be another way of leveraging the data Healthix has already gathered. Ms. Destefano highlighted Healthix's increasing social media presence, including a new blog.

Mr. Early adjourned the meeting at 5:29pm.