

# Collaboration for Data in Action: Two HIEs and a State Office of Mental Health



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# BACKGROUND

- New York's mental health system serves 900,000+ annually
- Office of Mental Health (OMH) licenses psychiatric inpatient units within general medical hospitals, psychiatric hospitals, and Comprehensive Psychiatric Emergency Programs (CPEPs) statewide, and has implemented 988 Contact Centers
- NYS OMH is implementing a coordinated mental health crisis response service system which requires real time data on ER/hospital services

# OMH - CURRENT & DESIRED FUTURE STATE

**CURRENT STATE:** Reliance on Medicaid, manually data entry

- **Medicaid:** Data lag, limited population, missing data for Medicare duals
- **Manual data entry:** Error prone, clinician burden, requires monitoring
- **Manual file upload:** Not automated- provider EMR/IT burden, data lag, provider files not standardized, aggregate data only for some programs

**DESIRED FUTURE STATE:** Use HIE data

- Real time individual level data for all ER/inpatient mental health services
- Reduce provider burden

# THE COLLABORATION



- Two Bronx HIEs-BronxRHIO and Healthix
- Designing the reporting criteria that highlights a good dataset usable for OMH was key
- Separate Infrastructures BUT “common” template
  - Apply Privacy Blocks and include all related ED Visits and Inpatient admission/discharges
  - Defining the value set for Mental Health Crisis – BronxRHIO Clinical director research was valuable
  - Set up on-going reporting for daily delivery to OMH

# EVALUATING THE DATA & UNDERSTANDING DELAYS

## Diagnosis Codes:

Patient's data would populate based on diagnosis. If patient's data does not populate it could be due to the patient not having a qualifying diagnosis.

## Potential Delays:

Can come from the source and system queues to process incoming data may cause data to be delayed during the initial pull.

# HEALTHIX : OBSERVATIONS & IMPROVEMENTS

Month	Distinct Rows	Distinct Patients
2024-01	255,564	2,391
2024-02	262,575	2,390
2024-03	261,444	2,217
2024-04	192,731	2,037
2024-05	280,795	7,830
2024-06	1,438,972	19,953
2024-07	1,874,173	25,209
2024-08	1,646,076	25,034
2024-09	2,070,048	29,695

- Diagnosis Codes arrive up to 5-10 days after discharge
- Project Terminology
  - Better Quality of Data
  - Normalizing to USCDI Standards
- 2024 EHR HUBs DQP
  - 695 Practices
  - Improved labs, diagnosis, vaccination, procedures and medications key data elements

#Civitas2024

# BRONXRHIO - POINT OF VIEW

- Understanding how the data will be used
- Informatics understanding for identification of data capture points



**High  
quality  
data  
ingestion**



**Error-  
free  
reporting**



**Reliable  
Insights**



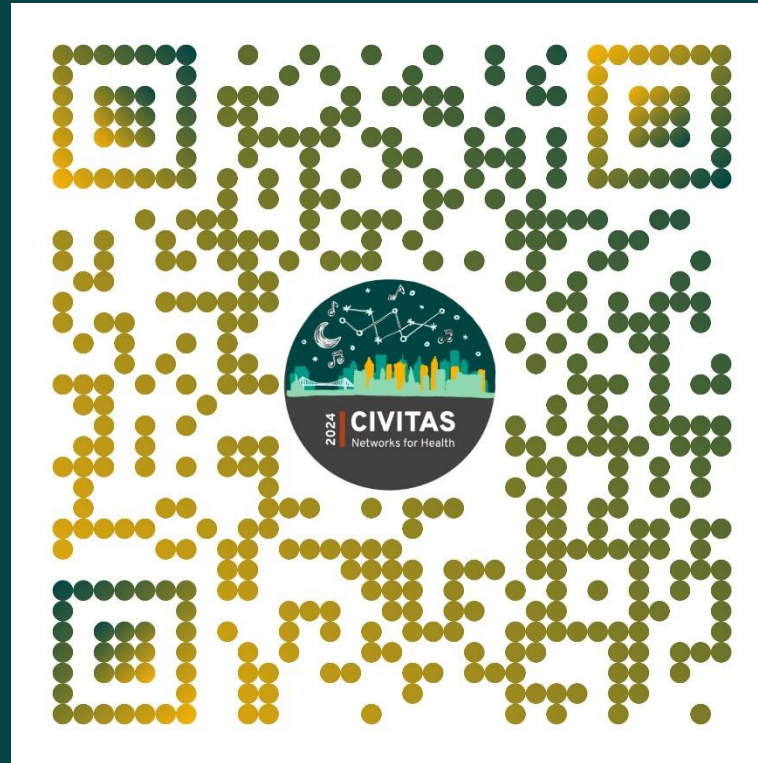
## WHERE DOES THIS TAKE US?

- Compare HIE data with other state data
- Work with HIEs to use the data to develop real time reports
- Increase outpatient mental health provider HIE participation
- Enhance outpatient MH reporting by building upon existing HIE infrastructure



# CHECK OUT OUR AGENDA!

## SCAN



# THANK YOU!

For more information, please feel free to contact

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