

February 2022



Who we are...

The Innovative Health Alliance of New York, LLC. (IHANY) is a collaboration among doctors, health systems and health care providers in New York's Capital Region aimed at improving the health of the communities we serve by working together in new, more coordinated ways. In today's evolving health care landscape, clinical integration is essential to achieving better health for the community, better care for individuals and lower costs of health care.

This Month's Priorities

1. **GPRO:** Thank you to all our Primary Care practices who have connected with the IHANY quality team to discuss the logistics of the abstraction. We are about 50% through the process and will be continuing to reach out up until the end of March, we thank everyone for their cooperation with this process.

2. **Annual Wellness Visits (AWV):** **Addressing Annual Wellness Visits for our our Medicare (ACO and Advantage) populations is a year round effort.** To help move the dial and address patient education on AWV the IHANY team has developed a Medicare AWV Patient Education Document you can use. Click the image to the right. If you would like copies, posters or have any other questions please reach out to **Brian Pinga**.

3. **Promoting Interoperability:** CMS's QPP portal is now open. Practices that have been identified as needing to report PI please do so ASAP. Once you have submitted and have your results please email them to both **Brian Pinga** and **Laura Graham**. If you have any questions or need assistance with your submission please reach out to Brian and/or Laura. PI submission must be completed no later than **Friday March 4th**.

WHAT YOU NEED TO KNOW ABOUT Medicare Annual Wellness Visits

Did you know that Medicare will provide an Annual Wellness Visit (AWV) once a year at no cost to you? Below is some information about this benefit and how it differs from a "yearly exam" or a "problem visit."

What is an AWV?
The Annual Wellness Visit (AWV) is a yearly appointment with your care provider to update your health records and ensure you are up-to-date on receiving preventive healthcare services (screenings and vaccinations).

Who is Eligible?
All Medicare Part B members who have not had a Medicare AWV or "Welcome to Medicare" visit in the past 12 months.

What does the AWV cost?
Patients pay nothing out-of-pocket for this visit. However, during your visit if you require further tests or screenings other than those listed below, a co-payment or deductible expense may occur.

What is covered as part of the AWV?

- Update of your age, race, address, and contact information
- Update of your medical and family history
- Update of your list of current care providers
- Measurement of blood pressure, height and weight
- Screen for memory changes
- Review of movement ability and risk of falling
- Written preventive screening plan for the next 5 to 10 years
- Advanced Care (end-of-life) Planning
- Review of current medications

What should I do if I haven't had an AWV in the past 12 months?
Call your primary care provider and ask to schedule your AWV. Talk to your provider about what you can do to prepare for the visit and what they would like you to bring.

Mission Statement

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Ellis Medicine Welcomes New CMO

Michael Trevisani, MD, MBA, FACHE, is joining Ellis Medicine as chief medical officer. His first day was Monday, January 17th.

Dr. Trevisani brings 15 years of CMO experience to the position. He most recently was CMO at HCA Regional Medical Center Bayonet Point, Hudson, FL. Prior to that, he was the interim CMO at Mount Carmel New Albany Surgical Hospital in Ohio, and CMO at Mohawk Valley Health System in Utica, NY.

Dr. Trevisani has deep New York ties. He earned his medical degree from Upstate Medical University in Syracuse in 1984, and completed his undergraduate degree at Hamilton College in Clinton, NY.



At Ellis, his focus will be on quality, helping to take Ellis from a two-star hospital as ranked by CMS to a three-star hospital, as well as meeting other quality metrics and goals.

Dr. Trevisani's appointment comes as part of our Management Services Agreement (MSA) with St. Peter's Health Partners. He will report to both Dr. Steven Hanks, Chief Clinical Officer for both SPHP and Ellis, and Kim Baker, Ellis' new COO.

Dr. David Liebers, a member of SPHPMA's senior management team and longtime CMO, will remain in a crucial clinical role as an infectious disease specialist, and also serve in an advisory capacity to Dr. Trevisani and the senior team. He will continue to help guide Ellis through the COVID pandemic.

IHANY Website Update

There are now easily assessable resources for HCC Provider Education and Quality on [IHANY.org](https://www.ihany.org). Go to the "For Providers" section and choose what topic you would like to explore.

Welcome to the HCC Coding Catch-Up

Documentation, coding and submission of each patient's diagnoses or Hierarchical Condition Category (HCCs) **is required at least once per calendar year, restarting every January 1.**

Coding topics for this month:

COPD and other respiratory conditions (click for job aid) that should be documented and coded with specificity include:

- **COPD** – type, with(out) exacerbation, coexisting conditions, complications
- **Asthma** – type, severity, with(out) exacerbation
- **Respiratory failure** – acuity, with(out) hypoxia and/or hyperkalemia

Combination codes (click for job aid) are single codes used to classify the following:

- two diagnoses
- diagnosis with a manifestation
- diagnosis with an associated complication.

Examples of **conditions requiring combination codes** include:

- **diabetes with certain complications** – assumed causal relationship (ex. CKD, PVD, cataracts)
- **arteriosclerosis of extremities with complications** – intermittent claudication, ulcer, gangrene
- **hypertension** – assumed causal relationship with CHF and CKD
- **coronary artery disease and angina** – assumed to be linked when both are present

The most effective way to document is MEAT. This acronym represents **M**onitor, **E**valuate, **A**ssess, or **T**reat the condition.

For more information on these topics, visit our website

<https://www.ihany.org/for-providers/hcc-provider-education/>.

Connecting our CIN: EpicCare Link

EpicCare Link is a free web-based portal that provides real-time access to patient information so you can access patients' clinical data by connecting you to St. Peter's EPIC medical record system to provide quality patient care. You'll receive automatic notifications when there is an update on your patient, giving you the information you need to plan your patient's follow up and continuing care plans. You can also use EpicCare Link to quickly refer patients to SPHPMA organization. If you have questions about EpicCare link please contact [James Renner](#).

Connect Patients to SPHPMA Diabetes Prevention Program (DPP)

You can help your patients prevent or delay the onset of Type 2 Diabetes! St. Peter's Health Partners Medical Associates offers a free Diabetes Prevention Program to qualifying patients! The year long program helps participants make healthy lifestyle changes to lower their risk of developing Type 2 Diabetes! Classes meet weekly for 16 weeks then bi-monthly then monthly. Using a CDC approved curriculum, they focus on a 5-7% weight loss and increasing activity to 150 minutes or more a week. The team covers a variety of topics such as grocery shopping, reading food labels, managing stress, coping with triggers and more. Participants have a trained lifestyle coach to help guide them through the length of the class! Referring is easy through Epic CareLink.

- 1) Order Entry
- 2) Select **Ambulatory Referral to Diabetic Education**
- 3) Select **SPMGP Prediabetes Management for department**
- 4) Answer the questions: Number of hours ordered (**Initial**), Diabetes Services (**Comprehensive Program**), Training (**Group education**), Certification (**select No**)

- 5) Dx Association: **Prediabetes**
- 6) Sign orders

If you want more information or are interested in upcoming classes, visit: [Diabetes Prevention Program | St. Peter's Health Partners \(sphp.com\)](#)

Specialty Spotlight

IHANY Network Specialty Practices: Cardiology

As a Clinically Integrated Network, continuing to promote in-network referrals will allow for IHANY to provide better health to the populations we serve.

With that in mind, we will have feature spotlights on IHANY partners and affiliates within this newsletter to ensure we keep you informed of our diverse resources.

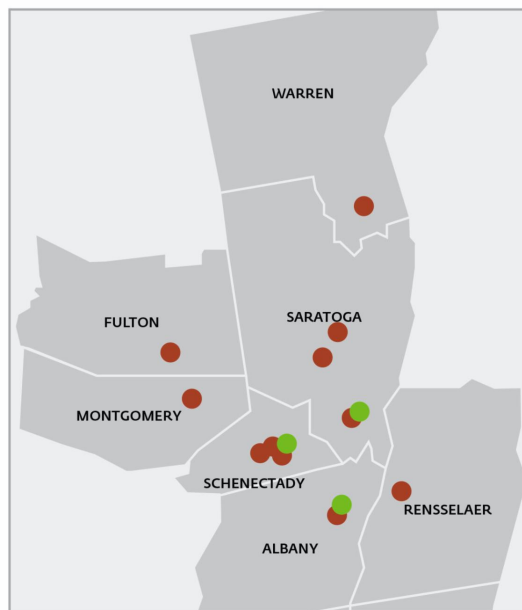
In honor of February being [American Heart Health Month](#), we would like to highlight the Cardiology practices in IHANY that not only serve the Greater Capital District but also north into Saratoga, Warren, Fulton and Montgomery Counties.

All of these practices are members of the St. Peter's Health Partner's Medical Associates (SPHPMA) group.

To celebrate [American Heart Health Month](#) SPHPMA will be highlighting:

- SPHP "Connected Care" www.sphp.com/connectedheartcare. On this landing page, consumers can view a video of one of the SPHPMA providers, find our walk-in clinics for cardiovascular care, and view "Adrian's Story." Consumers can also take a free, online risk assessment which can provide them with important information about their heart health.
- "ABCS of Heart Health." This message encourages consumers to "Talk to your health care team about the ABCS – Take **A**spirin when appropriate, get **B**lood pressure under control, **C**holesterol management, and **S**moking cessation."
- "Glow Red" by lighting up several of our facilities/hospitals with red lighting to help raise awareness of heart disease.
- Wear Red Day on Feb. 4th. SPHP will be encouraging the community (and SPHP colleagues) to wear red, and snap a photo of themselves and/or friends and post to the SPHP Facebook and Twitter accounts.

When it comes to matters of the heart, St. Peter's Health Partners is a leader in the Capital Region. Our comprehensive cardiac and vascular services include



- St. Peter's Health Partners Medical Associates Cardiology (11)
- Walk-In Clinics (3)

diagnosis and treatment of heart disease, including coronary artery disease, heart attack, congestive heart failure and congenital heart disease.

We offer a wide variety of non-invasive, cardiovascular diagnostic services including:

- Same-Day Heart Care
- Echocardiogram laboratory
- Electrocardiogram (EKG or ECG)
- 3-D echocardiogram
- Event recorder
- Exercise stress test
- Holter monitoring
- Nuclear stress test
- Signal-averaged EKG
- Stress echocardiogram
- Tilt table testing
- Transesophageal echocardiogram (TEE)

Minimally invasive structural heart procedures

In this [video](#), get to know Nish Patel, M.D., FACC, of Albany Associates in Cardiology, a practice of St. Peter's Health Partners Medical Associates.

Dr. Patel is the only fellowship trained surgeon doing minimally invasive structural heart procedures locally.

Advanced Cardiac Imaging in Clifton Park

Imaging in Clifton Park includes PET, CCTA, and Calcium scoring in addition to Echo, Holter monitors, and EKG. For more details watch this [video](#).

Echocardiogram Laboratory

An echocardiogram generates images of the heart through the use of sound waves (ultrasound). With these images, a doctor can determine how well the heart is moving, chamber dimension, wall thickness and valve function. Our echocardiography laboratory offers all aspects of cardiac ultrasound including:

- Adult and pediatric echocardiograms
- Transesophageal (TEE) echo
- Stress echo
- Dobutamine stress echo
- Echo with contrast agent to enhance wall imaging

We perform more than 5,000 echocardiography studies per year. Our lab is accredited by the Intersocietal Commission for the Accreditation of Echocardiography Laboratories, a nonprofit organization that evaluates facilities for quality patient care. Our staff is registered with the American Registry of Diagnostic Medical Sonography, and continuing medical education is a requirement for all of our sonographers. We are also affiliated with the echocardiography program at Hudson Valley Community College, through which St. Peter's Hospital provides students with practical experience.

Electrocardiogram

An electrocardiogram (EKG or ECG) is a noninvasive recording of the heart's electrical activity viewed as a graph or series of wavy lines on a moving strip of paper. This test may show the heart's rate and rhythm. It can also detect decreased blood flow, blockage of the coronary artery, enlargement (hypertrophy) of the heart, or the presence of either current or past heart attacks. EKG's are quick, safe, painless and inexpensive tests.

3-D Echocardiogram

Images captured by a 3D echocardiogram can help diagnose various causes of chest pain, breathing difficulties and dysrhythmias. During a 3-D echocardiogram, patients feel no discomfort at all. In fact, many people find it fascinating to watch the video monitors showing real-time pictures of their own heart at work. A 3-D echocardiogram is a painless, safe and highly effective way to produce images of a beating heart using the same sound wave technology obstetricians use when they view an unborn baby in the womb. This imaging procedure allows the physician to see clear, color images in real-time. (Other procedures use two-dimensional, black-and-white images, which can make diagnosis more difficult and less precise.)

Event Recorder

An event recorder is an ambulatory monitoring device used to record the electrical activity (ECG) of a patient's heart for a prolonged period of time on an outpatient basis. Its purpose is to look for evidence of transient cardiac problems (problems that come and go), which were not apparent when a standard ECG was performed. Event recorders use a circular tape that stores approximately 30 seconds of a patient's heart rhythm. When the patient experiences the "symptom of interest", he/she presses a button that freezes the recording, which is transmitted by telephone to our interpreting center.

Exercise Stress Test

An exercise stress test is used to measure the heart's tolerance for exercise and detect various forms of heart disease. An echocardiogram is performed before and after mild exercise on a treadmill to measure the heart's activity.

Holter Monitoring

A Holter monitor is a portable electrocardiogram (ECG) that monitors the electrical activity of a patient's heart for 24-48 hours while he/she moves around freely. With the Holter monitor, electrode leads are applied to the skin and attached to a tape recorder. The patient is sent home to resume normal activities while the monitor records a continuous ECG tracing for physician analysis. Its purpose is to look for evidence of transient cardiac problems (problems that come and go), which were not apparent when a standard ECG was performed.

Nuclear Stress Test

A nuclear stress test is a type of electrocardiogram (ECG) that compares the heart's electrical activity when at rest and when it's under exertion. A nuclear stress test also produces images that indicate contrasting light and dark spots of the heart. These contrasts reveal any scarring or reductions in blood flow that occurred before, during or after exertion.

Signal-averaged EKG

A signal-averaged electrocardiogram (ECG) captures all the electrical signals from the heart and averages them to provide the physician more detail regarding how the heart's electrical system is working. Electrodes (small, plastic patches) are placed at certain locations on the chest, arms and legs. When these electrodes are connected to the ECG machine by lead wires, the electrical activity of the heart is measured, interpreted and printed out for further interpretation. During this procedure, multiple ECG tracings are obtained during approximately 20 minutes in order to capture abnormal heartbeats (arrhythmias), which may only occur intermittently.

Stress Echocardiogram

An echocardiogram is a common test that utilizes sound waves to produce images of the heart in motion. Your doctor can use these images to identify various abnormalities in the heart muscle and valves. Some heart problems occur only during exercise. In a stress echocardiogram, ultrasound images of the heart are

taken before, and immediately after the patient walks on a treadmill or rides a stationary bike. If the patient is unable to exercise, a chemical can be injected into the bloodstream to make the heart beat more rapidly, as if the patient were exercising.

Tilt Table Testing

Tilt table testing is a diagnostic test performed on a pivoting table that helps a physician determine why a patient's blood pressure sudden drops, which often lead to fainting. The patient begins the test in a horizontal position before being tilted head up and feet down to replicate the factors leading to blood pressure related fainting. A medication may be used during testing to stimulate the patient's abnormal reflex. The patient's response to tilt table testing (including symptoms of fainting, EKG strips and blood pressure response) determines further therapy.

Transesophageal Echocardiogram (TEE)

In some patients, closely positioned ribs, obesity and emphysema may create technical difficulties that limit the transmission of the standard echocardiogram ultrasound beams to and from the heart. If this happens, your physician may request a transesophageal echocardiogram (TEE). With the TEE, the echo transducer is placed in the esophagus (or food pipe) that connects the mouth to the stomach. Since the esophagus sits behind the heart, the echo beam can avoid many of the obstacles in the front of the chest, capturing a much clearer image of the heart.

Walk in Clinics: Making It Easy to Get Heart Care

If you are having non-life threatening cardiac symptoms – including chest discomfort, palpitations, shortness of breath or rapid heart rate – or not feeling well, accessible same-day care is available to you.

You will have direct access to our medical expertise and state-of-the-art diagnostic testing, including echocardiogram, EKG, and stress testing. We will then work with referring physicians to develop a plan for treatment that is suited to meet your individual needs.

2546 Balltown Road
Suite 300, Schenectady
Monday - Friday, 8 am to 4 pm
518-377-8184

2 Palisades Drive, Albany
Monday - Friday, 8 am to 4 pm
518-458-2000

1735 Route 9, Clifton Park
Monday - Friday, 8 am to 4 pm
518-458-2000

SPHPMA Cardiology Practices by County

Albany County

Albany Associates in Cardiology
2 Palisades Drive
Albany, NY 12205
518-458-2000

Fulton County

Cardiology Associates of Schenectady

23 Arterial Plaza #30A
Gloversville, NY 12078
518-773-2303

Montgomery County

Cardiology Associates of Schenectady
425 Guy Park Avenue, Suite 202
Amsterdam, NY 12010
518-842-7088

Rensselaer County

Albany Associates in Cardiology
2 New Hampshire Avenue
Troy, NY 12180
518-458-2000

Saratoga County

Albany Associates in Cardiology
1735 Route 9
Clifton Park, NY 12065
518-458-2000

Cardiology Associates of Schenectady
103 Sitterly Road, Suite 2100
Clifton Park, NY 12065
518-383-9373

Saratoga Cardiology Associates
6 Care Lane
Saratoga Springs, NY 12866
518-587-7625

Schenectady County

Cardiology Associates of Schenectady
115 Saratoga Road, Suite 230
Glenville, NY 12302
518-348-5300

757 Carman Road, Suite 103
Schenectady, NY 12303
518-881-0810

2546 Balltown Road, Suite 300
Schenectady, NY 12309
518-377-8184

Warren County

Albany Associates in Cardiology
156 Quaker Road
Queensbury, NY 12804
518-458-2000

If you are an IHANY Network Specialty practice and would like your location featured in a future IHANY Monthly, please email [Brian Pinga](mailto:brian.pinga@constantcontact.com).

Clinician Resources

New on IHANY.ORG - IHANY Clinician Burnout Toolkit

Tina Shah, MD, MPH, a national leader in the field of clinician well-being was the featured speaker at IHANY's Town Hall "Burnout: The Contagion & What We Can Do About It." Dr. Shah is Senior Advisor, Office of the US Surgeon General in the area of Healthcare Worker Wellbeing & Workforce Sustainability, and a practicing critical care physician. Key points of Dr. Shah's presentation were:

- Burnout is due to chronic stress
- Personal resilience is not the solution
- Evidence shows system-based interventions can help reduce clinician stress
- Practice of medicine will ever be what it was before Covid-19 pandemic

Click on the link below to watch the town hall, take a look at Dr. Sha's slides and access IHANY Clinician Burnout toolkit.

[*IHANY Town Hall October 25, 2021 – Innovative Health Alliance of New York, LLC*](#)

Education

SPHP Medical Grand Rounds – Save the February Dates

CME credits are available for the live events and recordings will be posted 30 days after the event. **These sessions are open to all IHANY providers.**

Details available on the website: <https://www.sphp.com/colleagues/continuing-medical-education>

Upcoming Presentations

Meetings are held **12pm-1pm** on Wednesdays

February 2, 2022

Risk Management and EMR notes

Presented by Rick Mcquire, esq.

Mcquire Cardona, PC, Attorneys at law

February 16, 2022

To be announced

Microsoft Teams Meeting Link: click [here](#)

For questions, contact:

Kathy Kindness, Medical Librarian, kathy.kindness@sphp.com

Website: <https://www.sphp.com/colleagues/continuing-medical-education>

2021 Promoting Interoperability Reporting

Contributing Data to Hixny Meets 2021 MIPS Promoting Interoperability (PI) Requirements

By providing proper documentation, facilities that contribute data to Hixny are automatically qualified to receive credit for the Health Information Exchange (HIE) Bi-Directional Exchange requirement of CMS' Quality Payment Program: Merit-Based Incentive Payment System (MIPS).

The documentation required to receive credit is a combination of information from your EHR system, Hixny's website and your EHR vendor and includes:

- Dated report or screenshot documenting successful receipt and transmission of patient data by a MIPS eligible clinician (at the NPI level) *and/or*
- Documentation from Hixny's website ([found here](#)) confirming data contribution and information about the breadth of organizations in our health information exchange network participants *and/or*
- Letter, email or other documentation from your CEHRT vendor confirming a connection between your EHR and Hixny, including the date of onboarding and a description of the connection type.

You can find the criteria for all 2021 MIPS Data Validation: Promoting Interoperability Performance categories [here](#).

If you have any questions, please reach out to your account manager, RuthAnn Craven at rcraven@hixny.org.

We are here to support you.

Your IHANY Practice Support Team

Ashley Zapp, Manager, Care Coordination

Brian M. Pinga, Director, Quality Improvement & Practice Operations

Eileen M. Jones, Director, Clinical Condition Documentation

Emily Smith, Risk Adjustment Coding Specialist

James Renner, Manager, Population Health Analytics

Julie R. Eisen, Risk Adjustment Coding Specialist

Laura Wise, Healthcare Data Analyst

Laura Graham, Quality Improvement Specialist

Lisa Kelly-Armstrong, Director, Network Mgmt. & Operations.

Lyndsey House, Post-Acute Coordinator

You can find all of our past newsletters on our website, click [here](#).

Learn more about IHANY

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