

To bring you the best possible care, NYSDOH made it possible for providers to exchange your health information through a computer network called a SHIN-NY (State Health Information Network for New York). VNS Health participates in the **SHIN-NY** as part of federal and state regulations allowing your health information to be transmitted so that other providers can view your information to improve the quality, coordination and efficiency of patient care while protecting your privacy and security.

The **SHIN-NY** is a “network of networks” that links New York's eight regional Qualified Entities (QEs) throughout the state. Each Qualified Entity (or RHIO) operates its own network that collects electronic health records from participating providers.

VNS Health works with the following not-for-profit Regional Health Information Organizations (RHIOs): Bronx RHIO and Healthix, to provide your demographic and health information to SHIN-NY.

We are asking you to sign a NYSDOH approved form to give VNS Health consent to access and receive information about you from SHIN-NY. VNS Health will access your medical information from SHIN-NY only if you have given VNS Health your written permission on our Consent Form to do so.

Your consent remains in effect until you withdraw it. You can withdraw your consent at any time by completing a new form in which you deny consent for VNS Health to access your information in the SHIN-NY.

For additional information you can go to: [nyshealth.org/shin-ny/what-is-the-shin-ny](http://nyshealth.org/shin-ny/what-is-the-shin-ny)

## Frequently Asked Questions about Health Information Exchange

### **Which health care providers will share my information?**

VNS Health participates in several Regional Health Information Organizations (RHIOs) in the New York City area. The list of providers that belong to each can be found on our website at [vnshealth.org/health-information-exchange](http://vnshealth.org/health-information-exchange) and is updated regularly.

### **Why would I want my health information shared?**

When hospitals, doctors, nurses, and other health care providers have your health information, they can give you better care and treatment. SHIN-NY allows your providers to have access to your most up-to-date information—including lab tests, medical history, medicines, allergies, and other health reports—quickly and securely so they can deliver the best care possible.

**How will sharing my health information improve the quality of care?**

SHIN-NY improves the quality of care you receive because your providers will be able to offer coordinated care. Your medical records will be more complete, which may reduce errors and duplication of expensive tests or procedures. All of your physicians and other providers will get consistent information, allowing for more accurate diagnoses and more targeted treatment.

**Is my health information private and confidential?**

Absolutely. Providers obey federal and state laws about medical information privacy. SHIN-NY will not share your health information with anyone without your consent except in certain circumstances such as an emergency where access to your information is critical to your health, or for matters of public safety.

**What are my rights?**

As a patient/member, you have the right to decide to allow VNS Health to access your electronic health information or not. If you decide not to give your written permission, VNS Health will not access your information through Regional Health Information Organizations (RHIO's). If you give written permission and later change your mind, you can withdraw it by completing a new form in which you deny consent for VNS Health to access your information in the SHIN-NY.

If you choose not to consent, VNS Health may not have access to health information that might be important and helpful as we treat you. If you have questions about your privacy, please refer to the [Joint HIPAA Notice of Privacy Practices of VNS Health OHCA \(vnshealth.org/hipaa\)](https://www.vnshealth.org/hipaa) given to you during your admission. (If you need another copy, ask your VNS Health nurse or therapist for one.)

**Whom can I contact for more information?**

To ask questions or for information, contact the **VNS Health Privacy Officer:**  
220 East 42nd Street, 6th Floor, New York, NY 10017;  
[VNSHealthCompliance@vnshealth.org](mailto:VNSHealthCompliance@vnshealth.org).

Specific operations and/or health care provider participants of the Health Information Exchanges may change at times without notice, but the most current description is always available on our website at [vnshealth.org/health-information-exchange](https://www.vnshealth.org/health-information-exchange).

**Is there a risk of “identity theft”?**

VNS Health shares only your medical information and any health insurance information necessary for billing. We will not submit your financial information to the Health Information Exchanges. In addition, the HIEs are used only by health care providers who view your health information to provide you with better care. Your information can be accessed only by providers who you have authorized and who have agreed to adhere to strict security measures and procedures to safeguard your privacy. Special technology keeps anyone who is not authorized from seeing any of your personal and private information.

**A special message about sensitive information.**

If you give consent, VNS Health may access all of your available electronic health information through the listed RHIOs, and the listed RHIOs may disclose all of your available electronic information to VNS Health. Your health-related information may include, but is not limited to, medical records and other related medical information such as: a history of illnesses or injuries you have had (like diabetes or a broken bone), test results (like X- rays or blood tests), and lists of medicines you have taken. This information may be obtained from other providers and health care insurance plans. Additionally, other information about your care, such as personal and private information that may be used to identify you; information about you and your family; and financial/billing information, may all be available.

Please be aware that your health-related information may relate to sensitive health conditions, including but not limited to:

- Substance abuse (drug and alcohol use problems)
- Birth control and abortion (family planning)
- Cancer
- Genetic (inherited) diseases or tests, including predisposition genetic testing information
- HIV AIDS
- Mental illnesses; mental retardation and developmental disabilities
- Communicable diseases including sexually transmitted and venereal diseases.

**Permission**

Your written consent to participate in the Health Information Exchanges will be requested on a separate Consent Form.