Ending the Epidemic Task Force
Committee Recommendation
CR10

Recommendation Title: Innovative, Digital/Electronic Care Coordination Models
That Improve Rates of Adherence

1. For which goal outlined in the Governor’s plan to end the epidemic in New York State does
this recommendation apply? 1 and 2

2. Proposed Recommendation:

Technology-focused

- Telemedicine projects for both urban and rural areas
- Use of text messaging and Health Insurance Portability and Accountability Act (HIPAA)
  compliant mobile applications for medication and appointment reminders
- Patient portals through electronic health records or other innovations
- Provider’s innovation funding
  - To encourage development of innovative electronic strategies
  - Cites, as an example, a clinical trial in progress using a mobile device-based personal
    health record provided to patients
  - For an RFP to assess the relative costs of electronic strategies for patient
    engagement, reengagement and retention vs. standard outreach activities

Identify funding for electronic health record enhancements including patient portals that allow
patients to schedule and track appointments, review laboratory results and receive
appointment reminders.

Identify funding for technology resources to implement telemedicine in both rural and urban
areas to enhance access to and continuity of care statewide.

Advance the use of telemedicine, text messaging, and social media based interventions
statewide. This recommendation is especially relevant to rural and suburban communities to
provide linkages to improve retention in care and re-engage people in care who have fallen out
of care. Other electronic activities (e.g. text messaging, patient portals and other innovations)
will deliver health information, reminders for medical visits and medication reminders.

List of key individuals, stakeholders, or populations who would benefit from this
recommendation

- Patients will have improved outcomes and improved quality of life
- HIV-negative sexual contacts
- Providers who will have the necessary assistance to encourage adherence to appointments and medication use
- Patients in rural areas

**List of measures that would assist in monitoring impact**

- Define denominator (e.g. number of HIV-positive patients by site or care or program)
- Baseline and 12 month interval reports of: number (%) of patients with at least two HIV medical care visits in 12 months, at least three months apart
- Number (%) patients on antiretroviral (ARV) therapy
- Number (%) patients virally suppressed

**Footnotes or references**


3. **Would implementation of this recommendation be permitted under current laws or would a statutory change be required?** Permitted under current law.

4. **Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?** Within the next year.

5. **Please list the TF numbers of the original recommendations that contributed to this current version:** TF45, TF86, TF184, TF213.