



CHESAPEAKE REGIONAL INFORMATION SYSTEM FOR OUR PATIENTS

CRISP: A Regional Health Information Exchange Serving Maryland and D.C.

LHD Presentation

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What is CRISP?

CRISP is a non-profit health information exchange, or HIE, organization serving Maryland and the District of Columbia.

Health Information Exchange allows clinical information to move electronically among disparate health information systems. The goal of HIE is to deliver the right health information to the right place at the right time—providing safer, more timely, efficient, effective, equitable, patient-centered care.

CRISP's Mission: To advance the health and wellness of our patients by deploying health information technology solutions adopted through cooperation and collaboration.





The CRISP Data

CRISP receives inbound data feeds from many provider organizations across the region, including all hospitals in Maryland and most in D.C. This powers CRISP services, putting clinical information in the hands of those with treatment and care coordination responsibilities. Below are details on the CRISP information available to Local Health Departments

Data source or attribute	#
Live hospitals	56
Live hospital clinical data feeds	213 (lab, rad, clinical document feeds, CCD)
Long-term and post-acute care facilities	41
Standalone labs and radiology centers	15
Unique patients in our index	+10 million
Patient searches	+114,000/month
Encounter alerts sent	+590,000/month



CRISP Core Services



Prescription Drug Monitoring Program

The PDMP program is overseen by the Department of Health and Mental Hygiene, Alcohol and Drug Abuse Administration

The program aims to:

- Monitor the prescribing/dispensing of controlled dangerous substances
- Assist healthcare providers, public health and safety authorities with reducing the non-medical use, abuse and diversion of prescription drugs

The PDMP data is:

- Reported by CDS dispensers, including pharmacies and healthcare practitioners
- Securely stored
- Disclosed only to persons authorized by state law

CRISP serves as the access point for clinical licensed providers

- All other uses, such as investigators from law enforcement, health professional licensing boards or DHMH agencies, will register with and submit data requests to Health Information Designs (HID) via <http://www.hidinc.com/mdpdmp>.





Encounter Notification Service

- CRISP currently receives Admission Discharge Transfer messages in real-time from:
 - All Maryland Acute Care Hospitals
 - 6 of 8 D.C. Hospitals
 - All Delaware Hospitals
- Through ENS, CRISP generates **real - time hospitalization notifications** to PCPs, care coordinators, and others responsible for patient care. Local Health Departments who coordinate care or care programs can receive these notifications.



Important Current Capabilities

- Full Continuity of Care Documents (CCDs) are also routed through ENS to subscribing providers, who elect to receive them to support transitions of care.
 - 10 Hospitals currently send CCDs to CRISP
- Hospitals can “auto-subscribe” so they can be alerted when one of their past discharges is being readmitted within 30 days. This same capability allows the receiving hospital to be notified, when a patient arriving at their facility had been discharged from another facility, within the past 30 days.
 - 34 hospitals currently auto-subscribe to receive readmission notifications
- ENS was recently enhanced to include the ER and IP visits for a given patient with the past 6 months.



Clinical Query Portal

- ❖ The query portal allows credentialed users to search the HIE for clinical data.
- ❖ Users can search for patients using last name/DOB or the medical record number from your practice or a hospital.
- ❖ Information is presented in a “what’s available and from where” view.
- ❖ Users can drill down to see more detailed information, such as individual lab results.
- ❖ Information obtained through the portal can be printed or downloaded for incorporation into the local medical records.

Types of data available:

- Patient demographics
- Lab results
- Radiology reports
- Prescription Drug Monitoring
- Discharge summaries
- History and physicals
- Operative notes
- Consults



View of Clinical Query Portal



My Results

Patients

Patient » Rollins, Jenny K

CRISP Training
Sharice Spinner | Change Site | Logout

Patient Actions

- Back to List
- Download CCD
- Download CCDA CCD
- Download Summary PDF
- Configure Layout
- Request Advance Directive

Rollins, Jenny K Female 12/20/1978 (36 yrs) (Community ID:3344223)

2985 Oxford Court, Columbus, MD 39701

Summary

More Patient Information

Patient Groups

Interstate PDMP

Medications (5)

Date	Name	Source
06/16/2014	GCN (SIMVASTATIN 0.2...	PDMP
01/28/2014	GCN (HYDROCODON-...	PDMP
01/28/2014	GCN (LORAZEPAM 1 M...	PDMP
11/26/2013	GCN (LYRICA 100 MG ...	PDMP
09/05/2013	GCN (ZOLPIDEM TART...	PDMP

Documents (0) Functional Statuses (0)

No Documents to display

Vitals (2) Social History (0) Other Orders (0) Immunizations (0)

Name	Value	Collected
BMI	29	06/02/2014
BLOOD PRESSURE	160/97	06/02/2014

Imaging (3)

Date	Name	Source
03/29/2013	FLUORO, UP TO ONE HR	CGH
03/29/2013	CHEST, SINGLE VW (A/P-...	CGH
03/28/2013	ANKLE, COMP., (3 VIEWS)	CGH

Ambulatory Encounters (1)

Date	Type	Source
06/27/2014	1	CGH

Problems (0)

No Problems to display

Documentation (1) Laboratories (12)

Date	Name	Source
04/01/2013	OPERATIVE REPORT	CGH

Inpatient Encounters (2)

Date	Type	Source
06/11/2014	Emergency	CGH
03/28/2013	Emergency	CGH


Allergies (0) Procedures (0) Care Management (0)

No Allergies to display

results



Viewing Patient Information: Laboratory Results



CRISP

My Results Patients

Patient » Rollins, Jenny K

Patient Actions

- Back to List
- Download CCD
- Download CCDA CCD
- Download Summary PDF
- Configure Layout
- Request Advance Directive

Rollins, Jenny K

2985 Oxford

Summary

Medical History

06/16/2014

01/28/2014

01/28/2014

11/26/2014

09/05/2014

Documents

No Documents

Vitals (2)

Name

BMI

BLOOD PRESSURE

Laboratories

Download Report

Rollins, Jenny K 12/20/1978 Female

Flag: General, Low, High | Abnormal: ! ↓ ↑ Critical: ! ! Severe: ! !

Order Info

Order Type	Laboratory
Collected On	Jun 11, 2014 12:01:00 PM
Status	Final
Filler Order Id	0620:BS00124R

Providers On Order

Ordering Provider	Ahmed, Zareen A
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Source Information

Source	CRISP General Hospital
Received On	Jun 20, 2014 4:24:20 PM

Encounter

Admission Type	Source	Class	Attending Providers	Admission Date	Discharge Date	View Details
Emergency	CRISP General Hospital	Inpatient	Lopez, Eugene	Jun 11, 2014 3:28:00 PM		View Encounter Details

A1C

Status	Placer Field 1	Placer Field 2	Filler Field 1	Filler Field 2	Reported On
F	0619:BS00124R				Jun 19, 2014 1:23:00 PM

Observations

Flag	Name	Value	Units	Interpretation	Range	Status	Reported On	Source	Document
↑	A1C	9.2	%	Above high normal	4.0-6.0	F	Jun 11, 2014 1:24:00 PM	POINT OF CARE TESTING	

jimkeough@aol.com requested A1C labs result of 9.2 on June 11, 2014
Manually Created.
BFS @CRISP, 2014-06-19 13:36

TOTAL CHOLESTEROL

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Laboratories (12)

Source
CHOLESTEROL, ... CGH
TO DIFF CGH
M CGH
CGH
IAL - AUTO CGH

(2)

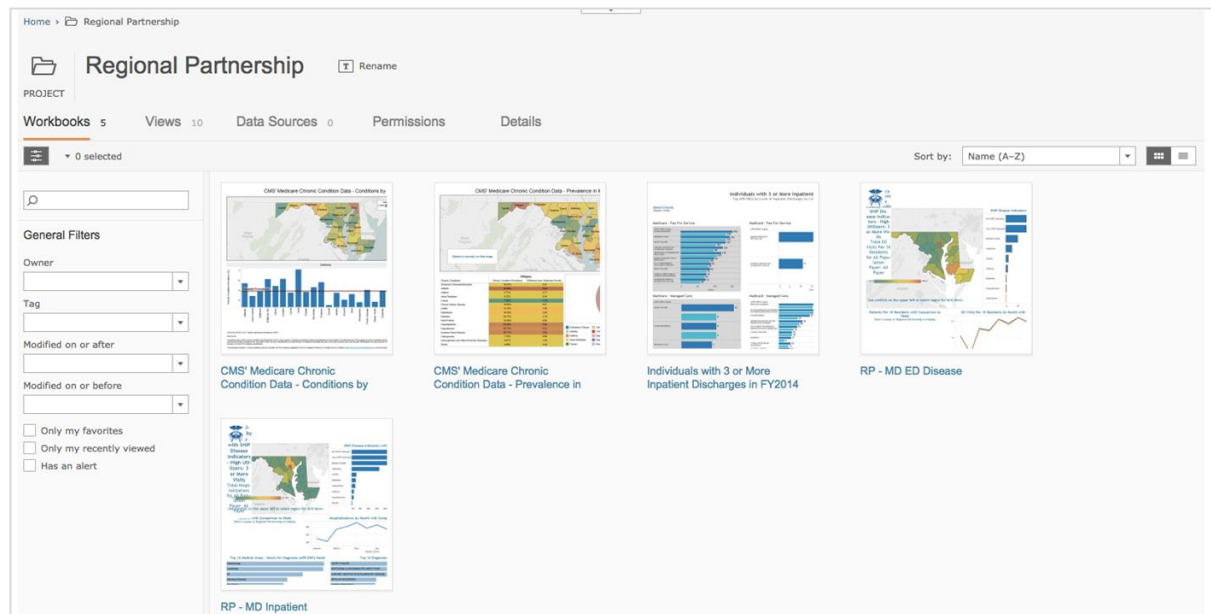
Source
CGH
CGH

(0) Care Management (0)



CRISP Reporting Services (CRS)

- Reports generated from a collection of data sources to support quality improvement, strategic planning, financial modeling, and other activities.
- CRS originally focused on reports for hospitals, we are now expanding to develop reports for other organizations to include public health departments
- Allowable data use varies based on the amount of detail included; patient-level detail in Tableau is only permitted to be used for care coordination activities.





INTEGRATED CARE NETWORK



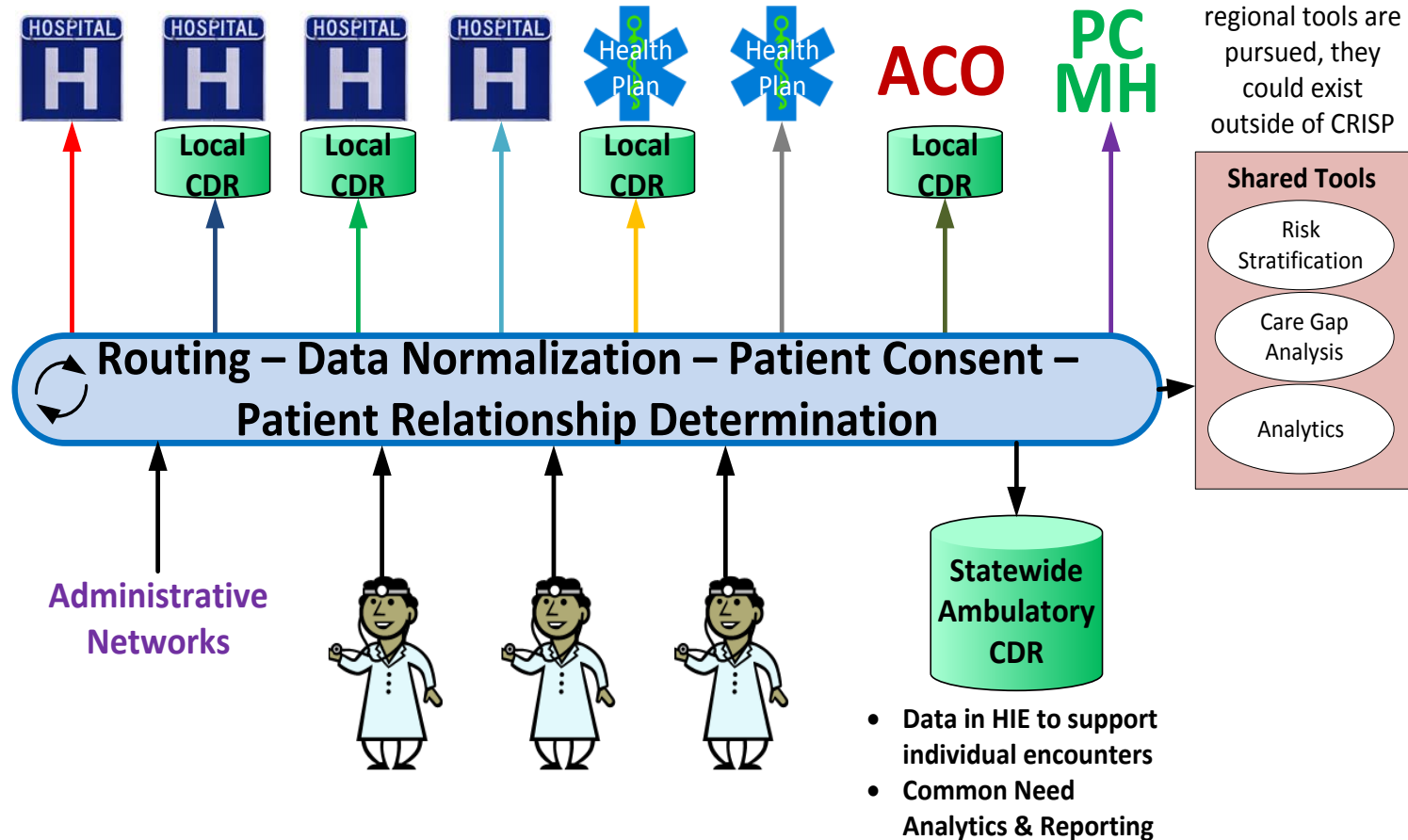
CRISP and Statewide ICN Infrastructure

- CRISP's role in pursuing ICN infrastructure and services is rooted on identifying and deploying those services that can and should be offered as common state-level infrastructure and are best pursued cooperatively.
- We are in part translating (and in some cases further defining) the Care Coordination Workgroup report into a set of work activities building towards agreed upon common infrastructure and services.
- CRISP's new tools should complement the ongoing and significant investments health systems, hospitals and ambulatory providers have already made.
- For some providers, CRISP will offer new solutions and tools. For other providers, CRISP will provide new data, make connections among different health system providers, and facilitate a shared understanding of the needs of shared patients.
- Consistent with CRISP's history and mission, we will be thoughtful about maintaining an incremental approach defined by CRISP users' needs.



ICN Infrastructure

Shared Infrastructure – Separate Systems





Community Care Team

Using CRISP for Care Coordination

Presenters:

Elizabeth Menachery, MD

Medical Director, Howard County Health Department

Kate Harton, MPA, RN

Program Manager, Community Care Team Healthy Howard

Presentation Outline

- Overview of Program
- Relationship with the Howard County Health Department
- Target Population and Care Team Model
- Community Partnerships
- Current use of CRISP
- Future plans for Expansion

Community Care Team Program Overview

- Utilizes population health strategies to decrease preventable hospital readmissions and empower Howard County residents to better manage their chronic health conditions
- Program development began in 2013
 - Referrals accepted January 2014
- CCT was the brainchild of the Howard County Health Department and the Horizon Foundation
 - Continue to provide consultation, oversight and funding
- Healthy Howard, Inc. implements the program

Community Care Team

- Target population:
 - Residents with multiple comorbidities and high hospital utilization
- Intervention Model:
 - Based on highly successful Camden Coalition of Healthcare Providers – Dr. Jeffrey Brenner
 - Home-based care coordination after hospital discharge:
 - Team of Community Health Workers, Nurses and LCSW
 - Connect clients with primary and other health care providers
 - Coordinate care with healthcare team
 - Focus on reducing barriers caused by social determinants of health

CCT Partnerships

- Primary Care Practices
 - Work collaboratively on CCT clients
 - Participation in the Advanced Primary Care Collaborative
 - Business Associate Agreement
 - Embedded Care Coordinator
- Howard County General Hospital
 - Largest source of CCT referrals
 - Memorandum of Understanding
 - Embedded Community Health Nurse

Current Use of CRISP



- Real-time ENS alerts for enrolled clients
 - Directly to team working with the client
 - Helps with timely intervention and scheduling
- Daily ENS alerts for tracking utilization of graduated clients
 - Notifies us of a need to check-in
- Identifying potential clients
 - Nurse or Care Coordinator reviews ENS list for 2 primary care practices
 - BAA/MOU allows us to act as an extension of the practice
 - RN/CC screens for multiple hospital encounters on ENS report
 - Uses Query Portal to determine if they meet clinical eligibility

Benefits of CRISP to CCT

- More accurate data tracking
- Customization of ENS alerts
- Real-time alerts convenient for staff in the field
- Systematic screening of ENS list has led to increased referrals from Primary care practices

Future Plans for CCT and CRISP

- Howard County Regional Partnership for Health System Transformation
 - CCT as Care Coordination Model
- Expanding use of CRISP for identifying high utilizers
 - More Primary care offices using ENS
 - CRISP can generate reports for Howard County General Hospital
- CRISP integration with CCT database system- important as our program grows
- Shared Care Profile
 - CCT Care Plan uploaded to the profile
 - CCT identified as a member of the patient's care team

Questions and Comments

- Contact Information

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