



Use Case: Encounter Notification System (ENS)

Overview

ENS is a way to deliver information about a patient's medical services encounter, for instance at the time of hospitalization, to a permitted recipient with an existing treatment or care coordination relationship with a patient. Criteria for validating the continued existence of the patient relationship must be followed, mechanisms for informing patients when appropriate must be in place and opt out capabilities must be maintained.

Permitted Purpose Category

For treatment (Permitted Purpose #1) and for quality assessment and improvement activities, including care coordination, defined in HIPAA as a subset of health care operations activities (Permitted Purpose #3).

Use Case Description

This use case hinges primarily on three events:

1. Patient attribution (matching a patient and provider);
2. Notification rules; and
3. Notification output

ENS is designed to provide real-time notifications for treatment, quality improvement, and care coordination purposes when patients have specific encounters, such as hospital admissions or discharges, or specific criteria are met, such as a diagnosis being recorded. CRISP receives encounter messages from hospitals in Maryland, the District of Columbia, and surrounding states and can generate a real-time notification to those with treatment or care coordination responsibilities for that patient. Currently, participants may not know when one of their patients is admitted to a hospital, or alternatively, they may find out well after the admission and/or have incomplete data. ENS messages will serve to initiate a process for coordinating care and/or providing follow up care after specific encounters.

Active Patient

The use case would begin with a participant providing a list of active patients for whom they would like to receive relevant notifications. In addition, the participant may direct CRISP to send relevant notifications to a business associate who is performing care coordination activities on the participant's behalf. CRISP defines the meaning of an "active patient" in the following way:

- For an ambulatory provider, the patient has had a clinical encounter in the last 18 months; for a hospital or skilled nursing facility, the patient is within 90 days post discharge.
- A patient has provided an explicit opt-in permission within the past 36 months to share information about medical encounters, and the participant or business associate has no reason to believe the patient is no longer active.
- A patient is currently an active member of a care management program, health plan, PCMH or MCO to which the patient had to actively enroll.
- A patient is currently attributed to the participant's ACO.



- A participant is using the notification to support another approved public purpose, such as a cancer registry which is required by law to report patient health status.

Participants are responsible for keeping their active patient list up to date. Capabilities may be available to keep the patient list up to date automatically.

Notice to Patients

Encounters will only be available from participating provider organizations whose notice of privacy practices have been updated to describe their participation in the HIE and who make opt-out information available to their patients.

Providers who receive alerts must make their HIE participation known to their patients within their notice of privacy practices and make opt-out information available to their patients.

Opt-Out Applicability

Any patient that opts out of CRISP will also be opted out of encounter notifications. If a patient requests that a participant remove them from notifications, the participant must either remove the patient from their attribution list, or if they are not capable of doing so, they must provide information to the patient on how to opt out of CRISP.

Associated Use of the Query Portal

Once an alert is received, a participant may then use the information only as defined in the permitted purposes of CRISP's Policies and Procedures, namely for quality assessment and improvement activities, including care coordination. Participants that provide treatment to patients and that have existing access to the CRISP portal may use the portal to access additional information related to the patient's treatment during the alerted encounter, for example discharge diagnosis and instructions for follow up care.

Eligible Participants

CRISP participants and their delegates will have access to Encounter Notification Services.

Approval

This use case policy was originally approved on October 24 2013. The updated use case policy has been approved by the Clinical Advisory Board.

Dr. Jonathan Thierman, PhD

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05/29/2020

Chairperson

Dated