



**CRISP**

# Regional Approaches to Enhancing Post-Acute and Long- Term Care

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# Disclosure

- CRISP has no financial interests or relationships to disclose in this presentation



# Objectives

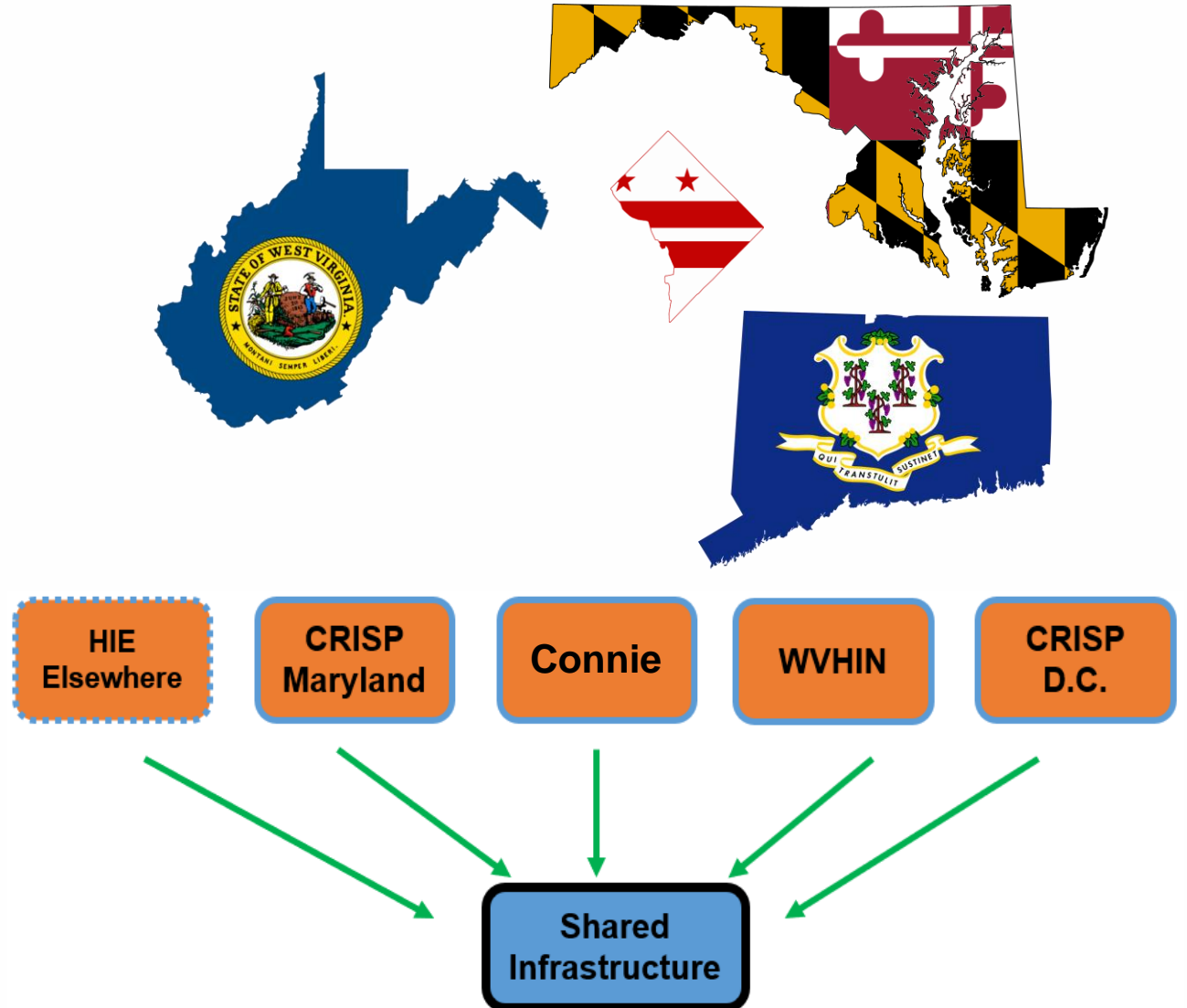
- Understand how utilization of available population health information (data) may enhance outcomes of care, especially during the COVID-19 pandemic
- Gain knowledge and understanding of how care coordination can be improved with the point of care data and care alerts available through the health information exchange
- Define relationships for purposes of HIPAA compliance when accessing patient records



# About CRISP

**A Health Information Exchange (HIE)** serving Maryland, and West Virginia, the District of Columbia, and Connecticut via affiliation.

**Vision:** To advance health and wellness by deploying health information technology solutions adopted through cooperation and collaboration





# Technology and Shared Services

- Our HIEs utilizes shared services infrastructure made available by CRISP – especially for services at the point of care and in support for care coordination. This creates efficiencies and economies of scale.
- Each region has also deployed software and technology independent of CRISP's other regions to support specific use cases.
- Each region's staff is made of locally hired project managers and outreach teams who work closely with participants on the ground
- Each region's governance is entirely local to ensuring we are implementing technology that supports local needs.



# CRISP Services

## 1. POINT OF CARE: Clinical Query Portal & In-context Information

- Search for your patients' prior hospital records (e.g. labs, radiology reports, etc.)
- Monitor the prescribing and dispensing of PDMP drugs
- Determine other members of your patient's care team
- Be alerted to important conditions or treatment information

## 2. CARE COORDINATION: Encounter Notification Service (ENS)

- Be notified when your patient is hospitalized in any regional hospital
- Receive special notification about ED visits that are potential readmissions
- Know when your MCO member is in the ED

## 3. POPULATION HEALTH: CRISP Reporting Services (CRS)

- Use Case Mix data and Medicare claims data to:
  - Identify patients who could benefit from services
  - Measure performance of initiatives for QI and program reporting
  - Coordinate with peers on behalf of patients who see multiple providers

## 4. PUBLIC HEALTH SUPPORT:

- Deploying services in partnership with Maryland Department of Health, DC Department of health, and West Virginia Bureau of Public health
- Enabling researchers to appropriately access aggregated data and manage cohort studies
- Housing the Prescription Drug Monitoring Program (PDMP) for Maryland

## 5. PROGRAM ADMINISTRATION:

- Making policy discussions more transparent and informed
- Supporting Care Redesign Programs

# Daily COVID Capacity and Weekly Vaccination Reporting Requirements for SNF's in Maryland



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# SNF Daily Reporting

As Required By MDH





# Bed Availability

CRISP Reporting Requirements.p x Post Acute Capacity User Guide\_ x Post Acute Capacity User Guide\_ x

File | C:/Users/Eshope/Downloads/Post%20Acute%20Capacity%20User%20Guide\_20201011%20(3).pdf

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Page view | Read aloud | Draw | Highlight | Erase

The Bed Availability tab displays a Maryland county map of post acute facility available beds. In order for the report to populate, users must select a date. . User can change the date slider to view the most recent or past results. The color of the county indicates the percentage of beds available in the facility located in that county. Bed availability for specific facilities is listed in the second chart.

### Post Acute Bed Availability

### Post Acute Bed Availability

Facility Name	Date																		
	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19				
HEBREW HOME OF GREA...	90		101	101	100	95	417	118	119	120	116	123	123	122					
SALISBURY REHABILITAT.	89	89	92	92	92	96	106	108	110	106	109	111	112	119	119				
STELLA MARIS INC.	91	89	93	95	95	95	97	94	93	94	90	88	90	92	92				
WILSON HEALTH CARE C.	27	27	43	66		70	96	123	123	124	124	128	129	130	123				
NORTHAMPTON MANOR...	61	84	85	86	88	90	90	90	90	90	91	91	92	92	91				
MANOR CARE HEALTH SE.	79	79	79	78	78	78	76	76	78	74	75	75	75	81	81				
THE PINES GENESIS ELD.	74	74	75	76	76	75	75	74		74	74	73	72	73	74				
FUTURE CARE CHESAPEA	72	71	73	71	73	72	74	60	72	69	69	69	69	70	68				
CATON MANOR		70	68	68	70	70	70	75	68	68	66	66	66	66	66				
PATAPSCO VALLEY CENT.	64	64	64	38	38	37	64	67	67	67	68	64	63	64	64				
HERITAGE CENTER	64	64	64	5	3	2	66	66	67	67	67	66	66	66	66				
BERLIN NURSING AND R.	61	63	62	65	64	64	66	66	67	67	68	70	71	72	72				
MANOR CARE HEALTH SE.	38	37	36	36	36	36	65	61	69	69	68	68	63	64	64				
CITIZENS CARE CENTER	8	8	8	8	8	8	65	65	65	65	65	65	64	64	63				
LOCHEARN NURSING HO.	61	63	61	62	64	64	64	63	64	64	64	62	62	62	62				

Date: 5/19/2020

County: [All]

Facility Name: [All]

Room Type: [All]

Open Beds %: 0% to 100%

Date: Last 15 days

# of Beds Available Today: 0 to 123



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# Weekly Vaccination Reporting

As Required by CMS/MDH



# Reporting Requirements

## **DEADLINE: EVERY WEDNESDAY by 11am EST**

- **Each Wednesday, it is required that a designated staff member at your facility enters complete Resident and Staff vaccination data into CRISP by the deadline of 11am EST.** The data you enter each Wednesday is used to update this site each Friday: <https://aging.maryland.gov/Pages/SNFVD.aspx>
- After the deadline of 11am EST Wednesday has passed, the next opportunity to submit updated vaccination data will be the following Wednesday. If your facility does not meet this deadline for staff census, resident census, and vaccination data, the dashboard will show DNS for your facility.

**FACILITY NAME CHANGE** If the name of your facility appears incorrectly on the public site, please submit all official name changes requests to [crs-team@crisphealth.org](mailto:crs-team@crisphealth.org)



# CMS definition of Staff

## STAFF CENSUS

**Please note that CMS has released new guidance for reporting facility vaccination metrics. MDH has reviewed the guidance and has aligned our definition of STAFF with the definition used by CMS. Please note the CMS 'Staff' definition includes persons/groups that our prior definition did not.**

Correct Resident and Staff census data is necessary to accurately calculate the percentage of persons at your facility who are partially or fully vaccinated.

### **CMS definition of STAFF:**

“**STAFF**” means those individuals who work in the facility on a regular (that is, at least once a week) basis, including individuals who may not be physically in the LTC facility for a period of time due to illness, disability, or scheduled time off, but who are expected to return to work. This also includes individuals under contract or arrangement, including hospice and dialysis staff, physical therapists, occupational therapists, mental health professionals, or volunteers, who are in the facility on a regular basis, as the vaccine is available.



# INCLUDE the following as “staff members.”

Please **INCLUDE** Staff members in the following categories, in-line with the above definition. If a Staff member worked multiple shifts/days, count them only once when you report each week.

- **Nursing staff:** registered nurse, licensed practical nurse, vocational nurse
- **Clinical staff:** physician, physician assistant, advanced practice nurse
- **Aide:** certified nursing assistant, nurse aide, medication aide, and medication technician
- **Other staff or facility personnel:** regardless of clinical responsibility or resident contact, not included in the categories above (maintenance, environmental services, etc.)
- **Independent contractors/Volunteers:** Workers that are actually employed by other staffing agencies or volunteers who are not direct employees of your facility, but who are in the facility on a regular basis (at least one a week). This includes hospice and dialysis staff, physical therapists, occupational therapists, mental health professionals, etc.



# Vaccinations-updates to questions

## VACCINATION

**NHSN has released new mandatory updates to questions regarding Resident and Staff vaccination status. These questions will appear in your weekly survey.**

Please only include current Resident and Staff members in your vaccination totals. If a Resident was vaccinated but has been discharged, do not include that Resident in your vaccination entries. If a Staff member was vaccinated but no longer works at your facility, do not include that Staff member in your vaccination entries.



# New Vaccination Questions-Same for Residents and Staff (screenshot from actual form)

**Each Resident or Staff member who is eligible to receive a booster will only be entered in ONE of the following categories:**

Number of residents eligible to receive an additional dose or booster of COVID-19 vaccine:

Booster/additional dose of Pfizer:

Booster/additional dose of Janssen:

Booster/additional dose of Moderna:

Booster/additional dose unspecified manufacturer:

Number of staff eligible to receive an additional dose or booster of COVID-19 vaccine:

Booster/additional dose of Pfizer:

Booster/additional dose of Janssen:

Booster/additional dose of Moderna:

Booster/additional dose unspecified manufacturer:



# ImmuTrack: A COVID-19 Vaccine Outreach Tool

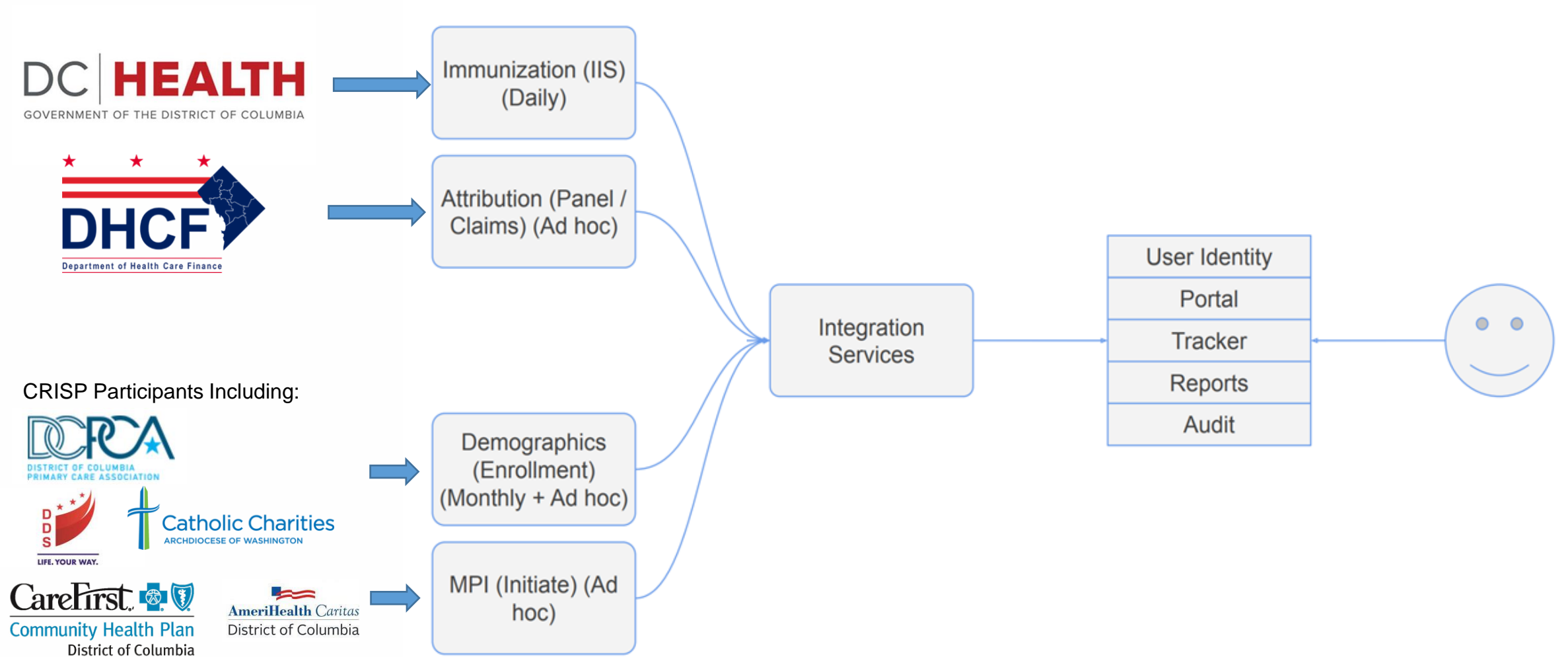
July 12<sup>th</sup>, 2021

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# Utilizes Existing Infrastructure plus Data Inputs from DC Health and other Agencies



Fully Funded by a Federal Office of the National Coordinator Grant (known as the ONC STAR HIE Grant), inclusive of technology and personnel time



# CRISP DC's COVID Support

- Sharing case data from DC Health to downstream users:
  - Notifying EMS of transmission risks
  - Alerting providers of positive patients
- Sharing data back to DC Health to help them manage the pandemic:
  - Demographic data related to COVID infections
  - Up to date contact information for contact tracers
  - Hospitalization data related to COVID admissions for syndromic surveillance
- Central source for up-to-date data and reports
  - Secure reporting dashboards with lab results, case files, and other information



# Vaccine Data Service: A Multi-state Vaccine Outreach Support Tool

CRISP DC, DC's Designated Health Information Exchange (HIE), is collaborating with DC Health on COVID-19 response tools, including to support vaccination initiatives. Using the COVID-19 immunization data collected in DOCIIS 2, CRISP DC is now creating reports and toolsets for:

1. Patient-level coordination and vaccine outreach,
2. Better patient-level information at the point of care, and
3. Population monitoring and targeting purposes.

The patient-level capabilities are available in Maryland via CRISP and West Virginia via the WVHIN.

# Vaccine Data Service



CRISP

VACCINE DATA SERVICE

Connecting **Providers with Technology** to Improve Patient Care

Panel / Practice:

Demo Practice-1 [Practic

Apply



Horrocks, David



Logout

Vaccination data from ImmuNet available through **01/13/2021**  
ENS Panel Subscription data available through **01/07/2021**

Excel Export

Patient Name	Vaccine Status	First Dose Vaccine Date	Second Dose Vaccine Date	Age ↓	Chronic Condition Count	First Dose Vaccine	Second Dose Vaccine
CHEUNG, JONATHAN	Not Vaccinated			79	3		
ARMSTEAD, CHLOE	1 Dose Received	01/04/2021		79	5	Moderna - COVID-1...	
BACA, DONNA	Not Vaccinated			79	2		
KRUEGER, CAROL	1 Dose Received	12/18/2020		78	0	Moderna - COVID-1...	
WHATLEY, JAMES	1 Dose Received	12/24/2020		78	3	Moderna - COVID-1...	
MCGUIRE, WAYNE	Not Vaccinated			77	7		
GONZALEZ, ROSALYN	1 Dose Received	12/18/2020		77	6	Moderna - COVID-1...	
HAMILTON, MARISA	Not Vaccinated			76	2		
SPIESS, CHRISTOPHER	Not Vaccinated			76	3		
REYNA-RODRIGUE, MELISSA	Not Vaccinated			76	3		
PROUDFIT, CHRISTINE	1 Dose Received	01/02/2021		75	0	Moderna - COVID-1...	

Navigation

Chronic Conditions

