



Use Case: Clinical Guidance Notifications

Overview

CRISP has the ability to leverage the clinical information received from participants and other partners/stakeholders to highlight specific information at the point of care and for care coordination purposes. In certain circumstances, particular pieces of information are placed in the system, which allow it to be raised to an additional level of awareness among users when CRISP participants query individual patients and/or receive encounter notifications. Displaying this information will aid clinicians in clinical decision making and assist care coordination entities to develop and prioritize care management strategies and plans.

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).

Technical Design

CRISP receives a wide range of data from many participant sources, including, but not limited to, emergency medical services (EMS), Admission, Discharge, Transfer (ADT) encounter feeds, lab data, and other clinical documents. These feeds can carry a variety of patient data including: Primary and Secondary Impressions, Chief Complaints, Admit Reasons, Admitting Diagnoses, and Discharge Diagnoses. Some fields are free-text and can contain text-based indicators of specific events.

CRISP is able to highlight specific information (i.e. diagnosis, lab data) from a data source and provide additional context to call a user's attention to this information. A way to technically accomplish this is to use a rule engine to identify the criteria and flag specific information. As the information is received (i.e. EMS data), each of the relevant fields carrying information that may meet the specified criteria will be analyzed. Any events or data that match the criteria established in the rule engine will be flagged and made available to the user via the selected technical solution for that use case (i.e. via the Encounter Notification Service, a CRISP portal, or other point of care system). For example, if a patient has a diagnosis or EMS encounter indicating a suspected overdose, that information can be placed in a certain location within the portals, along with the source and date of the diagnosis, and additional context or language from the Department of Health, such as references or resources helpful for a clinician to take next steps.

Additionally, CRISP stakeholders want notification of a child being at risk for abnormal childhood development and in response has created a "Child Development Alert". The alert will be displayed in CRISP tools when a patient has received a specific triggering diagnosis which CRISP is able to receive through participant or other data sources. Clinical and public health stakeholders will provide CRISP the list of diagnoses that will trigger the "Child Development Alert" to be attributed to a patient's record in CRISP. The text of the alert will display the reason the alert triggered; the source and date of the diagnosis; and any additional context.



Use Case Description

While multiple sources (e.g. all hospital ADT feeds) can be evaluated to meet the notification criteria, each individual notification generated and displayed in accordance with this use case will use data from a single source. This includes but is not limited to a diagnosis that appears in an ADT feed, a lab result that appears in lab feed, or a specific encounter or procedure code. The source of data includes, but is not limited to CRISP clinical and payer participants, MDH, or Medicare or Medicaid claims data in accordance with data use agreements and the CRISP participation agreement. These data will be displayed in point of care tools and care coordination tools such as ENS. CRISP will work with participants and stakeholders to determine the necessity and priority for alerts to be displayed at the point of care. The method of display for each alert will be dependent on the targeted audience for viewing the alert. The text of each alert will rely on state or federal agency experts or published guidance in the areas relevant to the alert, where possible, or reviewed and approved by the CRISP clinical committee or its subcommittees. For example, CRISP is working with MDH Maternal and Child health to develop the text of the “Child Development Alert.”

Each new alert type will be documented internally with at least the following information:

- requesting stakeholder entity / origination of the alert
- source of alert information
- duration of alert
- display method and location
- text of alert
- state or federal agency or medical professional society used for expert consultation for alert text

The CRISP clinical committee will be provided periodic updates on the amount and type of alerts that are being generated.

Opt-Out Applicability


Opt-out will apply to all notifications and alerts.

Eligible Participants

CRISP participants and their delegates will have access to this information through CRISP tools and services such as query portal and Encounter Notification Services.

Approval

This Use Case Policy has been approved by the Clinical Advisory Board.


7/6/20

 Chairperson Dated