

Use Case Policy: Updated Contact Information for Quality Improvement

Overview

Payers have access to CRISP tools and services for purposes of care coordination and quality improvement as allowed by HIPAA and by other approved use cases. Those use cases are limited to use of encounter alerts and queries to support quality improvement initiatives. Payers, including DC Department of Health Care Finance (DHCF), often need to follow up directly with their members to support quality initiatives, such as audits of service quality. In conjunction with efforts to determine the quality of services provided, payers frequently attempt to contact patients to ascertain the quality, frequency, duration and other aspects of care. Outreach to patients is frequently hampered by inaccurate contact information or patients not providing updated contact information to the program. While payers can currently query individual patients to access CRISP held contact information, a more efficient process enabling payers to update their information is the provision of a roster report upon request of the payer.

Permitted Purpose Category

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

Payers currently provide CRISP a panel or list of their members for purposes of encounter notification and query support. CRISP will provide the payer with most recent contact information, including phone number and addresses for the panel of patients. This report of updated contact information can be provided on an annual or quarterly basis per the request of the payer. Payers may use the information to update their own member files.

Opt-Out Applicability

Any patient that opts out of CRISP will not be included in the updated contact information reports.

Eligible Participants

The requested reports would be available for use by CRISP payer participants. All users must be verified by a participant point of contact and must complete the required steps to gain access to the system.

Approval

This Use Case Policy was by the Clinical Advisory Board.

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10/1/2021

Chairperson

Dated