## 10/18/2022

Tuesday, October 18, 2022 10:54 AM

Meeting Date: 10/18/2022 11:00 AM Location: Microsoft Teams Meeting Link to Outlook Item: <u>click here</u>

**Invitation Message** 

## **Participants**

Bertrand, Stephane (BCHD) (Meeting Organizer)

marc.rabner@crisphealth.org (Accepted in Outlook)

Bowman, Elise (BCHD) (Accepted in Outlook)

White, Mary C. (BCHD) (Accepted in Outlook)

Morgan, Matt (BCHD)

## **Notes**

- Intro
- Purpose of Meeting recap
  - LHIC Care Coordination
    - Create a new def of care coordination informed by community
    - Seek reimbursement for care coordination
    - Address interoperability question close loop of care coordination
- Shared Problem Statement (Discussion)
  - Ensure that pts get the care that they need, no duplication of services, understand how connecting patients to SDoH services impacts health, comm between networks within city
  - Several tech solutions operating side by side, not communicating w/ each other, patient info existing in silos
  - Stay away from tech solutions
    - o Social care systems, clinical care systems fragmented, lead to duplication
    - Inadequately address social needs
  - Referral clarity pts don't always know where they're being sent and why. Shared referral pathway?
  - Prevent information loss
  - Liaison btw primary care and specialists
  - Enhanced Coordination of Care
    - Sharing info btw social and clinical caregivers
  - Ecosystem principals no shared standard for data sharing
  - Root causes/levels? Take it to the group 10/28
    - Fragmentation of care
    - O --
    - o --
    - Shared data standards
    - o Reimbursement model for social services
- What do we need from the coalition/ How might the coalition help us address this problem? (Discussion)
  - MDPCP leadership + CRISP + 2-in-1
  - Fragmentation occurs in:
    - Id of social needs
    - Social svc resources

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- More than just referrals
- Different ways that people receive services
- Three buckets:
  - Systems that provide services and don't share data (Meals on Wheels)
    - Not a lot of in-roads
    - Opportunity to pull data and bring into CRISP
    - City Share housing resources with CRISP
  - Network referral platforms (UniteUs, Find Help) referrals from medical/clinical side to CBO
    - CRISP working to integrate with these programs
  - o CRISP closed loop referral tool. Not a lot of features. ~3 dozen CBOs.
- HIPAA-covered/not-HIPAA-covered entities
- Burden placed on CBOs to document within multiple systems
  - DOUBLE DOCUMENTATION
    - Routing referrals from different sources to different destinations
    - No standards applied across referrals
- 1. Who do we need in the coalition?
  - 1. Who do we already have? Issues w/ interest -> implementation
    - a. MD Physicians Care (MCO)
    - b. Hopkins
    - c. 1 MCO
    - d. A few CBOs
  - 2. Who do we need?
    - a. FAST team (Meals on Wheels, Movable Feast, Capital Area Food Bank, MD Food Bank)
      - i. Large grant to provide food services to high risk populations
      - ii. Limited discussion across organizations
      - iii. Case study to share of CBOs and data sharing. UMMC paying for
      - iv. Can be scaled across the state
    - b. Handful of orgs that use FindHelp or CRISP to discuss data sharing across orgs, including CBOs involved in referrals
    - c. Medstar:
      - i. Open to data sharing
      - ii. Fist org to share FindHelp info with CRISP
      - iii. Diana Quinn Head of Community Health
      - iv. Elizabeth on Care Coordination team, last day is today
    - d. Hopkins
      - i. Uses FindHelp
      - ii. Looking to expand across system
      - iii. Having implementation issues
      - iv. Kristin Tople
      - v. Kara Goldstein
    - e. City Office of Performance Innovation
      - i. Dep. Mayor wanted to solve for care coordination
      - ii. Wants to be involved
    - f. Mercy
      - i. Not ready
    - g. St. Agnes
  - 3. What is our min/ max?
  - 4. Funding, On the ground, control, already bought-in
  - 5. 211, UU, Wellsky, etc.
  - 6. CBOs

- 2. Meetings
  - 1. When/How often
  - 2. Existing meetings? That we can co-op
- 3. What are the initial few milestones we need to accomplish? (Discussion)
  - 1. Recruit/Convene
  - 2. Share the problem Statement
  - 3. Define a goal for tech solution

Next Steps
Take it to the group 10/28
Pull MedStar back in with CRISP
What data sharing do we need?
Elise + Marc - meet to discuss next steps + activities to present to MedStar (Standing meeting
every 2 weeks)
ID possible second healthcare org
Elise - Discuss w/ Mercy
Pull Office of Performance Innovation back in with CRISP