



Use Case Policy: Use of Query Portal for Care Coordination

Overview

HIPAA allows for data sharing without patient consent for quality assessment and improvement activities, including care coordination. CRISP allows participants who have an active treatment or payment relationship with a patient access to CRISP services to facilitate care coordination activities without patient consent. Additionally, organizations who are performing care coordination activities on behalf a health care provider or payer may access patient data for this purpose without consent.

In order to improve health outcomes and lower health care costs for individuals engaged in care in different sectors of the health care system, additional entities have engaged in activities to assist patients to navigate the health care and social services systems. These entities may or may not be affiliated with a health care provider or payer; they may also be acting on behalf of public health authority or local health department. State and local health departments play a significant role in care coordination for individuals in their jurisdictions. For example, due to the opioid crisis, many health departments have undertaken new targeted care coordination or home visiting programs or may have contracted with organizations who specialize in assisting individuals with an addiction. These relationships also exist between health departments and organizations who specialize in working with other unique populations. State and local health departments and their contracted care coordination entities obtain patient consent upon enrollment into a navigation or care coordination program.

Access to CRISP services for these entities who are often federal or state grantees, will enable them to better coordinate a patient's care and assist them in navigating the health care system.

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

The Maryland Department of Health (MDH), local health departments and their delegates may access CRISP services for the purpose of care coordination for patients who have given consent for the entity to access their data available through CRISP services. This consent may be verbal or written, and appropriate documentation, including the date consent was obtained, must be made available upon request for CRISP auditing. The consent may be a part of a broader consent when patients are enrolled in a care management or navigation program. If consent is not already required for enrollment in the program, the participant must obtain patient consent to access CRISP services for care coordination purposes. The consent may be relied upon for a period of one year unless it is revoked by the patient. Patients must also be provided information about CRISP and their ability to opt-out.

Opt-Out Applicability

Any patient that opts out of CRISP will not have their data made available for quality improvement activities.



Eligible Participants

The Maryland Department of Health, local health departments, and their contracted delegates may have access to CRISP services for care coordination purposes. All users must be verified by the participating organization point of contact and must complete credentialing steps and adhere to all CRISP policies and procedures.

Approval

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


Chairperson

January 4, 2019
Date