Connecting Providers with Technology to Improve Patient Care

Use Case Policy: Closed-Loop Referrals

Overview

Closed-loop referrals provide a means for healthcare professionals to send patient information to a community-based organization (CBO) to help address a patient's needs that are typically better served outside of clinical workflows. A CBO can provide an array of different support programs within the community, including services that address a patient's social needs or address underlying causes of poor health outcomes with the goal of positively impacting the patient's overall health outcome(s). The CBO can then provide feedback on the outcome of that referral back to the referring individual/entity.

CRISP facilitates referrals to the CBO by enabling health care providers who are active CRISP participants to make referrals to the CBO. The information included on the referral shall be considered protected health information in accordance with the Health Insurance Portability and Accountability Act (HIPAA). While many of the participating CBOs are not HIPAA covered entities, both HIPAA covered and non-HIPAA covered organizations may receive/access the referral-specific PHI as a part of a referral from a provider without patient authorization in accordance with 2017 FAQ, "HIPAA Privacy Rule and Sharing of Information Related to Mental Health" issued by the HHS Office of Civil Rights. CBOs who receive these referrals agree to participate in the program to "close the loop" on the referral and provide information on the referral back to CRISP to be shared with participants. Information specific to the patient's relationship with a CBO and the outcome of the referral is provided to CRISP. That information is then used to populate CRISP tools. CRISP may then send a message, specific to referral activities to subscribers, thereby closing the referral loop and notifying referring individuals/entities of the referral outcome.

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).

Use Case Description

An authorized CRISP user will access CRISP to view referrals that have been sent for a patient with whom the user has a care relationship.

In addition, the user can make a referral to a Community Based Organization (CBO). The referral is automatically sent to the CBO through CRISP tools or to their system of record and upon receiving the patient information, the CBO contacts the patient to enroll them into a given program(s). The CBO then captures program specific, patient-related events such as enrollment, missed, made appointments, rejected, and completed status and sends those events to CRISP. The CBO events update the CRISP referral database to provide closed-loop referral information and update downstream systems. Some of the CRISP tools that may be populated by this data include care alerts, Patient Snapshot, ADT messages, and care team widget.

Referring users can see the status of their referral through the CRISP referral tool, through various tools in the CRISP Unified Landing Page, and/or the referring user's systems of record.



Opt-Out Applicability

Patients who have opted out of CRISP will not have a referral sent. Additionally, patients can opt out at the CBO of having their program specific participation information shared back with the CRISP HIE.

Eligible Participants

CRISP participants and their delegates will have access to Referrals and Encounter Notification Services. CBOs will have access to the Referral Worklist tool, but not to any additional CRISP tools that may contain PHI.

Approval

Chairperson

This use case policy was approved by the CRISP Clinical Committee on November 4, 2020.	
Jonathan Thierman, MD, PhD	3/15/2021

Dated