State of the State Panel

CRISP
ANNUAL SUMMIT
2025

Speakers

CRISP
Chesapeake Regional Information
System for our Patients

Tequila Terry, Senior Vice President, Care Transformation & Finance, Maryland Hospital Association

Gene Ransom, CEO of MedChi, The Maryland State Medical Society

Kevin D. Heffner, President and CEO of LifeSpan Network

MHA MISSION

Maryland Hospital Association

Advancing health care and the health of all Marylanders

MHA serves Maryland's hospitals and health systems through collective action to shape policies, practices, financing and performance to advance health care and the health of all Marylanders.

MHA MEMBERS

MARYLAND HOSPITALS: 5 THINGS TO KNOW

Over 5 Million Lives Touched Annually

Beyond the Bedside: $2.09 Billion in Community Benefit

Backbone of Maryland's Economy: Support for 223,000 Jobs

Caring for Maryland's Most Vulnerable: $2.2 Million Daily in Care for Those Unable to Pay

National Model for Health Care

WHAT HOSPITALS DO...

ACUTE CARE

- Provide life-saving interventions for emergencies (e.g., injuries, trauma, stroke, heart attack)
- Deliver high-quality care for acute illnesses and injuries through 24/7/365 emergency services
- Manage complex conditions using advanced technology and specialized expertise
- Ensure smooth transitions to post-acute or rehabilitation care for recovery

COMMUNITY WELLNESS/PREVENTION

- Promote healthy lifestyles through campaigns on nutrition, exercise, and smoking cessation
- Provide screenings and early detection for chronic diseases like diabetes and cancer
- Address social determinants of health, including housing, food security, and transportation
- Partner with organizations to support underserved and at-risk populations
- Lead vaccination drives and public health initiatives to prevent disease outbreaks

A TRACK RECORD OF SUCCESS

- Maryland hospitals **drive innovation** under Maryland's unique Model through health care payment reform

- In the All-Payer Model and the Total Cost of Care Model, hospitals generated **$4.6 billion in Medicare savings** through high-quality, efficient care delivery

- Hospitals **improved outcomes** in unplanned readmissions, preventable admissions, and timely follow-up

- The AHEAD Model builds on this legacy with an even greater focus on **population health** and creates new opportunities to improve the health of Marylanders

THE AHEAD MODEL

Maryland
Hospital Association

STAYING AHEAD OF AHEAD

States Advancing All-Payer Health Equity Approaches and Development

" A flexible framework designed to improve health care outcomes for people residing in participating states. AHEAD will use hospital global budgets and a primary care program (Primary Care AHEAD) to assist states in achieving higher quality care delivery, increasing investment in primary care, and supporting the delivery of advanced primary care - all while controlling overall growth in health care costs."

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

OPPORTUNITIES

The AHEAD Model creates new opportunities to develop partnerships and share accountability across the health care spectrum and reinforce the importance of population health.

Population Health

- Hospitals will play a critical role in leading local interventions that focus on identifying populations that are most at risk for poor outcomes and developing targeted interventions that improve health.

Partnerships

- Hospitals will partner across the care spectrum to improve care coordination and ensure patients get care at the right time and in the right setting.
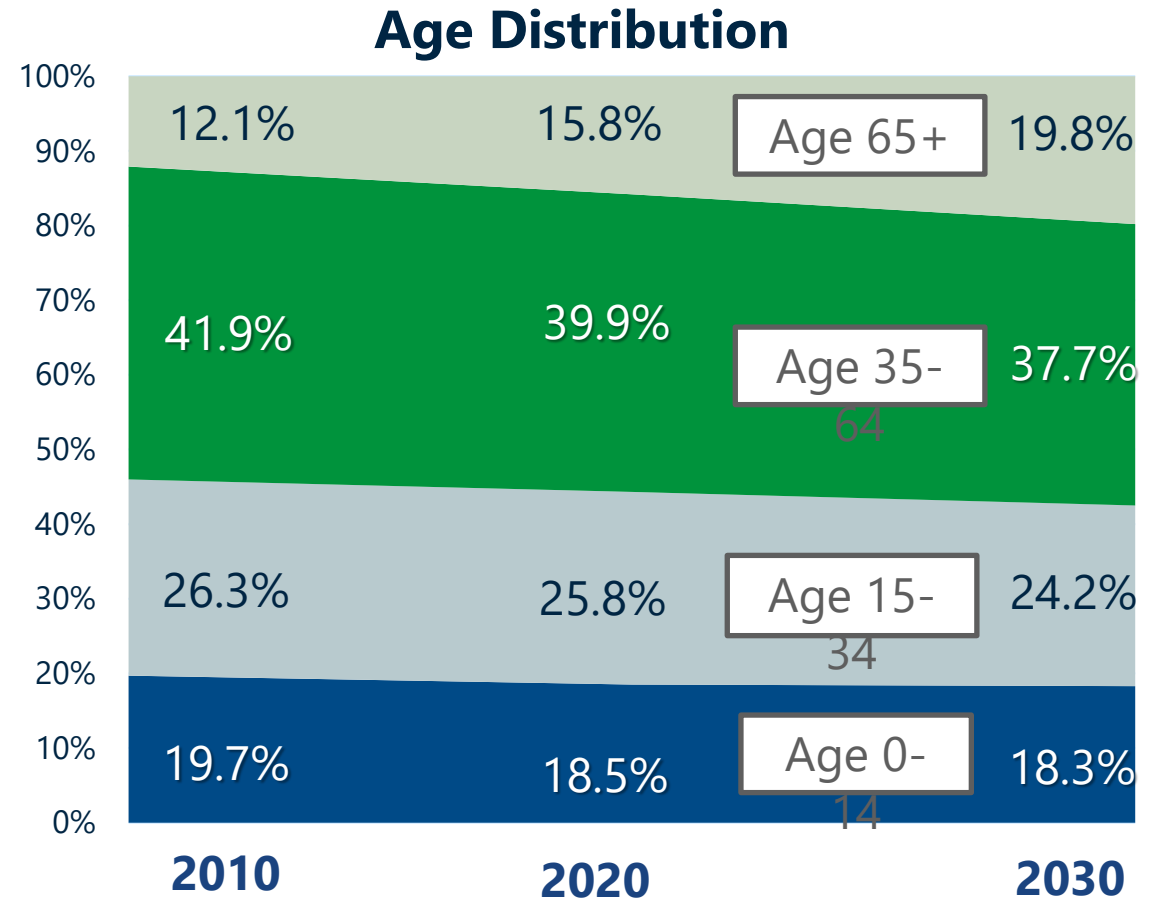
HEALTHY HOSPITALS AND COMMUNITIES

Hospitals need AHEAD Model policies that ensure they are prepared to provide the 24/7/365 access that communities rely on.
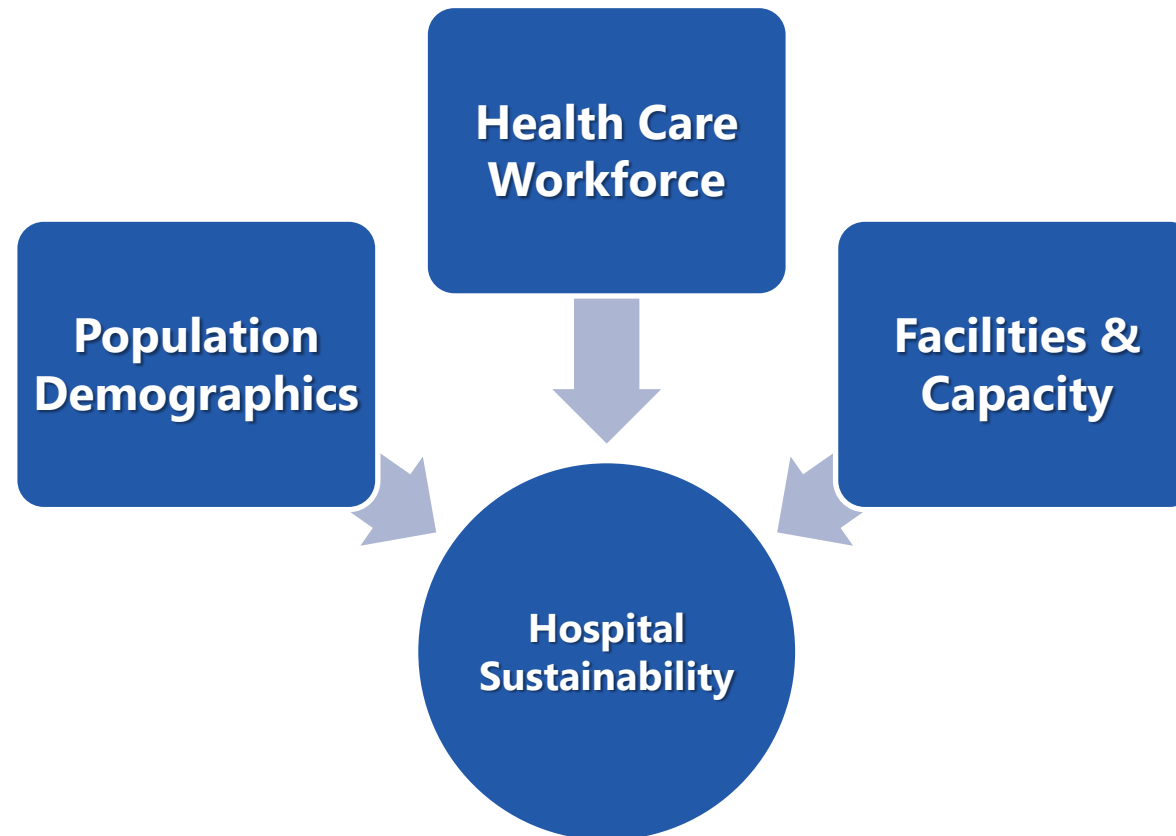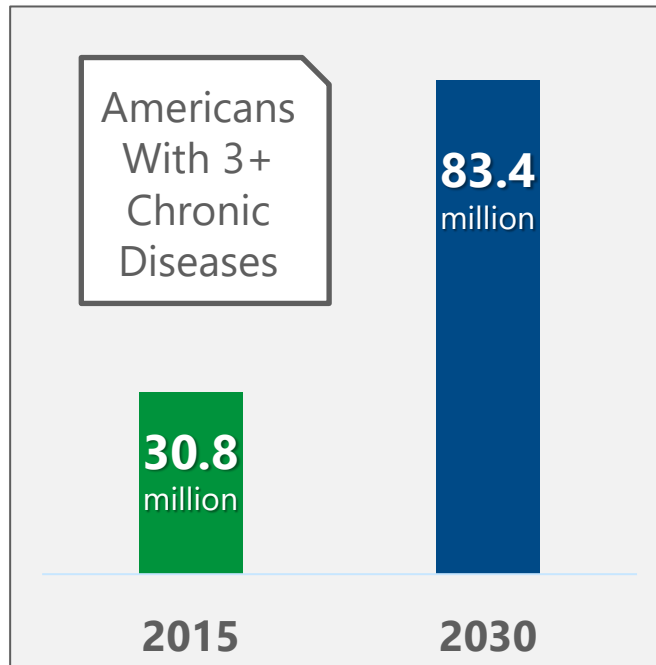
POPULATION DEMOGRAPHICS: GROWING AND AGING POPULATION

- Maryland's population is growing, aging, and becoming more complex with multiple chronic conditions.

- The demand for hospital care will only increase.

- Hospitals must be equipped to handle these changing needs for everyone's health and safety.

Age Distribution

	2010	2020	2030	
Age 65+	12.1%	15.8%	19.8%	
Age 35-64	41.9%	39.9%	37.7%	
Age 15-34	26.3%	25.8%	24.2%	
Age 0-14	19.7%	18.5%	18.3%	

POPULATION DEMOGRAPHICS:
CHRONIC DISEASE BURDEN RISING

Americans With 3+ Chronic Diseases

30.8 million — 2015

83.4 million — 2030

Heart disease costs expected to triple by 2030, to $818 billion, or 17% of U.S. health spending

SPOTLIGHT:
FUTURE OF DIABETES IN MARYLAND

	Total Pop. 2020	Total Pop. 2030	65+ Pop. 2030
Prediabetes	28.9%	29.8%	51.0%
Diagnosed with Diabetes	9.7%	11.6%	18.9%
Undiagnosed with Diabetes	3.4%	3.7%	7.0%

"Maryland is projected to spend $11.1 billion by 2025 on diabetes-associated health care, including costs related to prediabetes and undiagnosed diabetes. Nearly 50 percent of these costs are projected to come from the senior population."

FACILITIES & CAPACITY

The AHEAD Model creates opportunities to revisit policies to support hospital modernization and ensure health care infrastructure keeps pace with evolving needs.

Address Maintenance Needs

Allocate resources for routine upkeep of hospital facilities statewide to ensure safe, functional, and efficient settings

Increase Capacity

Expand space and resources to accommodate the growing demand for acute and complex care services, safeguarding quality care for all patients

STRENGTHENING RECRUITMENT AND RETENTION

Hospitals need skilled physicians, nurses, and staff

Rising costs of health care staff must be addressed to prevent shortages and maintain care quality

Policies must support hospitals' ability to attract and retain these critical staff members

PREPARING FOR AHEAD

The AHEAD Model provides Maryland with an opportunity to further deliver on the promise of healthy communities <u>and</u> healthy hospitals.

HEALTHY COMMUNITIES

- Develop new initiatives to improve care delivery & outcomes:
  - ✓ **Population Health interventions and goals**

  - ✓ **Partnerships across the health care spectrum**

HEALTHY HOSPITALS

- Adopt policies, regulations, or legislation to ensure hospitals are resourced to:
  - ✓ **Support the growing and increasingly complex patient population**

  - ✓ **Ensure there Modernize facilities, address routine maintenance needs in buildings, and ensure capacity**

  - ✓ **Recruit and retain essential physicians, nurses, and other hospital staff**

CONNECT WITH MHA ON SOCIAL MEDIA

@MarylandHospitalAssociation

@mhaonline

State of the State: Ambulatory Field Perspective

Gene Ransom, CEO of MedChi, The Maryland State Medical Society

The Post-Acute Dilemma

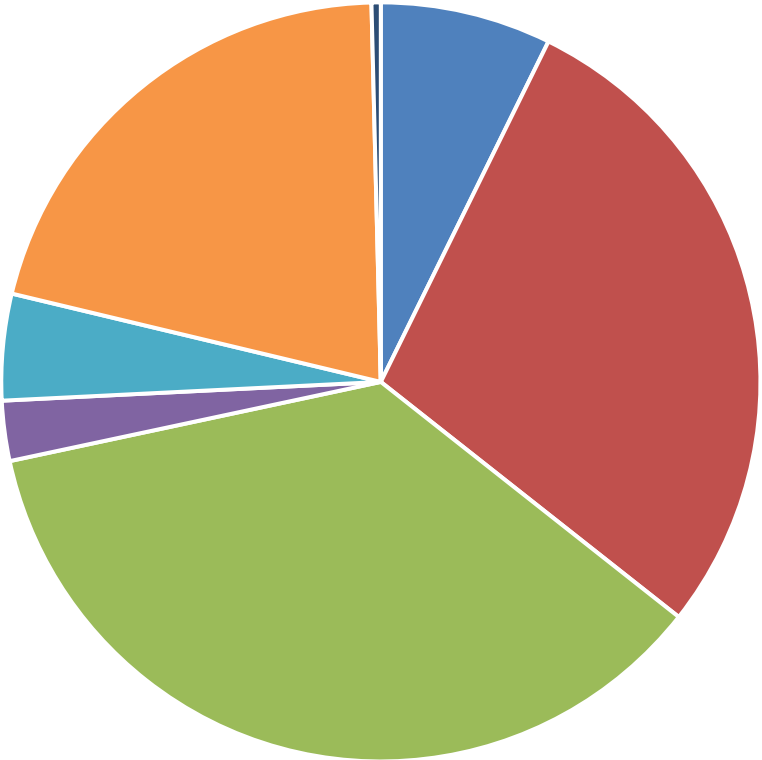KIDS THESE DAYS DON'T PLAY OUTSIDE LIKE WE USED TO

WILLIAM, CALL THE COPS THERE ARE KIDS ON DIRTBIKES

- Baby Boomers (1946) are about to enter their eighties. Over the next 20 years, Medicare, Medicaid and Social Security will need to support more individuals than ever before.

- "If you've met one Boomer, you've met one Boomer."

- The 2030 paradigm flip will have consequences.

- Responsible development and scaling of technology (AI) is clearly necessary to support caregiving.

LifeSpan

Membership At A Glance 2025

340

483	Total Members
326	Total Providers
144	Assisted Living
183	Nursing Facilities
37	Independent Living
23	Home & Community Based Services
13	CCRC
2	Affordable Housing
1	Acute Care
1	Individual Retiree
2	Government Associates
106	Business Associates
48	Parent Orgs

■ Independent Living ■ Assisted Living ■ Skilled Nursing
■ CCRC ■ HCBS ■ Business Associates

CRISP Post-Acute:
By the Numbers

- Tripled connections to ADC's in the past year

- Home health providers keep popping up everywhere, with 8 new organizations onboarded with CRISP so far this year

- 177 onboardings in the past four years

- 217 nursing homes connected to CRISP

- 159 nursing homes connected to RTMS

CRISP and RTMS

Key Stats

159 — Facilities Signed / Participating

217 — Total Maryland Skilled Nursing Facilities

~8,200 — Year to date Clinical Recommendations

82% — CTA Recommendation Acceptance Rate

Overview

- Data connectivity focus on quality and reporting to provide complete picture of care for all providers utilizing CRISP

- Clinical data delivered daily from facility EHR to CRISP HIE

- Remote RN serving as clinical technical assistant for clinical overview of residents daily

- Clinical education and guidelines to improve patient outcomes in Facilities

- Facility engagement through in person visits, clinical discussion, phone calls and ongoing contact

Clinical Programs & Education utilized to support facilities

Clinical Toolkits & Support Provided for:

- CHF
- Sepsis
- Aspiration Pneumonia
- Shortness of Breath
- GI Bleed
- UTI Surveillance
- COPD

Clinical Education Provided via:

- Education on Lifespan website
- Handouts sent to facilities
- Daily Emails to facilities
- Clinical Calls with facilities
- Monthly onsite visits to facilities
- Presentations at Lifespan Conference

Engagement From Facilities

We use the emails everyday to evaluate our high-risk patients

We print the CTA recommendations for our morning huddle with our physician

We look at every resident sent t us by the CTA, because if we don't that patient will return to the hospital in 48 hours

We appreciate that the recommendations are relevant and manageable for our facility

We loved meeting our CTA. We use what she sends everyday

I can take a day off and know that Real Time will find anything important and alert my staff

We look for the CTA email everyday to validate what we saw and pick up on things we might have missed

Deep Impact
In the Space

- Daily touches: 3.0 x 217 x 120 = **78,120**
    . . . And that's just Maryland nursing homes

- Acute Care, Primary Care and Post-acute care need to be more deeply connected with data, shared on a level field, in order for any and all providers to deliver the right care at the right time

- Continue to grow the numbers of post-acute providers connected to CRISP, sharing and receiving data with the rest of the continuum to improve the lives of those we serve.

Thank You!

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Questions?

Please take our survey

Training materials, recorded webinars, and patient education flyers can be found at: https://crisphealth.org/

CRISP Support

support@crisphealth.org

877-952-7477