

## Opportunities for Maryland Investment in Care Coordination

Activity	State-level	Regional-level	Local-level	Implementation Strategy
<b>Build/secure a data infrastructure to facilitate identification of individuals who would benefit from care coordination</b>				
1. Combine <b>existing</b> data sources for the purpose of identifying individuals who would benefit from care coordination	X			1. Use BRFA funds to fund CRISP to accomplish this activity
2. Secure <b>new</b> data sources. Specifically, request the use of Medicare patient-level data for the purpose of identifying individuals who would benefit from care coordination and chronic care management	X			2. MHA to coordinate hospitals to make a special request of CMS for access to Medicare data together with the State
3. Develop procedures and policies to <b>secure patient consent</b> for the sharing of data for purposes of care coordination	X			3. Use BRFA funds to secure contractor to develop patient consent process
4. Engage a vendor for the purpose of storing, cleaning and normalizing the Medicare data and other Medicare related data sets Maryland may be able to obtain	X			4. Use BRFA funds to purchase capabilities from an existing qualified vendor
5. Use data to <b>identify individuals</b> who would benefit from care coordination and chronic care management	X			5. Use BRFA funds to secure contractor to convene leaders in developing best possible approaches to stratifying patients based on needs for use by hospitals and other providers
<b>Encourage patient-centered care and patient engagement</b>				
1. Standardize patient consent forms	X			1-4. Use BRFA funds to secure contractor to convene providers and create standardized consent forms, health risk assessment, and care plan elements
2. Standardize elements needed in care plans	X			
3. Standardize health risk assessment elements	X			
4. Standardize elements in discharge summaries to aid transitions to LTPAC providers as well as home-based settings	X			

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5. Make key elements easily visualized through CRISP.	X			5-6. Use BRFA funds to have CRISP create easily visualized access to care plan data elements
6. Develop approach to identify patients with care plans through CRISP, together with identification of care managers and providers	X			
7. Develop processes to avoid duplication of resources across provider systems, including coordination of resources for health risk assessments		X		7. Use BRFA regional planning processes to avoid duplication of resources
8. Lead a state-level campaign to encourage individuals to 1) participate in care plans and 2) complete and share medical orders for life sustaining treatment	X			8. Ask HSCRC consumer engagement workgroup to assist in developing a plan and campaign for engaging patients and families in care planning and consents
9. Educate patients about care coordination resources and opportunities			X	9-10. MHA to lead effort for statewide education and coordination of efforts with support of consumer work group
10. For care coordination, first connect patients with providers with whom they have a relationship			X	
<b>Encourage collaboration</b>				
1. Facilitate collaborative relationships among providers, patient advocates, public health agencies, faith-based initiatives and others with a particular focus on resource planning, resource coordination, and training		X		1. Use BRFA funds to provide regional planning resources, including technical resources to support regional planning efforts 1. Work with DHMH to create web-based inventories of community services available in the State

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2. Facilitate somatic and behavioral health integration	X			2. Use BRFA funds to develop approaches that can be deployed on a regional and local level. Improve integration and deployment of community-based resources. Coordinate with dual eligible ACO efforts
3. Facilitate care integration between hospitals and long-term care/ post-acute services		X	X	3. Use BRFA funds to develop approaches that can be deployed on a regional and local level. Coordinate with dual eligible ACO efforts. Develop gain sharing/P4P approach. Develop limited demonstration approach for 3 day waiver.
4. Support practice transformation through technical assistance and dissemination of information on best practices	X			4. Use practice transformation grant funding (applied for)
5. Create standard gain sharing and pay for performance programs	X			5. Use BRFA funds to develop standard approaches to pay for performance and gain sharing opportunities in Maryland. Work in coordination with MHA approach for hospital-based services.
6. Encourage providers to take advantage of new Medicare Chronic Care Management payments	X			6. Use practice transformation grant funding (applied for) and encourage implementation.

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<b>Connect providers</b>				
1. Develop plans to connect community based providers to CRISP	X			1-4. Funding source TBD.
2. Develop plans to connect long term and post-acute providers (LTPAC) to CRISP. Develop approaches to meet needs of LTPAC.	X			
3. Purchase/develop applications to facilitate interoperability among providers' EMRs to make clinically relevant information available to providers	X			
4. Purchase applications to facilitate collection of EMR data to use for population health and outcomes measurement	X			