

## Our Vision for Community Information Exchange

Community Information Exchange (CIE) is an integrated network of health care and community services partners that use a shared language, a database of available resources, and an integrated technology platform to facilitate data sharing and care coordination. CIE is a component of the ACH vision for Community Based Care Coordination (CBCC), providing a technology platform that enables care coordination. CIE is consistent with the Washington's vision for Health IT (HIT) and the exchange of information between health care providers but focuses on addressing the disconnect between health care and community services organizations.

### CIE is More Than a Technology Platform

Our vision is to improve coordination and planning so that people receive appropriate services and supports to advance whole person care by strengthening linkages among clinical providers, social services providers, and the people they serve through community engagement and technology. CIE exists on a continuum from information flowing through traditional mechanisms to the use of emerging IT platforms. When ACHs use the term "CIE," it includes the use of a technology platform as well as all of the people, policies, processes and resources needed to make a CIE system work.

### Principals for the Development of a CIE

We believe the following five principals should guide the development of a CIE system in Washington:

1. Keep the client/patient at the center, improving care coordination, reducing disparities, addressing equity of outcomes, and contributing to client well-being.
2. Respect and protect client/patient privacy so that all, including the patient/client, feel secure and in control of sharing information.
3. Make the solution a low barrier and simple for end-users and clients/patients.
4. Exchange only information that will improve care and equity to avoid unnecessarily complicating the system and increasing privacy risks without sufficient value.
5. Relationships, community input, accountability, and engagement are key to success -- the technology aspects of CIE alone will not create collaboration or improved care coordination.

### Essential Components of a CIE System

Washington's ACHs have worked together to identify the following core components of a community information exchange system. Washington must develop a system that includes:

- Shared language: a common language that bridges clinical care and community services to enable effective and accurate communication;
- Resource Database: a searchable inventory of available resources and supporting services and information;
- Bi-directional closed-loop referrals – A component of a CIE that allows health care providers to refer patients to community services, community service providers to refer clients to health care providers and/or other community services, and for all service providers to know that the referral took place and the outcome of the referral.

Closed-loop referrals are a common, but not necessarily required, use case and CIE component. Other use cases might take the place of closed-loop referrals in some communities. Closed-loop referrals alone, without the other essential components, does not constitute CIE.

- Community network partners – Community-based services providers that participate in the CIE are listed in the resource database, send and receive referrals, and are represented in the longitudinal record (see the next page), that may include housing services, food services, transportation services, and other supports.
- Clinical network partners – Health care providers that participate in the CIE are listed in the resource database, send and receive referrals, and are represented in the longitudinal record (see the next page), that may include primary care, acute care, behavioral health, and mental health.

## Advanced or Future CIE Components

A more advanced CIE might also include the following components as CIE in the community matures:

- Longitudinal Record – A complete longitudinal record of the health care and community services sought and delivered for each individual client. The longitudinal record in a CIE is a history of the services and supports used by a client, and not necessarily a longitudinal *health* record.
- Analytics – Support for data analytics that can be used for process improvement and to demonstrate not only activity but improved outcomes.

## Community and State Support is Critical for CIE

Successful community information exchange systems also require that the state and communities support all of the following:

- process and data governance;
- community outreach;
- interoperability among partner systems;
- network operations;
- a concept of data ownership;
- accountability among network partners;
- network funding; and
- sustainability for the purposes of care coordination and efficient health care and community services information sharing.

## Community Engagement and Involvement

Engagement of communities and clients is also critical to the success of CIE. Washington must Engage clients/patients to ensure they understand the potential for sharing their information, how their information will be used, and how their privacy will be protected. Obtain consent to share information with appropriate network partners. Community service providers must also be engaged and supported in order to understand the capacity they have to participate in the CIE and to work with them to identify resource gaps and advocate for needed community investments. Lastly, outreach must be done with health care providers and payers to ensure they understand the value of coordination with and referrals to community services, understand the potential improvements for outcomes, and are willing to learn the system and spend the additional time/effort required for success.

## About Washington's ACHs

Washington's ACHs are an integral part of the state's Medicaid transformation efforts. There are nine ACHs covering the state, each serving a distinct region. Each ACH is unique yet they share a common approach to improving the health of their communities and transforming health care delivery. They are tackling complicated problems through cross-sector collaborations and investments in innovative approaches. Over the past four years, ACHs have led efforts to transform local health care systems, connecting health care and social services, and investing millions of dollars into providers and community partners. To learn more about Washington's ACHs, visit us at [www.washingtonach.org](http://www.washingtonach.org).