HIT Stakeholder Collaborative

July 23, 2026

Agenda

1. Governance Transition and Introduction to CSS
2. Overview of Key Platform Capabilities
3. Existing Initiatives
4. Future Initiatives
5. Discussion: Feedback and Suggestions

Governance Transition and Introduction to CSS

Governance Transition

Welcome to Rhode Island Health Information Exchange (Rhode Island HIE)!

Effective July 1, 2026, we are Rhode Island's state-designated Regional Health Information Organization (RHIO).

Rhode Island HIE is governed by CRISP Shared Services (CSS).

- CSS has provided the technology powering the state's HIE since May 2025.
- This transition brings RHIO and HIE services under a single organization.

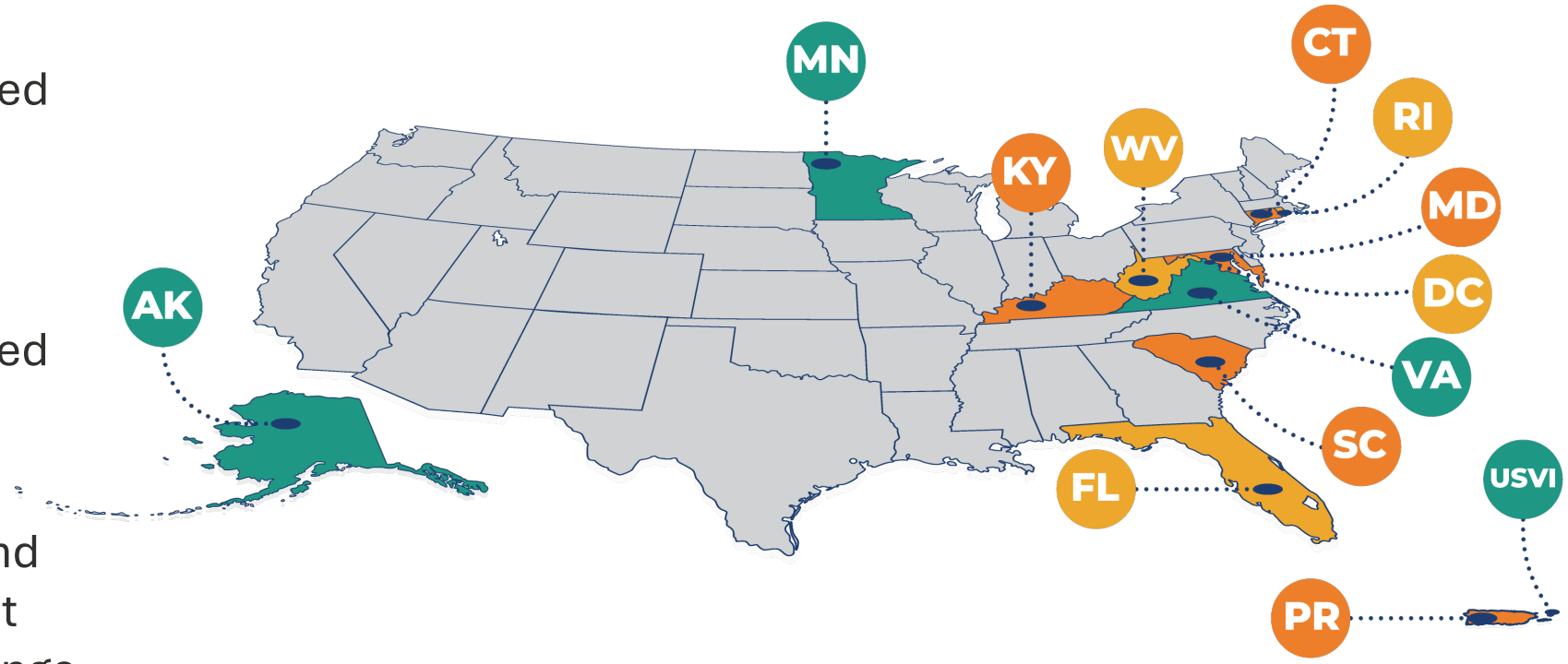
This transition welcomes Rhode Island into CSS's network of over 12 state and regional partners. Rhode Island will benefit from this shared services model through increased sustainability and reduced costs.

Introduction to CRISP Shared Services

Non-profit, mission-driven organization operating shared health data infrastructure across the country

Supporting 12 states and territories through centralized technology and localized governance

Multi-sector connectivity and petabyte-scale environment enabling secure data exchange, analytics, public health, care coordination, and Medicaid use cases



Overview of Key Platform Capabilities

Platform Data: Capabilities and Availability

Data Elements

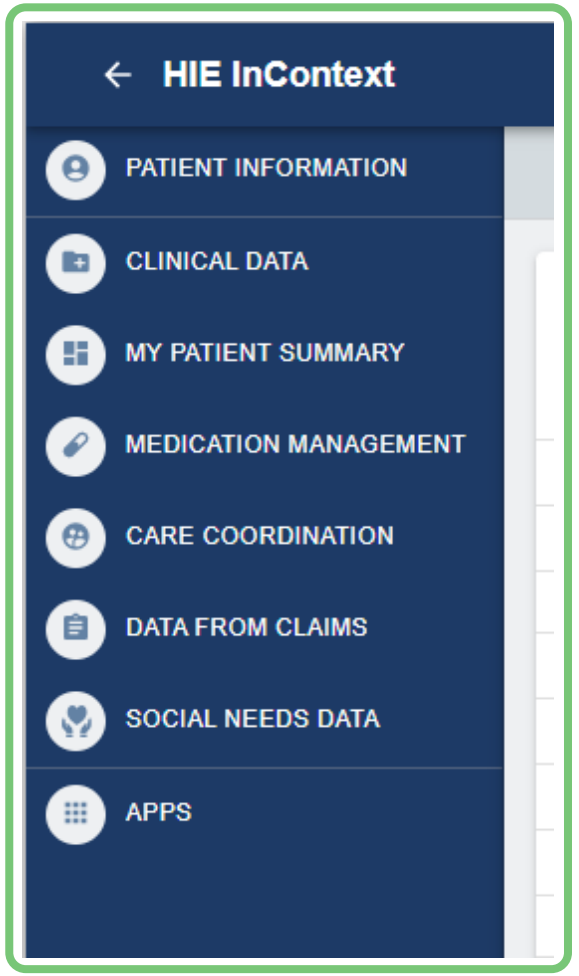
- Part 2 (with patient consent and provider credentials)
- National Networks
- Encounters
- Labs
- Radiology
- Discharge summaries
- Medications from CCDs
- Problems from CCDs
- Allergies from CCDs
- Immunizations from CCDs
- View Care Team
- Medications – dispensed
- Public health alerts to providers
- Referrals to community organizations
- Social needs assessments

Data Types

- ADT
- ORU (Lab)
- ORU (Trn)
- ORU (Rad)
- CCD
- Panels – Providers
- Panels – Payers
- Immunization Repositories
- Medicaid Panels
- Medicaid Claims
- EMS
- Public Health Panels
- Prescription Data

Point-of-Care: InContext & HIE Portal

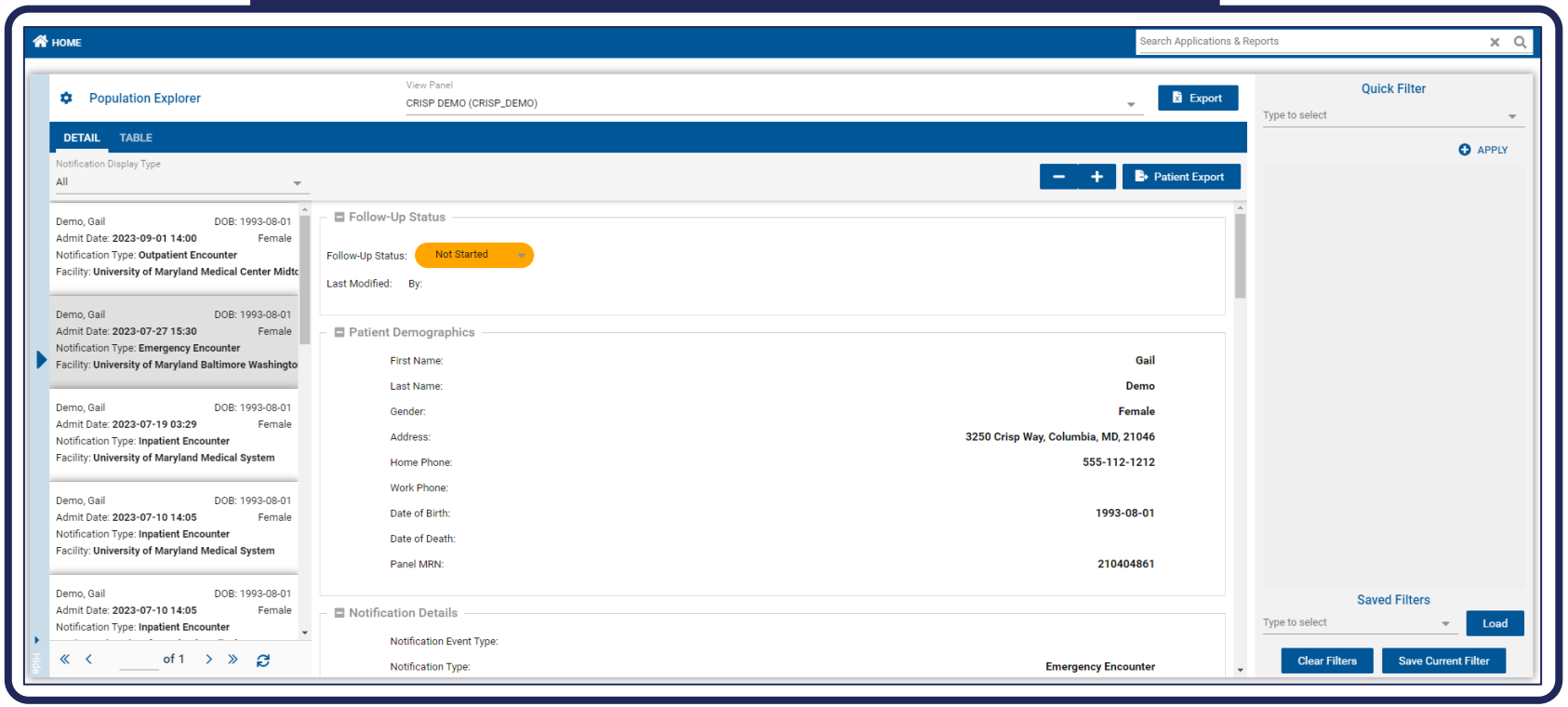
- **Demographics**
  - Next of Kin
- **Medication Management**
  - PDMP
  - Medications from CCDs
- **Clinical Data**
  - Encounters
  - Clinical Notes
  - Labs
  - Radiology Reports
  - CCDs
    - Problems, Allergies, Immunizations, Vitals*, Procedures*
- **Care Coordination**
  - Care Team
- **Claims**
  - Medicaid
  - Payers
- **Social Needs**
  - Referrals to community organizations
  - Social needs assessments
- **My Patient Summary**



Care Coordination: CEND & Population Explorer

- **Real-time alerts** to appropriate end users based on treatment and care management relationships via CSS Event Notification Delivery Service (CEND)
- **Interactive user interface** within HIE Portal or messages delivered into EHRs
- **Subscription information** (a patient's Care Team) is displayed at the point-of-care through HIE Portal or InContext
- **Delivery options:**
  - In web-based user application portal (Population Explorer)
  - HL7 real-time
  - Epic In Basket
  - Bulk extracts delivered on daily, weekly, bi-monthly basis

Population Explorer



CEND Platform: Offerings Available to All Participants

- Preventive Services:
  - Breast Cancer Screening
  - Colorectal Cancer Screening
  - Cervical Cancer screening
- Death indicator
- Mental health follow up
- High risk pregnancy
- LANE (low acuity non-emergent needs)
- Maternal Health - Complication of Pregnancy
- Maternal Health - Labor and Delivery
- Non-Fatal Overdose Alert EMS
- Non-Fatal Overdose Alert Hospital
- Potential Prediabetes Alert
- Readmission Emergency
- Readmission Inpatient

- Timely Follow Up Chronic Conditions Primary Discharge Diagnosis Only
- Timely Follow Up Chronic Conditions Primary or Secondary Diagnosis
- Chronic Kidney Disease (or CKD)
- Specialty Visit
- ED Pregnancy Alert
- Abnormal A1c
- Coming 2026: Childbirth Discharge
- Coming 2026: Childbirth and Hypertension
- End Stage Renal Disease (ESRD) Summary Rule
- High Utilizer Notification Rule
- Observation Status Alert Rule
- Notification Rule with Diagnosis Code
- Pregnancy Incoming Diagnosis Rule

Existing Initiatives

DAV and QRS Update

Current Status:

- CSS Policies and Procedures
  - Received DAV Certification 6/1/2026
  - 12-month certification
- Sources validated as of 6/1/2026 – January Cohort
  - 7 ORU (approx. 90% coverage for RI labs)
  - 8 CCD-A Outpatient care
- July Cohort (in progress)
  - 3 Outpatient Clusters – Athena, Nextgen & Greenway (specific sites still tbd – multiple sites per cluster)
  - 2 Inpatient – Brown, CNE
  - 1 ORU – Roger Williams Medical Center

Output:

- Design
  - All RI sources will generate output – will be DAV or non-DAV depending on certification
  - Output is in C-CDA format as certified by NCQA
- Panel based
  - Output is generated as the data comes in so new recipients can be added easily
- Currently Planned Recipients
  - NHP – technical meeting scheduled 7/28 – we are ready to send them data once their preferred method of receipt is confirmed
  - Medicasoft – Have exchanged sample files, currently collaborating with OHHS to onboard Medicaid panel prior to enabling production workflow

Behavioral Health and Consent

- **The Consent Tool** is a feature in the HIE Portal and the InContext app in your EHR that allows organizations to register a patient's consent to share sensitive health data—including 42 CFR Part 2
  - **This is a central, HIE-wide "global consent" covering disclosure from all Part 2 covered data sources in the HIE**
- With consent, RI HIE and CSS will be able to provide sensitive data at the point-of-care for authorized providers, significantly improving care coordination and supporting early intervention and timely follow up.
- **Key features:**
  - Capture, register and manage 42 CFR Part 2 consents directly within the HIE, including new electronic consents and attestation of existing paper consents.
  - Update consent status, expiration dates, and revocations while maintaining a complete consent history with printable records.
  - Register multiple patient consents at once using Bulk Consent to streamline high-volume workflows.
  - Easily identify patients with consented 42 CFR Part 2 data throughout the HIE using a visual indicator, supporting compliant information sharing.
- **Upcoming education and outreach program:**
  - Going live with several key Part 2 data sources over the next two months (Care New England, CCBHCs)
  - Provide robust educational materials to organizations, patients, and legal guardians to support facilitation of consent conversations
  - Upcoming webinars and office hours to learn more about capabilities, features, and operational considerations for sharing Part 2 and patient consent data with RI HIE

Case Study: United Services (CCBHC) - Connie (Connecticut HIE)

Challenge

- Limited visibility into emergency department utilization and post-discharge events.
- Need for earlier intervention and stronger care coordination for high-risk behavioral health patients.

How They Use the HIE

- Monitor emergency department utilization and readmission patterns.
- Identify high-risk patients in near real time.
- Use HIE data to drive population health surveillance and care protocols.

Impact

- Care teams intervene earlier to reduce avoidable ED utilization.
- HIE data identified a pattern of stroke patients being admitted to psychiatric inpatient care within 30 days.
- Developed new care coordination protocols to immediately engage community case management following a stroke.
- Improved communication, care planning, and support for patients with complex behavioral health needs.

> ***"If we see a certain client going to the emergency department several times a month, we're able to work with the care team to develop an intervention and determine what additional support the client needs outside of the emergency department."*** **— United Services**

Public Health – Priority Initiatives

- Rhode Island HIE and CSS are working hard to expand public health functionality, including comprehensive reporting and integration across state ecosystem
- OHHS and RIDOH prioritized projects with RI HIE:
  - State Labs integration
  - State Immunization integration
  - EMS and ImageTrend integration
  - CDC PHIG Grant: eLR and eCR
  - Medical imaging and PACS sharing
  - Dental initiative
  - Identify priority population health indicators and monitor across state
  - Registries:
    - Chronic Disease: Diabetes and Heart Disease
    - Cancer Registry
    - Vital Records and Newborn Screening

Future Initiatives

Leveraging the Full Scope of RI HIE's EHR Capabilities

InContext.

InContext is an EHR-based application that provides comprehensive, longitudinal HIE patient history without ever leaving your EHR – no separate portal or login required.

Why?
- Stay in your clinical workflow
- Reduce clicks and save time
- Access a complete longitudinal patient record
- Make more informed care decisions

Available Data:
- Labs
- Encounters
- Radiology Images & Reports
- Clinical Documents (including Allergies & Vitals)
- Claims Data
- PDMP & Medications
- Care Team
- SDOH
- Immunizations

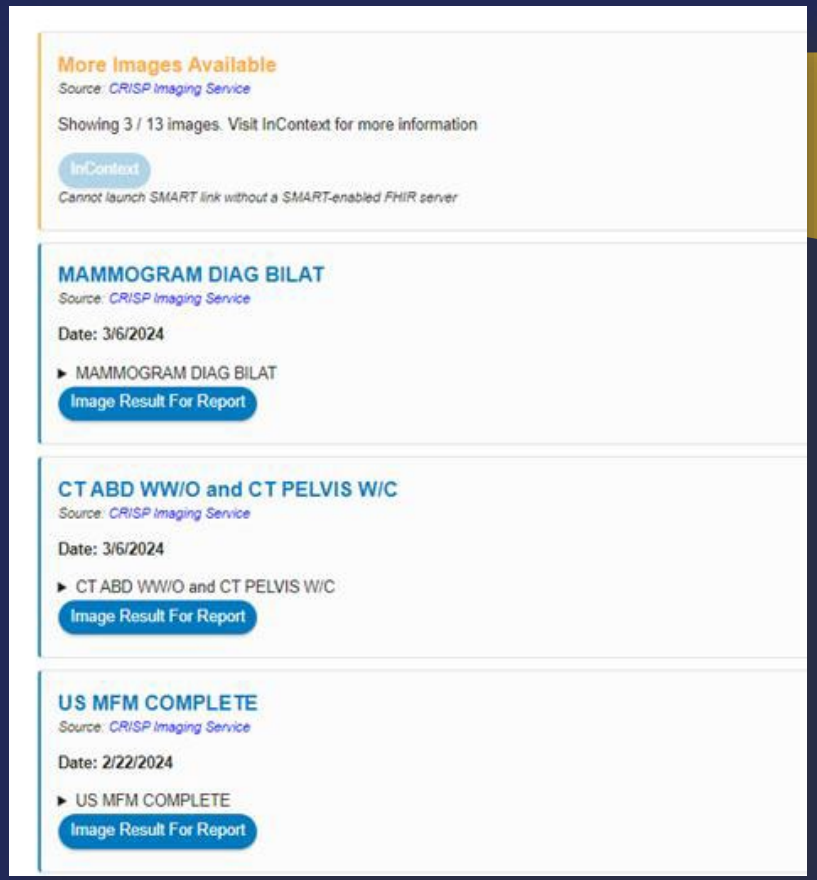
InWorkflow

InWorkflow delivers key and timely data from HIE directly into a user's EHR workflow. No passwords. No launching of an additional application. Just the data you need, directly when and where you need it.

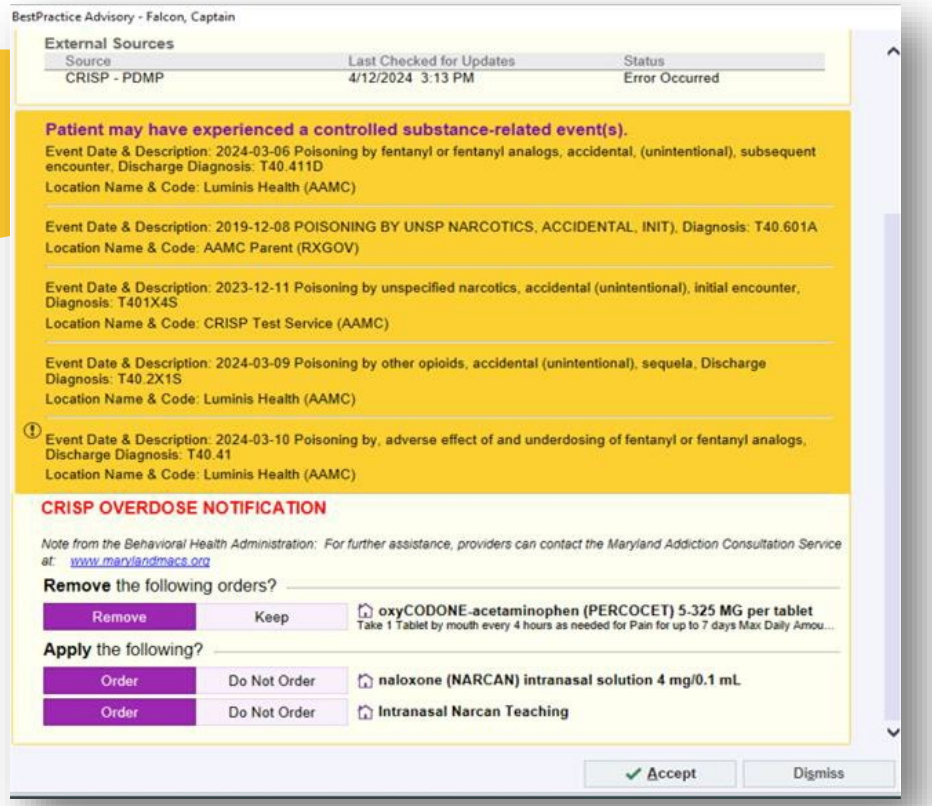
Why?
- Increases the review of relevant data and reduces unnecessary treatments
- Minimizes time clinicians spend searching HIE while still providing all the benefits of an HIE
- Completely customizable delivery and trigger configurations to meet the needs of unique organizations and providers

Example Use Cases:
- Imaging Reports
- Health Screening
- Best Contact Information
- EMS Patient Care Report
- Infection Prevention and Control
- Harm Reduction for Prior Overdose
- HIE Quick View
- PDMP

Imaging Reports in the Ordering or Chart Review Workflow



Harm Reduction in the Controlled Substance Ordering Workflow



Case Study: Luminis Health

OVERDOSE inWORKFLOW

- CDS Hook alerts surfaced during controlled substance order
- Up to 3 past overdoses displayed (HIE-sourced)
- Providers **prompted** to order Naloxone + education, or modify order - *with one click*

PDMP inWORKFLOW

- Embedded PDMP review (no portal login)
- Acknowledgment captured for audit trail
- Integrated with RxGov

In 2 Months:

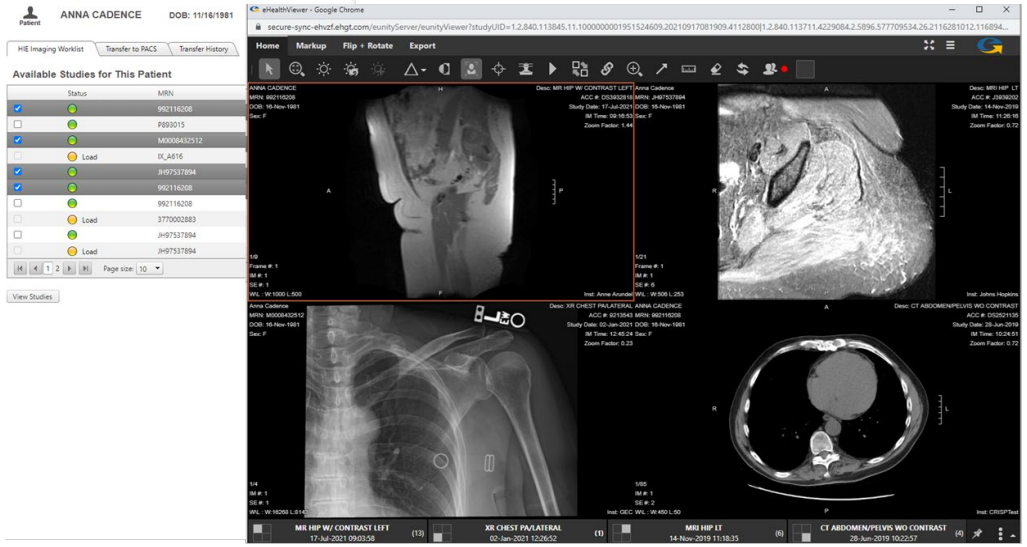
1. **100 overdose** alerts for **35 unique** patients
2. **20 naloxone** orders placed
3. **0 clicks** outside the EHR

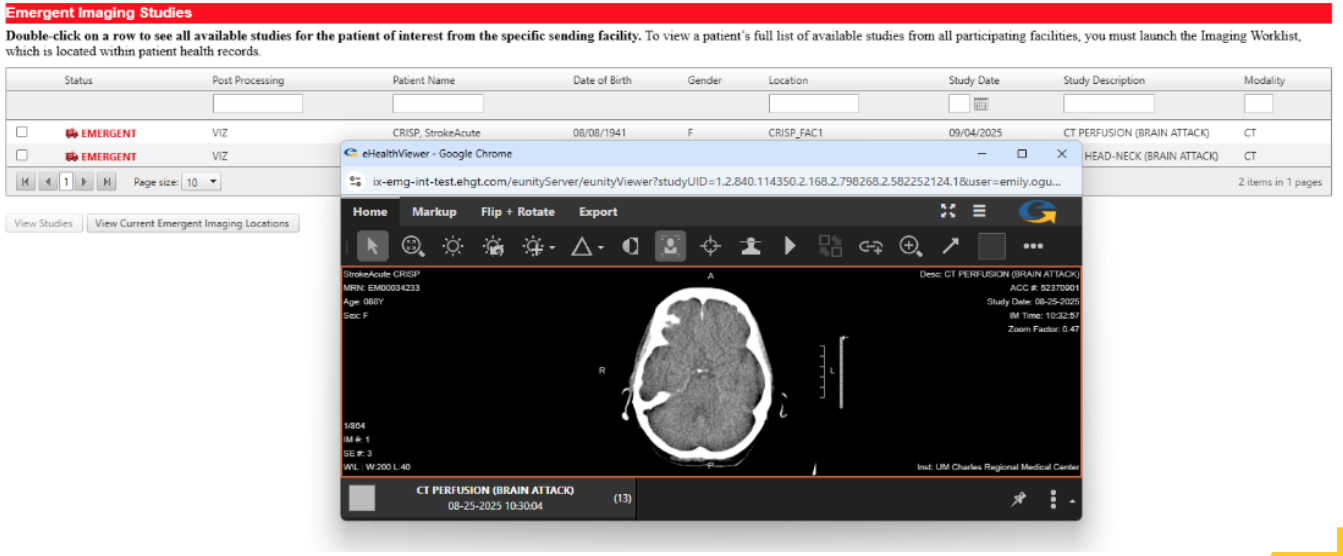
Image Exchange

- **Image Exchange** allows organizations to share their radiology and cardiology imaging studies and for those images to be viewed by users in full diagnostic quality through HIE Portal or InContext.

- **Functionality:**
  - Compare images from all organizations that contribute images
  - Review up to 20 years of historical images from participating sites
  - Transfer to PACS: Download external images from the Imaging Worklist to your local PACS
  - Auto-push workflows
  - View high resolution medical images in full-DICOM quality
  - Real-time image collaboration with eHealthViewer
  - Ability to measure, zoom, collaborate, flip, revert and rotate imaging studies

- **Emergent enables wet/unread stroke studies to be securely shared to a worklist that is available for authorized HIE users within minutes of an exam being performed.**





Open Discussion: Feedback and Suggestions

Appendix

DAV Validated Data Sources as of 6/1/26

CCDs

- Brown Outpatient
- CNE Outpatient (including RIPCPC sites)
- Athena – MDRI, University Ortho, Breakwater Primary Care, CharterCare Medical Group, Arches

ORU Labs

- Brown Hospitals – The Miriam Hospital, Rhode Island Hospital & Newport Hospital
- CNE Hospitals – Kent Hospital, Women & Infants Hospital
- Our Lady of Fatima Hospital
- Eastside Labs