



CRISP

Data and CRISP's Role in Pathways Grants

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CRISP's Role in Pathways

1. Provide pre-award data
2. Support and advise CHRC on grantee data collection
3. Supply Pathway's grantees and CHRC with data
4. Provide technical assistance to grantees



Data in Pathways Pre-Award

- In the RFP phase, CRISP worked with CHRC to provide public access to data files (“Public Use Files”) to support applicants as they prepare Pathways applications.
 - Health data files
 - Social Determinants of health data files
- Applicants could use these data files to identify specific disparities in their communities and highlight areas of need but were not limited to disparities identified in the data files.



Grantee Data Collection Support

- All grantees proposed process and outcomes measures in their proposals
 - Process measures – who is being helped with what interventions? How are those interventions implemented? How was the grant money spent?
 - Outcomes measures – what were the results of the interventions?
- To enable aggregation across grants, CHRC and CRISP developed standardized measures, but also allowed custom measures to reflect unique grantee activities



Examples of Grantee Data Collection Measures

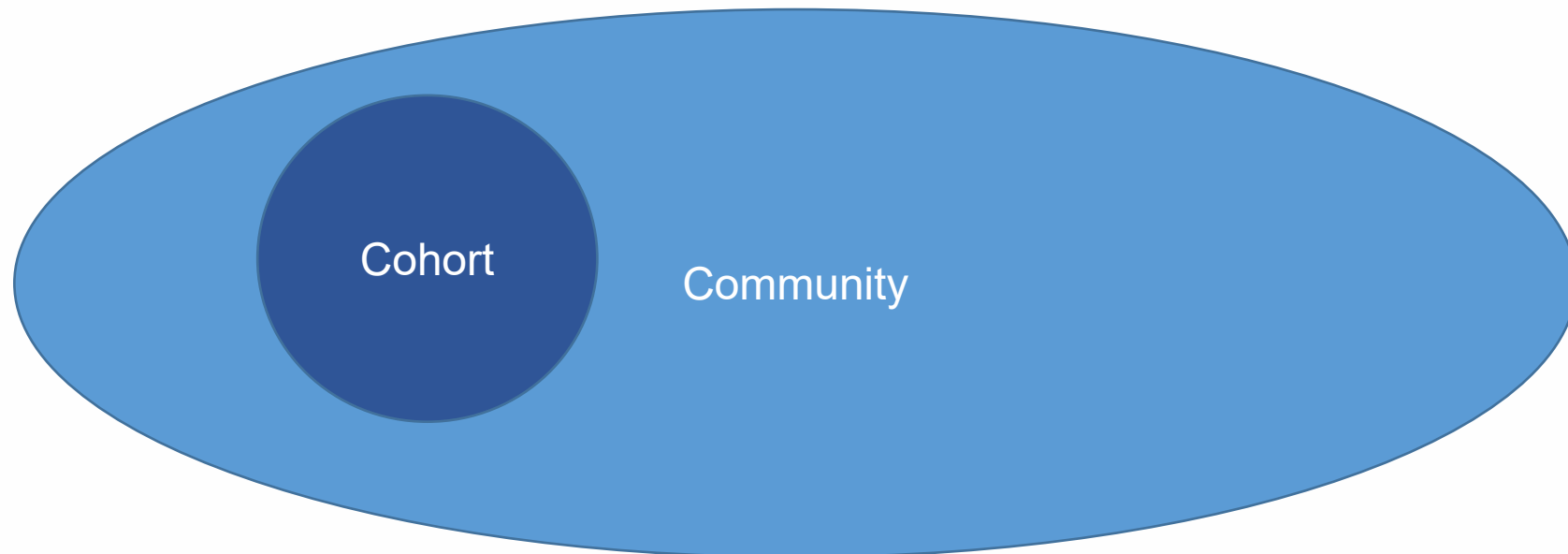
- Grantees have both standard and custom measures

	Standard (collected for all/most grantees)	Custom
Process	<ul style="list-style-type: none">-# participants receiving grant services (unduplicated) by race break out-# participants screened for SDOH needs	<ul style="list-style-type: none">-# of food insecure diabetes patients who receive fresh local produce.-# of patients who attend two or more care coordination support sessions.
Outcomes	<ul style="list-style-type: none">-# participants who achieve diabetic control	<ul style="list-style-type: none">-% food insecure diabetes patients who report increased consumption of fresh produce.



Pathways Approach to Data Collection

- Most Pathways grants have at least two components
 - More intensive interventions on specific group of participants (cohort/panel)
 - Programs to impact larger geographic communities (moving into HERC roles)
- Pathways grantees will collect information on services and outcomes (as possible) provided to both their cohorts and their broader communities





Support Grantees and CHRC with data

- CRISP can facilitate providing hospital utilization and cost outcomes data for supplied cohorts and geographic areas
- Examples of data:
 - ED visits for enrolled participants 6 mo. before and after program enrollment
 - Diabetes hospital visits per capita for zip codes before and after Pathways grant

Program Name	Chronic Conditions	Chronic Condition Operator
Test Panel Program (2)	All Patients	AND
Most Recent Payer	N/A	OR
All	N/A	

Percent of Members on the Panel with 1 or more Visits					
Time Period	Total Number of Patients with a visit - Pre	Total Number of Patients with a visit - Post	Total Number of Patients with a visit - Pre %	Total Number of Patients with a visit - Post %	Change in Number of Patients
1 Month	11	13	5.6%	5.6%	1.0%
3 Months	33	36	16.8%	18.3%	1.5%
6 Months	50	59	25.4%	29.9%	4.6%
12 Months	76	91	38.5%	46.2%	7.6%

Average Charge per Member						
Time Period	Total Number of Patients with at least 1 visit pre or post	Total charges - Pre	Total charges - Post	Average Charge per patient - Pre	Average Charge per patient - Post	Total Charges per Patients change
1 Month	21	\$37,991	\$9,918	\$3,454	\$763	(\$2,691)
3 Months	59	\$97,031	\$39,427	\$2,940	\$1,296	(\$1,645)
6 Months	87	\$208,536	\$223,663	\$4,179	\$3,791	(\$388)
12 Months	117	\$467,098	\$459,158	\$6,146	\$5,046	(\$1,100)

Total Number of Members on Panel that could contribute to analysis					
	1 Month	3 Months	6 Months	12 Months	
Total Number of Patients in Panel that could contribute to analysis	197	197	197	197	

Rate of Visits per 10 Members					
Time Period	Total Number of Visits - Pre	Total Number of Visits - Post	Rate of Visits per 10 patients - Pre	Rate of Visits per 10 patients - Post	Visits Rate change
1 Month	17	18	0.9	0.9	0.1
3 Months	55	57	2.8	2.9	0.1
6 Months	135	137	6.9	7.0	0.1
12 Months	282	327	14.3	16.6	2.3

Average Charge per Visit							
Time Period	Total Number of Visits - Pre	Total Number of Visits - Post	Total charges - Pre	Total charges - Post	Average Charge per visit - Pre	Average Charge per visit - Post	Total Charges per Visits change
1 Month	17	18	\$37,991	\$9,918	\$2,235	\$551	(\$1,684)
3 Months	55	57	\$97,031	\$39,427	\$1,764	\$692	(\$1,072)
6 Months	135	137	\$208,536	\$223,663	\$1,548	\$1,633	\$85
12 Months	282	327	\$467,098	\$459,158	\$1,656	\$1,404	(\$252)

Public Health Dashboard Utilization Map

The utilization map allows you to visualize various quality, financial, and utilization measures by county or zip code for your population of interest. For example, you can visualize the ED encounters per 1000 for pediatric asthma by zip code to identify areas that are most impacted.

Geography:

Measure:

Utilization:

Month of Discharge Date:

Conditions:

Hospital Name:

High Need (Last 12 mo):

Payer:

Prevention Quality Indicators:

Service Line:

Demographics

Age Group:

Race:

Ethnicity:

Gender:

Visits:

© 2022 Mapbox © OpenStreetMap

State	Visits	Patients	Charges	Population	Selected Measure
20601	53,977	20,997	\$208,586,295	24,156	53,977
20602	70,112	26,591	\$243,893,301	24,985	70,112
20603	55,510	22,552	\$208,694,326	28,967	55,510



Technical Assistance

- One-on-one meetings with each grantee
- Joint CHRC/CRISP biweekly Technical Assistance calls with all grantees to discuss common topics among grantees, including:
 - Walk-through of CRISP Pre-Post Report (5/4)
 - Commonly asked questions about data collection
 - How to upload panel to CRISP