Clinical Activity History (CAH) Service Overview

**What is the Clinical Activity History Service?**
HealthShare Exchange (HSX) developed its Clinical Activity History (CAH) service to further enhance the ability of providers to receive recent medical history on their patients. Based on payer claims data, the service gives practitioners a summary of a patient’s recent encounters with healthcare providers. HSX has deployed the CAH service in emergency departments and is ready to expand its use in ambulatory practices and skilled nursing facilities.

**How does a provider access a patient’s CAH?**
The service is initiated by a push notification when a facility/practice sends real-time registration or admission information to HSX. With this information, HSX polls the payer tied to the patient’s insurance. The payer produces a clinical activity history for the individual. In most cases, HSX packages this CAH and sends the document as an attachment to a provider via Direct secure messaging.
Elements of the CAH Report

The clinical activity history document contains a payer’s summary information on a patient, including these contents:

- patient demographics
- patient's primary care physician
- Detailed prescription drug list (past six months)
- ED visits (in past year)
- disease conditions (past two years)
- primary and outpatient procedures (past two years)
- office visits and specialists seen (past two years)
- diagnostic imaging (past two years)
- inpatient admissions (past four years)
- immunizations (past four years)
- lab results
- alerts by condition

CAH Benefits

The CAH service has the potential of lessening some of the challenges to care coordination. The information provided in CAH documents can assist providers with identifying:

- a more comprehensive medical history on a patient who may have difficult recounting this information and may utilize multiple hospitals and providers for care;
- previous tests performed, with results;
- list of current medications (also helpful in preventing potential drug interactions and identifying patients that may be seeking prescriptions for controlled substances);
- and high utilizers of emergency-based care.

Access to such information makes for more-informed care and will likely result in better-targeted treatment. This improved quality of information can have a positive impact on outcomes through a reduction in duplicate or unnecessary admissions, tests, medications, and therapies.

To join the HSX membership, email: info@healthshareexchange.org