# SHARP Function Checklist

Decision Points for CBOs Considering Working with Social Health Access Referral Platforms

Health plans, systems and providers are increasingly using Social Health Access Referral Platforms (SHARPs) to refer their members/patients for social services to address identified gaps in social determinants of health (SDOH). Some potential benefits to health care entities in using these platforms include:

- *Access to lists of community-based organizations (CBOs) in a geographic area providing services that are needed by members/patients*
- *A simple way for health care entities to refer members/patients to CBOs for services*
- *Ease of documentation—the potential to generate a closed loop to document the action taken on referred needs*
- *Data on outcomes from specific social services to help guide the development of annual bids and benefit packages*
- *Data on the availability of resources and, potentially, where to invest in developing services to fill gaps in the community*
- *An easy way for members/patients to self-refer and access services*
- *A one-stop resource that can be used by health plans, providers and social services staff.*
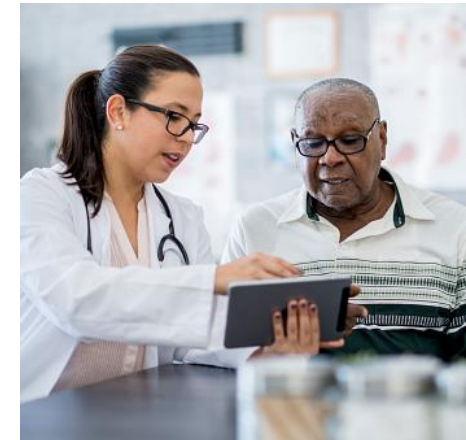
The tool that follows is designed to help CBOs that are already beginning to work with SHARPs or those that may be considering working with SHARPs in the future by providing information on the issues and impact that working with a SHARP may have on your CBO.

Your CBO may not always have a choice when it comes to working with a SHARP. Contractual obligations with a health care payer or through your state may dictate which one is used and how involved your CBO will need to be. Using this tool can prepare your CBO for informed discussions with both health care payers and SHARPs.

BASIC DECISION POINTS

Platform Function	Consideration	Yes/No	Notes
Overall Capabilities	Does the platform offer services related to referrals and access to data to which your CBO doesn't currently have access yet needs?		
	Does the platform provide interoperability capabilities such as an Application Programming Interface (API) with HL-7[i] or FHIR[ii] capability standards (industry standards for sharing health information) to facilitate communication between the API and software tools that your CBO does not currently have?		
	Do the advantages of working with a SHARP outweigh any identified challenges or costs associated with its adoption?		
	What would your CBO "gain" or "lose" by adopting use of the referral platform?		
	If the SHARP is approaching your CBO, has it indicated whether a payment mechanism will be in place that will pay your CBO for services provided as a result of referrals made through the platform?		
	Does the SHARP provide an opportunity for your CBO to provide meaningful input on its operation and workflow?		
	Is it possible to customize aspects of the SHARP to meet your CBO's needs?		
	Does agreement to use the SHARP entail any required additional agreements with other parties (e.g., the specific health plans or systems using the platform)?		
	Is the SHARP interested in specific services offered by your CBO?		
	If the SHARP is interested in only a few of your CBO's services, is the platform willing to discuss broadening its scope to include all of your CBO's services?		
	Which organization is responsible for assessing the needs of referred individuals? Your CBO? The payer? Another party?		

Platform Function	Consideration	Yes/No	Notes
Overall Capabilities Continued	Does the platform provide your CBO with any context around the client's overall needs or access to the referred individual's care plan?		
	Would use of the SHARP provide your CBO with a competitive advantage?		
Payer Requirement	Is use of the platform contractually required by a current or potential health care contacting partner or your state?		
Payment	If the SHARP is approaching your CBO, has it indicated that there will be a payment mechanism in place that will pay your CBO for services provided as a result of referrals made through the platform?		
	Is that payment sufficient to cover your agency's costs related to service delivery? Does this payment include a reasonable margin?		
Network Definition and Considerations	How does the platform define its network?		
	How does the SHARP relate to existing networks that your CBO may lead or already be part of?		
	Would use of the SHARP conflict with any of your CBO's existing business arrangements?		
	Would there be any impact on your CBO if the referral platform created a closed network that didn't include your CBO?		
	Are any of your CBO's partners already using the referral platform? If so, what has their experience been?		
	Are other CBOs (including competitors) in your community or state adopting and using this platform? Why/why not?		
	What is the relationship between the SHARP and existing 211, No Wrong Door/Aging and Disability Resource Center and/or other Information & Referral/Assistance systems in your community or state?		
	Can your CBO's interface with the SHARP be mapped to reflect your CBO's requirements and process to make and receive referrals internally? Within your network of providers?		

Platform Function	Consideration	Yes/No	Notes
Network Definition and Considerations Continued	Does the SHARP offer a consistent process for enrolling CBOs as part of a formal payer or provider network?		
	Does the platform offer a consistent process for enrolling CBOs for the purpose of contracting as service provider to receive reimbursement?		
	Is the platform requiring your CBO to provide information on your network of service providers? If so, are they paying you for this valuable information? Is your relationship with these service providers protected?		
	Does the SHARP require your CBO to accept exclusivity arrangements with the platform, health plans or systems?		
	Does the SHARP have any expectations that may require your agency to assign staff to handle referrals exclusively for the platform, particular health plans or systems?		

TECHNICAL DECISION POINTS

Platform Function	Consideration	Yes/No	Notes
Dual Documentation/ Workflow Alignment	Does the SHARP easily interface or align referral workflows and processes with your CBO's existing systems?		
	Is dual documentation necessary when using the SHARP(s)?		
Multi-Platform Market Presence	If multiple platforms are available in your market, which one(s) make the most sense as a potential partner?		
	Which, if any, of your existing customers are using the platform(s)?		
	Which, if any, of your existing health care contracting partners are using the platform(s)?		
Closed Ecosystem/Service Blocking	If your CBO chooses not to participate with a SHARP, does that block your services from being used by the SHARP's participants?		
Data Ownership	Who owns the data that your organization enters into the platform? Your agency? The platform? The health care organization with which the platform is contracting?		
Data Sharing, Privacy and Consent	What is the platform's policy related to data sharing and consent?		
	Is the platform's data sharing policy consistent with the HIPAA standards and state laws with which your organization must comply, including any new standards that may be applicable based on the referral's source (health plans or systems)?		
	Can a CBO that is using the platform but not providing care tied to a specific referral still view all information tied to that individual?		

Platform Function	Consideration	Yes/No	Notes
Service Capacity Tracking	Does the platform provide a tracking mechanism to identify supply and demand for the services your agency provides?		
	Does the platform provide a mechanism for non-traditional traditional health care delivery services?		
	What mechanism or feature does the platform offer to assist CBOs in declining a referral or forwarding it to another CBO in the network?		
Shared Outcome Measurement	Does the platform use measurable outcomes to evaluate the overall impact of programs?		
Individual Profile View	Does the platform provide an individual client profile with drill-down capabilities to better understand the client's health status, social supports, benefits, care plan, other services and service providers as well as other social services needs?		
Population or Case View	Does the platform provide a population view?		
	Does the platform(s) allow your CBO to drill-down to population subsets and track case loads?		
Administrative View	Does the platform provide useful administrative views? For example, can your CBO view across the entire platform customer base, across a specific geographic region, CBO group or network; or only across your CBO, your assigned case workers, etc.?		
Multilingual Capability	Can platform information be displayed in multiple languages?		

Platform Function	Consideration	Yes/No	Notes
Interface & interoperability *Application Programming Interface (API) connectivity*	Does the platform have back-end interface capabilities to different types of platforms (Electronic Health Record, Community Based Organization, Care Management, Population Health, Behavioral Health etc.)?		
	Does the platform have single sign-on (SSO) capability, etc., and data integration where appropriate (e.g., with care plans)?		
	Does the platform meet HL7 standards? (*HL7 specification documents provide the framework in which to communicate patient information between health care organizations.*)		
Reporting	Does the SHARP have built-in standard reports? Can your CBO build its own standard reports in the platform?		
	Does the SHARP give your CBO the ability to customize reports? By organization? By client? By case worker? By source? By service type? By ZIP code?)		
	Does the platform provide standard operations and other business intelligence reports by organization, service and/or ZIP code?		
	Does the platform have performance tracking by service, access and cost savings? Does the platform provide other Return On Investment (ROI) related reporting?		
Preferred Referral	If the platform identifies service providers as "preferred providers," does it do so by both service type and provider type?		
Real-Time Referral Loop Tracking	Does the platform maintain real-time end-to-end referral tracking by user, such as referral made, by whom, when and outcome)?		
	Does the platform include task management with timeframes and scheduling?		

Platform Function	Consideration	Yes/No	Notes
Referral Tracking Process and History Tracking	Does the platform track acceptance or rejection of service requests by maintaining historical end-to-end referral tracking by customer such as referral made, by whom, when and outcome?		
Updated Resource List/Guide	Does the platform provide a resource listing by categories of social determinants?		
	Is there a process in place to ensure that resources listed on the platform are regularly updated?		
	Can a CBO filter the network so that only its preferred partners are visible for referrals?		
	Does the platform allow your CBO to customize resource listings?		
Appointment Tracking	Can your organization track appointments by end user (e.g., by care manager or service recipient) or calendar in system?		
e-Prescribing/ Ordering Process	Does the platform have e-prescribing or order capabilities from clinicians, non- clinicians, customer) so these clinical providers can order or "prescribe" SDOH related services?		
	What e-prescribing or ordering information is transmitted with the referral to a provider from your CBO?		
Screener/ Assessment Capabilities	If standard screening tools and assessment capabilities are included on the platform, does your agency have the ability to customize them for use with the end user population or other standards (e.g., specific assessment tools your agency uses)?		
ICD9/10 Information for Condition Diagnoses/Billing Codes	Does the platform track and provide diagnosis data and related information?		
	Where applicable, does the SHARP support and align diagnoses codes with service and billing codes? (For example, a diagnoses of food insecurity may lead to service—and billing—codes for nutrition counseling, food pantry service options, meal delivery options, etc.)		

Platform Function	Consideration	Yes/No	Notes
Data Security Capabilities	Does the platform meet all security requirements (HIPAA, 42 C.F.R. Part 2 protections; HITRUST certification, etc.)?		
	Does the platform include secured log-in/credentialing for all users?		
	Does the platform's data storage, redundancy and related disaster recovery standards meet your CBO's (and your payers') minimum standards?		
	Is the platform's data stored in the U.S.?		
Customer Consent	Does the SHARP document consent for use/sharing of data for both protected health information (PHI) and PHI-related information? Does the platform meet all government and payer minimum consent requirements?		
Education, Training and On-Call Support	Does that platform provide users with required education and training on how to use the platform and its features?		
	Is there 24/7 support available for the platform—either through call center support, online support or some other method?		
Service Preference	Does the platform use machine learning[iii] or some other data scraper[iv] to feature or remind users of preferred services by individual organization or organization type (e.g., specific population subset such as those who are dually eligible for Medicare and Medicaid)?		
Patient/Member Access	Can patients/members and caregivers (with permission) access the system and see their profiles to view/update records?		
Service Listing	Does the platform list all services supported either through direct or indirect referrals?		

Platform Function	Consideration	Yes/No	Notes
Real-Time Resource Directory	Can CBO staff look up available community resources in real time using either ZIP code or service category (e.g., housing, food, utilities assistance)?		
Documentation Process	Does the platform outline its documentation process?		
	Does platform documentation note a potential double entry burden?		
Mobile Apps and Offline Access	Is the platform designed and optimized for mobile/tablet use?		
	If your agency serves areas where broadband and cellular internet access may not be available, does the platform offer offline access and automatic uploads when your staff/service providers are back online?		
Closed Loop Referral	Does the platform allow for referrals to be marked as open, closed, sent, rejected or other status by the organization?		
	Does the platform allow users to make referrals based on a program/service type offered by another organization?		
Case Load Management (by Role)	Can the platform be customized by organization, user or role? (e.g., by care manager, community health worker to see specific content or individual caseloads)?		
Referral Supply/ Demand Control	Can your CBO set limits within the platform to communicate with other CBOs the number of service referrals that you have available?		
	If needed, can your CBO set referral limits within the platform for other CBOs (e.g., for pilot testing purposes, because of quality concerns, etc.)?		
	Is the platform vendor offering any volume projections/guarantees or service line preferred status or exclusivity for your CBO?		

Platform Function	Consideration	Yes/No	Notes
Credentialing & Enrollment	Does the platform provide a framework for credentialing or an equivalent model to validate a CBO's capability, experience, expertise, legal standing, certification, etc.? If so, does it also include reminders when updates are needed?		
Accreditation	Does the platform require any certifications for specific SDOH-related services in which a CBO must demonstrate specific core competencies and compliance standards? These certifications may come from accrediting bodies such as the National Committee for Quality Assurance and URAC.		
Quality	How does the platform vendor assess quality and what analysis, information or reporting is offered to help your CBO measure and improve performance?		
	Does the platform have any quality and performance standards? How might those benefit or damage your CBO's reputation?		
	What are the consequences for CBOs that underperform in the SHARP's network? If yes, how do these requirements benefit or threaten your CBO?		
Costs	Is the referral platform asking your CBO to pay to be in its network or for access to its software or other services? Do the benefits (payment for services, data, etc.) to your CBO outweigh these costs?		
	Will your CBO need to acquire any new technologies or related services to access and participate on the referral platform? Do your CBO's benefits (payment for services, data, etc.) outweigh these costs?		
Legal	What legal/contractual requirements and obligations does the platform require?		
	Has your CBO reviewed the contracting requirements with your lawyer, insurance professional and/or your risk management expert? Are the risks identified acceptable and management within the context of benefits of the contractual relationship?		

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[i] https://www.hl7.org/about/faqs/
[ii] https://www.hl7.org/fhir/
[iii] Machine Learning is the use of computer algorithms to automatically improve an activity through both experience and the use of data.
[iv] Data scraping is the term for importing information from human-readable data outputs from other software. Often used in pulling data from websites, such a tables or lists.