UNDERSTANDING THE CLOSED-LOOP REFERRAL SYSTEM (CLRS) LANDSCAPE IN NEW MEXICO

Prepared by the New Mexico Social Drivers of Health Collaborative

What is a CLRS?

A closed-loop referral system allows healthcare providers, community organizations and health plan staff to screen community members for social needs like food insecurity or housing instability. If needs are identified, a secure, electronic referral is sent to organizations that can meet those needs through a HIPAA-compliant technology platform. Once a community member receives care, the service organization "closes the loop" by updating the shared platform with the referral outcome (Presbyterian, 2023).

How CLRSs Benefit our communities?

Closed loop referral systems help tracking referral programs in real time, improving coordination between healthcare and community partners, ensuring individuals receive the services they were referred to and providing date and measurable outcomes for programs and funding.

OUR ROLES IN CLOSED LOOP REFERRAL SYSTEMS

CLRS FACILITATORS

FEDERAL AGENCIES

Role

- Support implementation, evaluation and sustainability of closed-loop referral systems in addressing SDOH and health-related social needs to identify best practices and improve health outcomes
- Use data to foster hospitals, health insurance, private sector, philanthropic organizations, and community- and faith-based organizations investment in addressing SDOH
- Reduce barriers to using grants to address SDOH
- Promote initiatives to expand funding for SDOH health-related social needs interventions (AMA, 2025)

STATE AGENCIES

Role

- Implement a statewide CLRS as a comprehensive solution to refer, provide, and track a wide array of public health, social and economic services across the State for Medicaid and other underserved populations.
- Establish standardized CLRS definitions and functions for all systems to follow.
- Work with community partners and other state agencies to offer services that improve access to care, promote health and wellbeing, and reduce health emergencies.
- Provide governance, funding, standards, technology, and training.

CLRS TECH PROVIDERS

Role

- Support Technology and EHR integration
- Establish workflow configuration including referral workflows, automated routing, notification and service categories.
- Onboard community partners by adding them to the referral network with appropriate user roles and access permissions
- Provide analytics and reporting through dashboards with information about referral performance, completion rates and service outcomes
- Ongoing support for platform management and user training.
- Ensure equitable access to data.

MANAGED CARE ORGANIZATIONS (MCOS)

Role

- Develop CLRS functionality and provide program support
- Use the CLRS for member referrals by the MCO's Care Coordination and Care Management staff
- Assist in developing program-specific referral workflows and provide technical assistance (TA),
- Conduct outreach and support for onboarding providers,
- Engage community-based organizations in the CLRS participation.
- Support efforts to increase provider participation in CLRS.
- Articulate the potential benefits of the CLRS with CBOs.

COUNTIES/ COUNTY HEALTH COUNCILS

Role

- Build and manage networks of CBOs and other organizations.
- Validate local resources.
- Coordinate with health care providers to support screening, navigation, and delivery of health-related social needs services.
- Engage in a broader ecosystem of partners, including health insurance plans, local government, and child & family supports, to provide support to Medicaid members.
- Utilize technology platforms to facilitate referrals, enable reimbursements for CBOs, and track outcomes, and align with the goals of the 1115 demonstration waiver.

FEDERALLY QUALIFIED HEALTH CENTERS/CLINICS

Role

- Ensure necessary documentation in place and understand requirements for participation in the CLRS.
- Receive training and clear directions for how to make referrals and build understanding of who is eligible for services that could be available to them.
- Screen patients for social needs and referring patients.
- Track outcomes to ensure community members receive support.
- Participate in ongoing opportunities to strengthen use of CLRS.

COMMUNITY BASED ORGANIZATIONS (CBOS)

Role

- Ensure necessary documentation and resources in place and understand requirements for participation in the CLRS.
- Ensure CBO has a National Provider Identifier (NPI) number and/or contract with MCO to be able to bill Medicaid for relevant services.
- Integrate social needs screening into electronic health records.
- Send and receive referrals for appropriate services.
- Track outcomes to ensure community members receive support.
- Participate in ongoing opportunities to strengthen use of CLRS.

MEDICAL/BEHAVIORAL HEALTH PROVIDERS

Role

- Ensure necessary documentation in place and understand requirements for participation in the CLRS.
- Receive training and clear directions for how to make referrals and build understanding of who is eligible for services that could be available to them.
- Use CLRS to connect patients to community and nonprofit organizations and coordinate services.

NAVIGATORS/CHWS/ CHRS/CARE COORDINATORS

Role

- Ensure necessary documentation is in place and understand requirements for participation in the CLRS.
- Receive training and clear directions for how to make referrals and build understanding of who is eligible for services that could be available to them.
- Use CLRS to assist patients in connecting and receiving services from community and nonprofit organizations and coordinate services.

KEY KNOWLEDGE HOLDERS/CONTRIBUTORS /SYSTEM USERS

HEALTH INFORMATION EXCHANGE

Role

- Enable secure and standardized data exchange across EHRs, referral systems, and community platforms while maintaining compliance with healthcare regulations.

PUEBLOS, TRIBES AND NATIONS

Role

- Participate in government-to-government decision-making around CLRS.
- Lead the establishment of the data sharing standards, agreements and ensure protection and ownership of data.
- Guide the resources listed in any CLRS specific to Indigenous peoples.

NMSDOH COLLABORATIVE

Role

- Support the development and implementation of a community-driven, coordinated, closed loop health and social service referral system/s that meets the needs of our local communities.
- Provide members opportunities to participate in continuous quality improvement and management of the state CLRS.

COMMUNITY MEMBERS

Role

- Use the closed-loop referral systems available to connect to services.
- Provide feedback on usefulness of services.