



**California Health & Human Services Agency  
Center for Data Insights and Innovation  
Data Exchange Framework  
Digital Identity HIO Focus Group Meeting #1  
Chat Log (1:00PM – 2:30 PM PT, January 28, 2022)**

**The following comments were made in the Zoom chat log by HIO Focus Group Members and the public during the January 28th virtual meeting:**

13:35:09 From Alex Horowitz to Everyone:

Jim, does New York require a standard demographic dataset to be maintained by all New York State RHIOs, or are they able to define their own local methodologies?

13:36:01 From Bill Beighe to Everyone:

Alex mentioned USCDI - and I think leveraging standards are key - but what version of USCDI is needed to support patient matching

13:38:49 From Alex Horowitz to Everyone:

I agree Bill that that is an important question...do we just rely on the demographic dataset (relatively static) or think about other data elements that are slated to come out in future versions of standards like USCDI as ways to establish identity

13:41:51 From Alex Horowitz to Everyone:

Kate, I think the notion that certain state agencies are stewards of specific pieces of information that could have an outsized impact on the ability to establish individual identity is an excellent point.

13:42:41 From Kate Horle to Everyone:



13:44:52 From Lori Hack to Everyone:

Also, want to highlight Ako's point about the duplicate records. I was initially refused for my covid booster today from Kaiser as they showed I had 4 shots already. Some how two prior were duplicated in my medical record.! Source of truth is key.

13:45:46 From Bill Beighe to Everyone:

I suspect that USCDI ver 1 compliance with the current accurate demographic elements completed will permit accurate matching. The challenge comes in when basic errors are introduced. Like switched FN LN. Do we expect the systems exchanging data to be smart enough to make the match. Or does comparing the record against a MPI to do the matching and be the source of truth

13:47:12 From John Helvey to Everyone:

First Name

Last Name

Middle Name (including middle initial)



- Suffix
- Previous Name
- Date of Birth
- Race
- Ethnicity
- Sex (Assigned at Birth)
- Preferred Language
- Current Address
- Previous Address
- Phone Number
- Phone Number Type
- Email Address

13:47:39 From Alex Horowitz to Everyone:

Thanks Bill, I agree. Is it a part of the "Standard" we are working on include holding participants accountable for ensuring the accuracy and/or quality of the data they submit?

13:47:49 From Kate Horle to Everyone:

John, are these SacValley's elements?

13:48:07 From Kate Horle to Everyone:

or the minimum elements needed in your opinion?

13:49:53 From Bill Beighe to Everyone:

We have some fundamental issues to work on, please also consider SOGI, Pronouns, accurate REL, etc. These advanced considerations may make things too much, but we need to be forward looking

13:50:46 From John Helvey to Everyone:

There has to be a requirement at the place of service, clinics, hospitals, urgent care, mental health, social services, CBO's, etc... We are only stewards of what we receive from our members.

13:51:13 From Lori Hack to Everyone:

Agree with Alex. The P and Ps, data governance rules and training are key for this to work. The CHIA folks have been addressing this to try to ensure that the corrections and checks are done in a standardized manner too.

13:52:00 From John Helvey to Everyone:

@Kate those are from USCDI v1, however we can search on those at SVMS.

13:52:53 From Kate Horle to Everyone:

100 percent, Lori, The P&P and the governance, ultimately, will make all this work. and, a shared agreement on standards inside of the systems, Medicaid and the payers is the icing on the cake.

13:53:12 From Bill Beighe to Everyone:

Address considerations that drive me nuts - Does someone arrested - in Jail for a night or two get the Jail address? How do we record addresses for homeless, foster care etc.

13:53:56 From John Helvey to Everyone:

@Kate however, we can only search on what we are sent by the member. We do need to stance on what has to be collected and sent to the HIO's.

13:54:48 From Kate Horle to Everyone:

@John, very true, and, P&P can make that collection unified.

13:58:23 From Jamie Franklin to Everyone:

Can't any "exchange" pull the fields they need from inbound ADT to match the best they can - knowing that they can encourage their members to improve documentation as they can (not likely)...greater issue is not the patient matching issue but the actual POC access to the already matched records at present. Likely <25%? in a well integrated system currently....the lack of integration with current EMR workflows may be a greater focus for outcome improvement

14:00:46 From Ako Quammie - Contexture to Everyone:

As we are talking about "Standards" and not starting from scratch. I'm interested in the panels thoughts about TEFCA as a point to rally around because USCDI data sets are included in TEFCA.

14:01:05 From Bill Beighe to Everyone:

Another governance issue. Where does consent to share or not share live. And if the same patient has opt out of sharing at one point of care and opt in (default). Who rules the sharing of data.

14:03:03 From Ciara Keegan to Everyone:

ONC is working on standardizing addresses for patient matching purposes with their Project US@ <https://www.healthit.gov/buzz-blog/health-data/todays-the-day-for-project-us>

14:16:01 From John Helvey to Everyone:

I agree with Leo...

14:16:14 From Rim Cothren to Everyone:

Thanks, John.

14:16:25 From John Helvey to Everyone:

I agree with Bill also

14:16:32 From Aadli Kareem to Everyone:

I'm in agreement w/ Leo and Bill

14:16:37 From Ako Quammie - Contexture to Everyone:

The "Master-Master" is describing essentially the output a referential matching system.

14:17:47 From John Helvey to Everyone:



to Bill's point there are duplicates within the member organization let alone across the multiple places of service they receive care,

14:18:41 From Bill Beighe to Everyone:

Completely agree with Alex - need policy levers

14:19:31 From Alex Horowitz to Everyone:

We do have more entities in CA than in NY which is also a consideration (and HIOs of vastly varying sizes)

14:19:48 From Bill Beighe to Everyone:

Looked at our MPI yesterday - we have a thousand patients with the home phone that is a hospital main number

14:20:12 From Bill Beighe to Everyone:

our MPI

14:20:16 From Jamie Franklin to Everyone:

wouldn't we put the MPI/matching vendors out of business? may be some restraint of trade/competition restricting issues with dictating how an HIO does their matching?

14:21:50 From John Helvey to Everyone:

Excellent points Leo

14:24:08 From Alex Horowitz to Everyone:

It has been great to have perspectives from NY and from CO/AZ in this committee

14:25:56 From John Helvey to Everyone:

Amen Bill