



**California Health & Human Services Agency  
Center for Data Insights and Innovation  
Data Exchange Framework Stakeholder Advisory Group  
Meeting 9 Transcript (10:00AM – 1:00PM PT, June 23, 2022)**

The following text is a transcript of the June 23<sup>rd</sup> meeting of the California Health & Human Services Agency and Center for Data Insights and Innovation Data Exchange Framework Stakeholder Advisory Group. The transcript was produced using Zoom’s transcription feature. It should be reviewed concurrently with the recording – which may be found on the CalHHS Data Exchange Framework [website](#) to ensure accuracy.

*The following meeting was conducted in a “hybrid” format, where presenters, Stakeholder Advisory Group members, and members of the public were both present in-person at the Clifford L. Allenby Building, 1215 O Street, Sacramento, CA 95814 and able to join virtually via Zoom. The hybrid format provides expanded meeting access for Californians, while respecting public health concerns. The meeting transcript notes all comments delivered in-person and recorded via the in-room microphone as “CalHHS CDII Sacramento Office,” not differentiating between meeting attendees. CDII recommends reviewers seeking to know the exact speakers, review the full video recording of the meeting, also available on our website.*

1

00:00:22.440 --> 00:00:28.260

Mario S - Manatt Events: hello, and welcome to today's program my name is Mario i'll be in the background answering any soon technical questions.

2

00:00:28.800 --> 00:00:38.790

Mario S - Manatt Events: If experience difficulties during this session, please type your question into the Q amp a section located at the bottom of your zoom webinar viewer in a producer will respond.

3

00:00:40.620 --> 00:00:48.420

Mario S - Manatt Events: During today's event live closed captioning will be available, please click on the CC button at the bottom of your zoom window to enable or disable.

4

00:00:49.860 --> 00:00:52.200

Mario S - Manatt Events: mo now cover the meeting participation.

5

00:00:54.870 --> 00:01:08.190

Emma P - Manatt Events: Great there are a few ways that participants may interact with the meeting today for those on site you're encouraged to login through your panelists link on zoom please keep your video microphone and audio off for the duration of the meeting.

6

00:01:09.120 --> 00:01:14.970

Emma P - Manatt Events: instructions for connecting to wi fi or in the room, and if you have any concerns there, please reach out to jocelyn Taurus.

7

00:01:18.390 --> 00:01:25.980

Emma P - Manatt Events: Participants may also submit written comments and questions through the zoom Q amp a box all comments will be recorded and reviewed by advisory group staff.

8

00:01:26.460 --> 00:01:35.370

Emma P - Manatt Events: And participants fails to submit comments and questions, as well as request to receive data exchange framework updates to CD I had see hhs.ca CA.

9

00:01:36.840 --> 00:01:46.470

Emma P - Manatt Events: participants and advisory group members must raise their hand for zoom facilitators to unmute them to share comments, the Chair will notify participants members of appropriate times to volunteer feedback.

10

00:01:52.710 --> 00:02:00.690

Emma P - Manatt Events: And finally, public comment will be taken during the meeting it designated times will be limited to the total amount of time allocated for public comment on particular issues.

11

00:02:00.930 --> 00:02:08.250

Emma P - Manatt Events: The Chair will call it individuals and the order in which hands were raised, beginning with those in the room and followed by those dialed in or connected remotely through zoom.

12

00:02:08.700 --> 00:02:15.270

Emma P - Manatt Events: Individuals will be recognized for up to two minutes and are asked to state their name and organizational affiliation at the top of their statements.

13

00:02:15.690 --> 00:02:26.100

Emma P - Manatt Events: participants are encouraged to use the comment box to ensure all feedback is captured or email comments to CDI at see hhs.ca CA and now i'll hand it back to john oh man yeah.

14

00:02:27.600 --> 00:02:35.790

CalHHS CDII Sacramento Office: Thank you very much thank you that team and come out appreciate everyone joining us today excited to see many of you in person, we got many on the zoo.

15

00:02:36.720 --> 00:02:38.250

CalHHS CDII Sacramento Office: As always, we have much to cover.

16

00:02:38.880 --> 00:02:48.450

CalHHS CDII Sacramento Office: This being our last meeting excited to bring that spirit to this to this discussion or enough Secretary galle start our meeting with a few reflections on our progress that we're going to be going here.

17

00:02:48.750 --> 00:03:06.330

CalHHS CDII Sacramento Office: we're going to then discuss the updates made to the dsa the cmt s and the data exchange framework, as well as the strategy for visual identity based on all of your comments and input, where they are very valuable the meeting with an in depth discussion of next steps for a framework.

18

00:03:07.470 --> 00:03:11.820

CalHHS CDII Sacramento Office: So with that let's start with the roof ball Secretary mark Valley.

19

00:03:12.960 --> 00:03:14.730

Dr. Mark Ghaly: Good morning morning.

20

00:03:15.240 --> 00:03:16.170

CalHHS CDII Sacramento Office: Can email monta.

21



00:03:16.890 --> 00:03:17.670  
Jamie Almanza: marnie and President.

22  
00:03:19.170 --> 00:03:22.890  
CalHHS CDII Sacramento Office: Charles barkley Good morning, my name is Andrew.

23  
00:03:26.970 --> 00:03:32.190  
CalHHS CDII Sacramento Office: The Shell 31.

24  
00:03:33.930 --> 00:03:34.320  
CalHHS CDII Sacramento Office: The one.

25  
00:03:38.160 --> 00:03:39.090  
CalHHS CDII Sacramento Office: Job yes.

26  
00:03:39.570 --> 00:03:40.050  
morning.

27  
00:03:41.340 --> 00:03:42.150  
CalHHS CDII Sacramento Office: David for.

28  
00:03:50.610 --> 00:03:51.360  
CalHHS CDII Sacramento Office: lori that.

29  
00:03:54.270 --> 00:03:56.310  
CalHHS CDII Sacramento Office: Here Sandra Fernandez.

30  
00:03:58.980 --> 00:03:59.550  
CalHHS CDII Sacramento Office: advisor.

31  
00:04:00.240 --> 00:04:02.040  
Cameron Kaiser: Good morning honey.

32  
00:04:02.280 --> 00:04:02.730  
CalHHS CDII Sacramento Office: And ricky.

33

00:04:03.810 --> 00:04:04.350

CalHHS CDII Sacramento Office: Good morning.

34

00:04:05.700 --> 00:04:06.540

CalHHS CDII Sacramento Office: My name is.

35

00:04:09.000 --> 00:04:09.840

CalHHS CDII Sacramento Office: David letterman.

36

00:04:12.690 --> 00:04:14.070

CalHHS CDII Sacramento Office: amanda mcallister woman.

37

00:04:19.440 --> 00:04:19.920

CalHHS CDII Sacramento Office: falling.

38

00:04:24.210 --> 00:04:24.780

CalHHS CDII Sacramento Office: Water us.

39

00:04:25.410 --> 00:04:27.000

morning morning.

40

00:04:29.730 --> 00:04:30.390

Erica Murray: hi everybody.

41

00:04:32.040 --> 00:04:33.150

CalHHS CDII Sacramento Office: Eduardo murkiness.

42

00:04:39.240 --> 00:04:40.500

CalHHS CDII Sacramento Office: Karen seven Taiwan.

43

00:04:43.980 --> 00:04:45.150

CalHHS CDII Sacramento Office: He said earlier about.

44

00:04:48.630 --> 00:04:49.770  
CalHHS CDII Sacramento Office: Body Williams.

45  
00:04:52.680 --> 00:04:55.470  
CalHHS CDII Sacramento Office: Okay there's some yeah okay.

46  
00:04:56.340 --> 00:04:58.860  
claudia williams: i'm here thanks, thank you.

47  
00:04:59.430 --> 00:05:00.180  
CalHHS CDII Sacramento Office: William York.

48  
00:05:03.240 --> 00:05:06.570  
CalHHS CDII Sacramento Office: And now, for our State Department advisory group effort street.

49  
00:05:10.020 --> 00:05:11.250  
James with people who.

50  
00:05:12.450 --> 00:05:13.860  
CalHHS CDII Sacramento Office: are badly good morning.

51  
00:05:16.320 --> 00:05:16.920  
CalHHS CDII Sacramento Office: Good morning.

52  
00:05:19.650 --> 00:05:20.190  
Good morning.

53  
00:05:21.780 --> 00:05:22.470  
CalHHS CDII Sacramento Office: hey Fisher.

54  
00:05:25.110 --> 00:05:25.890  
CalHHS CDII Sacramento Office: Ryan hauser.

55  
00:05:27.630 --> 00:05:27.900

CalHHS CDII Sacramento Office: Julie.

56

00:05:37.050 --> 00:05:37.680

Nathan Nau: Good morning.

57

00:05:44.010 --> 00:05:44.550

Cheryl Larson: Good morning.

58

00:05:47.430 --> 00:05:48.900

CalHHS CDII Sacramento Office: Giuliana big fella.

59

00:05:50.910 --> 00:05:51.780

CalHHS CDII Sacramento Office: Leslie waiting room.

60

00:05:52.500 --> 00:05:53.130

Leslie Witten-Rood, EMSA: Good morning.

61

00:05:54.060 --> 00:06:01.170

CalHHS CDII Sacramento Office: Excellent Thank you, thank you for attending and i'm not gonna lie or discussion of urgency.

62

00:06:05.250 --> 00:06:09.060

Dr. Mark Ghaly: Thank you, is there a lot of ECHO or can you hear me clearly.

63

00:06:12.150 --> 00:06:19.590

Dr. Mark Ghaly: Great okay so good morning everyone, thank you for once again joining the stakeholder advisory group.

64

00:06:20.130 --> 00:06:27.690

Dr. Mark Ghaly: meaning, this is our last one so it's appropriate to just spend a minute, and we will throughout this meeting just first.

65

00:06:28.470 --> 00:06:42.480

Dr. Mark Ghaly: Just sharing deep thanks to many of you, I was sharing with Marco and some of the members of our senior leadership team, I recall very clearly pacing a parking lot outside of my 12 year old son's basketball practice.

66

00:06:43.530 --> 00:06:56.640

Dr. Mark Ghaly: on multiple days in a row working hard to land the exact language that became a B 133 pass last July, which puts us in the place, we are today, I remember thinking.

67

00:06:57.570 --> 00:07:06.180

Dr. Mark Ghaly: Not just how important this work is and how meaningful, it could be, but what a tight timeline and how aggressive, we were.

68

00:07:07.140 --> 00:07:20.430

Dr. Mark Ghaly: And how appropriate that timeline is and was at the time to to set so that we could meet an objective that that I think is long overdue in California and i'm really proud.

69

00:07:21.180 --> 00:07:36.390

Dr. Mark Ghaly: of where this group has come, I know, for many of you, it has been a long time coming, for others, you have jumped on justin time to really have in important and meaningful impact to the process.

70

00:07:37.920 --> 00:07:48.090

Dr. Mark Ghaly: If we could advance to the next slide just want to, as we have really just start again, where the vision for data exchange comes from this group.

71

00:07:49.110 --> 00:08:00.270

Dr. Mark Ghaly: put together this short concept that I think has guided the way has really put us in a place to have the tremendous progress that.

72

00:08:00.780 --> 00:08:09.840

Dr. Mark Ghaly: will culminate in today's meeting and then align a series of really important next steps i'm proud of our team.

73

00:08:10.710 --> 00:08:22.260

Dr. Mark Ghaly: That really john you have led a process that I think has not just been loosely connected set of monthly meetings but amazing listening sessions.

74

00:08:22.620 --> 00:08:27.870



Dr. Mark Ghaly: In small and medium sized groups taking written comments doing what.

75

00:08:28.680 --> 00:08:37.140

Dr. Mark Ghaly: Are I think two things that are really important to me and they're held up as guiding principles of cali Th s altogether, which is active listening.

76

00:08:37.920 --> 00:08:47.760

Dr. Mark Ghaly: And I think all of us, participated in that, and this was in some ways, our agency at its best with the rich set of comments and.

77

00:08:48.420 --> 00:08:57.360

Dr. Mark Ghaly: Acknowledging those who rolled up their sleeves and then secondly and and maybe most important i'm really proud of how this work has really done another one of.

78

00:08:57.690 --> 00:09:06.660

Dr. Mark Ghaly: The guiding principles of cal hhs which is put the person back in the Center and throughout all of this, as we.

79

00:09:07.230 --> 00:09:18.330

Dr. Mark Ghaly: haggle and discuss and try to compromise and come up with something that we think is moves California, a little closer to the vision that you see here I keep.

80

00:09:18.750 --> 00:09:25.050

Dr. Mark Ghaly: reminding myself of what this means for the patients and the people i've had the privilege of taking care of.

81

00:09:25.890 --> 00:09:30.720

Dr. Mark Ghaly: Now you know in my in my clinical work but also.

82

00:09:31.290 --> 00:09:44.730

Dr. Mark Ghaly: That all of our departments and agencies and efforts and entities represented here in this group, have the privilege of serving and supporting every single day and how the work that is being established by.

83

00:09:45.360 --> 00:09:51.840

Dr. Mark Ghaly: This advisory group is going to be very meaningful for everyday Californians as they.

84

00:09:52.560 --> 00:10:04.620

Dr. Mark Ghaly: seek to improve their lives and take care of challenges at some of our most vulnerable moments, whether that's an emergency rooms across the state urgent care centers behavioral health centers.

85

00:10:05.310 --> 00:10:16.830

Dr. Mark Ghaly: or in the social service offices and homeless service providers that we are empowering to do and change lives every single day in California so it's with a great deal of pride.

86

00:10:17.370 --> 00:10:21.030

Dr. Mark Ghaly: I sort of lift up this work today we're going to have.

87

00:10:21.750 --> 00:10:32.970

Dr. Mark Ghaly: Important discussions around sort of what the next steps look like, how does governance come together, I know we've had some important discussions are ready and i'll facilitate a little bit more.

88

00:10:33.510 --> 00:10:41.280

Dr. Mark Ghaly: With john on on what comes next, but I really just want to remind us again what our vision has been.

89

00:10:41.970 --> 00:10:59.550

Dr. Mark Ghaly: how important the work has been over the last year to get us to this place and the next step, the next steps to come, are going to be equally important for us to achieve the goals that I know we set out to achieve, with a be 133.

90

00:11:00.660 --> 00:11:03.720

Dr. Mark Ghaly: i'll just spend, we can go to the next slide.

91

00:11:05.460 --> 00:11:11.610

Dr. Mark Ghaly: So just really quick by overview and we're going to go into this more deeply what.

92

00:11:12.720 --> 00:11:35.460

Dr. Mark Ghaly: Really ends today and what starts tomorrow is our formal, this is our final formal meeting of the advisory group, we have some responsibilities that by July one and then at the end of July, then we publish and post some of this important work that the the.

93

00:11:36.720 --> 00:11:44.250

Dr. Mark Ghaly: Group has put together and the data sharing agreement and the policy and procedure, recommendations and then later.

94

00:11:44.820 --> 00:11:54.960

Dr. Mark Ghaly: The digital identity approaches that we have been discussing as well, and then we move into a phase where, for the rest of the calendar year we will have.

95

00:11:55.800 --> 00:12:09.480

Dr. Mark Ghaly: A sort of interim leadership government approach governance approach, all in the hopes that we work hard and diligently to establish a more foundational and permanent governance structure.

96

00:12:09.960 --> 00:12:19.680

Dr. Mark Ghaly: kicking off as soon as the first quarter of 2023 so just like the work we've already been doing for the last many months, this is again.

97

00:12:21.960 --> 00:12:43.620

Dr. Mark Ghaly: fast work, work that is already underway and we'll go into some of the details there in towards the end of today, before I turn it over to jonah I want to also just acknowledge that we're in the midst of closing down as we like to say the the budget and as part of the may revision.

98

00:12:44.880 --> 00:12:54.000

Dr. Mark Ghaly: There were important investments that will be made into practices and providers and entities that we hope and expect well.

99

00:12:54.780 --> 00:13:09.030

Dr. Mark Ghaly: Not only participate in the data sharing exercises and utility that we're talking about but begin to look at their own practices and transform those practices as such to not just accommodate the.

100

00:13:09.510 --> 00:13:20.550

Dr. Mark Ghaly: exchange of data from that entity to the rest of covered entities in California, but really, how does the availability of new and important information change.

101

00:13:20.940 --> 00:13:25.740

Dr. Mark Ghaly: Their workflow so supporting practice transformation through.

102

00:13:26.730 --> 00:13:36.480

Dr. Mark Ghaly: A number of practices is an important part of what we put in the budget and recommended, and we hope that, through the spinal conversations with the legislature that those.

103

00:13:36.960 --> 00:13:46.260

Dr. Mark Ghaly: Nearly \$200 million that's focused on practice transformation around issues like data exchange will be 200 million, I meant to say.

104

00:13:46.710 --> 00:13:54.600

Dr. Mark Ghaly: will be available soon enough to providers and practices across the State to make the appropriate changes.

105

00:13:54.990 --> 00:14:09.900

Dr. Mark Ghaly: and investments to be able to participate in this very important work, not just for providers and practices, but, for, as I said, all California, so when we move forward and really lift up this idea of a California for all.

106

00:14:10.470 --> 00:14:21.870

Dr. Mark Ghaly: today's work is not just foundational but one of the key building blocks to so many of the initiatives that we are working at the State level, and I know many of you are pursuing.

107

00:14:22.440 --> 00:14:31.620

Dr. Mark Ghaly: In your own backyards every single day so with that opening I believe i'm turning it over to jonah to get us through the next parts of our agenda.

108

00:14:33.030 --> 00:14:44.520

CalHHS CDII Sacramento Office: Thank you, Secretary I think in terms of like 16 our objectives are to their followers First, we want to share with with updates that we are proposing to make to the patient agreement.

109

00:14:45.150 --> 00:15:00.630

CalHHS CDII Sacramento Office: and also the procedures, these are based on your comments you've received over the last few weeks we will go over each of the various sections of the agreement and companies with proposed changes your suggestions and comments.

110

00:15:01.830 --> 00:15:06.960

CalHHS CDII Sacramento Office: can consider those we finalize the same up this week and next.

111

00:15:08.430 --> 00:15:18.450

CalHHS CDII Sacramento Office: One will spend most of the time today to discuss with their couple of other items want to make sure we covered, there are other components of the data exchange framework landscape.

112

00:15:19.350 --> 00:15:30.150

CalHHS CDII Sacramento Office: governance which will go into some detail in this in this session and one review those with you as well, and putting additional modifications of the page those other documents.

113

00:15:30.900 --> 00:15:44.430

CalHHS CDII Sacramento Office: That we want to provide an overview turn to him for strategy for digital identities again many public comments see many proposal modifications made that strategies be posted on July 31.

114

00:15:45.480 --> 00:16:02.910

CalHHS CDII Sacramento Office: that's slightly separate timeline from the Beijing framework which those public life so that's our meeting done for today, and if you go to the next slide I want to just make sure everyone's aware of the timeline July one hosting the framework July 31 of digital identities.

115

00:16:04.230 --> 00:16:16.860

CalHHS CDII Sacramento Office: Then, my January 31 of next year, most providers sign innovation agreement, the requirements and State law to require that with an exception for certain types of organizations that are two years to sign.

116

00:16:18.240 --> 00:16:29.880

CalHHS CDII Sacramento Office: Within after just so just so I don't want to spend on this after January 31 that point three, is about a one year time series for providers to get people to change that.

117

00:16:30.930 --> 00:16:34.320

CalHHS CDII Sacramento Office: he's traditions, and these are all spelled out.

118

00:16:37.260 --> 00:16:40.950

CalHHS CDII Sacramento Office: So we're coming up to our major deadline about 10 days.

119

00:16:42.450 --> 00:16:45.060

or two days i'm going.

120

00:16:47.280 --> 00:17:00.330

CalHHS CDII Sacramento Office: To give you a next slide please so just so you're all aware of what we received in terms of public comment period we receive 47 submissions for the day exchange framework, there were 749.

121

00:17:01.740 --> 00:17:04.920

CalHHS CDII Sacramento Office: Little comments we really, really appreciate I know.

122

00:17:06.210 --> 00:17:12.420

CalHHS CDII Sacramento Office: There was a bit of a burden for some of you for any of you use that spreadsheet and made it really very.

123

00:17:13.140 --> 00:17:23.550

CalHHS CDII Sacramento Office: manageable give it a number of comments to be a look for everyone else, so we can triage route them and he will address them, whether or not we took them or not matter.

124

00:17:24.030 --> 00:17:36.210

CalHHS CDII Sacramento Office: But it gave us the opportunity to make sure that every single comment is categorized and then addressed by the responding to and incorporated or, in some cases, you may not make changes, based on some feedback.

125

00:17:36.930 --> 00:17:53.400

CalHHS CDII Sacramento Office: So they were to break it down for you 20 commenters submitted 97 comments for the framework itself 35 commenters on the three minute or 200 comments there 31 commenters on the policy procedures that are 240 individual.

126

00:17:54.630 --> 00:18:05.400

CalHHS CDII Sacramento Office: recommendations and for Australian digital identities, they came a little bit later because there was a public comment period and there was a lot more participating or.

127

00:18:06.540 --> 00:18:08.370

CalHHS CDII Sacramento Office: Comments there, and a third number.

128

00:18:09.870 --> 00:18:12.450

CalHHS CDII Sacramento Office: of patients to that strategy response to this.

129

00:18:13.980 --> 00:18:25.440

CalHHS CDII Sacramento Office: anyone have any comments questions before we actually get into the next stage, which is, I will turn over the helm pfister to start going to the tsa changes.

130

00:18:29.880 --> 00:18:30.330

CalHHS CDII Sacramento Office: Okay.

131

00:18:31.740 --> 00:18:43.770

CalHHS CDII Sacramento Office: Hearing none I don't think I see any andres on the phone, so what I propose we do is telling you were there, alternatively, you will skip the next couple of slides and start with.

132

00:18:45.570 --> 00:18:47.460

CalHHS CDII Sacramento Office: Why what he said he goes like please.

133

00:18:52.170 --> 00:18:53.850

CalHHS CDII Sacramento Office: call in from Jasper Canada.

134

00:18:55.050 --> 00:18:55.710

CalHHS CDII Sacramento Office: New York.

135

00:18:58.560 --> 00:18:59.040

Helen Pfister: Okay.

136

00:19:00.150 --> 00:19:03.030

claudia williams: With a broken down car, no less, and.

137

00:19:04.200 --> 00:19:11.460

claudia williams: When would you like us to bring up comments that were not addressed when what would be the right time for that.

138

00:19:13.980 --> 00:19:23.160

CalHHS CDII Sacramento Office: have specific comments on either the dsa and the table of contents there's like 17 different sections from yesterday and, of course, their.

139

00:19:23.670 --> 00:19:38.460

CalHHS CDII Sacramento Office: MPs, if you have specific comments that you didn't see a dress in either the dsa or mts can you bring those up when we when we actually discussed either the cable content section that can you.

140

00:19:39.930 --> 00:19:40.140

Be.

141

00:19:45.270 --> 00:19:46.080

CalHHS CDII Sacramento Office: able to get that.

142

00:19:49.410 --> 00:19:51.000

CalHHS CDII Sacramento Office: Understanding Canada just found.

143

00:19:51.690 --> 00:19:52.290

yeah.

144

00:19:53.340 --> 00:19:56.730



claudia williams: it's super sketchy so I may just come in and chat.

145

00:19:58.740 --> 00:20:02.250

CalHHS CDII Sacramento Office: Okay, if you can, if you can you hear.

146

00:20:03.750 --> 00:20:04.440

CalHHS CDII Sacramento Office: US section.

147

00:20:05.790 --> 00:20:13.410

CalHHS CDII Sacramento Office: or comment, if you can try to raise them at that point in time, that we can address them when we're actually.

148

00:20:16.200 --> 00:20:16.590

Okay.

149

00:20:18.720 --> 00:20:24.630

CalHHS CDII Sacramento Office: I don't see any other hands up so i'm going to turn this over to Helen and element, with my research, most likely.

150

00:20:25.110 --> 00:20:38.040

Helen Pfister: Sure okay great um so based on all the feedback that we received from the from this group from the subcommittee and from the public, we made substantive modifications to the sections of the dsa that are highlighted in red on the slide.

151

00:20:39.060 --> 00:20:42.360

Helen Pfister: We also made some more minor non-substantive.

152

00:20:44.160 --> 00:20:52.950

Helen Pfister: Modifications mainly clerical and in the interest of time we're not focusing on those with just really focusing on the substance of changes that we made.

153

00:20:53.550 --> 00:21:04.260

Helen Pfister: And it'll be the same thing with respect to the pain piece when we get to those we're just going to focus on the substance of changes that we that we made in response to all the feedback that we that we received so next slide please.

154

00:21:05.490 --> 00:21:19.140

Helen Pfister: So on the definitions we actually got four comments, the first one related to the definition of a governmental participant, which, as previously drafted just refer to local state or federal entities.

155

00:21:20.340 --> 00:21:32.730

Helen Pfister: And a couple of commenters noted that misspell cities and counties and tribal entities are also governmental participants, so we just revised definition to explicitly express what reference there's three types of government, the participants.

156

00:21:34.890 --> 00:21:41.850

Helen Pfister: And we made a change to the definition of social services, there were a couple of comments, but noted that it was a little bit too limited.

157

00:21:42.960 --> 00:21:49.410

Helen Pfister: In particular, that delivering just items and services didn't really address PICs of resources that are non tangible that.

158

00:21:49.920 --> 00:22:04.890

Helen Pfister: Social services organizations might provide and there was also a request that we expressly refer to foster care and comes about, in the course of this definition, so we made the changes that are set on set forth in bullet to have of this of this slide.

159

00:22:06.360 --> 00:22:11.100

Helen Pfister: And then the last thing that the third change we made was in the definition of social service organizations.

160

00:22:12.210 --> 00:22:17.070

Helen Pfister: One of the commentaries noted that, in some instances, there are.

161

00:22:17.820 --> 00:22:31.230

Helen Pfister: Individual component departments of a larger health and human Services Agency that didn't call didn't clearly fall within a definition of social services organization, even though the services they're providing would qualify them qualified, then as that.

162

00:22:32.160 --> 00:22:38.130

Helen Pfister: So we made a change to the definition to explicitly call out multi department, health and human services agencies.

163

00:22:40.590 --> 00:22:42.030

Helen Pfister: Any questions or comments on that.

164

00:22:47.160 --> 00:22:48.360

Helen Pfister: All right next slide please.

165

00:22:49.680 --> 00:22:59.670

Helen Pfister: So the last change of the definitions that we made was to the definition of authorization and there were several comments here who request the clarity on whether part to data.

166

00:23:00.270 --> 00:23:06.960

Helen Pfister: substance abuse data covered under protective under 42 CFR, part two, could be exchange or the data exchange framework.

167

00:23:07.470 --> 00:23:14.550

Helen Pfister: And we address this in a few different places in the dsa and a PM keys on the answer is yes, as long as.

168

00:23:15.030 --> 00:23:23.430

Helen Pfister: exchange is permissible under applicable law, which, of course, among other things, mean that the public any any necessary authorizations have to be in place.

169

00:23:23.970 --> 00:23:38.520

Helen Pfister: And the original definition of authorization that we had referenced hipaa and California law but didn't reference 42 CFR, part two, so we revised that to include a reference to 42 CFR, part two, just to avoid any confusion that might otherwise be created.

170

00:23:42.870 --> 00:23:43.800

Helen Pfister: Next slide please.

171

00:23:44.820 --> 00:23:45.630

CalHHS CDII Sacramento Office: Read stopper does.

172

00:23:47.580 --> 00:23:48.960

CalHHS CDII Sacramento Office: Anyone want to make sure that there's.

173

00:23:50.010 --> 00:23:55.650

CalHHS CDII Sacramento Office: Anyone either either on definitions, or on the two sections, we did not take amendments to parties.

174

00:24:01.050 --> 00:24:02.190

CalHHS CDII Sacramento Office: That they've got.

175

00:24:03.270 --> 00:24:04.980

CalHHS CDII Sacramento Office: So one thing that that i've seen.

176

00:24:07.230 --> 00:24:08.910

So far, moment sees.

177

00:24:10.110 --> 00:24:21.540

CalHHS CDII Sacramento Office: This presentation is are concerned about this document creates a new definition of preaching preaching notification, this is something that is very well defined the law.

178

00:24:23.370 --> 00:24:30.900

CalHHS CDII Sacramento Office: And we're unsure why there is in this document, the attempt to create a new version of that.

179

00:24:34.020 --> 00:24:46.020

Helen Pfister: So we actually did address those comments on breach and breach notification in the breach policy itself so if you don't mind just holding that question, so we get to that, and then we can talk about any concerns that you might have about how the changes we've made.

180

00:24:50.070 --> 00:24:50.340

Okay.

181

00:24:54.390 --> 00:24:57.570

CalHHS CDII Sacramento Office: All right, no other hands raised here on the screen so let's go.

182

00:24:57.930 --> 00:25:01.170

CalHHS CDII Sacramento Office: Okay, wait one last part.

183

00:25:02.520 --> 00:25:06.060

i'm finding it hard to actually know about singing.

184

00:25:08.010 --> 00:25:14.460

CalHHS CDII Sacramento Office: concert I had we're not integrated continue to stay silent and hoping that they were addressed, but it is.

185

00:25:16.650 --> 00:25:35.010

CalHHS CDII Sacramento Office: I don't see a way to Western actual text right now to see whether it's something that's just not corporately Therefore I don't know whether I have not Okay, so one example was authorization for I suggested in burst spectrum of assessing scope is not.

186

00:25:36.420 --> 00:25:39.390

necessary and calling effects and say.

187

00:25:40.800 --> 00:25:44.520

intended to say an observation and plus you know even.

188

00:25:46.500 --> 00:25:46.950

CalHHS CDII Sacramento Office: Though I don't.

189

00:25:48.660 --> 00:25:49.050

I don't know.

190

00:25:55.770 --> 00:25:56.340

CalHHS CDII Sacramento Office: I don't.

191

00:25:57.240 --> 00:25:59.940

Helen Pfister: Have a little bit of a hard time hearing that unfortunately.

192

00:26:01.320 --> 00:26:19.140

CalHHS CDII Sacramento Office: Mark was saying, since he can't see the actual updated document can't comment on whether or not what is whether or not his comments were addressed awake state specific issue about authorizations, which is in section six, and so you would.

193

00:26:21.210 --> 00:26:23.040

CalHHS CDII Sacramento Office: Remember, to get two sessions.

194

00:26:24.090 --> 00:26:26.490

CalHHS CDII Sacramento Office: and specify requirement was.

195

00:26:27.720 --> 00:26:33.390

CalHHS CDII Sacramento Office: We did incorporate any changes to it, so we want to hear what your concerns are and we can address.

196

00:26:34.680 --> 00:26:35.340

CalHHS CDII Sacramento Office: That time.

197

00:26:36.960 --> 00:26:40.740

CalHHS CDII Sacramento Office: is up to six and six, I heard the word authorization now that's right that's right.

198

00:26:43.980 --> 00:26:44.460

CalHHS CDII Sacramento Office: rolls over.

199

00:26:45.240 --> 00:26:45.540

Okay.

200

00:26:46.800 --> 00:26:54.840

Helen Pfister: Okay um next section of the dsa that changes from A to a section for which the section on use of health and social services information.

201

00:26:56.160 --> 00:27:08.700

Helen Pfister: And initially that language prohibited the exchange of hsi for the indirect or direct fun to financial benefit of a participant and we got a fair amount of.

202

00:27:09.480 --> 00:27:25.680

Helen Pfister: feedback on this provision on all of which basically was that this was too broad and could curtail legitimate use of health and social service information, and so what we did is we actually took that prohibition out of the US itself.

203

00:27:27.270 --> 00:27:39.210

Helen Pfister: And instead we revise the required permitted and prohibited purposes policy to prohibit a participant from exchanging health and social service information with the attention with intention to sell such data.

204

00:27:40.050 --> 00:27:54.690

Helen Pfister: um so welcome thoughts that folks have on that because I think this is one of the trigger Eric trickier areas in the whole dsa p&p framework so we'd love to hear it, if people have reactions to to that approach.

205

00:27:59.070 --> 00:28:08.250

CalHHS CDII Sacramento Office: or milk is good question and then a comment, could you repeat what the language you thought for a minute I didn't hear the first word and then you said, the design, I think.

206

00:28:09.420 --> 00:28:22.410

Helen Pfister: Oh yeah so there was language in the previous draft of the dsa that basically said actually pulled up second beautiful exactly accurate um it said that.

207

00:28:24.450 --> 00:28:35.790

Helen Pfister: A participant shall not be permitted to acquire access use or disclose health and social service information for their own direct or indirect direct or indirect financial benefit.

208

00:28:38.430 --> 00:28:46.080

Helen Pfister: And because our concern is concerned that commenters expressed was it that was far too broad and could potentially.

209

00:28:46.620 --> 00:28:54.480

Helen Pfister: prevent participants from using health and social service information for a for for for legitimate uses essentially.

210

00:28:55.080 --> 00:29:04.290

Helen Pfister: So we tried to to narrow that fairly significantly by just prohibiting the access to use such intimate access essentially absence of such information with the intention to sell it.

211

00:29:06.000 --> 00:29:07.110

Helen Pfister: And for those of you who are.

212

00:29:08.250 --> 00:29:17.940

Helen Pfister: For those of you who are hipaa experts yo you'll you'll realize that tracks, to some extent the language in the hipaa penalty and the penalties provision of hipaa.

213

00:29:20.040 --> 00:29:28.380

CalHHS CDII Sacramento Office: Thank you, that comment is I think perhaps it now close to running the other direction, and I heard you use the words legitimate.

214

00:29:28.890 --> 00:29:35.760

CalHHS CDII Sacramento Office: uses, I guess, I come back to this and think that the purpose of the State exchanges all about the patient to the client.

215

00:29:36.330 --> 00:29:45.990

CalHHS CDII Sacramento Office: And so there seems to be a lot of room between if you're using the data and selling it and using the data for financial benefit, I think.

216

00:29:46.650 --> 00:29:54.540

CalHHS CDII Sacramento Office: Without that language in there and allows the data to be used for things that aren't necessarily related to the patient or client benefit.

217

00:29:54.870 --> 00:30:13.980

CalHHS CDII Sacramento Office: Including right market selection risk assessment and a whole set of other activities that I think are not uses and certainly important made over the last couple years, so it feels like moving from direct or indirect financial benefit to just selling is now too narrow.

218



00:30:15.930 --> 00:30:29.490

Helen Pfister: And so, would it be fair to say that you're proposing are the ones that you will be proposing that we somehow i'm not i'm not going to wordsmith it down this call, obviously I think that's a good use of anyone's time but somehow be tied to the patient pitch benefiting the patient.

219

00:30:31.710 --> 00:30:39.750

CalHHS CDII Sacramento Office: Yes or either that roadmap to financial benefit right it shouldn't be about financial benefit that should be about patient client.

220

00:30:40.830 --> 00:30:41.700

answers.

221

00:30:43.890 --> 00:30:45.990

Helen Pfister: Okay, any other thoughts on this.

222

00:30:47.580 --> 00:30:48.210

CalHHS CDII Sacramento Office: Claudia.

223

00:30:49.290 --> 00:31:00.600

CalHHS CDII Sacramento Office: submitted a comment she feels as though limitation on sales of white presented by data will be very disruptive that applies to the identified data, I think that was the suggestion is.

224

00:31:01.980 --> 00:31:02.880

CalHHS CDII Sacramento Office: To not.

225

00:31:05.190 --> 00:31:09.090

CalHHS CDII Sacramento Office: Do essentially carve out de identified data.

226

00:31:10.620 --> 00:31:11.160

Is.

227

00:31:12.570 --> 00:31:14.340

CalHHS CDII Sacramento Office: So it does not fall under this.

228

00:31:15.960 --> 00:31:17.610

CalHHS CDII Sacramento Office: This provision so.

229

00:31:24.150 --> 00:31:31.200

claudia williams: This is Claudia I just think it's smart to track to hipaa so the hipaa prohibited prohibited sale of identified data.

230

00:31:32.580 --> 00:31:45.540

claudia williams: And I think if you end up having a different definition it's going to be super tricky and many organization, I mean that's a whole bigger conversation as to whether that that creates a much broader restriction than what hipaa already has.

231

00:31:50.970 --> 00:31:51.630

CalHHS CDII Sacramento Office: Michelle good.

232

00:31:52.770 --> 00:31:53.550

scenario and.

233

00:31:57.960 --> 00:31:58.440

Why.

234

00:32:00.120 --> 00:32:03.930

CalHHS CDII Sacramento Office: Well, you can imagine scenarios where by having large.

235

00:32:04.710 --> 00:32:16.080

CalHHS CDII Sacramento Office: data sets of the identified data can be used for research purposes, so you may have institutions that want to access it in order to look at trends across populations, but you could not have identifier, to be able to link it to.

236

00:32:16.470 --> 00:32:29.370

CalHHS CDII Sacramento Office: Shell game in stone and frolic be able to actually see large quantities did that affect a little bit trends across populations that's one reason that's a reason why you might want to actually allow the sale of data, but.

237

00:32:31.140 --> 00:32:31.410

I.

238

00:32:32.460 --> 00:32:35.190

Again, not my world, I still go.

239

00:32:37.080 --> 00:32:39.330

CalHHS CDII Sacramento Office: In the middle, where I understand it's going.

240

00:32:40.350 --> 00:32:43.740

To be consent and access to all creation I.

241

00:32:46.110 --> 00:32:51.180

CalHHS CDII Sacramento Office: don't know that that's a sale like it feels I don't I in not knowing.

242

00:32:52.200 --> 00:32:53.220

It and people.

243

00:32:54.630 --> 00:32:55.170

are coming.

244

00:33:01.290 --> 00:33:01.950

CalHHS CDII Sacramento Office: In as me.

245

00:33:05.370 --> 00:33:08.850

CalHHS CDII Sacramento Office: This should be about patient client or not any financial.

246

00:33:12.030 --> 00:33:19.500

claudia williams: This is Claudia, I guess, I would just say there's a lot of large health systems that have mechanisms and have companies that are now.

247

00:33:20.460 --> 00:33:29.580

claudia williams: Providing de identified data for market purposes, so I guess i'm just asking if our intent is to block all that kind of activity in California.

248

00:33:30.570 --> 00:33:46.800

claudia williams: that's a very big to my my view that's a very big decision and all the different ways to identify and maybe that is our intent I just don't think we've really had a full discussion about that to support that's very different a much broader than federal restrictions.

249

00:33:47.850 --> 00:33:57.480

claudia williams: Our organization is banned from selling de identified data as well as identified this really applies to the existing practices across the whole system, in my view.

250

00:34:02.160 --> 00:34:09.210

CalHHS CDII Sacramento Office: Would that would it wouldn't limit what systems are doing today, and some of them are doing the research purposes are.

251

00:34:10.860 --> 00:34:13.200

CalHHS CDII Sacramento Office: Many years again.

252

00:34:14.430 --> 00:34:15.150

CalHHS CDII Sacramento Office: repurpose.

253

00:34:16.620 --> 00:34:26.400

CalHHS CDII Sacramento Office: Not from the various purposes, but to benefit things like research and other activities, I would be very cautious about us spending as much more broadly.

254

00:34:31.410 --> 00:34:40.290

CalHHS CDII Sacramento Office: Like my colleague, this is also not my wheelhouse entirely on ever I do have a question, it seems to me like Part of the purpose of this framework.

255

00:34:40.980 --> 00:35:08.190

CalHHS CDII Sacramento Office: Is around advancing the cause of clinical direct clinical care coordination, etc, and so is there a way to parse out how was applied within this framework vs la apply on their lives, so they were not trusting ourselves out over what we intend for these services versus everything.

256

00:35:09.240 --> 00:35:16.260

CalHHS CDII Sacramento Office: else I said the same thing twice, but i'm trying to wrap my head around the concept that gets the coriolis effect and Michelle.

257

00:35:17.910 --> 00:35:18.840

CalHHS CDII Sacramento Office: And that doesn't.

258

00:35:21.210 --> 00:35:26.040

CalHHS CDII Sacramento Office: start to sort of narrow other use cases outside.

259

00:35:28.650 --> 00:35:39.870

Helen Pfister: So yes, certainly nothing in this is intended to supersede any data exchange has done outside the framework and we can definitely take a look at the documents and make sure that that's see if we can make that any clearer.

260

00:35:41.070 --> 00:35:54.450

CalHHS CDII Sacramento Office: Because I think for the purposes of this product is framework we should definitely back down the hatches and say say and not have it be not sort of allow for there be an opportunity for.

261

00:35:56.010 --> 00:36:09.210

CalHHS CDII Sacramento Office: Information it's all built under my purpose in the long run philosophy is if there's an opportunity for your product market fusion people's health and human service and English and.

262

00:36:10.260 --> 00:36:11.130

that's pretty.

263

00:36:12.810 --> 00:36:13.020

Much.

264

00:36:15.180 --> 00:36:35.070

CalHHS CDII Sacramento Office: So, so my understanding is the data exchange that work is focused on identifiable confidential data to be exchanged to deliver search, I mean that's that's kind of the overarching principle so so kind of to the context of the comments it's focused on confidential data.

265

00:36:36.090 --> 00:36:48.210

CalHHS CDII Sacramento Office: Data that's protected and so from that context aligning with hipaa and making sure that it's not used for financial gain, makes a lot of sense to get into these comments about aligning that.

266

00:36:50.130 --> 00:36:57.570

CalHHS CDII Sacramento Office: If we don't align with hipaa work we're kind of shooting ourselves in the foot we've already got this alignment in California that makes it very hard for everybody.

267

00:36:58.110 --> 00:37:08.700

CalHHS CDII Sacramento Office: So aligning with hipaa seems like it should be a really strong principle and not doing something different than that, but I think have to michelle's point around what is the scope.

268

00:37:09.060 --> 00:37:24.270

CalHHS CDII Sacramento Office: it's the scope is confidential data that is not de identified data and to some of the comments GM plant, based on the conversations around that it's a whole different conversation and I don't think we should go down that rabbit hole or get sidetracked and.

269

00:37:25.920 --> 00:37:38.280

CalHHS CDII Sacramento Office: would love to have that conversation, but this is probably not the time or place so being clear that what we're doing with the data exchange framework is confidential data and and make sure I mean to Claudia and I.

270

00:37:39.900 --> 00:37:45.000

CalHHS CDII Sacramento Office: definitely agree with that, because so many of us talk to make sure we do that anyway.

271

00:37:47.550 --> 00:38:05.100

CalHHS CDII Sacramento Office: So maybe if we can so so in a nutshell understand your comments about to do it that's fine, but I think that's outside the scope of this particular effort and it's probably worthwhile at some point, but maybe not what we can cover here does help.

272

00:38:06.510 --> 00:38:07.680

I just want to agree with.

273

00:38:09.540 --> 00:38:23.070

CalHHS CDII Sacramento Office: That, because otherwise the baby over all of the various ways with the information that improve people's health as haha that's not really an autocrat in our balance I think that's a good good thing.

274

00:38:24.810 --> 00:38:25.110

Okay.

275

00:38:26.610 --> 00:38:30.930

CalHHS CDII Sacramento Office: So it sounds like we shift the thinking about how we.

276

00:38:32.520 --> 00:38:46.410

CalHHS CDII Sacramento Office: That we should be very intentional about the language here, focusing on identifiable data for the purposes of exchange in the context of the framework and trying to be cautious about the into only running blaney yeah my and other.

277

00:38:50.910 --> 00:38:56.940

Dr. Mark Ghaly: jonah before you move on this is probably so appreciate the conversation just happened and I think that.

278

00:38:57.750 --> 00:39:09.420

Dr. Mark Ghaly: You know, starting with carmela and Michelle Michelle comment, I think, very, very important to keep our eye on exactly what we're trying to do when I read the second bullet on prohibits exchange.

279

00:39:10.140 --> 00:39:29.580

Dr. Mark Ghaly: For participants direct or indirect financial benefit, I want to make sure that in the case of let's say an SSI application, where there is direct financial benefit from achieving approval of an SSI application that that that is not the intent right like the health information.

280

00:39:30.930 --> 00:39:42.870

Dr. Mark Ghaly: To populate and complete those applications is critical and, frankly, the lagging piece of information on so many of those getting timely approval as just one example, so.

281

00:39:44.670 --> 00:39:58.920

Dr. Mark Ghaly: My SIS suspicion is that's not what we intend to curtail but important, just to be clear that that does create for a participant a pretty direct financial benefit by achieving that benefit.

282

00:40:04.350 --> 00:40:04.740

CalHHS CDII Sacramento Office: Okay.

283

00:40:07.110 --> 00:40:07.530

CalHHS CDII Sacramento Office: Okay.

284

00:40:07.740 --> 00:40:08.070

um.

285

00:40:09.330 --> 00:40:09.570

CalHHS CDII Sacramento Office: yeah I.

286

00:40:10.980 --> 00:40:18.180

Helen Pfister: knew this would be tricky and the one thing I will add is that, as I may have not mentioned at the outset, we did take this progression of the DNA itself.

287

00:40:18.690 --> 00:40:24.090

Helen Pfister: and move the restrictive language which we're going to you know take everyone's comments consideration moved into the MPs.

288

00:40:24.990 --> 00:40:34.560

Helen Pfister: Which other we're trying to avoid many Members in the p amp P, a P amp P are easier to amend the video state itself so that was a mindful decision, because I think this is one of the trickier issues.

289

00:40:36.990 --> 00:40:38.550

Helen Pfister: Okay next slide please.

290

00:40:41.760 --> 00:40:51.630

Helen Pfister: i'm here, we got one or two comments that focused on health equity um and wanted language in the document wanted to make sure that participants.

291



00:40:52.380 --> 00:41:01.800

Helen Pfister: Participants would be required to utilize adopt data standards that best advance health equity, we agree with that, in principle, we obviously not have time to.

292

00:41:02.370 --> 00:41:07.860

Helen Pfister: Think through what this data standards should be I think it's going to be a bit of a you know, a decent amount of work.

293

00:41:08.400 --> 00:41:15.510

Helen Pfister: But to make sure that we keep focused on that we did add language in the in the in Section five of the dsa.

294

00:41:16.290 --> 00:41:30.630

Helen Pfister: That states that there will be specifications to be developed in the future that will set forth standards that advanced health equity on not quite a lot of clarity, yet on what the specifications will be but it's certainly a priority and want to make sure was actually in the dsa.

295

00:41:35.790 --> 00:41:43.170

CalHHS CDII Sacramento Office: Any comments from the group I think we'll see towards the end of this some of the policies and procedures that will be working on July one critic.

296

00:41:43.500 --> 00:41:54.180

CalHHS CDII Sacramento Office: specifications and this likely is going to be one of the highest priority items and purpose, not just with respect to equity, but also with respect to things like endpoints and other requirements versus mentors.

297

00:41:55.050 --> 00:42:09.840

CalHHS CDII Sacramento Office: And Camilla well I would agree it's important addition to the comments or press, we could just add add, as we said all along aligning with cms and other federal requirements of federal government is already looking at caltech.

298

00:42:09.840 --> 00:42:12.480

CalHHS CDII Sacramento Office: admission standards and just keep on messing.

299

00:42:13.920 --> 00:42:16.560

CalHHS CDII Sacramento Office: With you good suggestions and we'll be done.

300

00:42:22.260 --> 00:42:28.920

Helen Pfister: Okay i'm moving on to the next slide which is Section seven requirements to exchange, health and social services information.

301

00:42:30.090 --> 00:42:38.820

Helen Pfister: So what the section does is required participants to engage in the exchange of such information, either through entering into an agreement with a qualified hmo.

302

00:42:39.720 --> 00:42:45.210

Helen Pfister: Entering into an agreement with another entity that provides data exchange or using their own technology.

303

00:42:45.780 --> 00:42:55.710

Helen Pfister: And there was language in the prior draft of the dsi that were required participants that enter into an agreement with another entity, to quote ensure.

304

00:42:56.220 --> 00:43:03.450

Helen Pfister: that the other entity enables compliance with the minimum minimum requirements for data exchange that are set forth in the p amp ease and specifications.

305

00:43:04.200 --> 00:43:08.550

Helen Pfister: And at least one commenter noted that it would be difficult for a participant to ensure.

306

00:43:09.240 --> 00:43:24.840

Helen Pfister: That another entity does this, and so instead we made a change, and now the dsa requires participants to obtain reasonable assurances that the other entity, will enable the participant to to comply, so that was a in response to comments that we received.

307

00:43:29.040 --> 00:43:32.430

Helen Pfister: The other comment were receiving the section related to.

308

00:43:33.780 --> 00:43:47.760

Helen Pfister: Real time data exchange several comments is noted that at 133 provides for real time exchange of data and that the dsa and the pmt don't establish timeframes that sort of define what real time is.

309

00:43:49.260 --> 00:43:56.730

Helen Pfister: Again, this is something that we think it's going to require a little bit of thought and not something really had time to dig in on between time ago public comments and now.

310

00:43:57.600 --> 00:44:01.470

Helen Pfister: But we do agree that's important and so we've revised with the essay.

311

00:44:01.950 --> 00:44:08.970

Helen Pfister: To say that the participants will engage in real time exchange in accordance with the timeframe, support the policies and procedures.

312

00:44:09.390 --> 00:44:18.630

Helen Pfister: And one of the next to the policies will be working on would be policies that put more specificity around what constitutes real time exchange.

313

00:44:19.020 --> 00:44:27.600

Helen Pfister: Is it an hour it's been 24 hours depends on the data, etc, etc, as a lot of things to think through here, but we understand that that's the priority and will be, will be focused on that next iteration.

314

00:44:33.390 --> 00:44:35.040

CalHHS CDII Sacramento Office: Really, a couple of months, to start with.

315

00:44:38.820 --> 00:44:40.500

CalHHS CDII Sacramento Office: terminus with the language.

316

00:44:42.450 --> 00:44:54.000

CalHHS CDII Sacramento Office: What the language in the draft PSA was on number two around the real time data exchange and it address that at all or business entirely new language.

317

00:44:54.840 --> 00:45:05.850

CalHHS CDII Sacramento Office: I think part of the reason for asking and looking at what the responses in terms of shallow gauge and real time data is just the you know.

318

00:45:06.930 --> 00:45:23.730

CalHHS CDII Sacramento Office: anticipated challenges by some entities that will be required to execute the dsa and actually fulfilling that obligation, given the expansive number of entities that will be executing as over the next year.

319

00:45:25.440 --> 00:45:39.150

Helen Pfister: So there was a passing reference in the purpose and intent section of the dsi that sort of talk that said that the agreement steps for the common set of terms and conditions to support real time access to or change of health and social service information.

320

00:45:40.320 --> 00:45:47.790

Helen Pfister: That was all said and what we've done now is we've added a new provision in Section seven paragraph it's a new paragraph fee.

321

00:45:48.270 --> 00:45:58.800

Helen Pfister: That literally says participants chopped participants shall exchange in the real time exchange of health and social service information in accordance with the timeframe support in the posts and procedures.

322

00:46:01.230 --> 00:46:05.280

Helen Pfister: Understand seven this conference will be will be will be required fair amount of work.

323

00:46:07.500 --> 00:46:18.990

CalHHS CDII Sacramento Office: Thank you and I guess you know that we're striving for real time and understand that will be defined in the 80s, but there's a lot of work that goes into the House actually needs to happen.

324

00:46:19.740 --> 00:46:21.990

Helen Pfister: Absolutely yep totally agree.

325

00:46:23.190 --> 00:46:34.530

CalHHS CDII Sacramento Office: And just for everyone's occasion, so we know it's Secretary Gary mentioned we're going through this process of sun, setting as we're having in our governance, starting in July, through the end of the year.

326

00:46:35.160 --> 00:46:45.210

CalHHS CDII Sacramento Office: Next year for compliance, we need to have a similar process for developing next set of kpis including stakeholder engagement, so if we actually define things like.

327

00:46:45.690 --> 00:46:53.010

CalHHS CDII Sacramento Office: What is real time name, do we need to specify how might be different for different actors or maybe different requirements for different actors and we need.

328

00:46:53.460 --> 00:47:00.000

CalHHS CDII Sacramento Office: One and your other comments and advice about how that should be structured policy and procedure so.

329

00:47:00.630 --> 00:47:16.170

CalHHS CDII Sacramento Office: that's to go that we've heard loud and clear from public comments he greater specificity, some of those networks national don't actually specify I don't think actually said what specifies what we can actually means and so that's correct.

330

00:47:18.000 --> 00:47:21.570

CalHHS CDII Sacramento Office: So we need to, we need to be really clear as we've heard from public comments that's.

331

00:47:24.360 --> 00:47:24.840

Your problem.

332

00:47:32.040 --> 00:47:33.870

Helen Pfister: Okay next slide please.

333

00:47:35.130 --> 00:47:37.440

Helen Pfister: So it's actually native the dsa i'm.

334

00:47:38.100 --> 00:47:49.050

CalHHS CDII Sacramento Office: Sorry, I have one one for me one for authorization more you wanted to speak to one of your comments observations you want to bring up now i'll touch on like the language, the language access.

335

00:47:51.180 --> 00:48:03.750

CalHHS CDII Sacramento Office: Did you change the structure for organizations or the way you can, if you wouldn't mind like stating the comment that you made so that we can we can address whether or not it was.

336

00:48:04.860 --> 00:48:14.610

CalHHS CDII Sacramento Office: So the language was except for discloses that may be made without an authorization participants shall not disclosed unless there is an authorization.

337

00:48:15.870 --> 00:48:23.670

CalHHS CDII Sacramento Office: And the way that never works, it is you can disclose unless you need an authorization and that's a lot easier to play.

338

00:48:25.050 --> 00:48:30.870

CalHHS CDII Sacramento Office: craps the out is is the same right there is so much.

339

00:48:32.070 --> 00:48:34.740

CalHHS CDII Sacramento Office: requirement authorizations when they're not really needed.

340

00:48:35.880 --> 00:48:39.300

CalHHS CDII Sacramento Office: And we're doing it this way, just plays into her confusion.

341

00:48:42.120 --> 00:48:44.430

CalHHS CDII Sacramento Office: I was like I don't know if it's been incorporated.

342

00:48:45.570 --> 00:48:53.130

Helen Pfister: said, the language that's in the system to turn off the dsa is the language that you just read, so we can go back and take another look at that.

343

00:48:54.390 --> 00:48:56.340

Helen Pfister: But we didn't make any change in response to that comment.

344

00:48:57.390 --> 00:49:11.790

CalHHS CDII Sacramento Office: And what I think what you're suggesting market you think there's a better way of stating and so that is more aligned with currently example in the definition yes Okay, I actually do think that will get you have other comments about.

345

00:49:13.350 --> 00:49:23.820

CalHHS CDII Sacramento Office: Related to this, and so we should bring will bring it back and trying to get him one requires authorizations under what circumstances and where there may be more nervous mission.

346

00:49:27.780 --> 00:49:28.590

CalHHS CDII Sacramento Office: Okay, thank you.

347

00:49:31.170 --> 00:49:40.140

Helen Pfister: Okay um privacy and security there were several comments comments talked about the importance of patient consent and patient education with respect to the data exchange framework.

348

00:49:41.340 --> 00:49:44.910

Helen Pfister: We agree, and we are going to.

349

00:49:46.500 --> 00:49:58.320

Helen Pfister: Be at the incentives that cow hhs will develop resources intended to help individual users understand how the how the framework works, the benefits of information sharing.

350

00:49:59.190 --> 00:50:09.540

Helen Pfister: processes for pending consent, etc, etc, so the idea really is that there will be a set of resources that are very patient education focused.

351

00:50:10.590 --> 00:50:18.990

Helen Pfister: To ensure that patients, you know back to what Secretary Kerry said about putting the person back in the Center to ensure that patients are given the.

352

00:50:19.710 --> 00:50:28.980

Helen Pfister: resources they need to understand what this means for them and what their rights and responsibilities rights, rights are rights and authorities are with respect to data sharing under the data exchange framework.

353

00:50:39.360 --> 00:50:39.720

That.

354

00:50:41.910 --> 00:50:42.570

CalHHS CDII Sacramento Office: was wrong.

355

00:50:43.650 --> 00:50:50.010

Helen Pfister: Okay section 10 is the section on individual access services was also related policy here.

356

00:50:51.060 --> 00:50:56.070

Helen Pfister: And the comments we got here we're and again back to putting the patient in the person back in the Center.

357

00:50:57.420 --> 00:50:58.110

Helen Pfister: Next slide please.

358

00:50:59.490 --> 00:51:00.030

Helen Pfister: um.

359

00:51:01.170 --> 00:51:11.880

Helen Pfister: Were that individual users patients should have the right to inspect and correct discrepancies in their health records and also to request self reported information to be added to their records.

360

00:51:12.900 --> 00:51:20.310

Helen Pfister: So we in the essay itself, which is like very generally out of the word bi directional to the language in the.

361

00:51:20.850 --> 00:51:27.090



Helen Pfister: In the section when we get to the get to the individual Apps as policy you'll see we have some more specifics on how that.

362

00:51:27.450 --> 00:51:36.930

Helen Pfister: How that will work, so I would actually ask you to hold comments on this concept until we get to the policy and we can dig into it more detail PICs the extent that folks have have feedback.

363

00:51:40.770 --> 00:51:44.760

Helen Pfister: Unless anyone objects, I would say move on to the next slide.

364

00:51:46.260 --> 00:51:51.690

CalHHS CDII Sacramento Office: And just knowing for everyone 11 non cooperation orchestration and fill an integration work not.

365

00:51:52.920 --> 00:51:56.190

CalHHS CDII Sacramento Office: anyone has any quick comments or concerns on those.

366

00:51:58.140 --> 00:51:59.430

CalHHS CDII Sacramento Office: In our home or.

367

00:52:01.710 --> 00:52:02.490

CalHHS CDII Sacramento Office: Your apartment.

368

00:52:05.160 --> 00:52:05.520

CalHHS CDII Sacramento Office: Okay.

369

00:52:07.020 --> 00:52:22.860

Helen Pfister: Okay um so on enforcement so mentors emphasize how important is going to be a force that there's enforcement mechanism governing this framework and noted there no specifics on enforcement in the dsa or the piano piece at this point.

370

00:52:24.150 --> 00:52:34.170

Helen Pfister: We are aware that we haven't made any changes, yet I think we said at the last meeting and continue to iterate that reiterate that we are going to have an enforcement policy.

371

00:52:34.620 --> 00:52:45.570

Helen Pfister: That will be one of the high priority policies for the next set of policy development and so that is going to be we're not ignoring it use them it's critical we just that's going to be sort of in phase two of the policies and procedures.

372

00:52:53.100 --> 00:52:56.040

Helen Pfister: Okay um other comment in this area was.

373

00:52:57.120 --> 00:52:57.570

CalHHS CDII Sacramento Office: comments.

374

00:53:00.090 --> 00:53:12.270

CalHHS CDII Sacramento Office: Thank you, you will be surprised, thank you continue to believe that at 133 does not provide worse with authority and we require legislative change in order to move toward a force for.

375

00:53:15.780 --> 00:53:17.700

CalHHS CDII Sacramento Office: Good Thank you did you have a.

376

00:53:25.500 --> 00:53:26.070

CalHHS CDII Sacramento Office: homeless elements.

377

00:53:27.180 --> 00:53:29.100

CalHHS CDII Sacramento Office: Important i'm.

378

00:53:31.440 --> 00:53:33.840

CalHHS CDII Sacramento Office: On number two on the individual.

379

00:53:34.890 --> 00:53:36.720

CalHHS CDII Sacramento Office: Data we strongly support that.

380

00:53:38.040 --> 00:53:50.280

CalHHS CDII Sacramento Office: image bunch of legislation in the capital right now to take responsibility for patient blocking my my just a general comment, this is one of the elite of the purse we saw the actual document.

381

00:53:51.330 --> 00:53:56.760

CalHHS CDII Sacramento Office: Because how that that's a very working concept but it's also very important how it's written because it's something that.

382

00:53:58.260 --> 00:54:03.360

CalHHS CDII Sacramento Office: is addressed by information blogging is addressing the current California law and.

383

00:54:05.640 --> 00:54:06.690

CalHHS CDII Sacramento Office: negotiate so be.

384

00:54:07.830 --> 00:54:09.390

CalHHS CDII Sacramento Office: careful how much.

385

00:54:12.630 --> 00:54:21.540

Helen Pfister: So the language in the dsa itself is very close to what's on the screen here literally says nothing in this agreement shall prohibit an individual user.

386

00:54:22.170 --> 00:54:29.850

Helen Pfister: or an individual users per REP from opting out of having to individually individually years as a phr pH is exchanged pursuant to this agreement.

387

00:54:30.870 --> 00:54:35.190

Helen Pfister: So weren't trying to create any sort of anything new here we're just trying to clarify that, so that this is not in any way.

388

00:54:37.230 --> 00:54:37.680

Helen Pfister: um.

389

00:54:39.990 --> 00:54:42.660

Helen Pfister: ability to opt out of having information having information shared.

390

00:54:45.690 --> 00:54:46.170

CalHHS CDII Sacramento Office: With Hello.

391

00:54:47.820 --> 00:54:48.210

CalHHS CDII Sacramento Office: Charles.

392

00:54:50.280 --> 00:54:51.120

CalHHS CDII Sacramento Office: Thank you now.

393

00:54:52.740 --> 00:55:03.300

CalHHS CDII Sacramento Office: So when you're talking about an individual or individual user you're not you're not including the entities so talking about actual individual you have given me and.

394

00:55:04.380 --> 00:55:14.130

CalHHS CDII Sacramento Office: you're not talking about the media will opt out of having their health information exchange hundred hipaa the treatment plan provider like it currently is you're talking about.

395

00:55:15.210 --> 00:55:23.880

CalHHS CDII Sacramento Office: They can opt out of having the health information exchange exchange information just want to make sure we're not messing up the current practices here.

396

00:55:26.250 --> 00:55:31.200

Helen Pfister: we're not intending to that that's a fair point let's, let us give some thought to how we can make that a little bit clearer.

397

00:55:38.310 --> 00:55:45.090

claudia williams: I think I don't know how to address this honestly, but I think several comments this morning refer to.

398

00:55:45.540 --> 00:55:53.850

claudia williams: What is the scope of defining what constitutes information shared under the framework versus information shared elsewhere.

399

00:55:54.570 --> 00:56:01.800

claudia williams: And I think a lot of the things people are worried about are lawful things they're doing now.

400

00:56:02.250 --> 00:56:15.000

claudia williams: That maybe would they'd have to stop doing under this framework, and so I think I would just recommend that this to get much tighter on what constitutes information shared under the framework.

401

00:56:15.510 --> 00:56:27.870

claudia williams: I don't think we intend to maybe i'm wrong, but I don't think we're trying to just completely remake the way data is exchanged under hipaa today but there's several places in the policies that would do that.

402

00:56:28.830 --> 00:56:36.930

claudia williams: So I think perhaps so I don't know how to solve that because the way it's framed right now suggest that just about everything would be considered.

403

00:56:37.590 --> 00:56:49.590

claudia williams: Data sharing framework exchange so maybe that's just something you guys can take back and think about but anywhere we're establishing limitations that are not the limitations, we operate under today.

404

00:56:50.130 --> 00:57:03.780

claudia williams: And, and that is broadly construed to be all information sharing, I think that that could be problematic so maybe just again I don't think we can solve it right now, but I think you guys will want to think about that, before you release the document.

405

00:57:06.900 --> 00:57:07.200

CalHHS CDII Sacramento Office: I.

406

00:57:08.940 --> 00:57:20.790

CalHHS CDII Sacramento Office: think the flip side of that is that to the degree that framework facilitates something additional beyond what is currently existing outside of the framework.

407

00:57:21.480 --> 00:57:31.470

CalHHS CDII Sacramento Office: That we don't necessarily want to map over all of this sort of permissions or you know around this business these.

408

00:57:32.010 --> 00:57:37.320

CalHHS CDII Sacramento Office: are possible outside of the framework and the reason i'm going to say that because.

409

00:57:38.160 --> 00:57:47.340

CalHHS CDII Sacramento Office: You know, consumers and users aren't necessarily aware pretty and probably wouldn't be happy about all of those things, and so.

410

00:57:48.180 --> 00:57:56.220

CalHHS CDII Sacramento Office: This is a government led effort to do something for the good right, and so I do think that we have the whole what happens within the.

411

00:57:57.000 --> 00:58:01.290

CalHHS CDII Sacramento Office: framework to that higher standard rather than see this as.

412

00:58:01.770 --> 00:58:10.770

CalHHS CDII Sacramento Office: Supporting just a business function, which again outside of the favor fine it is what it is somebody did or didn't do their job at the federal level or whatever.

413

00:58:11.070 --> 00:58:22.170

CalHHS CDII Sacramento Office: But within the framework to the degree that we can hold that higher standard without disrupting what happens opposite is great, and I know that might be hard, but it seems like you have to try to.

414

00:58:24.390 --> 00:58:32.100

CalHHS CDII Sacramento Office: Thank you, I don't see that being consistent I think that's actually a good point and not consistent with what we're suggesting we want to make sure we're not.

415

00:58:32.610 --> 00:58:39.930

CalHHS CDII Sacramento Office: inadvertently changing business practices that are allowed today, but we also may want to expand certain things that could be allowed.

416

00:58:42.540 --> 00:58:43.020

CalHHS CDII Sacramento Office: or.

417

00:58:45.390 --> 00:58:50.220

Helen Pfister: yeah and I would add to that extent certain things that could be allowed, but also require certain exchange currently is a required.

418

00:58:58.860 --> 00:59:01.290

CalHHS CDII Sacramento Office: To repeat, that is all.

419

00:59:01.980 --> 00:59:17.190

Helen Pfister: I said yeah yeah I think it's it's to expand exchange it's already permissible, but also in some instances to require certain exchange that isn't required mean hipaa permits covered entities to share data for treatment purposes, without.

420

00:59:18.300 --> 00:59:30.180

Helen Pfister: authorization the under this framework entities would have to report will be that's one of the required purposes under the policy, so they would require to share information for treatment purposes so that's like one of the extension of this goes over what hipaa.

421

00:59:31.650 --> 00:59:32.010

Does.

422

00:59:33.780 --> 00:59:44.490

Helen Pfister: But it's not intended to in any way impact any exchange that's currently going on, or that's permissible or that is done under the existing hipaa or State law for other federal offering work.

423

00:59:48.030 --> 00:59:56.220

CalHHS CDII Sacramento Office: Okay let's see people recognizing that distinction there real quick there's general rule or a criminal and.

424

00:59:57.840 --> 01:00:08.250

CalHHS CDII Sacramento Office: It is that police are there, a couple of these things that become a precursor to all of this, and that as as we're parenting amount things that we really don't intend to be changing and we just need to stay.

425

01:00:08.490 --> 01:00:24.960

CalHHS CDII Sacramento Office: Out of it for the two or three then we just need to stay up front, so that people have a context, because there is a big federal context within this framework sense like like one example, one example, the wellness raise your father's permitted under USAid.

426

01:00:26.220 --> 01:00:36.870

CalHHS CDII Sacramento Office: And to try to integrate with Google, and then there is no desire to change what did we say in Berkeley change the business practices going on today there might be a couple of statements that helped to round.

427

01:00:37.980 --> 01:00:38.580

CalHHS CDII Sacramento Office: People very.

428

01:00:39.870 --> 01:00:40.110

CalHHS CDII Sacramento Office: Good.

429

01:00:41.760 --> 01:00:51.450

Helen Pfister: yeah and we do have language and one of the policies, but certain we can, if this needs to be tweaked we can tweak it, but it does express we say that nothing in this policy is intended to.

430

01:00:51.960 --> 01:00:58.080

Helen Pfister: restrict the participants from having different arrangements outside the dsi as long as the participants so complies with the dsa.

431

01:00:59.190 --> 01:01:03.540

Helen Pfister: But we can think about maybe expanding that little bit to address some of the comments we've just heard three.

432

01:01:03.750 --> 01:01:04.440

CalHHS CDII Sacramento Office: Three marks.

433

01:01:05.700 --> 01:01:13.860

CalHHS CDII Sacramento Office: On the lines of mercy but i'm not sure where this fits, but I think it's related to their language that the business.

434

01:01:14.820 --> 01:01:24.360



CalHHS CDII Sacramento Office: Just to summarize it a business associate agreement, I thought could trump the provisions of a the exchange framework, you can then the agreement.

435

01:01:25.200 --> 01:01:35.910

CalHHS CDII Sacramento Office: And I thought that was backwards, that that you could, for example, I had saved this individual access, where you have business associate agreement says, do not allow.

436

01:01:36.660 --> 01:01:39.810

CalHHS CDII Sacramento Office: Finding access to the individual five business associates.

437

01:01:40.740 --> 01:01:50.730

CalHHS CDII Sacramento Office: And I don't know what whether that comment was incorporated I don't know if it's changed we haven't really covered it, but it does go to win carmela was just saying, I think that is.

438

01:01:51.600 --> 01:01:55.710

CalHHS CDII Sacramento Office: Some business associate agreement practices that are inconsistent with with.

439

01:01:56.490 --> 01:02:10.530

CalHHS CDII Sacramento Office: The framework should be alarmed if you genuinely instead the framework and agreement should be should be directed, so I think we're just a marvelous that for all the signatories of the dsa adventure.

440

01:02:11.370 --> 01:02:25.050

CalHHS CDII Sacramento Office: covered entities is with partners those days need to align with the framework and different navigation on supersede different preference, but the language I saw it the other way around.

441

01:02:26.250 --> 01:02:29.310

CalHHS CDII Sacramento Office: I don't know what it is today the language is on the past.

442

01:02:30.480 --> 01:02:30.660

CalHHS CDII Sacramento Office: Oh.

443

01:02:31.800 --> 01:02:40.680

Helen Pfister: yeah so that wasn't the intent i'll have to go back and look the language you're referring to and figure out like what it was what led to that because that doesn't mean we should work will have to clarify that.

444

01:02:41.640 --> 01:02:50.940

Helen Pfister: I mean the the spirit is certainly, but a participant can get the participant cannot enter into BA and say oh sorry can do this might be, he was I can't I mean that's just that that's that's not the intent at all.

445

01:02:53.550 --> 01:02:56.160

CalHHS CDII Sacramento Office: Thank you for your hand up.

446

01:02:58.530 --> 01:03:13.170

claudia williams: yeah I just forgot to put it down yeah I do think, though, that this question of defining what is meant by deed what under what circumstances are we changing under the framework and and and what circumstances, are we not I don't I don't have clarity on that.

447

01:03:18.990 --> 01:03:25.350

CalHHS CDII Sacramento Office: yeah, I think, for your comments and suggestion will need to just double check go back and see if we can specify that with more.

448

01:03:27.300 --> 01:03:29.040

CalHHS CDII Sacramento Office: Clarity more.

449

01:03:31.680 --> 01:03:36.060

CalHHS CDII Sacramento Office: Okay, there are no more hands raised in the room, and so I mean.

450

01:03:38.700 --> 01:03:51.450

Helen Pfister: Okay, so next we'll move on to the policies and procedures um and, as I said, next slide please you know, as I said, we made some action typically made any changes the policy to we made some changes to the other ones.

451

01:03:52.710 --> 01:04:01.110

Helen Pfister: The slides only flag, the substantive ones, there are some minor minor clerical changes that we don't highlight so um, but I do want to go through the ones that we picked up that are significant.

452

01:04:01.980 --> 01:04:19.980

Helen Pfister: i'm the first one, and I think the most straightforward one next slide please oh I probably just jinx myself, by saying that i'm originally the policy and many of the dsa provided that if an amendment was approved the government governance entity would have.

453

01:04:21.060 --> 01:04:21.840

Helen Pfister: Would circulate.

454

01:04:23.340 --> 01:04:27.600

Helen Pfister: circulated to the participants with at least 45 days before the effective date.

455

01:04:28.350 --> 01:04:44.550

Helen Pfister: We got a lot of comments, saying that 45 days was far too short, and so we have accepted those comments agreed to them and have extended the or increased the timeframe 280 days unless a shorter period of time is necessary to comply with any sort of changing applicable law.

456

01:04:51.660 --> 01:04:52.110

CalHHS CDII Sacramento Office: and

457

01:04:53.190 --> 01:04:54.510

CalHHS CDII Sacramento Office: I think they're important one.

458

01:04:55.920 --> 01:04:56.460

CalHHS CDII Sacramento Office: By one.

459

01:05:02.010 --> 01:05:07.440

CalHHS CDII Sacramento Office: Thank you, so we have made some visibility for 480 days that.

460

01:05:09.540 --> 01:05:20.610

CalHHS CDII Sacramento Office: that's that's certainly better but, and I know it's probably not going to discuss number two the vendors have policies and procedures begging for both events PSA.

461

01:05:21.420 --> 01:05:32.730

CalHHS CDII Sacramento Office: awesome speakers are hearing a comment any last time, which is there really should be some provision in here about the cadence of how these amendments happen.

462

01:05:33.240 --> 01:05:42.840

CalHHS CDII Sacramento Office: really only one sort of second amendments can be happening at time, I think, ideally from cms perspective is the following manual process where.

463

01:05:43.650 --> 01:05:59.640

CalHHS CDII Sacramento Office: Both the practices that vendors everyone the jails are going to fall good know much you know they you know they used to be medicare efficient fee schedule, you know it's going to come out the summer we don't be finalized November everyone's sort of used to that and all that.

464

01:06:00.960 --> 01:06:13.470

CalHHS CDII Sacramento Office: Because the way that this is written, right now, no brainers on multiple events going on at one time, they can happen at any time it's impossible to find a colleague that was perfect.

465

01:06:15.420 --> 01:06:29.700

CalHHS CDII Sacramento Office: yeah I think we recognize it challenges there, we also recognize that there's a great deal of work on it needs it needs to take place next 12 months, so I think longer term having a set cadence makes sense and the shorter term.

466

01:06:30.180 --> 01:06:40.770

CalHHS CDII Sacramento Office: I would just be concerned that we're hamstringing ourselves with only into an annual process, which means, for example, there will be no updates to things like specifications for timely.

467

01:06:41.460 --> 01:06:57.390

CalHHS CDII Sacramento Office: timeliness for 12 months and we've heard from many to feed the ducks the next six months for the pmt before the tsa needs to be signed, so

I think we need to consider longer term what that period is views and said something that would be established shorter term.

468

01:06:59.040 --> 01:07:02.460

CalHHS CDII Sacramento Office: That would be very burdensome and what happens during the effort.

469

01:07:05.640 --> 01:07:13.410

CalHHS CDII Sacramento Office: yeah one of the comments and just as a follow up to David, this is lori like it.

470

01:07:14.490 --> 01:07:17.970

CalHHS CDII Sacramento Office: You would circulate amendment for signature which.

471

01:07:18.990 --> 01:07:24.240

CalHHS CDII Sacramento Office: To me seems to be burdensome generally when there's an agreement and that there's an amendment.

472

01:07:24.990 --> 01:07:45.270

CalHHS CDII Sacramento Office: there's there's sort of this set for this is the effective date we don't wait for signatures will not wait for fully executed to implement that policy procedure so like an EPL or any other amendment to policies, I would hate to see us waiting for signatures from thousands.

473

01:07:50.850 --> 01:07:53.190

CalHHS CDII Sacramento Office: I don't think anyone disagree with that.

474

01:07:54.510 --> 01:08:08.700

CalHHS CDII Sacramento Office: perspective of the state, easy to track all of your follow up, so I think you know recommendation is there, different ways first amendment's to be able to not require signatures, certainly in the name these they don't require this around the dsa so.

475

01:08:09.780 --> 01:08:12.990

CalHHS CDII Sacramento Office: How long have you reject consider whether.

476

01:08:13.320 --> 01:08:13.530

You.

477

01:08:14.670 --> 01:08:17.580

Helen Pfister: Look at the department about that you said, like what the requirements are.

478

01:08:24.030 --> 01:08:25.170

CalHHS CDII Sacramento Office: Okay, no more hands.

479

01:08:27.240 --> 01:08:30.750

Helen Pfister: Okay, so next slide please breach notification.

480

01:08:31.890 --> 01:08:46.950

Helen Pfister: I think that one of the single issues you've got the most comments on was the breach notification time when that was in the initial draft of the policies and procedure which i'm sure many of you recall required notification within 72 hours.

481

01:08:48.450 --> 01:09:00.600

Helen Pfister: We took that to heart and what we have done now is revised the policy to require participants to notify both the governance entity and the impact of participants, as soon as reasonably practicable.

482

01:09:01.530 --> 01:09:13.620

Helen Pfister: But certainly within any time frames required by applicable law that takes into account that different laws, but they apply your have different timeframes so that was our attempt to strike a compromise on the breach notification timeline.

483

01:09:19.980 --> 01:09:20.340

CalHHS CDII Sacramento Office: couple of comments.

484

01:09:22.860 --> 01:09:43.890

CalHHS CDII Sacramento Office: Well, take over because I got this I know i'm there for me to sell papers for Medical Association, I certainly this is another one where you know i'll want to see the the actual document but i'm certainly appreciate the changes that have been suggested here.

485

01:09:45.240 --> 01:09:54.780

CalHHS CDII Sacramento Office: Earlier we want to tie this back to applicable law that says his apartment or law that has been negotiated down the road one time is very well defined so.

486

01:09:56.640 --> 01:10:03.060

CalHHS CDII Sacramento Office: You know this was written on here looks looks pretty good you know for the season, but.

487

01:10:04.770 --> 01:10:05.400

CalHHS CDII Sacramento Office: Then he did.

488

01:10:07.560 --> 01:10:10.050

CalHHS CDII Sacramento Office: And it looks like okay Kathy Kathy said.

489

01:10:11.730 --> 01:10:14.730

Cathy Senderling-McDonald: hi and also hi everybody say had to join late the.

490

01:10:15.810 --> 01:10:26.190

Cathy Senderling-McDonald: Timely i'll say the cal saws GPA had a has an annual conference that's our eligibility system that are migrating towards the one single statewide system.

491

01:10:26.550 --> 01:10:36.210

Cathy Senderling-McDonald: And so i'm apropos to this particular item I wanted to kind of echo what what David just said, which is that this was one that we certainly commented on.

492

01:10:36.540 --> 01:10:43.320

Cathy Senderling-McDonald: We have pretty significant breach notification requirements, both to the State, as well as to the Federal Government for things like.

493

01:10:43.620 --> 01:10:54.660

Cathy Senderling-McDonald: calfresh or snap data medicare medicaid data that sort of thing so i'm making sure that those are not either superseded or layered on.

494

01:10:55.380 --> 01:10:59.580

Cathy Senderling-McDonald: In an inappropriate way is very important, so look forward to seeing the changes and.

495

01:11:00.450 --> 01:11:17.880

Cathy Senderling-McDonald: I apologize if I missed it since I didn't join until about 1030 Is there going to be another review or what's going to happen if you've already covered this cover it later apologies, I can get that offline, but I just want to make sure we would know kind of what happened after this.

496

01:11:20.160 --> 01:11:28.260

CalHHS CDII Sacramento Office: This gentleman, we were we're going to take your comments from today suggested modifications we're going to incorporate those.

497

01:11:29.160 --> 01:11:42.810

CalHHS CDII Sacramento Office: Make the advanced the recommendations to the Secretary publish the dsa the emmys in July one start the process of amending work at for adding up NPs or mentoring them once you see the language it's deemed appropriate and necessary.

498

01:11:44.850 --> 01:11:45.120

CalHHS CDII Sacramento Office: Next.

499

01:11:47.820 --> 01:11:49.200

Cathy Senderling-McDonald: Thanks appreciate the quick rundown.

500

01:11:50.910 --> 01:11:58.230

CalHHS CDII Sacramento Office: Do you envision envision that this group we're going to see sort of the outcome of this conversation before coasted Saturday.

501

01:11:59.700 --> 01:12:00.120

CalHHS CDII Sacramento Office: No.

502

01:12:02.220 --> 01:12:10.980

CalHHS CDII Sacramento Office: you'll see a summary you'll see a summary of all the comments of what was discussed here and the recommendations, but we're not going to publish another draft of the psat for more.

503



01:12:12.600 --> 01:12:16.710

CalHHS CDII Sacramento Office: and completely understand no revisions, but it might be helpful if we.

504

01:12:17.850 --> 01:12:18.540

CalHHS CDII Sacramento Office: have our Labor.

505

01:12:20.130 --> 01:12:21.870

CalHHS CDII Sacramento Office: But understand understand the rules.

506

01:12:28.020 --> 01:12:35.760

CalHHS CDII Sacramento Office: yeah Thank you certainly do appreciate the the alignment, we may have a similar comments and but.

507

01:12:37.560 --> 01:12:50.460

CalHHS CDII Sacramento Office: I think, also had had hoped that there would be a reconsideration of requiring notification to the governance entity altogether, given that they're seeing requirements for notification It just seems.

508

01:12:50.820 --> 01:13:01.950

CalHHS CDII Sacramento Office: Like duplication unnecessary realize it's not for your landing at least as of now, but it didn't seem like an area where you know there's existing requirements.

509

01:13:03.270 --> 01:13:18.750

CalHHS CDII Sacramento Office: You know many various entities if you're too, but this will be layered On top of that, but you know, considering that this will continue to be under the purview of that aren't as easy I am feeling is.

510

01:13:20.910 --> 01:13:25.830

Helen Pfister: And I think at some point that may well change, but you know as jonah said, this is, this is all new.

511

01:13:27.750 --> 01:13:36.180

Helen Pfister: To me, a lot of learning done here and initiative, which I think it makes sense to the governance entity to be aware of breaches um maybe at some point down the line that won't be necessary anymore.

512

01:13:42.630 --> 01:13:44.430

Helen Pfister: Anything else I should be going to preach definition.

513

01:13:46.290 --> 01:13:46.710

CalHHS CDII Sacramento Office: wrong.

514

01:13:48.690 --> 01:13:49.620

Helen Pfister: I didn't come on.

515

01:13:50.700 --> 01:13:51.030

CalHHS CDII Sacramento Office: yeah.

516

01:13:52.650 --> 01:14:04.110

Helen Pfister: um So there are a number of commenters you requested, the definition of breach be identical to the definition under hipaa which doesn't quite work, because the definition of breach under hipaa refers to.

517

01:14:05.040 --> 01:14:08.460

Helen Pfister: disclosure is not permitted under some Part II, which doesn't apply to.

518

01:14:08.970 --> 01:14:13.560

Helen Pfister: entities that aren't covered entities or participate in that exchange framework, so it didn't quite work to do that.

519

01:14:13.950 --> 01:14:20.700

Helen Pfister: But we tried to do as a compromise to kind of get to the same place is to use the definition of breach.

520

01:14:21.240 --> 01:14:37.590

Helen Pfister: That set forth in college California state health information policy manual, and that is based on both hipaa and State law and i'm sure you're not going to ask me exactly what that definition is which we publish it included in here, but did not, for which I.

521

01:14:38.610 --> 01:14:58.470

Helen Pfister: apologize um, but let me see if I can just kind of give you an overview what it says to get any thoughts, you may have so just find the policy okay so breach shameen we get i'll just read it, the unauthorized acquisition access disclosure or use.

522

01:14:59.850 --> 01:15:01.620

Helen Pfister: of health and social service information.

523

01:15:02.850 --> 01:15:12.180

Helen Pfister: In a manner, not permitted by the dsa or applicable law so pretty straightforward and then it goes on to say that that includes both unencrypted data.

524

01:15:12.930 --> 01:15:23.910

Helen Pfister: That either was or is believed to have been required by unauthorized person or encrypted data that was or was believed to have been acquired by a note by an unauthorized person.

525

01:15:24.390 --> 01:15:35.100

Helen Pfister: Where the encryption key or security credential was also acquired by or deleted required by an unauthorized person, so it covers both unencrypted data and encrypted data if there's a risk with that data could be.

526

01:15:36.000 --> 01:15:46.800

Helen Pfister: identified and again refers to unauthorized acquisition access disclosure use of information in a matter of not not prohibited not permitted by the dsa or applicable law.

527

01:15:55.140 --> 01:15:55.380

CalHHS CDII Sacramento Office: sure.

528

01:15:58.350 --> 01:16:04.230

CalHHS CDII Sacramento Office: Thank you very much for that explanation, yes, it was going to ask you to read it, and you did so well so.

529

01:16:06.720 --> 01:16:12.210

CalHHS CDII Sacramento Office: I did wanted to just run through a case study, so if you're a covered entity.

530

01:16:13.350 --> 01:16:15.810

CalHHS CDII Sacramento Office: And this applies to you.

531

01:16:17.070 --> 01:16:29.040

CalHHS CDII Sacramento Office: When it says applicable law it's hipaa it's not any other type of standard unless specifically called out the dsa that's the way that this paragraph would work.

532

01:16:34.140 --> 01:16:35.190

Helen Pfister: i'm sorry i'm not quite.

533

01:16:36.030 --> 01:16:40.110

CalHHS CDII Sacramento Office: enough on the question I apologize so so so so if you're at home planning provider.

534

01:16:41.790 --> 01:16:49.410

CalHHS CDII Sacramento Office: The way i'm interpreting what you're saying i'm trying to ferment is that the definition of a breach of the definition of a breach of the hipaa.

535

01:16:51.810 --> 01:16:52.710

CalHHS CDII Sacramento Office: Under this language.

536

01:16:54.600 --> 01:17:08.220

Helen Pfister: Well, it wouldn't know I mean that's that was suggesting people suggestion people gave to us and we didn't accept that because hipaa doesn't really apply to all the entity so exchanging information and have that exchange framework, so instead we use the definition from.

537

01:17:10.860 --> 01:17:11.670

Helen Pfister: The statewide.

538

01:17:12.990 --> 01:17:17.400

Helen Pfister: Health and patient policy manual, which is based on both hippos language and State law language.

539

01:17:17.880 --> 01:17:34.020

CalHHS CDII Sacramento Office: Yes, we just stand but i'm trying to get at is, if you are a non covered non hipaa covered entity or you are inversely him a covered entity, the application of this cross reference that you're you're you're going to include as language you're going to include.

540

01:17:36.090 --> 01:17:41.400

CalHHS CDII Sacramento Office: doesn't even happen, it is subject to the political hipaa definition and all the other entities.

541

01:17:42.420 --> 01:17:43.380

CalHHS CDII Sacramento Office: clickable to whatever.

542

01:17:44.820 --> 01:17:56.280

CalHHS CDII Sacramento Office: or doesn't require the different entities to be happy to include all reach definitions i'm trying to figure out if you split the baby here or whether you're still making folks change the way they define marriage.

543

01:17:56.520 --> 01:18:00.930

Helen Pfister: Okay yeah so we did try to split the baby here so that the hipaa definition would apply to hit the entities.

544

01:18:01.560 --> 01:18:03.060

CalHHS CDII Sacramento Office: Okay perfect, thank you very much.

545

01:18:11.610 --> 01:18:14.580

CalHHS CDII Sacramento Office: Okay, I don't see any other comments or hands raise.

546

01:18:15.630 --> 01:18:17.640

CalHHS CDII Sacramento Office: Your on the Info.

547

01:18:18.780 --> 01:18:27.240

Helen Pfister: So next slide please the permitted required and prohibitive purposes policies, so there were a number of changes here.

548

01:18:28.650 --> 01:18:36.390

Helen Pfister: This is one area again where we address the issue of whether part the data can be exchanged under the data exchange framework.

549

01:18:37.200 --> 01:18:47.250

Helen Pfister: The answer, as I said before, is yes, and so we changed some lenders policy to say that participants to exchange any information that so it's 42 CFR, part two.

550

01:18:47.850 --> 01:18:56.730

Helen Pfister: As long as appropriate authorizations are obtained and it's for a permitted purpose under the required prohibited from required for him prohibited implemented purposes policy.

551

01:19:02.370 --> 01:19:03.540

Helen Pfister: So any comments on that.

552

01:19:06.660 --> 01:19:18.780

Helen Pfister: And, just to be clear, under that policy require purposes, our treatment payment public health activities and certain types of healthcare operations but permitted purpose.

553

01:19:19.680 --> 01:19:30.420

Helen Pfister: prohibited policies prohibited purposes are what we discussed before the whole like sale of information, any other purpose is permitted purpose so unless its own restricted.

554

01:19:31.980 --> 01:19:37.290

Helen Pfister: 42 CFR, part two data can be shared under the under the under the under the dsi.

555

01:19:40.980 --> 01:19:45.990

CalHHS CDII Sacramento Office: shoulder and stories from that yeah sorry no audio.

556

01:19:48.600 --> 01:19:51.990

claudia williams: yeah this this comment falls under the.

557

01:19:53.160 --> 01:19:56.460

claudia williams: issue that was brought up that has not been addressed here.

558

01:19:57.600 --> 01:20:10.380

claudia williams: I know, several organizations express comments, saying that the operations definition should align with hipaa and PR I think all of our conversation this morning it just creates a lot of complexity if it doesn't.

559

01:20:11.790 --> 01:20:18.540

claudia williams: An example of that is let's say a provider wanted to exchange on the national networks to me data exchange framework.

560

01:20:18.960 --> 01:20:27.600

claudia williams: It was going to respond to all required purposes, but the operations definition doesn't align with the definitions by the network, which is hipaa.

561

01:20:27.990 --> 01:20:38.130

claudia williams: So now you end up having to have all this offline discussion between the organizations to validate that it's one of the subsets of operations that's actually covered likewise.

562

01:20:38.850 --> 01:20:47.520

claudia williams: In for blocking requires data sharing for all permitted purposes under hipaa so it refused to exchange under one of the.

563

01:20:49.890 --> 01:20:58.860

claudia williams: window you'd be in compliance with data additional framework and I guess I just I haven't seen the explanation for why.

564

01:20:59.490 --> 01:21:13.440

claudia williams: The pop, the decision was made not to align with hipaa, as we stated, is an important Andy and was actually in the law, so I would really appreciate a discussion right now about why did you.

565

01:21:14.160 --> 01:21:25.290

claudia williams: Despite lots of comments adjusting otherwise why the land on a limited definition of operations, I think it's gonna make this much more complex to implement.

566

01:21:27.180 --> 01:21:36.330

Helen Pfister: So without getting too much in the weeds that's probably impossible, there are six different elements of the definition of healthcare operations.

567

01:21:37.980 --> 01:21:43.800

Helen Pfister: And the first one is basically what we include in our definition under the dsi.

568

01:21:45.210 --> 01:21:54.960

Helen Pfister: The second one relates to reviewing the competence of healthcare professionals evaluating provider performance health kind of helps high performance training.

569

01:21:55.560 --> 01:22:06.570

Helen Pfister: Those types of things and under hipaa and then there are four more elements of the death of that definition and what hipaa does is allow covered entities to use.

570

01:22:07.380 --> 01:22:16.740

Helen Pfister: pH I for their own purposes for all six all six categories of purposes, but it only permits covered entities to disclose pH I.

571

01:22:17.130 --> 01:22:28.440

Helen Pfister: For the first two categories, the categories that's that I already mentioned, or the category that's already in there and then the health, the health care professional qualification supervision training type of piece of it.

572

01:22:29.670 --> 01:22:35.280

Helen Pfister: Even under hip and also from health care fraud abuse texture compliance so even under hipaa.

573

01:22:36.660 --> 01:22:43.380

Helen Pfister: A covered entity wouldn't be able to disclose pH I for the other, the last four elements of the hipaa.

574

01:22:44.040 --> 01:22:52.260



Helen Pfister: How corporations definition so that's one reason that we didn't include the full definition, because it just doesn't really it wouldn't be permitted permissible anyway.

575

01:22:52.920 --> 01:23:03.990

Helen Pfister: um The other concern that we had is that the limitation under hipaa that only allows participants to share data for healthcare operations, for the first two.

576

01:23:05.520 --> 01:23:12.720

Helen Pfister: buckets wouldn't apply to participants that aren't covered entities so you'd essentially have a.

577

01:23:13.740 --> 01:23:22.560

Helen Pfister: framework where non covered entities would have to share data for all six purposes well covered entities because hipaa limits what they can do would only.

578

01:23:22.950 --> 01:23:35.430

Helen Pfister: be able to shout out to share data for the first two purposes, and so, while we acknowledge that it may make sense at some point to expand the.

579

01:23:36.270 --> 01:23:47.010

Helen Pfister: required data sharing beyond just the sort of quality assessment improvement population health type activities that are in the first component of the six components of the healthcare operations definition.

580

01:23:47.640 --> 01:23:52.260

Helen Pfister: it's gotta be it's more nuanced than just saying we're just use the entire six prom definition of.

581

01:23:52.890 --> 01:24:02.460

Helen Pfister: Health preparations are hipaa it just doesn't work in this framework, so that is the reason that we didn't that we just use just a very limited definition and not the entire six prong hipaa definition.

582

01:24:03.930 --> 01:24:05.910

Helen Pfister: I know that was really I couldn't there's no way to get around it.

583

01:24:09.630 --> 01:24:27.180

claudia williams: I I hear you and thank you for sharing that I think I still worried that this is not in alignment with info blocking I mean always every entity is going to have to assess whether it's permitted to share in a given circumstance that's just the way it works for every purpose.

584

01:24:28.380 --> 01:24:38.730

claudia williams: It doesn't it's, not just for this one, so I don't really see why not be able to share it with one type of entity is a reason to chain to change to not use the definition since.

585

01:24:39.900 --> 01:24:48.270

claudia williams: That anyway, I I just I just, especially for using the national networks, I just don't understand how this is going to work like.

586

01:24:48.690 --> 01:24:55.260

claudia williams: You know so many organizations are on the national networks, they want to be able to use that network to exchange there's a definition of operations is there.

587

01:24:55.620 --> 01:25:04.320

claudia williams: I don't get how this is going to work for those organizations to want to be able to lean on those national networks to exchange so maybe that's just something for you to think about.

588

01:25:04.860 --> 01:25:13.110

claudia williams: As you refine this because if it's going to require a lot of conversation back and forth and argument it that's what's going to slow everything down so.

589

01:25:13.890 --> 01:25:20.040

claudia williams: We don't need to talk more about it here but we're just really asked you to think concretely about how How is this going to work.

590

01:25:20.520 --> 01:25:28.410

claudia williams: When we're trying to use networks that already use a different definition and every time we try to do something California specific it's going to slow us down, I think.

591

01:25:30.570 --> 01:25:37.830

CalHHS CDII Sacramento Office: over the long term internal controls just just to remind everyone that this definition would not prohibit.

592

01:25:39.150 --> 01:25:41.190

CalHHS CDII Sacramento Office: The second through six.

593

01:25:42.390 --> 01:25:47.580

CalHHS CDII Sacramento Office: activities that are specified, I have a are things that are.

594

01:25:49.350 --> 01:25:56.730

CalHHS CDII Sacramento Office: activities under healthcare operations so wouldn't live in the ability for organizations to share data to share those data.

595

01:25:58.770 --> 01:26:11.220

CalHHS CDII Sacramento Office: It would not require that they share or any requests that has made so so it does align with hipaa I think it national networks that means, this is a federal rule it's.

596

01:26:12.030 --> 01:26:32.910

CalHHS CDII Sacramento Office: noted, I think, seven is 45 CFR 164 64 so there's a specific rule that's defined what's permitted within without consent of an individual, and there are other conditions like there has to be pre existing relationship with the individual, the correspondence needs to include.

597

01:26:34.470 --> 01:26:43.620

CalHHS CDII Sacramento Office: Specific care related to that individual so just to be clear you're not in that misalignment we are fully embracing the definition.

598

01:26:44.130 --> 01:26:56.610

CalHHS CDII Sacramento Office: Of what is permitted what we're doing here in word as a telephone, as noted is defining what is required for any signatory and trying to ensure that a covered entity is.

599

01:26:58.200 --> 01:27:03.300

CalHHS CDII Sacramento Office: is required to share the same information and non covered entities are in disagreement.

600

01:27:06.570 --> 01:27:08.610

CalHHS CDII Sacramento Office: So Charles Thank you.

601

01:27:09.630 --> 01:27:11.580

CalHHS CDII Sacramento Office: I think you answered my question.

602

01:27:12.810 --> 01:27:16.050

CalHHS CDII Sacramento Office: which was exactly how does this impact existing.

603

01:27:17.280 --> 01:27:28.710

CalHHS CDII Sacramento Office: Patient What you said is correct that's sounds good, I think there's confusion, you know a little bit loose on the plan side on our side on whether or not that.

604

01:27:29.850 --> 01:27:33.990

CalHHS CDII Sacramento Office: Is the case law, except to go back and take a look at it, but maybe it would be also helpful.

605

01:27:34.620 --> 01:27:43.320

CalHHS CDII Sacramento Office: In EP or in some other documentation to state what you stated, if that's an eater interpretation, so that we can go back and say hey.

606

01:27:44.130 --> 01:27:58.740

CalHHS CDII Sacramento Office: You know this is how this framework would be applied, because I think the concern that Claudia had is that if we don't understand either feud and then our partners, maybe you know we end up in kind of a recap, of the message that'd be my recommendation, but I appreciate you providing.

607

01:28:01.710 --> 01:28:17.280

CalHHS CDII Sacramento Office: Since we're the all the experts here and we're not totally on the common understanding of what this means it seemed like we should further elaborate and clarify, so that everyone has a real understanding of what this also procedure will permit require.

608

01:28:19.080 --> 01:28:21.510

CalHHS CDII Sacramento Office: appreciate that Michelle joke around.

609

01:28:23.070 --> 01:28:29.790

CalHHS CDII Sacramento Office: You and just to endorse the required data exchange for dummies guide book notion.

610

01:28:31.050 --> 01:28:42.840

CalHHS CDII Sacramento Office: You know I think it's, it is important also and, again, I just want to confirm my understanding that on the business side.

611

01:28:44.340 --> 01:28:53.100

CalHHS CDII Sacramento Office: The entities that are required to do the state exchange our goal is for them is both understand what's required and then.

612

01:28:54.300 --> 01:29:08.370

CalHHS CDII Sacramento Office: You know if they need to build out some additional firewalls or protections or whatever that they understand that's going to come with the territory right and the battle ation is on them to sort of.

613

01:29:08.700 --> 01:29:17.160

CalHHS CDII Sacramento Office: Create that in out kind of structure within their their organizations state exchange capabilities and so.

614

01:29:18.480 --> 01:29:37.470

CalHHS CDII Sacramento Office: I imagine that an organization should be able to go okay here's what we're doing today right outside of the day, change framework here's what's going to be new and here are the rules that are attached to that new set of activities right just making sure that that's how it's envisioned.

615

01:29:39.960 --> 01:29:40.290

That.

616

01:29:42.030 --> 01:29:42.480

CalHHS CDII Sacramento Office: vision.

617

01:29:44.070 --> 01:29:45.390

CalHHS CDII Sacramento Office: will take some time to get there.

618

01:29:49.290 --> 01:29:51.720

CalHHS CDII Sacramento Office: Any other comments from olive oil, please go ahead.

619

01:29:52.920 --> 01:30:08.520

CalHHS CDII Sacramento Office: Just a quick question and i'm just sorry that's probably very stupid simple for you to CFR, part two, is that double jeopardy here between federal and state what we're trying to achieve and defending the clarification that was made here is that.

620

01:30:09.540 --> 01:30:23.070

CalHHS CDII Sacramento Office: In a previous draft, there was a language that's just that that it's not permitted to share information is subject to Part Two and we're saying is permitted, but at least if it is subject to federal law, which means you consent.

621

01:30:23.520 --> 01:30:26.460

CalHHS CDII Sacramento Office: Informed Consent from individual so we're just aligning better with.

622

01:30:28.350 --> 01:30:28.860

CalHHS CDII Sacramento Office: federal law.

623

01:30:31.320 --> 01:30:32.550

CalHHS CDII Sacramento Office: and energy will be.

624

01:30:33.930 --> 01:30:43.080

CalHHS CDII Sacramento Office: Either educator will lose your California, I appreciate all the work that you all been doing on this frankly where we were 18 months ago, and where we are today is.

625

01:30:43.830 --> 01:30:53.100

CalHHS CDII Sacramento Office: Significant advancement for consumers in California appreciate that great deal and just harkening back to the permitted to use is under.

626

01:30:54.210 --> 01:31:01.650

CalHHS CDII Sacramento Office: hipaa for healthcare operations really appreciate the explanation and the advancement another area to do think that it.

627

01:31:02.610 --> 01:31:21.240

CalHHS CDII Sacramento Office: By creating essentially two tiered what's required versus what isn't there are implications that happen downstream contracting that we need to be conscious about and so we've we've recommended right along that report over exactly with hipaa we understand where the state's at and appreciate.

628

01:31:22.560 --> 01:31:33.630

CalHHS CDII Sacramento Office: The direction you're going right now there are implications of that we certainly want to work with this group to figure out how to address those as we move forward, but thank you again for all the great work you're doing.

629

01:31:36.150 --> 01:31:36.450

CalHHS CDII Sacramento Office: Thank you.

630

01:31:38.130 --> 01:31:42.300

CalHHS CDII Sacramento Office: Any other comments Claudia your hand is raised.

631

01:31:43.530 --> 01:31:43.710

CalHHS CDII Sacramento Office: You.

632

01:31:45.750 --> 01:31:46.680

claudia williams: Know thanks.

633

01:31:51.330 --> 01:31:53.520

CalHHS CDII Sacramento Office: For him right here so let's keep going.

634

01:31:54.540 --> 01:32:00.810

Helen Pfister: Okay um point to that we already talked about so I would be inclined to skip that and move on to the next slide.

635

01:32:03.540 --> 01:32:10.380

Helen Pfister: So here we had comments from a couple of commenters and they were worried that the dsa might require participants.

636

01:32:10.950 --> 01:32:18.390

Helen Pfister: To provide information to third parties that might want to limit or penalized access to abortion or mental health care or gender firming services.

637

01:32:18.900 --> 01:32:33.930

Helen Pfister: And in response to this we added a specific specific provision in this policy that says that participants may not access user disclose information through the dsa with the intention to do any of the foregoing.

638

01:32:36.540 --> 01:32:38.040

Helen Pfister: Questions or comments on that.

639

01:32:51.030 --> 01:32:51.240

Helen Pfister: Good.

640

01:32:51.960 --> 01:32:59.400

Helen Pfister: Okay um so there was language in this tmp that prohibited participants from charging fees other participants.

641

01:32:59.850 --> 01:33:09.150

Helen Pfister: um people asked if that would prohibit a qualified health information organization from charging fees and through its participants, and that is not the intent, and so we added language, making that clear.

642

01:33:15.000 --> 01:33:18.120

Helen Pfister: And then the third point here Point five in this section is.

643

01:33:19.500 --> 01:33:26.970

Helen Pfister: The initial definite so public health activities are required purpose under this policy so participants have to share information for public health activities.

644

01:33:27.510 --> 01:33:31.740

Helen Pfister: And initially we excluded from the definition of public health activities.

645

01:33:32.400 --> 01:33:45.090

Helen Pfister: and activities, leading to the oversight enforcement of laws, regulations are rules by governmental participants, the idea being that you couldn't this information



can be used by a government or participant to audit and entity participants anything like that.

646

01:33:46.350 --> 01:33:58.830

Helen Pfister: We got comments back soon with that was too broad um and that it shouldn't apply to activities by governmental participants relating to public health matters.

647

01:33:59.460 --> 01:34:15.540

Helen Pfister: And so we narrowed the definition a little bit, and so the only public health activities that are prohibited would be audits civil administrative investing or incredible investigations inspections licensure disciplinary actions things of that nature so.

648

01:34:16.920 --> 01:34:24.720

Helen Pfister: It would be permissible to share information with government, the participants for public health related oversight activities.

649

01:34:31.980 --> 01:34:33.210

CalHHS CDII Sacramento Office: Cameron Kaiser Please go ahead.

650

01:34:34.230 --> 01:34:41.190

Cameron Kaiser: And morning, and thanks, obviously the California conference of local health officers has a particular interest in this part of the dsa.

651

01:34:41.670 --> 01:34:47.670

Cameron Kaiser: And I do think that the work group that CCL I chose recommendations for public health activities were considered.

652

01:34:48.630 --> 01:34:54.390

Cameron Kaiser: My concern, and again, as others have said, this might be alleviated with the exact language which I don't see here.

653

01:34:55.260 --> 01:34:58.650

Cameron Kaiser: Is that exclusion of civil administrative or criminal investigations.

654

01:34:59.250 --> 01:35:12.180

Cameron Kaiser: I know that the group is trying to reassure folks that this would not be improperly used for law enforcement purposes, but quarantine and isolation in particular are judicially enforceable by civil penalties and sometimes even criminal charges.

655

01:35:12.930 --> 01:35:18.900

Cameron Kaiser: Under health and safety code 120280 it's actually a misdemeanor to violate a health officer order.

656

01:35:19.410 --> 01:35:24.480

Cameron Kaiser: and obviously we always try to do everything short of it, but once in a while we are actually in court.

657

01:35:25.020 --> 01:35:34.170

Cameron Kaiser: To require legal remedy when the health officer order is woefully flouted, I mean i've done that myself personally on several occasions when i'm the one testifying in front of the judge.

658

01:35:34.800 --> 01:35:39.330

Cameron Kaiser: We might be able to make this case with facts and findings that are acquired outside of this framework.

659

01:35:39.660 --> 01:35:48.180

Cameron Kaiser: But things like provider in lab records or, at least as important, and these are records already legally entitled to receive under existing regulation, regardless of the dsa.

660

01:35:48.600 --> 01:35:54.270

Cameron Kaiser: If this takes off we're likely to get those records through a system, regulated by this framework, which is totally desirable.

661

01:35:54.990 --> 01:36:04.650

Cameron Kaiser: But we also would not want existing health data such as say somebody is tuberculosis cultural is olds are positive blood titers to be excluded from an otherwise.

662

01:36:05.430 --> 01:36:11.970

Cameron Kaiser: Solid case by an expansive reading of the section that would compromise our ability to enforce a lawful order.

663

01:36:12.330 --> 01:36:17.670

Cameron Kaiser: Likewise, if there was some sort of dangerous environmental release that required an emergency response.

664

01:36:18.000 --> 01:36:25.860

Cameron Kaiser: We may use aggregate de identified health data to make the case that there's actually an ongoing health impact and we wouldn't want that evidence to be excluded.

665

01:36:26.670 --> 01:36:36.450

Cameron Kaiser: it's one of those things where health officers are unavoidably law enforcement officers that statutory under htc 10 1030 and that's an intrinsic part of every health department.

666

01:36:36.840 --> 01:36:45.990

Cameron Kaiser: Our previous recommended revision was that there will be a specific general exception made for the statutory powers of the State public health officer and local public health officers.

667

01:36:46.290 --> 01:36:52.140

Cameron Kaiser: I know this law, this language was entitled wasn't tended to be well intentioned, but I still think that.

668

01:36:52.410 --> 01:37:06.570

Cameron Kaiser: That wording would be narrow enough to exclude other potentially problematic uses and allow us to our normal ability to take urgent action, backed up by judicial review of necessary when it's required for protecting the public health thanks.

669

01:37:07.560 --> 01:37:10.710

Helen Pfister: Okay, no I think that's a that's a fair point we'll take another look at that.

670

01:37:12.690 --> 01:37:13.080

Cameron Kaiser: Thank you.

671

01:37:18.420 --> 01:37:18.750  
Helen Pfister: Any other.

672

01:37:19.440 --> 01:37:22.110  
CalHHS CDII Sacramento Office: No other andres in the room, or on zoom.

673

01:37:23.760 --> 01:37:28.140  
Helen Pfister: Okay, so next slide please um.

674

01:37:29.160 --> 01:37:40.830  
Helen Pfister: So number one we've already sort of touched upon on the various commenters aspect their policies that for timeframes for when participants have to respond to requests, this is the whole real time access thing.

675

01:37:41.670 --> 01:37:47.550  
Helen Pfister: Right now, we just say that responses have to be as soon as reasonably reasonably practicable and certainly within timeframe required by law.

676

01:37:48.210 --> 01:38:02.700  
Helen Pfister: We do anticipate that there will be a future policy that is more granular and actually puts in more definitive timeframes for different types of for responses different types of requests were pushed as opposed to pull notifications, etc, etc, so that's that's that's a tbd.

677

01:38:04.140 --> 01:38:06.990  
Helen Pfister: On one of them, one of the things that are tbd list.

678

01:38:10.050 --> 01:38:11.190  
Helen Pfister: Questions or comments on that.

679

01:38:14.460 --> 01:38:15.240  
CalHHS CDII Sacramento Office: Mark savage.

680

01:38:18.180 --> 01:38:19.920  
CalHHS CDII Sacramento Office: savage about this from this here.

681

01:38:21.240 --> 01:38:23.610

CalHHS CDII Sacramento Office: In my mind exchanges both push and pull.

682

01:38:24.900 --> 01:38:25.170

out.

683

01:38:26.580 --> 01:38:37.140

CalHHS CDII Sacramento Office: This is where, in terms of a response to a request to kind of see anything about just initiate a exchange, which happens all the time for older and specialist.

684

01:38:38.490 --> 01:38:47.700

CalHHS CDII Sacramento Office: Patient calls up the provider directs the currents the transmission to their patients third party help out and initiated.

685

01:38:50.820 --> 01:38:51.780

CalHHS CDII Sacramento Office: The K 12.

686

01:38:52.800 --> 01:39:03.060

CalHHS CDII Sacramento Office: version seems also to just work terms of responding to requests finds that nothing in here about initiating exchanges are we talking about exchange general.

687

01:39:04.050 --> 01:39:11.100

Helen Pfister: yeah no i'm you're totally right I think i've been talking for a little bit too long and I I misspoke I really wasn't I didn't I didn't.

688

01:39:11.790 --> 01:39:19.410

Helen Pfister: we've had discussions about pushing information, but I just think in terms of like responses to queries and maybe different types different timeframes applicable to different types of queries.

689

01:39:21.150 --> 01:39:29.610

CalHHS CDII Sacramento Office: That Are you suggesting we need to, we should consider language about to to respond to pushes to to.

690

01:39:30.000 --> 01:39:45.420

CalHHS CDII Sacramento Office: Define initiating and i'm pushing data to an individual that there's a duty to respond like an acknowledgement of sometime if i'm a provider and i'm referring to is disclosing i'm sending and not responding to requests and actually initiating does this framework apply today.

691

01:39:47.670 --> 01:39:50.850

CalHHS CDII Sacramento Office: It does not responding to a request.

692

01:39:52.020 --> 01:39:59.220

CalHHS CDII Sacramento Office: Actually initiated right, we have the same discussion on the tech editor you know and see what was just in terms of responses.

693

01:40:00.960 --> 01:40:10.200

CalHHS CDII Sacramento Office: So you're saying, should we specify a doobie to push data, not just to respond to inquiries, but to initiate.

694

01:40:12.870 --> 01:40:15.150

CalHHS CDII Sacramento Office: information in question to the other participants.

695

01:40:16.260 --> 01:40:24.330

CalHHS CDII Sacramento Office: I think it was the I didn't see any consideration of it at all, which is fine, my comic So why is a constrained in terms of exchange.

696

01:40:25.140 --> 01:40:33.420

CalHHS CDII Sacramento Office: There might be different requirements that apply if it's if you're initiating and if you're responding to requests okay I don't we talked about.

697

01:40:34.230 --> 01:40:43.170

CalHHS CDII Sacramento Office: response to a request and everything sort of refers to the policies and procedures so i'm not sure what applies to an initiation okay.

698

01:40:43.650 --> 01:40:55.560

CalHHS CDII Sacramento Office: you're okay so here's again we're talking about requirements for exchange we're addressing duty to respond or not necessarily addressing here in this policy duties to actually share information to initiate.

699

01:40:57.270 --> 01:41:05.100

CalHHS CDII Sacramento Office: And there are requirements federal law that will definitely believe it's like the patient's request providers sending information because they party Helen.

700

01:41:07.410 --> 01:41:15.660

CalHHS CDII Sacramento Office: Helen do you know we've addressed those other sections and if not, we may want to look back at it and.

701

01:41:17.280 --> 01:41:17.850

CalHHS CDII Sacramento Office: see what.

702

01:41:19.020 --> 01:41:19.590

CalHHS CDII Sacramento Office: We may need to.

703

01:41:21.480 --> 01:41:28.710

Helen Pfister: know I mean this is really all a bit, this is all focused on response to request it there's been no or no provisionally pushing data out.

704

01:41:30.390 --> 01:41:36.030

CalHHS CDII Sacramento Office: All right, I think we will need to consider with respect to initiate pushing.

705

01:41:38.130 --> 01:41:38.400

hey.

706

01:41:41.160 --> 01:41:41.730

CalHHS CDII Sacramento Office: Why.

707

01:41:44.310 --> 01:42:03.270

claudia williams: yeah I, I agree with that comment and would just ask that your new policy and procedures discussion this was made earlier as a comment, but I think that whole discussion of that new policy should include a discussion of proactive data sharing.

708

01:42:04.470 --> 01:42:09.450

claudia williams: To to mark's point into the point that others have raised, so I think there's a great opportunity, as you.

709

01:42:09.840 --> 01:42:22.680

claudia williams: Look at that new policy to discuss what, whether in what circumstances proactive data sharing should be required so that would just be a request for scope and then in terms of the number two and I know we haven't got there yet, but.

710

01:42:23.730 --> 01:42:31.320

claudia williams: I just you know I guess i'm just really questioning whether it's going to be feasible to get word out to everyone.

711

01:42:31.830 --> 01:42:37.860

claudia williams: By January to sign the agreement there hasn't been any awareness or campaign or anything like that.

712

01:42:38.190 --> 01:42:46.260

claudia williams: Especially those small practices that I think at least I was under the impression they wouldn't be signing till closer to their obligation date.

713

01:42:46.740 --> 01:43:03.030

claudia williams: And then the other question would be if signing includes selecting a qualified hi Oh, and I also question that the whole sequence because we haven't defined what those are yet so if in signing you up to designate a qualified high to.

714

01:43:04.710 --> 01:43:19.290

claudia williams: To just ask you to go back and kind of think about all those tiny pieces, because I think we're going to need a really extensive education campaign that just doesn't feel feasible to complete by January, and then the qualifier, this is a separate issue.

715

01:43:21.690 --> 01:43:26.040

CalHHS CDII Sacramento Office: recognizing that there is a need for significance stakeholder communication.

716

01:43:30.150 --> 01:43:39.420

CalHHS CDII Sacramento Office: format and servers and providers and partnership by some famous hand they before, and then the Chicago bears fan fiction that first okay.



717

01:43:41.280 --> 01:43:41.610

CalHHS CDII Sacramento Office: Okay.

718

01:43:43.020 --> 01:43:51.960

CalHHS CDII Sacramento Office: Great speakers, so I did want to weigh in on what Claudia illustrates about number two that's a good free it's it's very.

719

01:43:53.130 --> 01:43:58.590

CalHHS CDII Sacramento Office: Good we're going through it out small practices to sign this thing like January of next year that.

720

01:44:00.420 --> 01:44:06.960

CalHHS CDII Sacramento Office: Year, unfortunately, I went back statute, and that is actually how the statute.

721

01:44:08.250 --> 01:44:22.560

CalHHS CDII Sacramento Office: And that's the that's the problem we have right now um so but I wanted to raise that because, because the government entities, is going to happen, the legislation next year that was one of the things you're fixing in the subsequent piece of legislation.

722

01:44:23.610 --> 01:44:29.850

CalHHS CDII Sacramento Office: Because it does afraid we're going to have enough challenges in January 2023 trying different medium to large groups.

723

01:44:30.990 --> 01:44:35.190

CalHHS CDII Sacramento Office: On orbit out chasing around 25,000 small practices.

724

01:44:37.620 --> 01:44:55.470

CalHHS CDII Sacramento Office: My Marilyn Thank you and just to build off of some of our audience is comments, I think it occurs to be really helpful to for all of the covered entities to understand.

725

01:44:56.610 --> 01:45:00.600

CalHHS CDII Sacramento Office: Who the data exchange framework applies to into it doesn't.

726

01:45:01.680 --> 01:45:20.520

CalHHS CDII Sacramento Office: That is to say, County agencies as plans as providers not required and there, or you know understanding, who sit in the south very explicitly so that we could save all of ourselves a lot of confusion in the implementation stages of this.

727

01:45:22.620 --> 01:45:31.260

CalHHS CDII Sacramento Office: To clarify who needs to sign this release to participate in very clear on that one second i'm actually asking for the negative to.

728

01:45:31.980 --> 01:45:50.730

CalHHS CDII Sacramento Office: It does not include you complete your health agencies, the reminders you know, etc, so that they know okay for off the hook here, but also so that whole medical managed care plan so that other entities don't wrongfully assuming that were covered in two terms of required to be it.

729

01:45:55.980 --> 01:45:57.990

CalHHS CDII Sacramento Office: Okay, thank you good suggestion.

730

01:46:02.430 --> 01:46:09.120

CalHHS CDII Sacramento Office: Thanks I just responsive michelle's comment, I understand that if you all are optional under this that I.

731

01:46:10.350 --> 01:46:21.630

CalHHS CDII Sacramento Office: would just be I think the attendant hope would be that you know, to the extent feasible that county and others actually participate, and so I would just be concerned about the guys.

732

01:46:22.560 --> 01:46:32.190

CalHHS CDII Sacramento Office: Just sort of indicate, you know, claiming that this whole set of really important entities that we would hope would eventually participate.

733

01:46:33.600 --> 01:46:34.860

CalHHS CDII Sacramento Office: is not required to do.

734

01:46:36.300 --> 01:46:39.120

CalHHS CDII Sacramento Office: Something would happen sorry about that.

735

01:46:41.430 --> 01:46:43.950

CalHHS CDII Sacramento Office: yeah understood, I mean I understand I guess kind of.

736

01:46:45.960 --> 01:46:53.460

CalHHS CDII Sacramento Office: want to participate in this, there are probably needs to be one very clear on with this applies to without.

737

01:46:54.720 --> 01:47:05.340

CalHHS CDII Sacramento Office: Without coloring and with through it shouldn't lighting, but doesn't so I totally get what you're saying when you're reading the lender specific guidance you exactly.

738

01:47:06.360 --> 01:47:08.760

CalHHS CDII Sacramento Office: If you 133 specifies the now.

739

01:47:10.260 --> 01:47:27.990

CalHHS CDII Sacramento Office: And, but i'm not sort of closing the door on others to sign it may not be required to but they benefit them and others will participate yeah and I know this simple way to do it is a choir but it's optional if you'd like to is is one way to put it.

740

01:47:33.060 --> 01:47:33.330

Okay.

741

01:47:34.620 --> 01:47:35.970

CalHHS CDII Sacramento Office: All right, let's keep going.

742

01:47:36.990 --> 01:47:41.100

Helen Pfister: Okay next slide please privacy and security standards um.

743

01:47:42.330 --> 01:47:51.000

Helen Pfister: So we did have a few comments that requested the policy clearly reflect the importance of complying with laws that govern behavioral health data sharing.

744

01:47:51.930 --> 01:47:59.190

Helen Pfister: Policy did already require compliant with applicable law um, but we did add a new provision specifically stating that if a participant.

745

01:47:59.790 --> 01:48:09.150

Helen Pfister: Exchange behavioral health information, then prior to doing so they will they will implement appropriate administrative physical and technical safeguards.

746

01:48:09.720 --> 01:48:20.670

Helen Pfister: To protect such information in accordance with applicable law, including 42 CFR, part two, and the lunch room British Petrus short act so that was intended to address that specific comment.

747

01:48:29.670 --> 01:48:44.760

CalHHS CDII Sacramento Office: You just have a question about how this interacts with at 133 and the howling information sharing and guidance that that leaves the law for purposes of sharing information.

748

01:48:45.990 --> 01:49:01.230

CalHHS CDII Sacramento Office: To support county probably speaking, and I just want to make sure it's clear that this doesn't restrict that and then it doesn't so good question or comment, when I made is maybe 133 different a different section that trailer bill actually authorize.

749

01:49:02.970 --> 01:49:18.960

CalHHS CDII Sacramento Office: Under under for the purposes of calculating that certain state lobby way, including for the purposes of kalyan Asia and cardboard nation cetera, this would not this this with not supersede the allowances for.

750

01:49:20.070 --> 01:49:26.190

CalHHS CDII Sacramento Office: That they need to be shared, for the participants who are supporting initiatives, and we should.

751

01:49:27.930 --> 01:49:47.730

CalHHS CDII Sacramento Office: I think what we need to do is just make sure that that is absolutely the case so your health plan or provided in certain medical by signing so you're not actually saying no I can't benefit from the provisions here appreciate that and particularly because we have such a real or perceived.

752

01:49:49.080 --> 01:49:59.100

CalHHS CDII Sacramento Office: Thank you Okay, so I think what we just need to do is get consultation from Council State Council of whether or not just to confirm that we are not.

753

01:50:01.020 --> 01:50:02.490

CalHHS CDII Sacramento Office: Participants in kalyan.

754

01:50:04.560 --> 01:50:17.850

CalHHS CDII Sacramento Office: we're not preventing us from the benefits of these permissions and, if I may, I just wanted to jump in let's say, from our perspective, obviously 42 CFR sound waves that are telling so that's just like.

755

01:50:19.560 --> 01:50:24.630

CalHHS CDII Sacramento Office: We have no authority, no matter how far you're going to take government to wait for it to work.

756

01:50:29.910 --> 01:50:34.500

Helen Pfister: Okay, so number two we already spoke about, so I think we can move on to the next slide.

757

01:50:36.150 --> 01:50:41.340

Helen Pfister: which relates to our participants right to access their their their data.

758

01:50:43.560 --> 01:50:44.970

Helen Pfister: And here.

759

01:50:48.210 --> 01:50:58.980

Helen Pfister: We basically there were we basically revised the language and the policy in response to questions that are coming through received about existing law limitations on individuals right to access their data.

760

01:50:59.520 --> 01:51:12.780

Helen Pfister: And the fact that some of the prior language was based on hipaa language that may well change see what the policy does now is just sort of at a high level require participants to process individual access requests in accordance with applicable law.

761

01:51:14.310 --> 01:51:25.170

Helen Pfister: To add a provision that says, if a participant doesn't have the phr API pH is a subject that request, they will direct the person to the appropriate participant if they know who, that is.

762

01:51:26.700 --> 01:51:29.250

Helen Pfister: And then here just because.

763

01:51:30.330 --> 01:51:37.290

Helen Pfister: There may be changes in a business associates obligation to provide individuals access to data under applicable law.

764

01:51:38.280 --> 01:51:52.080

Helen Pfister: We want to make it clear that if the business associate agreement prohibits that kind of activity and that provision is is consistent applicable law, then the va will will control.

765

01:51:56.760 --> 01:51:57.900

Helen Pfister: Questions or comments on that.

766

01:52:04.290 --> 01:52:09.840

Helen Pfister: Okay we've we've warned everybody out i'm almost at the end here, can we turn it over to rim.

767

01:52:11.010 --> 01:52:12.420

Helen Pfister: Initially we.

768

01:52:13.800 --> 01:52:23.040

Helen Pfister: Initiatives policy tracked hipaa and limited the information that our participant must provide to an individual user to.

769

01:52:24.210 --> 01:52:33.600

Helen Pfister: It doesn't made a record set as defined under hipaa some commenters pointed out that California has got its own requirements regarding access and dispose dispersion use of data.

770

01:52:34.200 --> 01:52:42.960

Helen Pfister: And so we revised policy to take out the reference doesn't mean hip it doesn't need to record sets and just refer to applicable law instead.

771

01:52:51.570 --> 01:52:53.880

CalHHS CDII Sacramento Office: see any comments you're on linkedin.

772

01:52:54.540 --> 01:52:56.370

Helen Pfister: All right next slide.

773

01:52:57.690 --> 01:53:06.120

Helen Pfister: So this is what bidirectional X X is comment about a point I referenced early on in the presentation um there were a number of commenters that.

774

01:53:07.650 --> 01:53:13.080

Helen Pfister: wanted to make sure that individual users have the right to inspect and correct any discrepancies in their health records.

775

01:53:13.500 --> 01:53:20.220

Helen Pfister: and also to request any self report information to be added to their records, and so we have revised the policy.

776

01:53:20.970 --> 01:53:30.660

Helen Pfister: So it says that participants that maintain phr pH I P, I have to respond to a request as self reported data now respond to the request doesn't mean like.

777

01:53:31.200 --> 01:53:38.370

Helen Pfister: It means respond, yes, no maybe whatever it doesn't mean they have to incorporate it but have to respond to the Kansas ignore the requested gotta respond it.

778

01:53:39.030 --> 01:53:49.050

Helen Pfister: And they have to have a process in place to correct inaccurate information and reconciling any discrepancies in their records and what the patient is requesting to be changed.

779

01:53:56.100 --> 01:53:57.030

CalHHS CDII Sacramento Office: I remember.

780

01:53:59.070 --> 01:54:10.140

Erica Murray: Everybody I couple questions on this one one wanted to make sure that we are aligned with the Federal requirements and the operating.

781

01:54:10.620 --> 01:54:24.870

Erica Murray: procedures that already exists and to has there been any thought to an iterative process whereby we start unit select unilaterally and before moving to bi directional exchange thanks.

782

01:54:27.390 --> 01:54:37.980

Helen Pfister: So I think we are aligned with federal requirements, but if there's anything that you think that we're not aligned with we leave interested in hearing about it, and the second question, things like the more for you, Jonathan for me.

783

01:54:40.350 --> 01:54:53.580

CalHHS CDII Sacramento Office: yeah there you go back to the first one is, I think I saw some comments from actually Stephen on some recent guidance, but Eric Would you mind me saying a second one about the process.

784

01:54:55.320 --> 01:55:02.010

Erica Murray: Sure i'm having all sorts of ironic technical technical difficulties at the moment but um ya know we were just.

785

01:55:02.580 --> 01:55:16.740

Erica Murray: wondering about the order of things in terms of perhaps rather than starting with bidirectional exchange if there might be unilateral exchange first then moving into bi directional exchange that's what we heard from our Members.

786

01:55:21.150 --> 01:55:27.090

CalHHS CDII Sacramento Office: um well I think what we had what we've seen from public comments and.

787

01:55:28.560 --> 01:55:36.810

CalHHS CDII Sacramento Office: And from committee members is that there's a real desire and our principles that there's a real desire to allow for individuals.



788

01:55:37.410 --> 01:55:42.780

CalHHS CDII Sacramento Office: up and others who participate to have some say in and what their record.

789

01:55:43.740 --> 01:55:58.410

CalHHS CDII Sacramento Office: My state incorrectly about them my gender is wrong, my name is wrong identified correctly here and to support the process by which they can not only access the information, but they can request amendments to it which we.

790

01:55:59.580 --> 01:56:10.170

CalHHS CDII Sacramento Office: which we think is really important to empower individuals to have some means to correct or request a correction so that's really what this is is suggesting.

791

01:56:10.710 --> 01:56:17.610

CalHHS CDII Sacramento Office: That there's more engagement with the individual, especially when they no one to access that information to help them to be able to request.

792

01:56:18.960 --> 01:56:22.410

CalHHS CDII Sacramento Office: updates to the records when they see ours are.

793

01:56:24.450 --> 01:56:25.500

Erica Murray: Thanks thanks.

794

01:56:25.740 --> 01:56:27.750

CalHHS CDII Sacramento Office: to point out, this is one example of a.

795

01:56:27.750 --> 01:56:33.240

CalHHS CDII Sacramento Office: Patient generated data, more broadly, and there's there's a need for that as well.

796

01:56:34.680 --> 01:56:37.110

CalHHS CDII Sacramento Office: So has multiple use cases.

797

01:56:38.160 --> 01:56:46.290

CalHHS CDII Sacramento Office: that's a really, really important point when they were building a supplement information efficient generated wants to allow for magnetism to do that in this framework.

798

01:56:46.470 --> 01:56:53.760

CalHHS CDII Sacramento Office: Not that they take control of their record and require that something changed that there's a process by which they can request and.

799

01:57:00.120 --> 01:57:00.540

CalHHS CDII Sacramento Office: Okay.

800

01:57:01.590 --> 01:57:03.360

CalHHS CDII Sacramento Office: I think we have one more call.

801

01:57:06.000 --> 01:57:14.340

CalHHS CDII Sacramento Office: I think that's my view I think you're giving them a little bit of a break, so if we go on to the next slide on the volatility to speech change.

802

01:57:14.760 --> 01:57:25.170

CalHHS CDII Sacramento Office: We actually got a number of different comments on this policy number of them related to the version, yesterday I require in the data elements teach changed.

803

01:57:26.070 --> 01:57:33.840

CalHHS CDII Sacramento Office: Roughly half of the respondents said we should stay with version one roughly half of the comments.

804

01:57:34.620 --> 01:57:43.350

CalHHS CDII Sacramento Office: That community that we take the language in the contract policy, we need to do a few even advocating version three, which is published.

805

01:57:43.950 --> 01:57:57.390

CalHHS CDII Sacramento Office: Currently language contains version one up until October 6 energy to for all entities after that point and the real thing there is that, after October six.

806

01:57:57.780 --> 01:58:16.890

CalHHS CDII Sacramento Office: Other requirements already include all of the API for providers and inclusion of the tunes St Luke's data elements that are aligned with principal defeat identifies here in this group and at 133 tend to consider social determinants of health plans for.

807

01:58:18.630 --> 01:58:28.170

CalHHS CDII Sacramento Office: The second area that received the paramount comment was definition of hell by entity just the requirements for not only.

808

01:58:28.650 --> 01:58:51.600

CalHHS CDII Sacramento Office: Did it was held one of the recommendations with actually to adopt many to choose cms rule applies to health plans, so that is the language that was added instead and maintain is defined our widget the document to align with the seniors who switches that the.

809

01:58:53.730 --> 01:58:56.280

CalHHS CDII Sacramento Office: Information one region.

810

01:58:57.870 --> 01:58:58.350

question.

811

01:59:00.150 --> 01:59:01.650

CalHHS CDII Sacramento Office: Was it the information.

812

01:59:04.410 --> 01:59:19.410

CalHHS CDII Sacramento Office: The entity must have access to the data controller, the data and authority make data available, and that is going to change to the same school and we've extended it to apply to all these are covered in that.

813

01:59:21.390 --> 01:59:26.400

CalHHS CDII Sacramento Office: Was there before we go on to the next day, the next slide security questions or comments.

814

01:59:31.770 --> 01:59:35.430

CalHHS CDII Sacramento Office: If not gone to the next slide please um.

815

01:59:36.570 --> 01:59:45.630

CalHHS CDII Sacramento Office: There were a couple comments about section of the policy for participants, that will not limited not listed specifically for free.

816

01:59:46.440 --> 01:59:50.880

CalHHS CDII Sacramento Office: and specifically listed social services, and that was a confusing inclusion.

817

01:59:51.750 --> 02:00:10.050

CalHHS CDII Sacramento Office: So that language has been adjusted, first of all to exclude exclude singling out social services to reduce that ambiguity and then to focus on usc I here, as well as long as that information is again the paint by the organization or.

818

02:00:12.240 --> 02:00:32.130

CalHHS CDII Sacramento Office: The inclusion of healthcare services or the provision of social services information that aligns with the language and dsa policies and procedures there's also a note that this me the topic of revision to this policy through future public.

819

02:00:35.550 --> 02:00:40.830

CalHHS CDII Sacramento Office: There was a suggestion on actually defining nationally recognized standards which approved.

820

02:00:41.400 --> 02:00:54.510

CalHHS CDII Sacramento Office: which appears several times in this policy and the recommendation was to define it as those that are published, and the current version of the standards version advancement process which is maintained.

821

02:00:54.900 --> 02:01:05.460

CalHHS CDII Sacramento Office: By one see as a note CDI version two is included, and therefore fall into this definition of nationally recognized version three is not yet.

822

02:01:07.230 --> 02:01:10.920

CalHHS CDII Sacramento Office: not yet published and and there's not yet here.

823

02:01:12.270 --> 02:01:13.590

CalHHS CDII Sacramento Office: In that process.

824

02:01:15.000 --> 02:01:27.750

CalHHS CDII Sacramento Office: And then finally specific specific standards that are called out for Kelly jhs to define in the future, there were a number of comments about.

825

02:01:28.380 --> 02:01:45.810

CalHHS CDII Sacramento Office: not adding language here that would allow new standards to be created that language actually was removed, so no longer appears, and the only standards to a point, there are those that are nationally recognized or appear in California law as what.

826

02:01:49.440 --> 02:01:51.330

CalHHS CDII Sacramento Office: Are there any comments or questions about.

827

02:01:58.170 --> 02:02:03.570

CalHHS CDII Sacramento Office: This, thank you for having that we're going to go back over john I think to public comment period.

828

02:02:06.600 --> 02:02:07.380

CalHHS CDII Sacramento Office: Thank you.

829

02:02:09.000 --> 02:02:19.590

CalHHS CDII Sacramento Office: So please have that we're going to go into public comment that that individuals in the public audience will comment, they inserted, it is the Q amp a or otherwise, you can physically raise your hand.

830

02:02:20.190 --> 02:02:29.970

CalHHS CDII Sacramento Office: on site, or you raise your hand and zoom teleconference options, please state your name and the organization affiliation and keep your comments respectful and.

831

02:02:31.440 --> 02:02:32.670

CalHHS CDII Sacramento Office: you'll be recognized.

832

02:02:33.720 --> 02:02:36.690

CalHHS CDII Sacramento Office: And we're going to start with on site first.

833

02:02:38.550 --> 02:02:38.820  
CalHHS CDII Sacramento Office: Can you.

834  
02:02:39.840 --> 02:02:40.380  
CalHHS CDII Sacramento Office: Learn.

835  
02:02:43.470 --> 02:02:43.770  
CalHHS CDII Sacramento Office: Okay.

836  
02:02:45.000 --> 02:02:45.210  
CalHHS CDII Sacramento Office: All.

837  
02:02:50.580 --> 02:02:56.190  
Emma P - Manatt Events: Right, we did have one hand raised, but it seems to have gone down so at this time.

838  
02:02:57.630 --> 02:03:00.780  
Emma P - Manatt Events: There are no further requests for comment.

839  
02:03:02.340 --> 02:03:09.600  
CalHHS CDII Sacramento Office: Okay, and we will take that time and use it wisely attentive over to jonah for leadership framework of it's.

840  
02:03:10.770 --> 02:03:11.040  
Great.

841  
02:03:12.150 --> 02:03:30.210  
CalHHS CDII Sacramento Office: there's more to come after this and i'm going to try to get through this quickly so that we can get to and meditation and governance, which I think is top of mind, for many, if I can just step back, please, to slide 40 I didn't skip over one slide which you need to address.

842  
02:03:31.230 --> 02:03:36.330  
CalHHS CDII Sacramento Office: They were as we've noted a number of different policies and procedures that public comments these.

843

02:03:37.200 --> 02:03:48.630

CalHHS CDII Sacramento Office: Discussions for elevated, as these are critical Claudia made a comment about all fine H I O process and and actually having that in place in time for the petition agreement to be on live and sign.

844

02:03:49.380 --> 02:03:57.000

CalHHS CDII Sacramento Office: So there are six that were identified is critical and maybe others that through the implementation process be identifying to take place.

845

02:03:57.390 --> 02:04:02.760

CalHHS CDII Sacramento Office: Some maybe in advance of these, but the six pack continue to sort of surface at the top or around.

846

02:04:03.180 --> 02:04:11.550

CalHHS CDII Sacramento Office: The qualified, he is ignition process real time data exchange definitions what is real time in firm monitoring and auditing.

847

02:04:11.880 --> 02:04:19.950

CalHHS CDII Sacramento Office: Enforcement information blocking and technical requirements for exchange, so all of those we believe are necessary for us to develop in this interim.

848

02:04:20.400 --> 02:04:36.210

CalHHS CDII Sacramento Office: reputation based in the next six months and others arise, what would require ization process and to get off those and make sure that was clear with our what our work plan, essentially for policies looks like over the next six months and it looks like any question or.

849

02:04:38.700 --> 02:04:40.980

CalHHS CDII Sacramento Office: Just real quick, are you starting these in July.

850

02:04:42.060 --> 02:04:58.620

CalHHS CDII Sacramento Office: Well, we are going to start them as soon as we can stand up sort of Santa fe, so I think, yes, ostensibly but we'll have to get sort of the next iteration of this process going so that we can begin development yes perfect, I would just want to make sure that I find my vacation.

851

02:04:59.910 --> 02:05:07.470

CalHHS CDII Sacramento Office: But the other is the is this group want to be, whatever the new advisory group miss what.

852

02:05:09.960 --> 02:05:11.130

CalHHS CDII Sacramento Office: you're gonna have to wait for that one.

853

02:05:13.590 --> 02:05:17.370

CalHHS CDII Sacramento Office: we're trying to keep you out here okay so let's go to.

854

02:05:18.420 --> 02:05:34.680

CalHHS CDII Sacramento Office: To implement us right to the other day exchange framework sections and you're going to slide 43 or six other segments of the framework we spent a number, a lot of time going through some of these in previous processes with this room.

855

02:05:35.850 --> 02:05:45.750

CalHHS CDII Sacramento Office: That process and the guiding principles that Wednesday the scenarios and then that's an opportunity so we're going to touch on governance here but we're really going to adjust.

856

02:05:46.230 --> 02:05:58.710

CalHHS CDII Sacramento Office: For that, for the next segment and john is going to go ahead and just going to facilitate that so we can move to the development process next slide slide 44.

857

02:06:00.210 --> 02:06:07.590

CalHHS CDII Sacramento Office: There were very few comments received on the exchange on this framework development process didn't make any changes there.

858

02:06:08.100 --> 02:06:23.010

CalHHS CDII Sacramento Office: guiding principles if you recall, we actually went through very extensive development process and how the common and review, there were more comments or suggestions about changes we really actually blended those to just add a couple of other fires to.

859

02:06:24.300 --> 02:06:25.830

CalHHS CDII Sacramento Office: Principles around.



860

02:06:27.630 --> 02:06:39.720

CalHHS CDII Sacramento Office: disparities and to agree that agent income is this word not included in some items to consider around the spirit, so those were included in one of the policy, and one of the principles around addressing health equity.

861

02:06:41.130 --> 02:06:47.070

CalHHS CDII Sacramento Office: i'm going to continue to go through this if anyone has a comment question or continual for.

862

02:06:48.450 --> 02:06:50.970

CalHHS CDII Sacramento Office: US I see them on quite a few okay.

863

02:06:53.400 --> 02:06:55.440

CalHHS CDII Sacramento Office: All right, let's go to slide 45 please.

864

02:06:57.300 --> 02:07:05.970

CalHHS CDII Sacramento Office: seven nations landscape This included a comprehensive scan of literature, plus research that has been done, plus surveys, there was.

865

02:07:06.300 --> 02:07:18.960

CalHHS CDII Sacramento Office: really good data thanks to some work done with the Department of Health care services seats yeah so researchers at ucsf that allows us to get a better picture or a picture on the landscape.

866

02:07:19.680 --> 02:07:26.940

CalHHS CDII Sacramento Office: leveraged in addition to other survey information, for example, we're about to lose our computer, so we may want to make sure that.

867

02:07:29.100 --> 02:07:31.230

CalHHS CDII Sacramento Office: That would be a disaster Okay, so we did not.

868

02:07:32.340 --> 02:07:52.260

CalHHS CDII Sacramento Office: make significant changes, other than in the landscape, there are some good suggestions that we should consider other activities like the polls, the registration service and calling various registries that exists and consider a house, for example, and here's a good one.

869

02:07:53.760 --> 02:08:07.140

CalHHS CDII Sacramento Office: And to consider how this framework can help advance other initiatives that require some type of information shine so we have it goes back to our landscape section and we'll want to consider those are.

870

02:08:09.510 --> 02:08:11.760

CalHHS CDII Sacramento Office: The only aspect would make sure we.

871

02:08:14.040 --> 02:08:19.170

CalHHS CDII Sacramento Office: review the description and not to make sure it's accurate to the context okay.

872

02:08:20.790 --> 02:08:22.560

CalHHS CDII Sacramento Office: we'll send those over to make sure that he's.

873

02:08:25.980 --> 02:08:33.480

CalHHS CDII Sacramento Office: clarification about context for certain providers or entities, we added some language here, based on some comments.

874

02:08:34.230 --> 02:08:44.340

CalHHS CDII Sacramento Office: Specifically, that we agree context for like care for older adults that's one issue, and we want to make sure we're planning for the state fair, of course, initiative around aging.

875

02:08:46.170 --> 02:08:55.590

CalHHS CDII Sacramento Office: And that's for various with respect to public health data there's a whole host of public health law, and we need to take that context before CCA.

876

02:08:57.030 --> 02:09:08.220

CalHHS CDII Sacramento Office: Show about some of the considerations there, so we want to make sure that we so we consider those are the landscape and there's some clarification around health on a child's.

877

02:09:13.860 --> 02:09:24.240

CalHHS CDII Sacramento Office: Alright, moving forward to slide 46 the scenarios, we made some minor edits to live events me from the landscape section just to make sure that we were aligned it.

878

02:09:25.020 --> 02:09:32.820

CalHHS CDII Sacramento Office: didn't miss anything with respect to governance again we're going to spend most of the rest of the session talking about governance and implementation.

879

02:09:33.390 --> 02:09:46.710

CalHHS CDII Sacramento Office: And just to know that there were a number of comments, for your comments, against having a formal governance meeting, for example in the board we're going to go through the status, proposing to do with respect to.

880

02:09:47.790 --> 02:10:05.580

CalHHS CDII Sacramento Office: Establishing governance, we are maintaining the recommendation that there'd be a formal governance process established over the implementation that does not change, and then we're going to show rooster when the implementation of that looks like over the next 12 months.

881

02:10:07.170 --> 02:10:09.030

CalHHS CDII Sacramento Office: Any comments here on forward.

882

02:10:15.330 --> 02:10:20.190

CalHHS CDII Sacramento Office: Okay, we gotta have a warm one is around gaps and opportunities.

883

02:10:21.240 --> 02:10:32.700

CalHHS CDII Sacramento Office: We identified a series of scenarios your calls way back in the early days of this group in this work, so we didn't make some minor change the landscape, based on update the landscape section.

884

02:10:38.760 --> 02:10:40.980

CalHHS CDII Sacramento Office: Okay, thank you um.

885

02:10:42.090 --> 02:10:46.140

CalHHS CDII Sacramento Office: In terms of some of the regulatory barriers to data exchange.

886

02:10:48.120 --> 02:10:57.540

CalHHS CDII Sacramento Office: We did actually add a new opportunity and the recommendation around at the exchange law and, specifically, just to know.

887

02:10:58.290 --> 02:11:06.750

CalHHS CDII Sacramento Office: When we define the function of the governance, we actually included that one of the functions of governance was to do a review of State law.

888

02:11:07.710 --> 02:11:18.420

CalHHS CDII Sacramento Office: Where there's disharmony with federal law to have a process by which you consider amendments to State law line federal law, we did not have that in this document discounts opportunities document and so.

889

02:11:18.840 --> 02:11:27.240

CalHHS CDII Sacramento Office: We did that was added here so it's not like we're having something and whole few, what are the functions of work to be.

890

02:11:28.230 --> 02:11:38.490

CalHHS CDII Sacramento Office: And then terms of inclusion of references for specific populations and sectors and there were some recommendations that some of the selected gaps opportunities note.

891

02:11:38.940 --> 02:11:47.070

CalHHS CDII Sacramento Office: that there are various populations and sectors like behavioral health county social services, etc, should be encompassed in or explicitly in the language of the gap.

892

02:11:47.670 --> 02:11:55.560

CalHHS CDII Sacramento Office: The gap sometimes tended to be more focused on healthcare delivery, I mean certainly expanded those I made sure that we will be more inclusive.

893

02:11:57.990 --> 02:12:01.320

CalHHS CDII Sacramento Office: And then last slide on this section like 48.

894

02:12:02.910 --> 02:12:11.100

CalHHS CDII Sacramento Office: There was more context requested or on federal funding opportunities we added that one to make sure we were leveraging.

895

02:12:11.520 --> 02:12:25.020

CalHHS CDII Sacramento Office: federal funding opportunities maximum possible to make investments at the state level as large as possible could so we've added some of those to financing section of this document.

896

02:12:26.430 --> 02:12:35.850

CalHHS CDII Sacramento Office: In terms of consideration for consent management for individuals, there was a lot of comment about the support for developing a service around content management.

897

02:12:36.630 --> 02:12:50.970

CalHHS CDII Sacramento Office: there's a great deal of interest to try to support that so that individuals providers plans counties and other participants all have a more consistent way and transparent way of documenting and managing.

898

02:12:52.110 --> 02:13:03.570

CalHHS CDII Sacramento Office: Your consent, this is a bit of a moonshot nothing like this has happened, whereby a technological service has been constructed to 1140 million people all.

899

02:13:04.110 --> 02:13:18.300

CalHHS CDII Sacramento Office: voice and established their their desires for certain information to be exchanged, that is, requires consent, but there's a strong desire to do so and we want to include that in our opportunities section.

900

02:13:19.440 --> 02:13:31.830

CalHHS CDII Sacramento Office: There are some there's a lot of interest with the counseling department health care services i'm giving them we'll need to integrate with behavioral health and so we're going to look at all opportunities to try and establish a service like this.

901

02:13:33.180 --> 02:13:39.540

CalHHS CDII Sacramento Office: The last is around ongoing funding to support data exchange, I think we heard from Secretary Galloway.

902

02:13:40.500 --> 02:13:49.500

CalHHS CDII Sacramento Office: We are advancing proposals at the state to fund implementation, there were some calls to find the ongoing support for that.

903

02:13:50.280 --> 02:14:00.570

CalHHS CDII Sacramento Office: To my knowledge, that is not currently in the budget and we're going to have to continue to consider and revisit how to sustain some of the infrastructure capacity and needs.

904

02:14:01.710 --> 02:14:02.850

CalHHS CDII Sacramento Office: on an ongoing basis.

905

02:14:03.960 --> 02:14:11.730

CalHHS CDII Sacramento Office: That so that will be an ongoing dialogue with all stakeholders about the business case and all state and supporting like.

906

02:14:15.780 --> 02:14:25.770

CalHHS CDII Sacramento Office: i'm going to pause and see if there any other comments here with Claudia has her hand raised and then look around the room and then we'll switch to digital identities when we're done with this client brilliant.

907

02:14:27.810 --> 02:14:40.080

claudia williams: Thanks, and thank you for highlighting the funding, I think, as was reflected in last meeting, where many organizations requested ongoing funding for high oh infrastructure.

908

02:14:40.560 --> 02:14:46.440

claudia williams: I would just ask that that be included as a need that's been identified by many stakeholders.

909

02:14:47.220 --> 02:15:02.220

claudia williams: I think this language refers to things like grants for onboarding but really doesn't bring up this issue of the infrastructure funding for hires that we've talked about several times in this meeting so just would effort you have that, in the discussion.

910

02:15:03.990 --> 02:15:12.390

CalHHS CDII Sacramento Office: that's not necessarily just limited to stand for infrastructure to support data exchange framework is that.

911

02:15:13.440 --> 02:15:13.890

CalHHS CDII Sacramento Office: Right.

912

02:15:14.130 --> 02:15:21.120

claudia williams: yeah I mean I think of as we've discussed before it's that high nodes are going to be a data sharing backbone for many participants.

913

02:15:21.540 --> 02:15:30.540

claudia williams: And not only do they need recognition as qualified hosts, but we believe they need actual funding as as that core data management infrastructure.

914

02:15:31.020 --> 02:15:40.110

claudia williams: And that That issue has been brought up, I think, several times by several organizations, but just don't see it reflected in this discussion that you see on the slide.

915

02:15:41.490 --> 02:15:50.250

CalHHS CDII Sacramento Office: will go back and consider whether or not, and how we would incorporate other language around recommendations for infrastructure and going.

916

02:15:51.360 --> 02:15:52.830

CalHHS CDII Sacramento Office: On going to dangers.

917

02:15:56.400 --> 02:16:07.950

CalHHS CDII Sacramento Office: feel along similar lines, I would say that it's funny to support you know the ongoing, this is a data exchange, but infrastructure for entities that they want come on board.

918

02:16:08.400 --> 02:16:16.680

CalHHS CDII Sacramento Office: of health departments and ongoing technical assistance and even the initial technical assistance, I think it's one like.

919

02:16:17.850 --> 02:16:30.930

CalHHS CDII Sacramento Office: me help and support for understanding how to even get there, and so pre onboarding assistance of like a pathway forward so we would appreciate seamlessly.

920

02:16:33.840 --> 02:16:34.560

CalHHS CDII Sacramento Office: Thank you so.

921

02:16:39.780 --> 02:16:41.370

CalHHS CDII Sacramento Office: Much any other comments.

922

02:16:42.750 --> 02:16:44.700

CalHHS CDII Sacramento Office: hands raised here or on the.

923

02:16:47.160 --> 02:16:47.790

CalHHS CDII Sacramento Office: telephone.

924

02:16:53.790 --> 02:16:55.950

CalHHS CDII Sacramento Office: Let me confirm that these are.

925

02:16:57.420 --> 02:17:01.200

CalHHS CDII Sacramento Office: we're stressing the importance of these funding opportunities the future we're not.

926

02:17:01.800 --> 02:17:14.490

CalHHS CDII Sacramento Office: saying the framework is going to find all of this is your opportunity to fight because read it, thank you, that we definitely want to what I heard from Claudia is you want to represent.

927

02:17:15.330 --> 02:17:23.340

CalHHS CDII Sacramento Office: Many stakeholders use that framework in order to be successful, needs to be funded to support infrastructure and ongoing.

928

02:17:24.900 --> 02:17:27.600

CalHHS CDII Sacramento Office: ongoing support to support.



929

02:17:28.620 --> 02:17:33.180

CalHHS CDII Sacramento Office: The state will consider opportunities to do so not that is committed to making those.

930

02:17:34.200 --> 02:17:35.970

CalHHS CDII Sacramento Office: 20 minutes angels to be.

931

02:17:37.110 --> 02:17:37.470

Thank you.

932

02:17:41.580 --> 02:17:42.120

Nicole Shields: Okay.

933

02:17:43.980 --> 02:17:45.300

CalHHS CDII Sacramento Office: During the join them to start.

934

02:17:48.090 --> 02:17:58.020

CalHHS CDII Sacramento Office: Thinking it's gone to the next slide in the interest of time i'm going to go through things pretty quickly as well, we did get a lot of different organizations submitting.

935

02:17:59.010 --> 02:18:10.230

CalHHS CDII Sacramento Office: comments to the digital identities roughly 75% are reported that were substantive comments that means they weren't just type of graphical errors or style suggestions.

936

02:18:10.590 --> 02:18:24.090

CalHHS CDII Sacramento Office: For general comments and support for actual horse suggesting substantive changes to the document i'd say about a better than 90% of those big cause a change to the document about half of those.

937

02:18:24.870 --> 02:18:38.820

CalHHS CDII Sacramento Office: In taking directed nation and about half of them adjusted and documents take portions of the recommendation or to adjust issues in some other way So all in all i'd say that the document is a pretty good day everybody that commented on it.

938

02:18:40.080 --> 02:18:47.670

CalHHS CDII Sacramento Office: The areas here highlighted in red those that had the most substituted changes and i'll i'll run through those real quickly.

939

02:18:48.930 --> 02:18:56.580

CalHHS CDII Sacramento Office: As we join us please erupted, he has specific questions along the line positively and let's go on to the next slide please.

940

02:18:58.770 --> 02:19:10.260

CalHHS CDII Sacramento Office: So, in general, there were a few comments about the document and hope that there were some consistencies pointed out in the language issues.

941

02:19:10.590 --> 02:19:17.040

CalHHS CDII Sacramento Office: And we try to fix those areas and constantly consolidated on specific language and define some terms.

942

02:19:17.430 --> 02:19:35.670

CalHHS CDII Sacramento Office: That we're using assistance in consistently so that just takes a document on a particular document around purposes useless exclusively language for person that chain and record when he doesn't use any other terms, other than that defined for both of those are.

943

02:19:37.830 --> 02:19:51.900

CalHHS CDII Sacramento Office: If we look into general sections in the document, one of the comments was in the process that that was insufficient input from such social services perspective.

944

02:19:52.320 --> 02:20:03.210

CalHHS CDII Sacramento Office: And it's just under represented in the focus groups, the document now acknowledges that is true spite our outreach to vote for this for this group and to several organizations.

945

02:20:03.750 --> 02:20:23.520

CalHHS CDII Sacramento Office: Social services were not well represented and delivery deliberations, there will be a need and document now acknowledges and need

continue to get input from social services organizations as the baby she's framework and digital identities chores over time on to the next slide please.

946

02:20:25.980 --> 02:20:45.150

CalHHS CDII Sacramento Office: On the purpose, there were a number of different coc comments on the purpose for digital identities again inconsistent use of language confusing the number of different terms inside said we try to clarify that find some terms and focus on those terms, there were some inaccuracies.

947

02:20:46.830 --> 02:20:58.200

CalHHS CDII Sacramento Office: Excuse me, there were some comments about the accuracy of the data may limit utility and that the document acknowledges that what we did, and language.

948

02:20:59.100 --> 02:21:13.560

CalHHS CDII Sacramento Office: That specifically said that validation of the information is beyond the scope of digital identities, at this time, but in several places now speaks to the need to educate organizations on the collection of information and.

949

02:21:14.040 --> 02:21:22.890

CalHHS CDII Sacramento Office: continued investment in standardizing data and improving the quality and there may be.

950

02:21:24.810 --> 02:21:27.960

CalHHS CDII Sacramento Office: language in the future that salvation.

951

02:21:29.850 --> 02:21:33.180

CalHHS CDII Sacramento Office: There was also a comment about some of the language misrepresenting.

952

02:21:33.750 --> 02:21:48.600

CalHHS CDII Sacramento Office: The input from this group, and that has been removed, that there are no recommendation specifically from this group that was a reference to a number of you that participated in the focus groups, they were making recommendations, but valuable to spend really just to make that.

953

02:21:49.980 --> 02:21:51.510

CalHHS CDII Sacramento Office: Funds, the next slide please.

954

02:21:53.910 --> 02:22:05.640

CalHHS CDII Sacramento Office: For a lot of questions and comments about data attributes, there were many comments, supporting the attributes for an individual identities, as the policy which record.

955

02:22:06.180 --> 02:22:19.440

CalHHS CDII Sacramento Office: Many that suggested gender and race, ethnicity preferred language as included, and you have CIV to also be included some even going beyond that point.

956

02:22:20.760 --> 02:22:31.950

CalHHS CDII Sacramento Office: We made two changes to the one change to document, in particular, and that was to move gender to be included when it is required by.

957

02:22:32.340 --> 02:22:45.390

CalHHS CDII Sacramento Office: components to enact a nationally recognized standard, one of the comments specifically pointed out that it is impossible to not include gender and important nationally recognized statements, the national networks today.

958

02:22:45.690 --> 02:22:56.850

CalHHS CDII Sacramento Office: But that is the document without that will be fine with gender should be included and that we might advocate for removing that in the future, the other attributes remain excluded.

959

02:23:00.630 --> 02:23:21.780

CalHHS CDII Sacramento Office: There was general support for inclusion of the health related identifiers, and that is the team and the document at this time and just wanted to note that federal needs, as well as the dsa still require the exchange of old usc usc I version two after.

960

02:23:22.920 --> 02:23:39.090

CalHHS CDII Sacramento Office: October six so even a Legion of digital identifiers TV of attributes part of digital identities does not believe anymore position from the need to exclude them to exchange that information outside of the realm of the two legged.

961

02:23:40.680 --> 02:23:40.980  
CalHHS CDII Sacramento Office: squat.

962

02:23:47.310 --> 02:23:58.740  
CalHHS CDII Sacramento Office: thanks for your comment about gender identity, the work that you do have any project and you get into the around gender identity by different elements that elements to.

963

02:23:59.760 --> 02:24:16.500  
CalHHS CDII Sacramento Office: have one gender quote unquote meetings and I seem to remember the final version of this will be for specific that just the word gender so, for example, they've got that down on recorded sex or gender, which should be once recorded at different points in time, they can change.

964

02:24:17.970 --> 02:24:27.600  
CalHHS CDII Sacramento Office: So let's make sure that we talk offline about that because i'm going to ensure that we represent that appropriately and still recognize that gets national states that you.

965

02:24:32.040 --> 02:24:39.630  
CalHHS CDII Sacramento Office: Can just pay, I think, part of what marks on it also goes to this, the adoption of like us CDI version two, which has the granularity of different.

966

02:24:40.560 --> 02:24:55.050  
CalHHS CDII Sacramento Office: different categories accidental that one this is telling me hope and version okay I don't particularly white, but there's a lot already right and not emerging one which one you want to do great Thank you.

967

02:24:56.160 --> 02:25:03.420  
CalHHS CDII Sacramento Office: Moving on to the standards we migrated the language in the document to the UFC gallery.

968

02:25:04.050 --> 02:25:23.340  
CalHHS CDII Sacramento Office: Rather than the one just to align with the bsa and the policies procedures there that doesn't make a real substantive changes to the afternoons, but it does bring fusion about each version, it was trying to standardize on third by to address alliance, we had.

969

02:25:24.390 --> 02:25:26.820

CalHHS CDII Sacramento Office: The US project.

970

02:25:27.840 --> 02:25:40.710

CalHHS CDII Sacramento Office: Which means that address includes mailing addresses home addresses, including P O box it so it's a broad definition use it by itself is not really defined by an address, so this represents.

971

02:25:41.820 --> 02:25:50.580

CalHHS CDII Sacramento Office: The status of that of that effort yeah yes, you will see if there's a recommendation about.

972

02:25:53.400 --> 02:26:03.570

CalHHS CDII Sacramento Office: Whatever yeah yes, that may be incorporated came on and good good to know that it is incorporated this spreadsheet now associated with.

973

02:26:06.480 --> 02:26:23.700

CalHHS CDII Sacramento Office: There were another comments talking about how technology standards alone or not enough document will specifically acknowledges that now again the need to move forward with the quality efforts and there was a great deal of support for innovation that.

974

02:26:26.340 --> 02:26:27.960

CalHHS CDII Sacramento Office: comment from Cameron Kaiser.

975

02:26:29.730 --> 02:26:45.180

Cameron Kaiser: yeah, this is just a brief observation on on point nine when I was in practice we I did have a few patients who were homeless and they actually had their postal address listed as general delivery so i'll just i'll just throw that out there for what it's worth.

976

02:26:46.350 --> 02:26:47.160

CalHHS CDII Sacramento Office: And you.

977

02:26:49.350 --> 02:26:51.900

CalHHS CDII Sacramento Office: let's move on to the next, and I think the final slide.

978

02:26:55.500 --> 02:27:04.350

CalHHS CDII Sacramento Office: There may be one more after this, we have a number of comments about permitted uses, I will say, for the most part that language remain.

979

02:27:04.380 --> 02:27:18.090

CalHHS CDII Sacramento Office: The same it's still exclude secondary uses digital identifiers, but it clarifies that's really associated with the statewide index, and not the use of attributes through general other process that people.

980

02:27:18.480 --> 02:27:24.750

CalHHS CDII Sacramento Office: organizations are free to use the data that they have associated with the digital identities.

981

02:27:25.650 --> 02:27:41.040

CalHHS CDII Sacramento Office: in framing permitted purpose but we didn't remove the language back around that isn't necessary and the real reason for that you're talking about patient person matching that minimum necessary what was pointed out minimum necessary is essentially.

982

02:27:41.070 --> 02:27:42.270

Jonathan DiBello: All of the attributes you.

983

02:27:42.270 --> 02:27:54.960

CalHHS CDII Sacramento Office: have available to make the match as accurate as possible and so we're leaning on the exclusion attributes rather than have been unnecessary, it was essentially went to the hospital on the fly.

984

02:27:56.280 --> 02:27:57.750

CalHHS CDII Sacramento Office: We still do not agree with.

985

02:27:59.010 --> 02:28:00.270

CalHHS CDII Sacramento Office: The other sector.

986

02:28:01.740 --> 02:28:02.430

CalHHS CDII Sacramento Office: And then let's.

987

02:28:02.580 --> 02:28:03.300

move on to.

988

02:28:05.400 --> 02:28:05.550

Our.

989

02:28:12.660 --> 02:28:18.030

CalHHS CDII Sacramento Office: Support for station will statewide person index just noticed that.

990

02:28:19.920 --> 02:28:22.380

CalHHS CDII Sacramento Office: There were several comments about acknowledging are.

991

02:28:22.440 --> 02:28:37.770

CalHHS CDII Sacramento Office: issued and the document was expanded and language, mostly at the language suggested individuals was also language about requiring participation, and that was not added to the document, but something.

992

02:28:38.490 --> 02:28:48.150

CalHHS CDII Sacramento Office: To consider in the future, recognizing that participation in something like a statewide person index increased it's a world.

993

02:28:50.190 --> 02:28:51.330

CalHHS CDII Sacramento Office: And the next slide please.

994

02:28:54.420 --> 02:28:56.160

CalHHS CDII Sacramento Office: Now we are finally at the end.

995

02:28:57.180 --> 02:29:04.920

CalHHS CDII Sacramento Office: Again in the potential words, there were several comments about not recognizing other initiatives so that's been expanded.

996

02:29:05.220 --> 02:29:11.340

CalHHS CDII Sacramento Office: And then there were some different general comments about the document is difficult to understand complicated document.



997

02:29:11.700 --> 02:29:20.880

CalHHS CDII Sacramento Office: it's not about 40 pages long, the discusses a lot of things that is difficult in some cases, to determine what the strategy is general discussion.

998

02:29:21.240 --> 02:29:33.060

CalHHS CDII Sacramento Office: So, two things are done to the document one was the attempt to strengthen the language to point out, for what strategy, and there is now an executive summary to getting this document to give a snapshot at some.

999

02:29:35.580 --> 02:29:39.720

CalHHS CDII Sacramento Office: I think that brings us to the end there any other comments or questions.

1000

02:29:43.680 --> 02:29:49.920

CalHHS CDII Sacramento Office: Because we're not going to really want to thank people in for their comments, a lot of very good substance that I think.

1001

02:29:53.190 --> 02:30:01.170

CalHHS CDII Sacramento Office: Okay, thank you, I know this is apparent on work half an hour left we're going to spend our remaining time on vacation focusing on.

1002

02:30:02.190 --> 02:30:02.610

john.

1003

02:30:04.140 --> 02:30:07.950

CalHHS CDII Sacramento Office: doe my name is Graham and Canada Secretary go.

1004

02:30:10.410 --> 02:30:16.950

Dr. Mark Ghaly: Sure thanks john yeah really rich conversation good to hear all of the comments and look forward to seeing how they're.

1005

02:30:18.720 --> 02:30:33.390

Dr. Mark Ghaly: Taking into account in what I receive ultimately so let's just spend about 20 minutes here on the implementation and future governance.

1006

02:30:34.470 --> 02:30:43.740

Dr. Mark Ghaly: Decisions so for the sake of time i'm going to just reiterate a few of the things that we have already covered turn it to john.

1007

02:30:44.160 --> 02:30:56.700

Dr. Mark Ghaly: To run through the slides pretty quickly john I think the final slide here ends up dealing with are mentioning the various functions of governance, which I think is a.

1008

02:30:57.210 --> 02:31:03.630

Dr. Mark Ghaly: Good one for us to settle with and then open it up to the group for some conversation so just quickly.

1009

02:31:04.590 --> 02:31:17.460

Dr. Mark Ghaly: You know we've had a few rounds on governance heard a lot of feedback as to what the role of the Advisory Group was whether there's.

1010

02:31:18.420 --> 02:31:26.250

Dr. Mark Ghaly: sort of precedence to establish ongoing governance, obviously, to make sure the fruits of the work.

1011

02:31:27.000 --> 02:31:33.690

Dr. Mark Ghaly: That have been completed, to date, get implemented and implemented thoughtfully and completely across the state.

1012

02:31:34.320 --> 02:31:51.630

Dr. Mark Ghaly: We need to make sure that we have an entity that oversees that and make sure that it is done well and wisely, we also just has been demonstrated over the last many months of this group, ensuring that we have transparency, clarity.

1013

02:31:52.710 --> 02:31:59.010

Dr. Mark Ghaly: broad stakeholder engagement is going to continue to be key so with those goals in mind.

1014

02:31:59.490 --> 02:32:10.770

Dr. Mark Ghaly: john if you wouldn't mind walking through the next four or five slides pretty quickly as to where we are today where we're going to immediately some of the suggestions I know Andrew kiefer asked how are we gonna.

1015

02:32:11.310 --> 02:32:15.690

Dr. Mark Ghaly: who's going to get appointed to these various committees wins, when will they start.

1016

02:32:16.350 --> 02:32:29.040

Dr. Mark Ghaly: How will they transition, we can answer some of those questions and then again open it up to the group for what I hope will be roughly 10 minutes of discussion before we have to wrap meeting so john alternate.

1017

02:32:30.210 --> 02:32:32.010

CalHHS CDII Sacramento Office: sounds great Thank you very much so.

1018

02:32:33.360 --> 02:32:40.050

CalHHS CDII Sacramento Office: July 1 that as a framework will launch with VI managing overseeing all aspects of governance.

1019

02:32:40.590 --> 02:32:48.810

CalHHS CDII Sacramento Office: To support us during this critical variables that was an interactive advisory many and and the SAP MP Subcommittee, which we will discuss and.

1020

02:32:49.470 --> 02:32:56.460

CalHHS CDII Sacramento Office: In a few slides Kelly to Gospel also develop a legislative proposal to establish a health and human services.

1021

02:32:56.910 --> 02:33:06.000

CalHHS CDII Sacramento Office: Data exchange Board, which will play a crucial role in major data exchange framework policy procedures policies and programs policy decisions.

1022

02:33:06.570 --> 02:33:19.620

CalHHS CDII Sacramento Office: Once we establish the board the board the once those the word is established existing activity will sunset at the border collie hhs will

establish change the charge new advisory committees and subcommittees as the next slide please.

1023

02:33:20.760 --> 02:33:38.640

CalHHS CDII Sacramento Office: So here on the 61 years you've seen the packet so i'm gonna read every bullet line, but here, you see the design and development of the framework, the implementation and requirements and so on the next slide we'll go ahead and kind of go over the charges composition.

1024

02:33:39.960 --> 02:33:41.130

CalHHS CDII Sacramento Office: slide 62.

1025

02:33:42.960 --> 02:33:51.840

CalHHS CDII Sacramento Office: So we will be establishing these advisory committees this year they'll operate under the domain specific charges prescribed by CDI broadly.

1026

02:33:52.440 --> 02:33:58.620

CalHHS CDII Sacramento Office: We have the implementation advisory committee, which will review and enhance the data exchange framework implementation recommendations.

1027

02:33:59.160 --> 02:34:08.550

CalHHS CDII Sacramento Office: To CDI for consideration and then we'll have the dsa MP subcommittee which will review and advanced the bsd bsa emmys to.

1028

02:34:09.180 --> 02:34:15.780

CalHHS CDII Sacramento Office: To see the aim for inspiration, as you can see from our meeting today we talked about a lot of things changing in the space.

1029

02:34:16.290 --> 02:34:25.650

CalHHS CDII Sacramento Office: past nine months it's been a reflection of that how much is going on globally but also federal so we continue, we will continue to adapt three point the environment for me.

1030

02:34:27.690 --> 02:34:43.530

CalHHS CDII Sacramento Office: As what this is by three grid and the DNA of the essays a video hundred videos have decision making authority, but will they will serve

as a critical source of input, as we implemented a chick Kramer numbers for both committees will be funded by the director CDI will also serve.

1031

02:34:44.970 --> 02:34:54.600

CalHHS CDII Sacramento Office: or name and doesn't need a surface chair, we had Li gh os are still discussing that specific composition of the advisory committees, however, I can say that both will be provided.

1032

02:34:55.410 --> 02:35:03.330

CalHHS CDII Sacramento Office: Representatives from public and private sector organizations and we're seeing the right size Bruce that will include a balance of stakeholder perspectives.

1033

02:35:03.570 --> 02:35:10.380

CalHHS CDII Sacramento Office: Since there's a lot of work to do to find your meetings will need on a similar schedule, as our current Advisory Board members probably every six weeks.

1034

02:35:10.800 --> 02:35:15.720

CalHHS CDII Sacramento Office: And it will be open to the public to our public input and transparency, which is essential to.

1035

02:35:16.500 --> 02:35:31.680

CalHHS CDII Sacramento Office: Successful governance so let's take a look at the next slide, which is a little closer implementation of 2023 so here, you see the establishment and seating i'm an H H, as in exchange for q1 of 2023.

1036

02:35:32.880 --> 02:35:39.630

CalHHS CDII Sacramento Office: And that will say next phase of the data exchange framework implementation once the board see that the board and led just will be charged.

1037

02:35:40.230 --> 02:35:46.290

CalHHS CDII Sacramento Office: With establishing some companies they feel are necessary to support implementation and oversight prediction framework.

1038

02:35:46.950 --> 02:36:02.910

CalHHS CDII Sacramento Office: But exchange Board will comprise seven voting members, the three ex officio members, the secretary of hhs who also served as chair of the board one representative from helpers and one representative from California they'll also be for.

1039

02:36:04.050 --> 02:36:18.000

CalHHS CDII Sacramento Office: appointed members who will serve up to two four year terms to individual will be appointed by the governor at least one will be a consumer representative one individual will be appointed by the speaker California State Assembly and one individual by the state's.

1040

02:36:20.460 --> 02:36:28.710

CalHHS CDII Sacramento Office: We recognize the data exchange is an area that requires relevant knowledge and experience, which is why we're recommending board members tab expert expertise.

1041

02:36:29.130 --> 02:36:37.380

CalHHS CDII Sacramento Office: and HIV administration of public and private health care or social services but also want to make sure that the word reflects of the first deep experience.

1042

02:36:38.010 --> 02:36:45.150

CalHHS CDII Sacramento Office: And the cultural that and the graphical diversity of the State so we're asking those factors are explicitly considered by appointing.

1043

02:36:45.630 --> 02:36:56.340

CalHHS CDII Sacramento Office: authorities finally to preserve trust and transparency board members will be subject to conflict of interest policies and board meetings will be subject to badly been open meeting and likely.

1044

02:36:58.800 --> 02:37:01.620

CalHHS CDII Sacramento Office: will go through this last one on the spot for q&a.

1045

02:37:02.670 --> 02:37:09.630

CalHHS CDII Sacramento Office: me read this, but if you look at kind of the overall governance functions that are laid out here, you can see.

1046

02:37:10.560 --> 02:37:24.540

CalHHS CDII Sacramento Office: You know policy decisions procedures monitoring oversight setting the direction and really falls on board with any good governance and really it's not the CDI to administer.

1047

02:37:25.140 --> 02:37:34.380

CalHHS CDII Sacramento Office: and implement the DNA change program there's a lot of other words on here i'm not going to read through, but I would say, from from the spirit of my background, working with words.

1048

02:37:35.490 --> 02:37:43.440

CalHHS CDII Sacramento Office: I look into this group here and think that there's just been an invaluable amount when you look at the final materials that are coming out landing July 1.

1049

02:37:43.590 --> 02:37:50.400

CalHHS CDII Sacramento Office: There is no doubt that all the participate in and contributed greatly to it and there's no way that we would have a treatment without you.

1050

02:37:50.790 --> 02:37:58.860

CalHHS CDII Sacramento Office: And that really is the spirit of moving into implementation I get show line feeling because I really do believe we're we're about to change service delivery.

1051

02:37:59.220 --> 02:38:11.730

CalHHS CDII Sacramento Office: In the state so that's really kind of the goal behind having a governance or that's really looking ahead and driving as hard as we can to achieve person centered services so with that Secretary.

1052

02:38:12.900 --> 02:38:16.350

CalHHS CDII Sacramento Office: Of myself we'd like to hear any input from the group.

1053

02:38:25.440 --> 02:38:43.530

CalHHS CDII Sacramento Office: Thank you, Charles barkley with the health plans and I just wanted to first start off by expressing my support this two step process I think that's thoughtful it allows us to move the project forward while the wrestle with a proposal I add, looking at the timeframes.

1054

02:38:44.850 --> 02:38:47.970

CalHHS CDII Sacramento Office: And the details here around the governance structure.

1055

02:38:49.020 --> 02:39:01.110

CalHHS CDII Sacramento Office: It just seems to me that the very likely could go with you want you to play 23 without of governance structure in place, so I just wanted to confirm that your guys's view is that.

1056

02:39:02.220 --> 02:39:12.900

CalHHS CDII Sacramento Office: Until that data exchange for is essential to really authorized it in effect that CBI will be continue to move the project forward.

1057

02:39:13.890 --> 02:39:26.040

CalHHS CDII Sacramento Office: In the interface it's caught up heels and drug next year, we can still get project will be important, I think that's what you're proposing average absolutely yes, thank you, thank you.

1058

02:39:29.340 --> 02:39:30.750

CalHHS CDII Sacramento Office: Yes, I think I was.

1059

02:39:32.100 --> 02:39:38.100

CalHHS CDII Sacramento Office: I think i've got a similar questions will probably just asking because i'm having trouble making the timing of this work.

1060

02:39:40.170 --> 02:39:43.710

CalHHS CDII Sacramento Office: Because this have to go back to the legislature it isn't.

1061

02:39:45.030 --> 02:39:49.230

CalHHS CDII Sacramento Office: Until the new legislature exceeded January.

1062

02:39:51.240 --> 02:40:05.190

CalHHS CDII Sacramento Office: In which case, assuming that the way this reads that there'll be a concern for you want the legislature would approve that legislation on an urgency basis that pretty much lightning speed.

1063



02:40:06.690 --> 02:40:09.480

CalHHS CDII Sacramento Office: For the morning we see do you want.

1064

02:40:11.160 --> 02:40:13.650

CalHHS CDII Sacramento Office: That is that the plan.

1065

02:40:16.110 --> 02:40:24.960

CalHHS CDII Sacramento Office: What we're trying to move as fast as we can, so I think that, following this meeting that we have we're going to go down the road of implementation.

1066

02:40:26.250 --> 02:40:28.530

CalHHS CDII Sacramento Office: and move forward as quickly as we can.

1067

02:40:38.490 --> 02:40:47.880

CalHHS CDII Sacramento Office: hi i'm already have the California association of HIV just want to thank you for looking at me as a requirement for the.

1068

02:40:48.720 --> 02:41:05.040

CalHHS CDII Sacramento Office: participants of the Board that's one of our concerns, this is incredibly complex as we talked about today that experts in the room, are still foggy and some of the details so appreciate that said factor in in Development Board, thank you.

1069

02:41:07.050 --> 02:41:16.290

CalHHS CDII Sacramento Office: So question about the committee and somebody and I can't recall, you may have said that the the scope activities are still under discussion, but of.

1070

02:41:16.680 --> 02:41:30.300

CalHHS CDII Sacramento Office: Just the implementation advisory three distinguishing that from the subcommittee that will be working on the psp but it'd be similar to this back fair where the dsa technical folks at flows through implementation advisory group.

1071

02:41:42.960 --> 02:41:43.380

Ali Modaressi: Thanks.

1072

02:41:44.430 --> 02:42:08.100

Ali Modaressi: First of all, I want to thank the Advisory Group and the work that all of us have done and John and John and Secretary to bring this to this to this stage, this was a lot of work, a lot of good work, I would say towards getting California, to the state by interoperability and.

1073

02:42:09.390 --> 02:42:16.380

Ali Modaressi: really happy with the work that has been done here, and the collaboration, especially, but the hard work really now starts with implementation of this.

1074

02:42:16.980 --> 02:42:30.210

Ali Modaressi: And and just wanna make sure that in terms of messaging to the participants and and the providers is going to be clear, because that could confuse.

1075

02:42:30.630 --> 02:42:40.350

Ali Modaressi: The market, so I didn't see anything here in terms of when this PSA will be available for review and signature.

1076

02:42:41.130 --> 02:42:56.340

Ali Modaressi: by the participants with a short timeline that we have, through January of 2023 and, but it also, I just want to point out and missed opportunity when it came up during the funding when.

1077

02:42:56.880 --> 02:43:04.500

Ali Modaressi: There was a mention about that for funding the HR yours, they think this stage is expecting a lot from the HBO says says.

1078

02:43:04.980 --> 02:43:23.400

Ali Modaressi: As this program is going to be rolled out and we're ready to take on that challenge, but I think there needs to be a funding for maintaining this infrastructure some of this stuff that we talked about regarding the patient identity consumer access this there's a lot of.

1079

02:43:24.900 --> 02:43:36.060

Ali Modaressi: infrastructure that needs to be built around that and I think direct funding to the edge fails is reasonable, since other states are also.

1080

02:43:36.780 --> 02:43:48.510

Ali Modaressi: Doing similar thing and and you know this this hard work needs to be backed by funding direct funding to the to maintain the building infrastructure to support this effort, thank you.

1081

02:43:49.440 --> 02:43:54.090

CalHHS CDII Sacramento Office: Thank you all, and I know I will say that the Center of the phone calls over the last few weeks.

1082

02:43:54.270 --> 02:44:07.740

CalHHS CDII Sacramento Office: And the discussions we've had over the last few weeks has definitely changed it's been a real effort to get this landed by July 1 everyone now in our minds are looking at how we over and so those discussions are are continuing to happen out here appreciate your phone.

1083

02:44:15.420 --> 02:44:15.690

Call.

1084

02:44:18.180 --> 02:44:23.100

claudia williams: hi this is Claudia i'm sorry I know my hands going up when it shouldn't have been out, but now it is up.

1085

02:44:24.630 --> 02:44:37.110

claudia williams: I just had a very I think this is a nice and nuanced approach its ambitious, it will take a lot of focus to work, but I support the sequencing think it's smart.

1086

02:44:37.680 --> 02:44:49.380

claudia williams: I wasn't clear what would be the process for establishing the interim groups and what is the process for people to express their interest in being part of those so just wanted to get a little more clarity on that.

1087

02:44:50.130 --> 02:44:52.020

CalHHS CDII Sacramento Office: And you for asking that and I.

1088

02:44:52.290 --> 02:45:03.210

CalHHS CDII Sacramento Office: Think Michelle and a number of other questions in terms of like what snaps and I think one of the things that really looked back and number problem is, we need to do a lot of education outreach.

1089

02:45:03.840 --> 02:45:16.830

CalHHS CDII Sacramento Office: There are a lot of books that are hearing about it, and then we need to go out and when I say out I feel like they need to be in a Community where the specific happens to look at how we align partners that are out there, both from a social service suicide.

1090

02:45:18.000 --> 02:45:24.150

CalHHS CDII Sacramento Office: So that's our number one goal over the next few weeks is to really get I love the idea of a data exchange framework for dummies but.

1091

02:45:24.900 --> 02:45:28.080

CalHHS CDII Sacramento Office: Because it's It is complicated, we get a lot of.

1092

02:45:28.350 --> 02:45:41.010

CalHHS CDII Sacramento Office: stuff more questions, we want to get out there, so that people understand what it is and what it isn't and how they can participate with their role might be so I see that as a primary goal or CD I over the next few weeks to get those.

1093

02:45:41.670 --> 02:45:44.850

CalHHS CDII Sacramento Office: Obviously there'll be able to next year in terms of making something.

1094

02:45:48.030 --> 02:46:02.850

CalHHS CDII Sacramento Office: What do you want to comment on process next steps yeah I will find your voice of interest for those is simpler use you've done your service for anyone 33 now is always says a lot of hard work and.

1095

02:46:03.870 --> 02:46:14.790

CalHHS CDII Sacramento Office: dedication that you want to go well, I would say, please let us know if you'd like to participate there's obviously a lot of work ahead Charles is in standing.

1096

02:46:17.490 --> 02:46:19.020

CalHHS CDII Sacramento Office: Like it's a its opposite day.

1097

02:46:20.070 --> 02:46:30.090

CalHHS CDII Sacramento Office: What I would say is you know, please let us know if you're interested in participating if you know others, that would be helpful slightly began this process it's it's really great to define.

1098

02:46:30.660 --> 02:46:38.790

CalHHS CDII Sacramento Office: mind that our clients around the table and different expertise that we really rely on and so please reach on one.

1099

02:46:44.730 --> 02:46:45.000

CalHHS CDII Sacramento Office: Second.

1100

02:46:46.500 --> 02:46:50.340

Dr. Mark Ghaly: I see Andrew kiefer's interview want to your hands up.

1101

02:46:51.990 --> 02:47:01.800

Andrew Kiefer: yeah I just I wanted to commend you Secretary galley and john and jonah and Marco and a whole host of other folks that aren't.

1102

02:47:03.360 --> 02:47:09.810

Andrew Kiefer: always the name on the email that good Center the one talking in these meetings but for all the great work on it.

1103

02:47:10.290 --> 02:47:16.890

Andrew Kiefer: But, specifically, I wanted to say i'm not on the layout for the governance, it makes a lot of sense from our vantage point.

1104

02:47:17.430 --> 02:47:32.400

Andrew Kiefer: Certainly there's a lot of work to do between here and there, but we're ready to roll up our sleeves and help on that and continue to work to make this successful, as I said earlier, we 18 months ago weren't anywhere close to where we are today, and because of this governor.

1105

02:47:32.820 --> 02:47:34.260

Andrew Kiefer: and Secretary your leadership.

1106

02:47:35.190 --> 02:47:39.600

Andrew Kiefer: And, and the hard work and elbow grease of this group we're on the precipice of something.

1107

02:47:40.830 --> 02:47:53.040

Andrew Kiefer: That we've all been striving to do but but haven't been able to and just the the, the opportunity is huge and and just really appreciate the opportunity to get to weigh in and support this great work.

1108

02:47:57.630 --> 02:48:16.470

Dr. Mark Ghaly: i'll jump in I think Andrew that's well said, and for those who were there before maybe when 33 was a thing I know it's been a Labor of love on governance just want to reiterate one point because we're focused on these sort of governance functions, we know there's a lot of work.

1109

02:48:17.520 --> 02:48:30.630

Dr. Mark Ghaly: That starts immediately and that's why this notion of an interim governance structure that immediately is established stood up hopefully depends on many of your.

1110

02:48:31.650 --> 02:48:40.200

Dr. Mark Ghaly: Ongoing participation in that work as we work to establish what yes, ambitious, to have a more.

1111

02:48:41.040 --> 02:48:54.840

Dr. Mark Ghaly: Permanent legislated structure up in q1 of next calendar year, but if that weren't to happen and our intent is to do what we can to see that it does happen that interim structure is going to continue.

1112

02:48:55.380 --> 02:49:16.890

Dr. Mark Ghaly: And we will keep that moving and keeping the work going forward so that all of the aspects of the hard work as Ali mentioned can continue and we can grapple with the specific regional or provider type issues, the ongoing work on making sure that what is.

1113

02:49:18.360 --> 02:49:30.240

Dr. Mark Ghaly: used for education and outreach is clear and useful and then of course the questions that will rear its head constantly around funding both startup and ongoing funding to all those functions.

1114

02:49:30.900 --> 02:49:47.850

Dr. Mark Ghaly: Will will occur, and we will use the interim structure effectively from now until then so seen no other hands up and assuming that all in the room, have had a chance to speak on this we.

1115

02:49:49.110 --> 02:50:00.720

Dr. Mark Ghaly: Think we're sort of in this moment of wrap up john and i'm going to use the the chance, just to really lean into thanks to everybody who has rolled up their sleeves who.

1116

02:50:01.170 --> 02:50:11.010

Dr. Mark Ghaly: came to this work, with a lot of energy, a lot of focus on this common vision, I think today's conversation highlighted that really nicely.

1117

02:50:11.490 --> 02:50:19.680

Dr. Mark Ghaly: With so many weighing in on thematically direction the consistent comments to really move the state in a direction that.

1118

02:50:20.340 --> 02:50:33.330

Dr. Mark Ghaly: Frankly, we haven't gone, we often highlight out California, is a leader in many areas and, frankly, here we haven't always led we've stumbled we've started and not finished and I think the pace of the work.

1119

02:50:34.020 --> 02:50:51.090

Dr. Mark Ghaly: With this effort and the momentum because of all of you, gives all of us at Kelly teach us a ton of hope that this is going to make a difference for people, we know and love and every California, who can benefit so with that john i'll turn it over to you and others to close us out.

1120

02:50:52.050 --> 02:50:52.980

CalHHS CDII Sacramento Office: In a second here.

1121

02:50:54.180 --> 02:50:55.410

CalHHS CDII Sacramento Office: We go to the next slide.

1122

02:50:56.790 --> 02:50:59.100

CalHHS CDII Sacramento Office: we're going to just give you a quick.

1123

02:51:00.750 --> 02:51:03.840

CalHHS CDII Sacramento Office: comment on Google deal with the Secretary said but.

1124

02:51:04.980 --> 02:51:12.870

CalHHS CDII Sacramento Office: I feel like we're just saying thank you a bunch of times and well deserved, so thank you again from here we go to the next slide just kind of what's next.

1125

02:51:14.100 --> 02:51:16.830

CalHHS CDII Sacramento Office: Well, look at us, we checked all the boxes will then.

1126

02:51:18.270 --> 02:51:20.100

CalHHS CDII Sacramento Office: You take the day off guys to be.

1127

02:51:23.040 --> 02:51:32.010

CalHHS CDII Sacramento Office: Alright, so what's happening that so we're going to share summary those next couple of weeks, we know, due to the timing there's a number of things that have been brought up that whole belt.

1128

02:51:32.640 --> 02:51:43.440

CalHHS CDII Sacramento Office: landing on July 1 with fine tuning some of the comments that have been brought in, and so you may be reached out to individually on somebody so the next show me land appropriately on July 1.

1129

02:51:44.160 --> 02:51:49.320

CalHHS CDII Sacramento Office: We are then going to go into efforts to draft the legislative proposal to establish DJ just.

1130

02:51:50.010 --> 02:51:58.440

CalHHS CDII Sacramento Office: Exchange board and then we're continuing on the data exchange framework implementation, and we can be in this implementation advisory committee of the vs.



1131

02:51:59.040 --> 02:52:05.430

CalHHS CDII Sacramento Office: Ts a dmV subcommittees so while this is the last meeting of our advisory group is only the beginning.

1132

02:52:05.880 --> 02:52:09.750

CalHHS CDII Sacramento Office: of our work to advanced data exchange, to improve the health and well being accountable.

1133

02:52:10.200 --> 02:52:11.940

CalHHS CDII Sacramento Office: it's a journey that is ongoing.

1134

02:52:12.150 --> 02:52:26.400

CalHHS CDII Sacramento Office: it's an ongoing process of refinement rather than a set destination on certain than any of us will be tedious work together, I appreciate the relationships that we form the conversations and all that you've taught me and our team, I want to give a special thanks to this man john.

1135

02:52:27.660 --> 02:52:29.460

CalHHS CDII Sacramento Office: and his team incredible team of men.

1136

02:52:30.480 --> 02:52:41.250

CalHHS CDII Sacramento Office: who make it look easy who are highly professional and, more importantly than anything they care about this work and what it means people, so I just want to thank them as well.

1137

02:52:41.640 --> 02:52:50.760

CalHHS CDII Sacramento Office: jocelyn and to my CPA theme for for all the work, thank you very much and i'll be happy to Kelly, just an honor to thank all of you, one last time, for your service and wish you did.