[Courtney Hansen] 09:37:11
all right. Morgan Stains president. Good morning, everyone. Elizabeth Stephan

[John Helvey] 09:37:23
I believe she's traveling today. Yes, she's also one that will not be able to be here
today and lead tn as well.

[Belinda Waltman] 09:37:32
So we will look forward to seeing them at our next meeting. and finally, Belinda
Waltman, Thank you, all right.

[Courtney Hansen] 09:37:45
So let's briefly go over our vision and objectives for today.

[Courtney Hansen] 09:37:48
I'd like to begin today by reminding all of us the vision for the data exchange for data
exchange in California, which is that every Californian and the health and human
service providers and organizations that care for

[Courtney Hansen] 09:38:02
them. we'll have timely and secure access to usable information that is needed to
address their help and social service and social needs, and enable the effective and
equitable delivery of services to improve their lives.

[Courtney Hansen] 09:38:19
Well-being. So as we work together over the coming months, diving deep into the
specifics of legal considerations and technical specifications, I would just ask you all to
keep that vision in mind to guide the work mainly that this is
about improving the health lives and well-being of California's So for our meeting objectives, as many of you know. This work on the Dxf.

Began one year ago, resulting in the release of the Dxf.

Including the Dsa. or data sharing agreement, and the initial set of P.

Andps this past July Today we will begin by reviewing progress made and key milestones.

We will then discuss the purpose and role of this subcommittee.

The approach of prioritizing new. who can be topics and reserve significant time for a substitute discussion to inform the development of new p andps that have been prioritized for development.

So if you thought that this was going to be an easy get to know you first meeting it's not we're jumping right to it and to start us off, I will turn it over to Jonah to talk about the

Dxf background and implementation roadmap. Thank you.

Right can we go to the next slide please so we're very, very happy that you're all able to support this and appreciate all the time that you're all able to support this and appreciate all the time that you're willing to invest in this very important activity.

Want to make sure that your familiar with the frame it's underpinning background as we undertake this work.

This is an incredibly important endeavor from the Health and Human Services Agency in the State of California, I mean, it really is link to a whole host of initiatives that the administration Health and human service agency have

undertaken is undertaking now including work with the problem services and calam and 8 K.
And the efforts of the office portability they're all sort of wrapped in

The ability for California and even if this framework is, is really comprised of a number of different artifacts.

Turnout to that is that there's a single statewide data, sharing agreement.

And alongside with that a series of policy documents. that are intended to help accelerate and expand health information exchange electronically amongst off and human service organizations and including government agencies and social programs starting in 20

20. so it's it's it's important for us to all Note that this is an interesting broad and and necessary to improve whole person care in the health.

And well being for all California.

Terms of the genesis of this our work is rooted in Ab 133, and health and safety.

This is passed back in 2,021 in July, when Governor Newson enacted this Health and safety code and establish the framework.

To a govern and overseas health. exchange in California.

So Ab. 1 33 requires, like khhs, along with its departure, offices and a consultation with stakeholders, including all of you and others, establish a stakeholder advisory group which we did

last year, and the State Exchange framework mandated a broad spectrum of organizations to X.

Keep the framework and and sign it by no way than January 30, first, 2020, and that most of the organization sign it with some exception.
I have a 2 year defral rate into exchange information out extra electronically with other mandated organizations.

[Jonah Frohlich] 09:42:36
In real time, starting in January the 30 first 2,024

[Jonah Frohlich] 09:42:41
And you'll note that in real time I used air quotes because it's something we actually as part of his task. A part of our work is to define what we mean by real time that will be coming in case you it

[Jonah Frohlich] 09:42:49
also required the establishment of a digital identity strategy.

[Jonah Frohlich] 09:42:53
By July 30 first, which was published and is available on on the Cdi website.

[Jonah Frohlich] 09:43:00
Next slide, please. So what's in the data exchange framework

[Jonah Frohlich] 09:43:06
I mentioned it's a series of policy document those include on the left

[Jonah Frohlich] 09:43:10
This whole development process, vision and guiding principles, landscapes for data exchange.

[Jonah Frohlich] 09:43:17
In California we developed a set of scenarios and work with our advisory group.

[Jonah Frohlich] 09:43:22
To develop those did exchange governments this is something that we are agency and Cdi are process of establishing

[Jonah Frohlich] 09:43:32
And this is this: is our governance on an interim basis.

[Jonah Frohlich] 09:43:35
Subcommittee and on Implementation Advisory Group, Cdi. I. all hoping to inform and raise the Secretary recommendations.

[Jonah Frohlich] 09:43:42
I, including around things like and procedures, which is and then gaps and opportunities.

[Jonah Frohlich] 09:43:50
So those are a set of policy documents. and then there's the day sharing agreement and policies and procedures that include that Dsa The first set of policies and procedures also were published in July. We

[Jonah Frohlich] 09:44:00
are now going to work through the next that we intend to with the publish and established by January thirty-first that next year, when those signatories the signatures are

[Jonah Frohlich] 09:44:16
argue next slide here.

[Jonah Frohlich] 09:44:26
Just in the background in the development process So the Dsa and the Pmp.

[Jonah Frohlich] 09:44:31
Set forth a common set of terms, and can, and obligations to support, secure in real time, get real time access to an exchange of health, intimate service, information.

[Jonah Frohlich] 09:44:43
Sharing agreement. Is this legal agreement executed by January of this coming here?

[Jonah Frohlich] 09:44:49
The policies and procedures are the rules of the road, and they really describe what was the underlying requirement that all signatories I must abide by.

[Jonah Frohlich] 09:45:01
So this is different from establishing. We said this repeatedly.

[Jonah Frohlich] 09:45:04
This is not about establishing the pipes and wires.

[Jonah Frohlich] 09:45:06
This is about everyone having a common understanding and assigned.

[Jonah Frohlich] 09:45:12
Agreements about how they electronically exchanges, making as clear as possible what the requirements are, what the expectations are of all signatories.

[Jonah Frohlich] 09:45:27
Next slide. I'm just gonna keep going until somebody tells me, Stop So the Dsa and the P.

[Jonah Frohlich] 09:45:35
Development process. There were 8 that were established many of you are part of that work, and we really yeah all of the advice that we got from from the previous group, and we'll from this group for the next 6.
But the 8 you can see they're published on the website.

But just for recap what is one of the policies is around amending the Dsa.

We need a policy about how we amend it, following January, the 30 first, 2,024 signatures that 23 signatures, and then a policy about developing and modifying policies and procedures. So we have policies about developing policies and about amending policies.

Those are necessary, because if all are beholden to the requirements in the policies, we need a process by which we get stakeholder understanding and agreement about how those should be changed over time reach notification permitted required and prohibited purposes, requirements to exchange health and social service, information, privacy, security, safeguards, individual access, data, elements be exchange.

These are all established, published on the website. and they will be accompanied by the next 6 that we do next slightly.

Who has to sign it. So in 81, 33 in code, there are 6 organization types that are required to sign the Dsa.

Some of these are specified with more precision, some with what General Q.

Care hospitals to find a section in code. as to what those are physician.

Organizations and medical groups does not refer to a specific code in in State law.

So those aren't are defined. more generally which does present some challenges in terms of organization, saying that this apply to me or not.
Field Nursing facilities are are defined in Section 2.

[Jonah Frohlich] 09:47:40
Well 50 of the State code, healthcare service plans and disability insurers that provide hospital, medical or surgical coverage.

[Jonah Frohlich] 09:47:46
And again, it also defines with some precision what those are, including that account management, care, plan, clinical libraries.

[Jonah Frohlich] 09:47:52
Again. This is relate to section 12 the business professionals Code I'm.

[Jonah Frohlich] 09:47:57
An acute psychiatric hostage. So those are the the entities that are required to sign.

[Jonah Frohlich] 09:48:02
There are thousands of these organizations will be required to sign and and actively share data.

[Jonah Frohlich] 09:48:08
And one of the roles of the State is, and Cbi is to create this inventory of who falls in each category.

[Jonah Frohlich] 09:48:16
And further, as the department, and has authority actually specify these further to better define things like what constitutes a physician organization and a medical group.

[Jonah Frohlich] 09:48:30
So that we can have a complete understanding of who is required to find these agreement next slide

[Jonah Frohlich] 09:48:42
Even like see when you ask a good question why don't we we can pause for just a moment.

[Jonah Frohlich] 09:48:48
Now, And so, Stephen. Just so, so everyone can can hear the question in terms of definitions.

[Jonah Frohlich] 09:48:56
Can or should we align this list with the definition of clinician under Federal regulations, each for blocking provisions.

[Jonah Frohlich] 09:49:02
We so I think it's something we we will likely have to take up as we consider what the definitions are, and again, because the Dsa.
And Ab. 133 specifies entities as opposed to individual practitioner. We'll need to consider like how we use Federal law to apply to our state requirements.

So it's a really good question and we are gonna try to and we should really try to align, as we always have, and it's stated in one of our principles in those policy documents to align with federal law

and rules wherever possible. Yeah, Joanne, just just a comment.

That I think that's really helpful especially for providers and other clinicians today that are already working on their Federal compliance.

If we can align this or as much as we can align this, it'll just lower the burden additional burden for them.

And the other thing is that I look if you go back as slide. I noticed in the list we captured laboratory, but but imaging centers, for example, are another entity that that would be held to be a clinician under the information sharing requirements, and we didn't call it out separately and incredibly important in terms of care coordination, especially amongst providers, but also for individuals.

Yeah, I I you know I totally agree with You here, Steven, and this is this is both a

This is a it's gonna be present some challenges because both categories are defined in statute and currently Ihs and Cdi. I don't have authority to it's broad in that broaden and say we are not going to apply these 2 imaging centers, for example, which I agree.

Should really be part of this of the network of participants through sharing data.

And ultimately really should be party to requirements around sharing data.
So that likely would require either regulatory authority or even statute changes to incorporate them into the definitions, unless there’s some way to broaden and define the category around provider groups. so it's going to present some issues with making sure that we get all of those particular who aren't reference to your pharmacies.

You'll also note are not part of the definition here. and they represent a critical stakeholder, as we see in the Covid.

So we we are gonna have to think about How this overtime may be broadened to include other other entity types.

Why, don't we sort of statutory timeline. I We’ve I think we've covered this I do.

I just do wanna note the I mentioned sort of an exception an exemption.

It's not a full exemption it's essentially a deferral for certain entities.

If you look at of the screen by January, the 30, first, 26, certain entities that are called out in A, B, 133 have another 2 years to comply with the mandate to actually share data and those are noted at the bottom fewer than 25 positions.

We have hospitals long term acute care, site, critical access, rural general.

If you care less than a 100 beds here’s the 100 bed state run site, hospitals, and nonprofit clinics with than 10 providers.

Those are actually again. These are i'm called directly from the statute have not defined these separately
They're called out, or maybe 133 and again,

[Jonah Frohlich] 09:52:28
This is so we're subject to that can't further refine it, unless additional authorities are provided.

[Jonah Frohlich] 09:52:39
I can do something next slide. Please.

[Jonah Frohlich] 09:52:44
I think I think i'm still going here I should know this, but I think i'm still continuing with this.

[Jonah Frohlich] 09:52:49
Is that correct?

[Jonah Frohlich] 09:52:55
Let's keep going that we want to get to the substance of this and get your input.

[Jonah Frohlich] 09:53:01
So governance important for everyone to understand. So where we are in this path towards pro long term governance of data exchange in California oversight last year, how hhs and cdr I stood up as as per

[Jonah Frohlich] 09:53:17
statute as I just noted a date exchange framework stakeholder, advisor, group, and a subcommittee, and they work instrumental and advising the State in developing the Dsa pps and all those policy

[Jonah Frohlich] 09:53:29
documents. Now we're in this interim period where we have a new implementation advisory committee that met earlier this week, and a new subcommittee.

[Jonah Frohlich] 09:53:38
The pnp subcommittee which is This group has a different composition from the subcommittee in the last iteration, and that's by design in part, it's because the subcommittee needs

[Jonah Frohlich] 09:53:48
to recommendations around policy and procedures that are include some technical considerations about things like transaction patterns and standards. and we felt like it was important in Cdi and khhhhs wanted to ensure that We

[Jonah Frohlich] 09:54:05
had the right composition. Stakeholders who could provide expertise on those in addition to other legal parameters that would be in soon.
[Jonah Frohlich] 09:54:12
The Pmp. that we developed. So this subcommittee a slightly different competition.

[Jonah Frohlich] 09:54:18
Some of you were here in the previous iteration. Some of you are new.

[Jonah Frohlich] 09:54:22
But that is why you see some different here today then we're on the previous subcommittee. All that's to say, is this group is expected to convene and through the second quarter next year at the second quarter of next

[Jonah Frohlich] 09:54:36
year, we expect that there would be a transition to long-term governance.

[Jonah Frohlich] 09:54:43
The reason why we're looking at the end of second question beginning of third is because, statute is needed to establish a board and an Hhs data exchange board with one of the recommendations that was

[Jonah Frohlich] 09:54:57
adopted by Cdi and health and human services to overseas over the long term.

[Jonah Frohlich] 09:55:04
The development of priorities procedures, and and developing and and moving that statute forward and having it advanced through the Legislature, and then signed by the Governor, will take some time we'd originally intended and

[Jonah Frohlich] 09:55:17
hoped to get this done by the first quarter of next year.

[Jonah Frohlich] 09:55:22
But with the legislative timeline it's it's to extend until the second Quarter, so that this permanent structure would be established in the third Quarter we'd still feel like we'd have similar types

[Jonah Frohlich] 09:55:30
of structures of external advisors. Subcommittee like this one are going to be necessary, not just to get expert insight, but to create a level of transparency and openness about the policies that need to be evolved

[Jonah Frohlich] 09:55:45
and established and established to build our

[Jonah Frohlich] 09:55:51
Our our capabilities are on data exchange. so we will continue, and we expect to continue an open and transparent stakeholder engagement process.
[Jonah Frohlich] 09:56:00
Does anyone have any questions about this before we start to get into

[Jonah Frohlich] 09:56:16
Okay. great thank you. I think i'm turning this over to one of Viking members.

[Matthew Eisenberg] 09:56:23
Now to review the charter. Is that correct? I'm sorry I was on double mute, Jonah.

[Jonah Frohlich] 09:56:28
Can I ask a quick question before we transition Yeah. go ahead? Welcome, sure, Matt Eisenberg. Sorry i'm late.

[Matthew Eisenberg] 09:56:34
I'm the Associate cio at Stanford healthcare any any recommendations from this subcommittee have to be approved by the implementation Committee that's the current governance structure as I understand it approved or

[Jonah Frohlich] 09:56:47
they get forwarded through to that to that committee.

[Jonah Frohlich] 09:56:52
That committee upon on them. They get approved ultimately by the That's the that's the flow.

[Matthew Eisenberg] 09:57:01
Okay, So they have to go through the implementation committee, for they have to, you know, to get the thumbs up

[Matthew Eisenberg] 09:57:14
And the only other comment I would make is next year is going to be a busy year, federally as well as the trusted exchange framework gets set up federally.

[Matthew Eisenberg] 09:57:21
So we talked about this before. there's going to be a lot lot of moving parts as we try to quickly move into this sort of permanent state or semi semi-permanent state.

[Jonah Frohlich] 09:57:32
Yeah. totally agree. Map we making your pathy came to the Yeah advisory Committee last year sorry earlier this year, but in the in the last iteration to advise on Tfcas.

[Jonah Frohlich] 09:57:45
And we had a call with Marianneger. I think it was last week to align on right after tfus where it came out with its process with when right and Qhan.

[Jonah Frohlich] 09:57:59
We are going to continue to engage with with Marianne and the Sequoia project, and again, we want to align as much as possible.

[Jonah Frohlich] 09:58:07
There is with their queue in process because in California We are going to establish a qualified at a open aligned with as much as possible. What they're doing Now they're voluntary Were required whom we require to

[Jonah Frohlich] 09:58:22
participate is different from who whom? so there will be some deviations.

[Jonah Frohlich] 09:58:30
But we'll try to minimize those and make and align as best as possible, with what they're setting up

[Courtney Hansen] 09:58:39
Okay, Gordon. Thanks. Jenna alright let's talk about the charter.

[Courtney Hansen] 09:58:46
So details on the roles and responsibilities of the Dsa.

[Courtney Hansen] 09:58:49
P. and V. Subcommittee are available in the Subcommittee charter, which has been shared with members and is available online on the Calhs Dxf.

[Courtney Hansen] 09:58:58
Website. The charter aims to provide background on the Dxf.

[Courtney Hansen] 09:59:04
Describe the subcommittee's purpose and role detail. the composition of the subcommittee and the responsibilities and expectations of its members, identify the chair and define their role outline, expected subcommittee

[Courtney Hansen] 09:59:17
meetings, milestones, and outputs. We will summarize some of the key content in the next 2 sides.

[Courtney Hansen] 09:59:24
Next slide, please. so, as previously noted, the purpose of the Dsa.

[Courtney Hansen] 09:59:29
Pnp. Subcommittee is to advise, Call Hhs Cdi. I.

[Courtney Hansen] 09:59:34
And the Ic. on the development of and modification to the Dsa.

[Courtney Hansen] 09:59:38
And its pmps. Kelly, Js. Cdi.

[Courtney Hansen] 09:59:43
Will lead drafting of language for new pmps and share materials for stakeholder review, and input Kelly to Jess will hold all final decision, making us we'll hold all final decision, making authority, but

[Courtney Hansen] 09:59:56
we'll receive guidance from this committee as chair I will preside over the subcommittee meetings and coordinate meeting agendas.

[Courtney Hansen] 10:00:04
The Iac will be kept informed of the subcommittee activities and will be provided opportunities to provide input on work product stemming from the subcommittee discussion, including drafts of the new

[Courtney Hansen] 10:00:14
Pnb's. so everything we do will be reviewed by the Ic.

[Courtney Hansen] 10:00:19
Next, slide, please.

[Courtney Hansen] 10:00:25
Member expectations for those that are returning this isn't new for those that are new welcome.

[Courtney Hansen] 10:00:33
And then this is kind of what we expect. Subcommittee members will serve in an important advisory role.

[Courtney Hansen] 10:00:38
Members will be expected to consistently attend and participate in meetings.

[Courtney Hansen] 10:00:44
Informed staff. If you are unable to attend a scheduled meeting review shared materials in advance of each meeting, and we will do our best to get you those materials.

[Courtney Hansen] 10:00:55
I, quickly as possible keep statements during meetings respectful, constructive, and relevant to the agenda topic, as well as brief.

[Courtney Hansen] 10:01:07
Be respectful to others solutions oriented in your deliberations and comments, and provide input on draft materials as requested, and finally serve as ambassadors to your network.
So if you are here representing a group such as you know, clinical laboratories, please share the things that we do here with the other people in your network.

Get their feedback and bring that feedback here as well.

Next slide, please the meeting timeline. so meetings will be held approximately every 6 weeks, and we have confirmed a meeting dates through march of 2023.

We will aimed host meeting agendas to the call. Hhs website 10 days in advance of each meeting and share any additional materials with members prior to each meeting.

Allow sufficient time for review. Now I would like to open it up for discussion, and ask if any subcommittee member has any suggested amendments to the proposed charter raise your hand, and I will call on you

Just give it another minute. Any questions, comments. And then just the comment that this is very well thought out and nicely presented.

Thank you. Thanks, Demon

Alright, hearing none. So we will consider the charter, then final, which is great.

And at this point I will turn it to Helen to talk about the prioritization of the next set of pnps.

If you do have any comments, questions about the trial, feel free to email me any amendments please email me by.

By Monday, I would say at the latest, so we can consider them.

Steven, you are unmute. I know that you. We did not follow any Roberts rules for that approval which is totally fine with me.

I love the efficiency of that but is that going to be our standard.
[Steven Lane] 10:03:24
We're basically seeking consensus and moving on from there.

[Steven Lane] 10:03:27
Just so. we know how to operate here

[Courtney Hansen] 10:03:34
Yes, I would say so, Jenna. So when it comes to reviewing policies and procedures, I think even if you may recall, we often would review materials.

[Jonah Frohlich] 10:03:51
All that comment. and we may and sometimes did, say, you have another week to review and provide additional comment, following the discussions, because there were some proposed changes.

[Jonah Frohlich] 10:04:05
We did do real time edits and we felt like it would be worthwhile to give participants spent an extra time to provide guidance.

[Jonah Frohlich] 10:04:15
I think, with the charter it's a little different it's. it's very similar to what we had previously.

[Jonah Frohlich] 10:04:19
So it doesn't feel like it it requires a whole lot of additional words.

[Jonah Frohlich] 10:04:23
Smithing. Now we pretty much adapted almost.

[Jonah Frohlich] 10:04:27
We adopted what we had previously I think when it comes to pnps.

[Jonah Frohlich] 10:04:30
We're not doing a robert's rule voting etc.

[Jonah Frohlich] 10:04:33
With this isn't it's advisory we're trying to get consensus but because we're going to be going into some pretty media topics that are that are good would be difficult quite frankly to get

[Jonah Frohlich] 10:04:44
consent. Yeah, Yeah. meeting setting, and may have some really valid comments that we need.

[Jonah Frohlich] 10:04:49
Will to refine materials. What we may end up doing as we did previously, is giving everyone additional time to reflect on changes.
Jonah Frohlich 10:05:00
Sending those changes around, giving everyone a specific timeline, say a week to provide additional comments.

Jonah Frohlich 10:05:07
And then What we typically have done then as well is then present.

Jonah Frohlich 10:05:12
Those updates to the group for final recommendations.

Courtney Hansen 10:05:17
I would propose we do that give everyone chad for meaningful dialogue and input absolutely That's fine.

Matthew Eisenberg 10:05:27
But it sounds sounds like formal voting is not required here.

Jonah Frohlich 10:05:32
Correct.

Courtney Hansen 10:05:37
As far as taking the documents and having time to review them for an additional week or so.

Courtney Hansen 10:05:42
I think that time is also critical for ambassadors to get input from their network.

Courtney Hansen 10:05:49
So we will definitely be giving that time

Courtney Hansen 10:05:55
Any other questions or comments.

Helen Pfister 10:06:02
Alright. Then I will pass it off to helen thank you great for those of you that i've met before.

Helen Pfister 10:06:08
Good to see you again. Those are new. Nice to meet you.

Helen Pfister 10:06:11
For those of you haven't met me i'm Helen Fister.

Helen Pfister 10:06:13
I am a partner at Manatt, Phelps & Phillips, and I've been working with Jonah and the team on them.
That stuff on this project since sometimes since we're beginning since last year, at some point so happy to be continue to be involved.

Next slide, please. So we have 6 pms that are prioritized for development.

Those are the ones on this slide here the first 3 we're gonna start to review today.

The next 3 will be the second phase the idea is to have all 6 of them done by January 30 first of 2,023 and the ones we'll talk about today information blocking basically prohibits participants from undertaking practices that will interfere with the exchange of health and social service.

Information, and also it sets forth, exceptions for actions that won't be considered information blocking, and we'll go into this more detail, obviously, but it does.

It is intended to track to some extent the Federal information blocking rule consistent with our general approach that we don't want to reinvent the we and we want to leverage existing Federal State frameworks wherever possible. The second policy we'll talk about a little bit today is monitoring, auditing, which is basically the processes.

But the State will follow, and the participants will follow, so they can ensure that all participants that have to sign the Ua.

Yes, I actually do so, and ensure the participants actually comply with their obligations under the dsa.

The third one is required Transaction prep patterns.

This is one that R Rim will take the lead on and basically sets forth that exchange prep panels for the for the data exchange framework.
And there is that participants must support at a minimum

And then the next 3 policy is the ones that will be in the next phase of this this work.

A B, 133 requires that that'd be exchange in real time, which of course beg your question of what that means.

So we will be developing a policy that defines what we time that exchange means in different contacts, and what participants have to do to comply with the real-time exchange requirement there'll be a technical requirement for exchange, exchange policy which will set forth technical specifications.

technical requirement for exchange, exchange policy which will set forth technical specifications.

And then a qualified h a designation process, qualified Hiv as those of you who looked at the Dsa. or were involved last year.

Remember, are the State designated that exchange entities that facilitate the exchange of information among participants in the that exchange framework.

This policy will set forth the process for designating qualified H.

Ios. so let me stop there and see if anyone is any, any, any comments

Okay, next slide, please. Oh, wait, Helen. it looks like Mark has a comment. Oh, I didn't see that.

Okay, thanks. Could you say a little more about what the required transaction patterns includes?

It sounds like you might include the flows for many of the policies and procedures that we have in effect.
And so various things might fit into that I just I you could say a little more that'd be helpful to me.

[Helen Pfister] 10:09:24
Thank you. So we're gonna have I mean rim if you wanna jump in Now, that's fine.

[Helen Pfister] 10:09:29
But we're gonna have a detailed discussion of it with later on, in the course of this meeting.

[Helen Pfister] 10:09:33
So do you want to give a quick answer room, and then we can go into more detail when we when we get to it?

[Rim Cothren] 10:09:37
Or how do you wanna I'll I'll go ahead and chime in for just a minute, Mark?

[Rim Cothren] 10:09:41
Thanks for bringing that one up, because there's been some other questions about that as well.

[Rim Cothren] 10:09:46
One of the things that we called out earlier was the data elements that needed to be exchanged here.

[Rim Cothren] 10:09:53
We're talking about part of the business processes that we want to support the types of interactions between participants.

[Rim Cothren] 10:10:02
And what are the data needs to exchange or access data across those?

[Rim Cothren] 10:10:05
And is Allen said we'll get into some of those later on, during today's meeting.

[Mark Savage] 10:10:14
Thank you at the appropriate point. I may have an idea about a policy that either fit there or is something else that I'll wait for the appropriate time.

[Rim Cothren] 10:10:22
Thank you. Excellent. Thanks. Okay. So we do recognize that.

[Courtney Hansen] 10:10:28
There may be additional policies that will be needed beyond the ones that we've already 1 s. We still have one more comment from Stephen.

[Helen Pfister] 10:10:35
Okay, yeah, just also, Helen and rim will transaction patterns.

[Steven Lane] 10:10:41
Or when we get to it, let's discuss with whether transaction patterns will also include purposes of use and repurposing of data which are certainly, you know, could be considered under transaction patterns.

[Rim Cothren] 10:10:54
Well, I will at least get a started there. stephen One of the policies and procedures that we had earlier that's already been approved is on permitted, required, and prohibited purposes.

[Rim Cothren] 10:11:10
For use. So at least my thought is today's discussion probably won't include that.

[Steven Lane] 10:11:13
But if we need to specify any of that that'd be an excellent topic for discussion, we could also make the good point that there there are policies and procedures that have already been approved that are not before

[Steven Lane] 10:11:28
this subgroup to develop, and and the importance of everyone on this group being keenly aware of of what has already been done.

[Helen Pfister] 10:11:39
So as it will inform this new work in addition. Absolutely thanks. Stephen.

[Courtney Hansen] 10:11:45
Alright, Helen, go ahead. Okay. So we realized that in addition to the policies that already exist. or Stephen just mentioned, and the ones that were developing. Now, we may need other pmps in the future and they we have for those of you

[Helen Pfister] 10:12:00
who've been participating in this group this list on the right side will look familiar.

[Helen Pfister] 10:12:05
We've been talking about those along the way one is dispute resolution, a policy for what happens with this dispute among participants relating to the data sharing agreement.

[Helen Pfister] 10:12:15
One is an authorization policy. at this point the that is your agreement to sort of a high level that if patient consent is required, or patients authorization is required to exchange information then participants won't exchange information unless we've
received that authorization. we may end up meeting a policy that fleshes it out some more pvd, but just keeping that on there sort of like in the parking lot.

[Helen Pfister] 10:12:37
Consent management. So Obviously, in an ideal world, there would be some sort of centralized consent.

[Helen Pfister] 10:12:45
National system. I don’t think we are there yet I hope we're very close to that.

[Helen Pfister] 10:12:49
Yet at this point, I think we're tabling that policy to with a better sense, where we're going in terms of consent management.

[Helen Pfister] 10:12:56
But welcome thoughts from from folks on that, I think, actually just saw.

[Helen Pfister] 10:13:00
Someone asked for the consent, manage to be prioritized.

[Helen Pfister] 10:13:04
I think the question is, what exactly do we mean by that if we're talking about just a centralized system.

[Helen Pfister] 10:13:11
We're not ready yet, but it both of other ideas as to what consent month management policy might include that we should focus on now would love to love to hear that. so I don't know sound if you wanna wanna wanna chat in on that

or given that you raise the the point. Well, yeah, this is Sunday, and thanks for giving me opportunity to speak.

[Sanjay Jain] 10:13:32
So consent management. The the reason I was thinking it should be prioritizes. This is the kind of a foundation of what data should be exchanged, and I I saw a point from Belinda the especially for part 2 We would need that so

[Sanjay Jain] 10:13:45
before starting the data exchange, we should think about a robust consent management system.

[Sanjay Jain] 10:13:54
Because that comes, I think, before we start extending the data. that's the reason I thought it should be prioritized.

[Helen Pfister] 10:14:01
Yeah, I mean, I think, at this point the idea is that each participant will have to be have to assure that they've gotten any required authorizations to share information.

[Helen Pfister] 10:14:13
Obviously like I said it would be ideal if there were a centralized system of book to rely on.

[Helen Pfister] 10:14:18
But that is not is not sort of in this first phase of of work.

[Jonah Frohlich] 10:14:21
Jonah I don't know if you've Joan a Courtney. Any other thoughts on that that you wanna you want to weigh in that way in on yeah and others on a team can weigh in here too.

[Jonah Frohlich] 10:14:33
Part of the challenge, as as Helen invoked, is the lack of some mechanism by which entities can actually manage.

[Jonah Frohlich] 10:14:43
Consent to accommodate that policy. As you all know, part.

[Jonah Frohlich] 10:14:49
2 data is protected under Federal law, and we cannot and do not have any authority to supersed

[Jonah Frohlich] 10:14:57
That requires that a part 2 provider only share information with others.

[Jonah Frohlich] 10:15:04
Where there is a release of information from the individual

[Jonah Frohlich] 10:15:09
And in order to ensure that that is understood, either needs to be not just a policy, but a process.

[Jonah Frohlich] 10:15:15
And in this kind of an environment, really some local statewide, federated or centralized system that’s actually helping to manage that, so that an individual can document their preferences for release revokes them modify them and that

[Jonah Frohlich] 10:15:32
others can all access and understand what the individual's preferences are around sharing.

[Jonah Frohlich] 10:15:40
That's obviously very complex. the policy is only one component of what's necessary.
The State feels that this is a priority.

But it also does need to, along with stakeholders.

Consider what types of investments and infrastructure necessary to make that happen.

I will say parenthetically that the Department of Healthcare Services as part of Calam is in the process of designing a pilot to establish a single universal release of information form.

Thank you part 2, but isn't limited to it and establish a process to have is there at the beginning of the next year to test them.

That would require that in at least at a local level.

That there is some sort of a centralized service likely through.

A health information exchange organization or a community exchange organization that has that capability so that they can actually manage it.

And the and the reason for that test is to actually see how that can.

This actual process for control, that management can be realized that we set a smaller scale.

And the lii. and Khhs are will be working alongside the department.

To observe those those pilots learn from them, so that the Agency and Cdi.

I can consider how to scale this statewide, as I know, is a very lengthy response.
But, as you all know, it's incredibly complicated to implement, and nothing at this scale has been done anywhere else in the country. Thanks for inviting blended.

[Helen Pfister] 10:17:22
To speak. Sorry, Courtney. I would just echo that I was gonna suggest something like, and maybe it's a combined Pmp.

[Belinda Waltman] 10:17:30
Authorizations and consent management that could speak to that phasing, you know, phase one before there is a state right registry.

[Belinda Waltman] 10:17:36
Here's how you would need to maintain, or you know, verify someone else's authorization before you exchange data, and then, after this is set up, we would expect this and I think

[Belinda Waltman] 10:17:44
the Phm program Guide. just did a really nice job of this saying before the Pm. service is live.

[Belinda Waltman] 10:17:51
We expect Mtps to do this for rest terrifying and after we'd expect them to follow a mar standardized approach.

[Belinda Waltman] 10:17:58
I think if we look at the Pmp. 4, that has the part to data reference, it leaves open a lot of question or potential ambiguity in terms of how does that actually need to happen?

[Belinda Waltman] 10:18:08
Between 2 organizations, exchanging data

[Helen Pfister] 10:18:17
That's a good suggestion to linda like it Okay, .

[Jonah Frohlich] 10:18:24
So I do want. Sorry, Joan. will you have to say something more?

[Jonah Frohlich] 10:18:30
No market. Okay, I do want so let's say suggestions on other topics.

[Helen Pfister] 10:18:39
Other pmps we might need. But let me just finish running through the ones that we already have listed so far quickly.

[Jonah Frohlich] 10:18:43
Enforcement Helen. Can we just pause from it?

[Jonah Frohlich] 10:18:48
Mark, I think, had a comment. Mark, this is about the people.

[Jonah Frohlich] 10:18:49
Go ahead, Mark. Why, we just wrap up and then we'll go to the other show.

[Mark Savage] 10:18:52
Thanks. Okay. So I have 2 and I think one is appropriate here for what's already on the list, and just a consideration about whether we had a long discussion about accountability as a printer and I'm wondering if enforcement fits in with the monitoring and auditing, because to me it seems like they flow together, and enforcement is an important piece of making sure that this happens.

[Mark Savage] 10:19:22
That's an idea to throughout the consideration and I'll save my other idea.

[Mark Savage] 10:19:25
If you were at that time

[Helen Pfister] 10:19:30
Okay, so rules big based access if at some point we decide that we need to specify the type of access back to information that different individuals, different roles and organizations might have, we may submit a policy, but that's specified that implementation and onboarding again like Not sure if we need this at this point, but at some point do we need some sort of implementation on boarding policy for participants?

[Helen Pfister] 10:19:55
That equality, I think, is self explanatory, and then obligations to cooperate again.

[Helen Pfister] 10:19:58
Not sure we need this. This may be something that comes down the line later on.

[Helen Pfister] 10:20:02
If we are end up having issues between participants, but just because of some of the pp topics that we surfaced in the first phase of his work and are still kind of in our parking lot for potential development going forward so
love will welcome all your thoughts on those as well as on any additional pmp that we may need as part to develop as part of this.

[Helen Pfister] 10:20:22
This process.

[Rim Cothren] 10:20:35
And Helen, I don't know if you can see the hands but Mark has his hand up.

[Helen Pfister] 10:20:38
I can't see the hands now I can call in books for you, Helen. that'd be great thanks

[Mark Savage] 10:20:46
So I don't know if this is a new a potential new Pmp. or an amendment, or something that goes with the existing one.

[Mark Savage] 10:20:53
I was really pleased to see in the individual access piece.

[Mark Savage] 10:20:58
Yeah. A reflection of of our long conversations about directional exchange.

[Mark Savage] 10:21:04
There was a mention about responding to individuals request patient generated help.

[Mark Savage] 10:21:09
Data process to correct errors submitted by individuals and recognize descriptions.

[Mark Savage] 10:21:15
Those strike me as being perhaps having a layer of detail. that's worth considering. I don't know if that would be a new pnp, or if that would be little more detail in an existing Pnp but they

[Mark Savage] 10:21:29
were significant enough and important enough that I just wanted to list that up.

[Helen Pfister] 10:21:35
Thank you yes, that's a very good point

[Courtney Hansen] 10:21:44
Any other comments from anybody else. Yeah, go ahead, hey? yeah thanks

[Leo Pak] 10:21:53
There's a I think all these things are really important, and you could probably have days and days with the conversation to not only signify how important each one of these components are, but to get down to a place where everybody agrees on a set of
[Leo Pak] 10:22:09
you know, policies and procedures. So I number one, just wanna reiterate.

These are critically important to move these things forward I i'm trying to interpret what obligations to Co.

[Leo Pak] 10:22:20
To corporate with respect to Df. Dxf. means W.

[Helen Pfister] 10:22:24
What is that? so? I mean for the that exchange framework to work.

[Helen Pfister] 10:22:31
Obviously, participants have to work with each other and at this point. we have the data sharing agreement itself and the positive procedures. we don't know what kind of issues might arise as this actually goes, live the extent that

[Helen Pfister] 10:22:45
we have disagreements or or issues among participants where someone's not being as as cooperative is another participant would like, then it may will be that at some point need a policy to provide more

[Helen Pfister] 10:23:01
guidance in that area. but I think at this point I don't think we don't know we don't know yet.

[Helen Pfister] 10:23:07
So it's something that was for raises potentially an issue going forward, but that I don't think we have a sense of what that would look like if you don't really know what issues we're gonna have to potentially

[Leo Pak] 10:23:14
address got it so just to follow up on that so what i'm hearing there is potentially that may rope into the monitoring and auditing components of this and some sort of mediation type of process is that right possibly the dispute

[Helen Pfister] 10:23:30
resolution. Yeah, Yeah, I think it's not they're all linked to some degree.

[Leo Pak] 10:23:35
Thank you. Yeah, you know, I think the challenge here is beyond not knowing what we don't know, all of these things interact right?

[Matthew Eisenberg] 10:23:43
So cooperation and enforcement will be important.
[Matthew Eisenberg] 10:23:47
Relevant to dispute resolution. consent management depends on a whole variety of use cases and can't interfere with public health activities.

[Helen Pfister] 10:23:56
They're they're all it's sort of circular so we'll have to sort of figure out how to byes of that apple. one piece at a time. frankly yeah and I think we've always said that this is very much going to

[Helen Pfister] 10:24:08
be an editor, and iterative process it's not like we're gonna like deliver a set of Dsa instead of pmps on January 36,000, and 24 and be done with it I mean this

[Helen Pfister] 10:24:15
is a living arrangement, and it's going to evolve over time, and we have to.

[Helen Pfister] 10:24:20
We'll have to love along with it

[Leo Pak] 10:24:27
So if I may follow up one on a different topic here, I know.

[Leo Pak] 10:24:32
Mark Savage ask questions about individuals. Am I to interpret that individuals mean, patient interacting in this framework, or not?

[Helen Pfister] 10:24:42
Sure if Mark was talking about individual organizations or actual real patients, actual real patients, there is a policy that we develop first come around on individual access to information.

[Matthew Eisenberg] 10:24:54
That, I think, is what Mark was referring to. Yeah, no.

[Matthew Eisenberg] 10:24:57
As with tech individual access services. is a big topic there's so much in just that one right right? identity management access read, write capabilities.

[Matthew Eisenberg] 10:25:07
Oh, don't get don't get us started we could spend every meeting, just talking about that.

[Leo Pak] 10:25:13
So sorry Last question on that. So some of these topics certainly have a direct impact for individuals, and some topics really have no impact from an individual perspective.

[Courtney Hansen] 10:25:25
My recommendation would be, as these policies procedures are developed to explicitly call those things out, so that we, as whoever's trying to implement this has an understanding of what those implications are thank you, Sunday

[Jonah Frohlich] 10:25:41
Jenna, were you gonna chime in? No, no, Alright.

[Elaine Ekpo] 10:25:46
And then we have a hand from Elaine. Yes, hi

[Elaine Ekpo] 10:25:52
I I was making sure that I I didn't see this Are we going to have a It's not, you know, quite as exciting.

[Elaine Ekpo] 10:26:01
But are we going to have a scope and definition policy?

[Courtney Hansen] 10:26:05
Something that helps us get on the same page about what this terms are that we're using whether we're corporate agency users anything like that in excess of what's already in the dsa Yes, something that kind of finds everything together understood. yeah, I don't think I mean We've got definitions of various pmps.

[Helen Pfister] 10:26:34
But we'd love to hear anything that you think might be missing, or how we could make it more user friendly if it.

[Elaine Ekpo] 10:26:42
I was thinking of something where it's all in one policy that might be. maybe that doesn't just work practically, but I I've seen different.

[Elaine Ekpo] 10:26:53
I see different examples where it's in you just go to one policy, and either it can be linked to the other policies instead of having to.

[Elaine Ekpo] 10:27:02
I don't know if I mean I don't know what the plan is for revising the policies and procedures that we have.

[Elaine Ekpo] 10:27:08
But if there's something that can help nav help users navigate the policies and procedures easier, I was thinking something like that.

[Elaine Ekpo] 10:27:15
Not that we need more definitions, but that it's the way that it's structured.

[Jonah Frohlich] 10:27:19
If it can be in one. Are you talking about like a like a glossary?

[Elaine Ekpo] 10:27:27
Essentially I think it's a great idea to have one i'm not sure.

[Jonah Frohlich] 10:27:33
I'd recommend it being a policy and procedure because of as you had noted, we have a policy about updates to policies, and we, I I would expect the glossary is going to be continually updated with terms and would

[Jonah Frohlich] 10:27:44
require this, that the Glossary continually be brought before committee to review new terms, which I think would be fairly administratively burdensome.

[Jonah Frohlich] 10:27:53
But I do think others may absolutely feel free to disagree.

[Jonah Frohlich] 10:27:57
But I do think having that kind of glossary, because, as we just noted, and it was like, what is, What do we mean by this?

[Jonah Frohlich] 10:28:02
Having a place where, in one place where where everyone can go to reference, and say, and see the glossary to understand what the terms mean.

It's easily accessible, and probably lived on the same space where all these documents can be.

[Jonah Frohlich] 10:28:17
The policies can be obtained. is a really good, really good suggestion that we should.

[Courtney Hansen] 10:28:21
We should take. Yeah, I love that idea

[Helen Pfister] 10:28:30
Anything further. Do you think that would meet your needs?

[Elaine Ekpo] 10:28:34
Yes, and I just using the wrong term because I was like I don't want it to be a policy.

[Elaine Ekpo] 10:28:38
But yes, a glossary. where we have all the terms, because I think one of the biggest things that I know.
The privacy side is the information blocking and going and attending Federal training on this and conferences, and the feedback that we got from Federal agencies was just know that everyone's going to apply this differently, and expect litigation so if there's a way that we can at least kind of head things off, where, if you, if they're participating in in in this data exchange, we've kind, of all agreed to the same terms to some extent, would be really nice.

Thanks, Elaine. Alright, I see a hand from Belinda.

Another question. So We talked in the last Dssa subcommittee about the different types of information that live in the Dsa.

That hopefully doesn't need to be amended you know too often versus more of the details on the pps that have this process for amendment versus more like technical assistance or training documents and thinking about things like part 2 where you can really spell out for organizations what that means?

Well will that be in the scope of this group, as well to recommend, like a ta type, approach, or topics that might be helpful?

Go ahead, Jenna. This group is largely gonna focus on Dmp. development to the extent, I think, blended that this group might recommend for the invitation 5 types of key that may be necessary to help inform stakeholders understand around Pms. I think that would be within scope to actually develop recommendations around them per se but to at least say, hey, I think there are certain things that really are going to require fairly significant amount ta implementation, advisor

committee. Would you consider this as part of, for example, the grant program that is being established?
This would be helpful for certain types of actors, Cvos or others who may have less expertise experience or capabilities to have.

I think this is to have that kind of support I think it's certainly within the purview, too.

Elevate those, the Implementation Advisory Committee for their consideration.

Does that answer your question? Yes, thank you.

I think we have to we're ready to move on and we just start getting into the other material.

Is there anything else? and if and if not, I just wanna make one sort of point of order.

Clarification. One thing I I failed to mention is part of this process, this process being like the news committees and summer and summary them.

How we organize these materials, and how we to make advanced recommendations and document.

All of this this these materials, this meeting recording the chat, the discussion, are all captured.

They will be documented, they will actually be posted on the website.

So you can watch the recording. You can see the chat notes.

We also provide a summary of the discussion, and the Q.

A so we'll we'll try to make sure we capture as much as we can.

We don't capture every single question that might get posed
[Jonah Frohlich] 10:32:27
We do rely on the chat feature for to to do that.

[Jonah Frohlich] 10:32:31
But we try to make sure we do capture those salient that discussions and questions that we're posing that we're answered here.

[Jonah Frohlich] 10:32:38
So just wanna make sure everyone's aware up left corner you see a little recording button.

[Jonah Frohlich] 10:32:42
All this is being recorded it's going to be posted all the chat functions, and all the chat is recorded, and we will provide a summary of these discussion.

[Courtney Hansen] 10:32:57
Thanks. i'm sorry I might have missed it and what you just said, but in terms of responding to the public questions that are coming up.

[Steven Lane] 10:33:10
Will your team attempt to respond to those in in the Q.

[Steven Lane] 10:33:12
A or will we, save those, and try to address them directly?

[Steven Lane] 10:33:15
I know, being in some of the other meetings, and and contributing to the Q.

[Steven Lane] 10:33:19
And a It can be a little frustrating you know to not not have a sense that that things are being received and and and thought of.

[Steven Lane] 10:33:28
So i'm just thinking of the 2 people who put in questions today.

[Jonah Frohlich] 10:33:31
Are they gonna get responses directly or not? I understand.

[Steven Lane] 10:33:43
Sounds like your recommendation. is that there’d be responses I I mean, I think I think if we want this to be a truly participatory public process, that it makes sense to respond.

[Steven Lane] 10:33:54
You know, when someone actually puts in a question that ends with a question mark as opposed to just contributing to the discussion.
Jonah Frohlich 10:34:01  
You know, as I often do in other meetings. So you know, we may want to do that at the front end of the public comment period.

Steven Lane 10:34:08  
We may want to. You know sometimes in other meetings that I I help to lead will start public comment a little earlier.

Steven Lane 10:34:13  
If it looks like there’s a backlog of questions that need responses.

Jonah Frohlich 10:34:17  
Just a thought, I mean, obviously, you guys can deal with that offline.

Courtney Hansen 10:34:21  
Even I really appreciate that. I think that that's a really great point.

Courtney Hansen 10:34:26  
I do want to invite participant or the panelists.

Courtney Hansen 10:34:29  
If you want like to respond to the questions you’re welcome to what our team is doing, kind of what Jonah mentioned is, we’re gathering them, and we actually are developing a frequently asked questions and so when questions come up, we can thoughtfully respond to them and post them on our website.

Courtney Hansen 10:34:45  
But as far as subcommittee members go feel free to jump in.

Courtney Hansen 10:34:51  
If you want multiple people can respond to the same person.

Matthew Eisenberg 10:34:56  
We really like the idea of being able to interact yeah it's just a logistical standard that we have to establish for the committee.

Matthew Eisenberg 10:35:06  
Should we be using the chat for the majority of discussion points?

Matthew Eisenberg 10:35:09  
And is Q. A. used to capture additional outside questions. Whatever you guys want is fine with me.

Matthew Eisenberg 10:35:16
I think we just should sort of follow that standard and and figure out which box on the virtual meeting we should be using most effectively

[Courtney Hansen] 10:35:29
I guess what I would say, Matt, just in response to that to make it clear, and we'll take back sort of the question.

[Jonah Frohlich] 10:35:32
Do we respond to the comments from the public explicitly. So we'll take that into consideration is

Any of the panelists here have want clarification about statements, or have questions about the materials, the content or conversation.

They should raise their hand and make sure that they have a chance to speak to it.

We often use the chat as you see here. like the back and forth with Devin and Stephen and Mark, to clarify, What do we mean by an individual? to to facilitate some of those offline discussions and then

we look at them, and we sort of pull those into our deliberation.

So, as you know we don't want to have this the conversation that you see in the chat is really helpful, but it also consume a majority of our time.

If we just spend all this time going through this this type of for discussion.

So we absolutely use this chat to help us like, Oh, okay, we we do need to spend some time offline thinking about what individual means and click are flying.

It. But if if there's some strong opinions or questions about what does this mean?

And I need clarification from we'd encourage you to raise your hand.

[Matthew Eisenberg] 10:36:45
Got it so. so when do we use the Q. A. box feature The: so the Q. A.
Is for the public. that is that you you shouldn't be using that as panelists good, that is public. Okay?

[Jonah Frohlich] 10:37:01
And then. Okay. So now I get it, and will you end up responding to those public questions after the meeting.

[Matthew Eisenberg] 10:37:07
I I think that's that was the question that Stephen asked that we said, Well, we we haven't met necessarily done that in the past.

[Jonah Frohlich] 10:37:14
So we need the the public questions that come up. We try to do it for all the panelists questions.

[Matthew Eisenberg] 10:37:19
We just need kick back and consider like that. We got it.

[Matthew Eisenberg] 10:37:22
Q. a's public. We work on the chat I got it now.

[Jonah Frohlich] 10:37:27
Sorry. you probably covered this when I wasn't here sorry about that

[Courtney Hansen] 10:37:37
All right. Any other comments Questions: before we move on. Okay.

[Courtney Hansen] 10:37:44
Next slide. I think it's time for a public comment

[Courtney Hansen] 10:37:51
So individuals in the public audience who may have a comment inserted in the Q. A.

[Courtney Hansen] 10:37:58
Or otherwise raise your hand, using the zoom teleconference options.

[Courtney Hansen] 10:38:02
As we previously talked about, and you will be called on in the order.

[Courtney Hansen] 10:38:05
Your hand was raised. Please state your name and organization affiliation. please keep your comments respectful and brief, and I will turn it over to Emma to call on folks

[Emma P - Manatt Events] 10:38:24
I don't see any hands raised at this time let me give folks just another yeah, a minute.

[Courtney Hansen] 10:38:35
Just give folks just a minute or 2 to find those raise hand buttons to figure out how to raise your hand on the phone.

[Courtney Hansen] 10:38:44
Just wanna make sure folks want to comment and have the ability to

[Emma P - Manatt Events] 10:38:56
Great. I see one hand raised from L johns i've gone ahead and giving you the permission to talk. you can unmute now.

[L. Johns] 10:39:08
Thank you, Courtney, for the extra moment to consider whether to jump in here.

[L. Johns] 10:39:15
I put a question in the q a actually it's a statement which I'll just read, plus one to authorization rising in priority.

[L. Johns] 10:39:27
This is about exchanging my information, my Phi.

[L. Johns] 10:39:30
I need to consent to that for any reason. outside Treatment operations, payment providers covered by Hipaa outside Hipaa that doesn't apply.

[L. Johns] 10:39:46
In my home opinion, Jonah is expressing a quote policy unquote.

[L. Johns] 10:39:52
Talking about Federated consent management the idea that we have to wait for that before talking about the role of the consumer patient individual in saying Yes, it's okay for you to share this information for that purpose.

[Courtney Hansen] 10:40:11
Thank you. Thank you.

[Emma P - Manatt Events] 10:40:20
Okay, I don't see any other hands raised at this time i've got a couple right moment.

[Rachel McLean] 10:40:30
Rachel Mclean, you should be able to unmute Hi

[Rachel McLean] 10:40:36
I work with a California Department of Public Health, and I think one of the one of the things I I would hope is like throughout your discussions.

[Rachel McLean] 10:40:47
If you could just add and local health department to just sort of clarify whether whether
and how you envision them being included in the pnps that you’re creating I i’ve
realized there are so many constituencies that you

[Rachel McLean] 10:41:02
would probably get exhausted, trying to list them all every single time.

[Rachel McLean] 10:41:06
But I l just think often, you know, these discussions really talk about like social services
and healthcare delivery.

[Rachel McLean] 10:41:15
But, for example, you know the pregnant person has syphilis, and we need to make
sure that if you get treated before they deliver their baby.

[Rachel McLean] 10:41:24
So the baby doesn't get syllabus and have that outcome.

[Rachel McLean] 10:41:28
Then there's really a relationship between public health health care and social
services.

[Rachel McLean] 10:41:35
So it's I I had asked a question about that cal am part 2 for 2 cfr part 2 pilot, which I
wasn't aware of.

[Rachel McLean] 10:41:43
That sounds really exciting, and I was wondering if local health departments We're
going to be a part of that.

[Rachel McLean] 10:41:48
But just in general, if you could just keep public health in mind, that would be great
thing

[Jonah Frohlich] 10:41:56
A comment. we do. just to respond to the question about local health departments
being included, we do hope and expect that.

[Jonah Frohlich] 10:42:04
That they would be participants in the pilot in particular behavioral health.

[Jonah Frohlich] 10:42:08
I can't behavioral health agencies, but also health.

[Jonah Frohlich] 10:42:12
Okay, anity would be really helpful to get insights into the
[Jonah Frohlich] 10:42:19
You can. nobody content management, cool cool, and process to inform what we might do on a statewide basis

[Emma P - Manatt Events] 10:42:32
Great. Thank you. I will now call on Harry Martin.

[Harry J. Martin] 10:42:38
Harry, you should be able to unmute now. yes, thank you.

[Harry J. Martin] 10:42:42
Harry Martin, county of Santa Clara.

[Harry J. Martin] 10:42:44
I'm. a technical person. I support them through the role of a business systems analyst.

[Harry J. Martin] 10:42:52
I killing the public health concerns we are trying to keep up with the impact of all of you know, especially what's going on at the Federal level, and also with what's going on here.

[Harry J. Martin] 10:43:03
So if there's a way to communicate not so much in the meetings.

[Harry J. Martin] 10:43:10
But what happens and how we can stay ahead of the curve, because this is gonna help us tremendously to standardize

[Courtney Hansen] 10:43:24
Yes, Thank you, Harry. All of our materials and everything are available on our website.

[Jonah Frohlich] 10:43:29
Donna go ahead. We We last week Cdi had a had a public webinar on various activities, and there will be a a series of those that are going to move forward to help increase awareness

[Jonah Frohlich] 10:43:47
today. it's also considering grants that will be a made available education.

[Jonah Frohlich] 10:43:55
Grants to organizations to help raise awareness of this.

[Jonah Frohlich] 10:43:59
These activities around Data exchange framework can data sharing i'm sorry.

[Jonah Frohlich] 10:44:03
I hope that's going to help expand access to an understanding of all of the work that we're doing here.

[Jonah Frohlich] 10:44:08
I'm so bad you and others either with you whether you're at a local health department community based organization a plan, a critical access hospital.

[Jonah Frohlich] 10:44:18
Have a better means to access and understand all the good work we're doing here.

[] 10:44:25
Great. Thank you for that for that. Thank you. Thank you, Harry.

[Emma P - Manatt Events] 10:44:35
No, it's no additional hands raised at this time all right and let's go to the next slide.

[Emma P - Manatt Events] 10:44:48
Okay, although it looks like we have a hand in in the space here with you got your hand up.

[Courtney Hansen] 10:44:55
Go ahead, Stephen, You're on mute sorry didn't mean to slow things down.

[Steven Lane] 10:45:01
But someone just did mention public health. I put a coming in the chat.

[Steven Lane] 10:45:08
Cdph seems to be, you know, largely absent from this discussion, and might be a stakeholder that should be more specifically included.

[Courtney Hansen] 10:45:17
Don't know what our plans are sure Stephen.

[Courtney Hansen] 10:45:22
We do have a representative from Cdph on the group Diana Trump for Tom.

[Steven Lane] 10:45:26
Wonderful thanks for thinking about Stephen. Okay, Oh, right so let's get into the Nitty Gritty.

[Courtney Hansen] 10:45:40
Let's talk about content for the pnps and development next slide.

[Courtney Hansen] 10:45:47
So the goal for the section of the meeting is to obtain input on draft content for 3 pmps and development.
The 3 topics we are going to discuss today are information walking monitor and auditing, monitoring and auditing, and require transaction patterns, and I will turn it over to Helen to kick us off with information blocking thanks.

Am I not a new, great alright? So the purpose of the information blocking policy is to prohibit all participants from engaging any practice that is likely to interfere with access exchange or use of health and social services, information.

And, as I said before, we are trying as much as possible to align everything.

The data exchange framework with existing Federal State laws.

So those of you who are familiar with the Federal information walking rules that language will look very familiar to you.

The 2 key definitions here on the slide to remind you, like participants, are all the signatories that execute the Dsa.

In some of us you have to execute it under 8,133, somebody voluntarily executed, and the definition definition of health and social services.

Information includes I'm not gonna read it too, but it's basically on the bottom of the slide.

This is the definition that comes right from the Dsa.

Itself the one that was approved at the end of end or last session of work.

Next slide, please. So like I said as next slide, please.

Okay, As I said, we are trying to track the Federal and Federal information blocking rule.
And we have here on top what we’re proposing for this Pmp.

[Helen Pfister] 10:47:28
And then on the bottom, the Federal definition of information blocking.

[Helen Pfister] 10:47:32
And we are basically tracking the Federal definition. With the exception, with 2 exceptions, one is the federal definition.

[Helen Pfister] 10:47:41
Applies only to certain types of they call them actors certain types of entities.

[Helen Pfister] 10:47:46
We are going to be applying the information blocking Pmp.

[Helen Pfister] 10:47:50
To all participants, regardless of whether they would be covered by the Federal rule.

[Helen Pfister] 10:47:55
And then the Federal rule applies to electronic health information.

[Helen Pfister] 10:47:59
We the tweak. we have here is that the information walking policy that’ll be part of this that exchange framework will apply to health and social services.

[Matthew Eisenberg] 10:48:08
Information. So just kind of his background there’s the 2 differences between the Federal definition of information blocking and the definition that we would be using in this policy and procedure any questions or comments about that so, if

[Matthew Eisenberg] 10:48:25
if the issue is, I understand it, here is extending beyond the existing Federal regulation, and the 3 actor sets provider developer.

[Matthew Eisenberg] 10:48:34
Hiv. it would be helpful to have some understanding of examples of other actors within the framework that are specifically in, or any that are exempted.

[Matthew Eisenberg] 10:48:46
So might be helpful to have that. We kind of got that down with the Federal regs.

[Matthew Eisenberg] 10:48:50
But i’m trying to understand what would that mean for a a California app developer or individual access service providers are they all in?

[Helen Pfister] 10:48:59
Is everybody in? Are there any exceptions? So it applies to the participants would sign the Dsa.

[Helen Pfister] 10:49:04
So an app developer would not be signing the Dsa but, for example, a social service organization that wanted to exchange information under the under the that exchange framework could send the Dsa.

[Helen Pfister] 10:49:15
But if they did, they would then be subject to the information.

[Helen Pfister] 10:49:17
Blocking. Pmp: Does that answer your question? Yeah.

[Matthew Eisenberg] 10:49:21
I guess the criteria is anybody who has to sign the the dsa is it?

[Helen Pfister] 10:49:26
And anyone who voluntarily signs a vsi. Okay.

[Matthew Eisenberg] 10:49:31
Okay, Thanks. Okay. next slide, please. Helen, we have a few questions.

[Courtney Hansen] 10:49:37
Okay, alright, go ahead So relying you Courtney, just to call on people, I'll be want to tie this this particular piece back to the earlier discussion about technical assistance people who are participating because

[Mark Savage] 10:49:56
they're covered by the cures act regulation will know some of these things, but the range of participants this is much broader.

[Mark Savage] 10:50:04
So premium on examples technical assistance for students.

[Mark Savage] 10:50:09
Cbos, Ss. what it might mean for them, so that they they feel comfortable coming in and doing this, we and that means doing this as far in advance as we can.

[Courtney Hansen] 10:50:21
Thank you. Very good. point Yes. point well taken alright lewis my colleagues will be very similar in the sense that I don't believe social service agencies.

[Louis Cretaro] 10:50:38
We're subject to the cures and and wondering if when we incorporate this into the Dsa.

[Louis Cretaro] 10:50:49
Will be, will be be looking at new exceptions. to this rule that may apply the social system.

[Louis Cretaro] 10:51:01
And what we need to find a new act goes as

[Helen Pfister] 10:51:08
So that is an excellent question, and we get to the next slide.

[Helen Pfister] 10:51:12
You'll see that it kind of runs down the existing 8 exceptions in the Federal role, and such the framework for a discussion of whether those are all appropriate in this context, and we would definitely want welcome feedback on on that including the

[Helen Pfister] 10:51:24
point that you that you just raised

[Courtney Hansen] 10:51:37
Right, Thank you. And Mark, do you have another comment

[Helen Pfister] 10:51:48
Alright, Helen, you're good to move on okay so next slide, please.

[Helen Pfister] 10:51:53
So I said, the exceptions are really the critical part of of of of this of this policy.

[Helen Pfister] 10:51:59
And the Federal rule has 8 exceptions which I have listed here, and many of them do seem appropriate in this context.

[Helen Pfister] 10:52:10
Although we may end up, wanted to make some tweets.

[Helen Pfister] 10:52:12
So we definitely welcome any thoughts that you all have on that.

[Helen Pfister] 10:52:15
And I also would say, like after this meeting, if you want, you know, if folks want to go back.

[Helen Pfister] 10:52:21
And actually this is very high level. I just want to go back and look at the exceptions as as they’re in the Federal rule and think about them and give feedback.

[Helen Pfister] 10:52:28
We we definitely welcome that we're gonna have another meeting of this group? And we would now, for the discussion of of all of these policies.
The 2 exceptions that I wanted to focus on before just flag for to discuss, and I welcome other thoughts as well are the fees exception.

The Federal rules permit actors to charge regional fees in connection with information sharing, and we’ve already specified in the permitted required and prohibited uses policy that we adopted last time around that except for a qualified health Information organization. A person can chart cannot charge fees through another participant for the exchange of data under the data exchange framework.

So just wanted to flag that as one difference that will have to have the one modification to the federal policies that will apply in this context, and solicit thoughts on what if there’s any circumstance under which a particular participants should be able to charge fees in connection with that exchange under the under the exchange framework.

Thanks, Helena. We have a couple of hands, Leo.

Thank you. The 2 examples of information blocking generally come from the Emr vendors, not participants themselves and Fqc.

Down the street is willing to comply with everything. The question is, how much effort and funds are necessary for their emr vendor to comply with these things.

So in the context of information blocking, is it safe to assume that the we should tie this back to whatever transaction patterns are going to be required.

Question. One question number 2 is, as a relates to fees.

You know. Reasonable, obviously, is a difficult thing to get on the same page with.

Who would be the arbiters of reasonable in terms. of fees? Yeah, I mean, I think that's I think I think question number one is rather any fee should be permitted at all.
And then question 2 is what would be reasonable and I think that ties back to the dispute resolution policy and enroll the governance entity and all the other intertwined parts that we've been giving reference referencing throughout.

So I guess, just to follow up on that. I think this policy should explicitly call out or tie it back to the transaction patterns, and that participants may not be was held responsible.

But their emr vendors should take some accountability.

Got it understood. Yep.

Alright. Thanks, Lou. next I have Diana. Hi!

I want to verify i'm i'm with cdphealth and I want to verify that the restriction on charging fees won't apply to vital records since our vital records department is literally funded by its fees sharing for the vital records that it produces.

So that that's something that would b a hamstringing of our our entire program.

So I would I need to make sure that's on the record that we can't.

We can't agree with restricting our certain program from not being able to reach charge fees for those records.

If it's part of this program and you we we got last around, too.

So. Yes, thanks. Diana. Helen, do you need a citation for that?

I think they gave it to us last time. but if I do, I know if you reach out to sounds good.
Alright next time. Morgan. Thanks. this is

Morgan stays from department of healthcare services I just.

I've I would urge you awesome about where where, as in this case, with information blocking where there is an existing standard that that are the at least that are mandatory signers already have to follow that we just that

we'd be really cautious about changing those it's gonna be is just gonna make trouble for them. and and to to from a slightly different perspective.

Okay, it may discourage signers from joining if they have.

Now we gotta follow, you know we already got too many rules we have to follow, you know, not that we can't.

I said, i'm very with with public health exception noted i'm pretty sympathetic to there shouldn't be fees going on here but just the best broadly I think it's just really important that

we'd be cautious about by the changing other rules, as as we yes, apps totally agree.

And if those of you who are on the committee last time I will call like, when it came to breach notification, we made some make significant changes to our initial proposals to align more closely with hipaa for that

very reason. So we're very much very much tuned to that concept. Thanks, Morgan

Alright, Mark thanks just reading the language here on piece.

I've to I think it's good to mention individual access as well, because they're not pretty per se go ahead just a word The word participant is not as inclusive as it might need to be for a fee
provision, and I will repeat a comment I provided in the last round, which is, I hope, that we get to a point where there are no fees for contributing for individuals contributing generated help data as well in directions

[Courtney Hansen] 10:58:55
Thanks, Mar and Stephen you're on mute as we move ahead with, you know, any policy around information blocking.

[Steven Lane] 10:59:07
I think this is a great opportunity to leverage so much good work which has been done by other groups before us.

[Steven Lane] 10:59:13
Over the past few years in terms of Federal compliance, and really trying to limit the whatever we put into our policy only to that which is additive, or, you know, divergent from the Federal guidance because my understanding is the

[Steven Lane] 10:59:29
Faqs that don't see is posted which I put a link to in the chat, You know constitute subregulatory guidance here, and and I think that you know this overview of the exceptions is great but

[Steven Lane] 10:59:40
there's so much detail under this and if we're going to be exciting this to other actors beyond those covered by 20 first century cares which I totally support. We just have to have to make sure we don't try to reinvent the

[Steven Lane] 10:59:55
wheel in the process. Also, I also posted a link to resources from the Sequoia project that Matt and I and others have been involved in developing, which is just a tremendous library.

[Steven Lane] 11:00:08
So again, a lot of the the questions people who may be newer to this discussion.

[Steven Lane] 11:00:13
So many of these questions have been asked and answered, and a lot of those resources are available.

[Courtney Hansen] 11:00:20
Thanks, Stephen. right. You are good to proceed, Helen.

[Helen Pfister] 11:00:28
Okay, The other area besides fees where I thought there might be where there will be a need to diverge from the Federal rules is when it comes to content.
So the content except the the content exception in the federal rules specifies the content that entities actors must exchange, and it's not completely consistent with where we've landed here.

[Helen Pfister] 11:00:53
In California, as I mentioned before, there is a There's the

[Helen Pfister] 11:01:01
Our data elements the th, the data elements Pmp: which sets forth the data elements of different categories or participants are apart to exchange, and it varies by participant.

[Helen Pfister] 11:01:09
And so I think that would be one area where The content required to be exchanged under that exchange framework and the Dsa.

[Helen Pfister] 11:01:19
Would be a little different than the content required to exchange under the Federal information blocking rules so just blagging that for folks as another area of of divergence

[Steven Lane] 11:01:42
Any comments on on that. Yeah, just just what I put in the chat.

[Steven Lane] 11:01:48
You know the the content and manner exception. The content piece of that really only applies for another couple of weeks.

[Steven Lane] 11:01:58
Because you know, come up to the sixth.

[Steven Lane] 11:02:03
There is no restriction on content, then it will apply to all,

[Steven Lane] 11:02:07
I. So I mean, while we have identified us. City Iv.

[Steven Lane] 11:02:11
2, which I think is awesome, and I completely support that.

[Steven Lane] 11:02:16
Still the scope for information blocking as of October the sixth is, is all like trying to help information and not restricted as it was prior to that date.

[Matthew Eisenberg] 11:02:23
Yeah, I I never disagree with you stephen and I think that's largely true.
[Matthew Eisenberg] 11:02:29
But there are depending on the designated record set of an actor organization.

[Matthew Eisenberg] 11:02:33
There might be other content that is not currently part of our designated record set that
a requester might want that we could provide.

[Matthew Eisenberg] 11:02:41
So there will be opportunities to use the content and matter. exception going forward beyond the

[Steven Lane] 11:02:47
I definition, and again, that's the the challenge of having a an in individual actor just
deciding particularly for providers. what is and isn't in your designated record set
completely agree. you said exactly what I was about to say But much more

[Helen Pfister] 11:03:03
articulate. So thank you for jumping in there

[Courtney Hansen] 11:03:09
Any other comments. Questions: just a plus one to the Sequoia project.

[Matthew Eisenberg] 11:03:14
Tools. they're really very helpful they've been a leader here and trying to help, and the
intent was to actually, I think, which will apply to California.

[Matthew Eisenberg] 11:03:24
Inform organizations that may not have the resources to put together.

[Matthew Eisenberg] 11:03:27
A large governance group. They can read a lot of that material and kickstart the
process so hopefully.

[Courtney Hansen] 11:03:32
Others will. Well, we can share that and disseminate that absolutely.

[Helen Pfister] 11:03:40
Alright, Helen, you are good to go. Okay. So Any other comments at all about
information block before we move on to monitoring and auditing.

[Helen Pfister] 11:03:52
And I again, I encourage you to go back and think about this more and give us any
feedback you have in other areas where you might want to garage from from the
Federal rules.

[Helen Pfister] 11:04:01
Okay, next slide, please. So the monitoring and auditing policy I could say like it sounds like would be the policy that sets forth how we're gonna monitor and audit participants to make sure they send the DSA if they're required to do so and then be that they comply with it once they've signed it.

[Helen Pfister] 11:04:19
And we've divided this into sort of 2 sets of obligations.

[Helen Pfister] 11:04:27
One is the obligations of the governance entity which are on these.

[Helen Pfister] 11:04:30
On this slide, and the other is obligations of the participants themselves, which is on the next slide.

[Helen Pfister] 11:04:36
It's very high level at this point as you'll see we're sort of saying that the governance entity is going to do any monitoring that it deems necessary to make sure that everyone is supposed to send the DSA. actually does so, do any monitoring and auditing, that it seems necessary to ensure the participants comply with the DSA.

[Lammot du Pont] 11:04:56
And then post. That was a complaint process, grievance, process, whatever whatever we decide to call it, to allow other participants or individual to report.

[Helen Pfister] 11:05:06
If they feel that a participant is not complying, not complying with obligation under the DSA and that would also step forward.

[Helen Pfister] 11:05:14
The process, but the governance governance entity would follow to investigate any such grievances or complaints.

[Helen Pfister] 11:05:19
So welcome thoughts, comments, additional attractions. Any input on on this as a general idea.

[Courtney Hansen] 11:05:27
Go ahead, Mark. I'll just raise the question I mentioned at the outset.

[Mark Savage] 11:05:34
In order to ensure components that enforcement was listed as a potentially separate policy.

[Mark Savage] 11:05:40
How does that is actually just not just monitoring and auditing, but as ensuring that there is compliance fit into this policy, or how does it not?

[Helen Pfister] 11:05:54
Jonah Courtney, do you want to take that one

[Helen Pfister] 11:06:04
So I think i'm Okay, i'll i'll jump into this. No, i'm gonna I think that they are obviously again very much related.

[Helen Pfister] 11:06:12
At this point, we're still a little bit we have a little bit further to go, and thinking through how enforcement is going to work.

[Helen Pfister] 11:06:18
And maybe at some point we do end up blending the 2 into one policy.

[Helen Pfister] 11:06:21
But at this point I think we were in a position as a group to think about how monitoring, auditing works.

[Helen Pfister] 11:06:28
We thought. It makes sense to like get that underway before we dug into enforcement, but just a lot of still out of open open questions on the enforcement side of things.

[Mark Savage] 11:06:38
I I understand about sort of doing what you can while you're waiting to finish what you what you need a little more time on recommend folding it together.

[Mark Savage] 11:06:48
And so that everybody is sure that it's not a 2 step process.

[Mark Savage] 11:06:53
But it's a holistic process, and it will all be done at the same time.

[Helen Pfister] 11:06:56
And it's and it's only a matter of timing before comprehensive process, policy and processes developed, and it certainly will all be done long before anyone's got to start exchanging data under the under the

[Courtney Hansen] 11:07:09
Dsi so agreed absolutely. and just to add to that.
[Courtney Hansen] 11:07:16
What Jonas spoke about before with the establishing a governance entity.

[Courtney Hansen] 11:07:20
We need to actually establish the entity before we deal with enforcement.

[Helen Pfister] 11:07:25
So there's a little bit of figuring out when to start enforcement where it goes, and then kind of whether it needs to be its own pp.

[Courtney Hansen] 11:07:37
Whether it goes somewhere else and so we're working through that right now.

[Courtney Hansen] 11:07:47
Mark, is that a follow up comment to what I just said?

[Mark Savage] 11:07:53
Says Khhhhhhs have any.

[Mark Savage] 11:07:57
I assume it does have independent enforcement authority in this regarded it.

[Mark Savage] 11:08:01
There are things it can do, even if there is not a a set for governance entity established.

[Courtney Hansen] 11:08:06
Yet at this point does not have statutory authority to enforce, in Ab 1, 33,

[Leo Pak] 11:08:25
Alright. Leo, yeah i'm not sure if you're going to get into some of the details of this thing.

[Helen Pfister] 11:08:31
But is. Are you anticipating some sort of a checklist, or a preparation document for those potentially getting ready to sign this document, or whether they are even qualified or have been necessary tools to comply so that is an excellent

[Helen Pfister] 11:08:53
question and that kind of ties back to some of the future potential pmps.

[Helen Pfister] 11:08:57
We talked about an implementation onboarding policy and something like what you're describing would fall into that kind of policy.

[Helen Pfister] 11:09:02
And so it may well be that. yes, at some point we will.
[Courtney Hansen] 11:09:04
We will need to do that, Ellen. Could that also be considered a technical assistance that we may want to go that route?

[Helen Pfister] 11:09:14
Yeah, I think they could be tied together Right? I mean.

[Courtney Hansen] 11:09:17
Yes, yes, think great point, alright. And then I have. John.

[John Helvey] 11:09:24
Yeah, this from a monitoring, monitoring and auditing perspective.

[John Helvey] 11:09:29
I mean, this gets very complex as we look at. You know what data from us, Cdi, too, or you know how they are, What is being really monitored and audited.

[John Helvey] 11:09:43
Is it? how is that gonna be truly measured and report?

[John Helvey] 11:09:48
So I I need to understand a little bit more of the scope of what monitoring and auditing early is, and how deep it goes into the details of what a participant should be concerned.

[Helen Pfister] 11:10:00
And making available, so that's actually a great segue to the next slide which continues this monitoring monitoring and auditing concept that focuses on with the participants obligations are so If you want to go to the next slide.

[Helen Pfister] 11:10:12
Please So we are obviously talking about participants having to make books records available to the extent that the governance entity is doing any auditing.

[Helen Pfister] 11:10:24
But we're also thinking about an attestation process where, depending on how the participant exchanges information.

[Helen Pfister] 11:10:32
They would submit some sort of attestation seeing what they're doing so. if they're doing it through qualified Hiv, then they'd have to annue the test that they've entered into with the call off at hio and that they're exchanging data through

[Helen Pfister] 11:10:43
that through that hio. if they do it through another end to do it's not a qualified hiv again they'd have to attest that they've entered into such an agreement, and that they are exchanging
[Helen Pfister] 11:10:52
H. information as required under the dsi and if they do it themselves again.

[Helen Pfister] 11:10:57
They'd have to submit the test an attestation, so the idea is that, like I mean by affirmatively, we're crying a requirement attestation, we're hoping that that will avoid participants

[Helen Pfister] 11:11:11
just kind of like sign The dsa and sort of putting it into a drawer, and then forgetting about it. I think it's like the active annual acquisition is one way that we're hoping to to getting

[Helen Pfister] 11:11:21
participants engaged in this in this entire process so let me just out there, and i'm sure there'll be many more questions.

[Helen Pfister] 11:11:26
So

[Courtney Hansen] 11:11:30
We have a few we'll start with jason thank you Laurie.

[Jason Buckner] 11:11:36
This five's great I think in the attestation is the right first step.

[Jason Buckner] 11:11:42
For this I would recommend some level of audit to attestations. be part of an ongoing process at some point.

[Jason Buckner] 11:11:50
Not a full lot of everyone, but some some form of a random amount of a certain number of participants.

[Jason Buckner] 11:11:56
Annually, just to verify that attestation is correct.

[Courtney Hansen] 11:12:05
Thank you. Leo. Thank you. Could there be an opportunity to maybe inject something slightly different?

[Leo Pak] 11:12:15
Some of these things like auditing they're very reactive And then the question is, you know, why my honor did it? Can you stab it?

[Leo Pak] 11:12:25
Can we establish some sort of a proactive component that maybe supplements what an audit may look like.

[Leo Pak] 11:12:33
So as Hiv or Hiv. whatever the terminology is that there is a defined set of metrics or measurements that are published on a regular basis, and transparent, all as opposed to waiting for a reactive situation,

[Helen Pfister] 11:12:50
so that that would be my comment. So with that potentially Leo fit into the app station bucket.

[Helen Pfister] 11:12:58
But the address space will be broader than what we've got on this slide, especially what you're thinking that they've got a a test for the doing certain more specific meeting certain metrics as opposed to simply that they're

[Leo Pak] 11:13:07
complying with Dsa. So you had in mind. Or, yeah, I think a at the station to me is a point in time problem, a a continuous monitoring or reporting of metrics is a health problem of the health of

[Leo Pak] 11:13:21
the system or health of how the data is exchanged.

[Leo Pak] 11:13:23
So as part of policies and procedures. If we can define what that output of measuring things would look like that may avoid the need to do auditing, and it becomes extremely self-evident and transparent. all okay.

[Helen Pfister] 11:13:37
Got it, I hear you. Thanks, Leo Alright and John and it just, brother.

You know, I think that this is all the comments that's Why, I've been great, but you know it does get into back into the detail of the data being contributed being collected, and being sent you know some of this is

operation workflow at the practice hospital. Someone is built within the emr, and some of it is in of the health data.

[John Helvey] 11:14:12
So you know, understanding really kind of what it is from a detailed perspective, that's being audited, you know, since we are talking about the Usc.

[John Helvey] 11:14:21
I 2, or the evolution there? you know they may be connected.

[John Helvey] 11:14:28
They may be sending data, but of the data that They're sending it may not be inclusive of the complete Us.

[John Helvey] 11:14:36
Cdi. due to various reasons. What would and how would that play into monitoring and auditing and recording

[Helen Pfister] 11:14:48
All good questions i'm not sure I have an answer for you right at the moment.

[John Helvey] 11:14:51
But I I I hear what you're asking Well, i'll just i'll just kind of weird kind of what Leo was leading to is that you know I think he was leading to this that other than manual processes qualified

[John Helvey] 11:15:08
Hivos or Hivs period. from an individual feed perspective, have a real, difficult time monitoring all of that.

[John Helvey] 11:15:17
Yeah, look out human participation and many of us are nonprofits and don't don't have this built in so supporting Hiv is just critical to helping us participate

[Courtney Hansen] 11:15:44
Absolutely. Thanks. John Alright and Morgan. Yeah. this

[Morgan Staines (he)] 11:15:53
The obligation to make, you know practices, books, and records available to the governor.

[Morgan Staines (he)] 11:16:00
Insanity raises a question about Oh, path! What becomes a public record?

[Morgan Staines (he)] 11:16:09
And and whether, yeah, whether we may expose, you know, potentially.

[Morgan Staines (he)] 11:16:15
Yeah, one perspective trade secrets, another one a more dangerous one, I think.

[Morgan Staines (he)] 11:16:19
Really whether whether it might expose vulnerabilities of a system.

[Morgan Staines (he)] 11:16:27
If those May were made public. so I think we need to be mindful of that.
I, anticipating that the governance entity is probably gonna need some statutory authority, and when that happens we by give some thought to this also to how to make sure that but it has the ability to to protect appropriately protect

Helen Pfister 11:16:48
things as as other public agencies do. Yeah, and there is language in the Dsa itself that talks about the confidentiality of information that participants provide in the context of monitoring and auditing.

But we can go back and and but so we've that's definitely the bat reminds but it's an important.

It's a very important point thanks morgan stevens. I'm. looking at this definition at the bottom of the slide here.

We're sorry has been out there for some time now and it uses the the word and health and social service.

Information. Should that be an and or or is it meant to be?

And which is to say that you will only qualify as a Qh.

Io, if you are currently exchanging both types of data that's a very, very different thing.

I think that I am part of a constituency that believes that there are a lot of national networks and frameworks that you know should ideally be identified as Qhiios within our methodology, and as we

all know some of the social there's not a lot of folks exchanging social service information.

Yet. you know we're trying to create something that will do that that can do that.

If we limit this to to those who Well, I guess facility is pretty open-ended.

59
But I just wanted to clarify whether that is meant to say currently and actively exchanges both of these types of information.

[Helen Pfister] 11:18:17
It. it's definitely the health and social services information comes from the Ds itself.

[Helen Pfister] 11:18:23
It's defined in there. but certainly to your point the intent is not that we're going to limit qhios to organizations that currently so at the experience of social service.

[Helen Pfister] 11:18:30
Information. that's absolutely not the point so completely agree with you on that one.

[Courtney Hansen] 11:18:36
Thanks, Steven. Okay, Jason. Oh, yeah. just a a suggestion here on the second bullet point.

[Jason Buckner] 11:18:44
I'm wondering if we could replace that the participant must attest with the Paul upon H.

[Jason Buckner] 11:18:52
Ao must attest. So you know, if a participant is engaging in exchange through a qualified H. O.

[Jason Buckner] 11:18:57
Can the qualified H. O. a test on the participants behalf?

[Jason Buckner] 11:19:01
I think that would be efficient and beneficial to the participants.

[Helen Pfister] 11:19:07
Okay, we can let's let's give that one thought

[Courtney Hansen] 11:19:13
Thank you. Any other comments. Questions on monitoring and auditing

[Helen Pfister] 11:19:26
Hearing none. Helen, was this your last slide? I believe it was Yep.

[Helen Pfister] 11:19:32
I think we're over to room now

[Rim Cothren] 11:19:38
Oh, great, thank you. I think I know most of the people that are on this. subcommittee.

[Rim Cothren] 11:19:44
Today for those that don't i'm room katherine i'm a consultant to cdi and have been supporting

[Rim Cothren] 11:19:52
The organization for about a year now primarily on the technical side of the data exchange framework.

[Rim Cothren] 11:19:59
I wanna start us talking about transaction patterns today.

[Rim Cothren] 11:20:04
Unlike the last 2 pnps there's less defined language here, and more concepts that I want to get started talking about because this is potentially a very very large topic.

[Rim Cothren] 11:20:17
I'm gonna drop in the chat real quick just for people's reference.

[Rim Cothren] 11:20:21
That part of our activities last year was to define the data elements that need to be exchanged by participants on the data exchange framework and signatories to the Dsa.

[Rim Cothren] 11:20:32
What we're talking about here are what are the patterns for exchanging that dated to me particular use cases or business needs.

[Rim Cothren] 11:20:42
And that's how I would suggest we think about transaction patterns is this is how information moves among participants.

[Rim Cothren] 11:20:52
Today, we're gonna talk about 4 specific patterns that we're suggesting might be part of this policy and procedure.

[Rim Cothren] 11:21:00
That's a targeted request for health information that would be when a participant on the data exchange framework would like to access or exchange or get exchange to them health information on a specific person and they knew no what participant might have that information, and therefore who to ask for it, will talk about all of these transactions, including that one in a little bit more detail.

[Rim Cothren] 11:21:19
The broadcast request for health. Information is similar, but in this case might be for a participant when they don't know who might have information on that person, and who to ask targeted health information delivery.
We see that under a lot of different names is the one I’m going to use today, at least.

But when a participant has health, information, it needs to be sent proactively to someone else, and knows who to see it to and I’d note that all 3 of those transaction patterns are transactions that are named, and intended to be supported on Tefka, and then the fourth is the request for notification.

When a participant wishes to be alerted to particular health or other encounter events for individuals that they support, and once to be alerted when those events take place.

This is related to the Federal rule, the cms Federal rule that hospitals must provide adt, notifications for admissions, transfers, and discharges.

And so we’ll talk a little bit about what that one might look like.

I’m gonna apologize in advance and walking through these scenarios.

They take a very health care and provider centric description of the scenarios.

Please do not think of them that way. that any of the participants might be any of the signatories to the data exchange framework. And although we’re talking about specific clinical events here, these transaction patterns could easily extend to social services organizations that signed the Dsa or to the earlier comment to county organizations, to public health organizations as well.

Any signatories. to the dsa that are a participant that’s that’s how I would like to talk about all of these.

Let’s go on to the next slide and get into the first transaction pattern, and for each of these what I’ve tried to do is just describe a scenario that might help us think about what this transaction pattern
looks like in this case the targeted request for health information is when a specific individual or organization in this case Dr.

[ Rim Cothren] 11:23:49
Smith has scheduled a patient to be seen by another individual, and that individual that participates on the data exchange framework would like some information about that patient before she shows up.

[ Rim Cothren] 11:24:06
And in this case that Doctor Dr. Jones knows who might have information on that patient.

[ Rim Cothren] 11:24:13
For example, Dr. Smith, that made the referral might be the primary care Physician likely has information on the patient as well as

[ Rim Cothren] 11:24:23
Other organizations, such as the patients insurance company.

[ Rim Cothren] 11:24:28
So this is a query response type of transaction where Dr.

[ Rim Cothren] 11:24:31
Jones makes a query to Dr. Smith, and expects information back, or makes a query to the health plan and expects information back.

[ Rim Cothren] 11:24:41
On all of these i’ve tried to note some of the technical standards that might support this exchange this transaction pattern.

[ Rim Cothren] 11:24:52
However, today's conversation is not about standards that will be in a separate pnp.

[ Rim Cothren] 11:25:01
Later on. and on all of these i’ve also posed some questions, and that's what i’m looking for feedback on today.

[ Rim Cothren] 11:25:08
So, for example, should the response to a query be required of all signatories to the Dsa.

[ Rim Cothren] 11:25:15
And that's going to be a recurring question that i'm going to be asking when you think about these transaction patterns.

[ Rim Cothren] 11:25:21
There’s also 3 contexts to think about them in first who should be required to do this transaction.

[Rim Cothren] 11:25:30
Second. are there? we? We may end up asking that.

[Rim Cothren] 11:25:39
Qh Ios support all of these transaction patterns.

[Rim Cothren] 11:25:42
Does that make sense? And third, the term transactions that are described here, but are not required of anybody, would still be the target of technical standards that we would define the technical standards If a party chose to do these

[Rim Cothren] 11:25:58
transaction patterns. So let me pause there for a minute and see if there are any thoughts.

[Rim Cothren] 11:26:04
We’re posing for instance, that everyone that signs the Dsa.

[Rim Cothren] 11:26:08
Would be required to respond to a query for information. Mark, I see your hand up.

[Mark Savage] 11:26:18
This is sort of a question on the side whether this is supposedly does include or does not include, an individual access request from the individual, so not not a participant, but the In many ways.

[Mark Savage] 11:26:33
It seems to be the same use case and according to the answer other other things may float from that.

[Rim Cothren] 11:26:39
But that's the that's the opening question so so that's an excellent question, Mark, and based on our earlier conversations today.

[Rim Cothren] 11:26:47
I was expecting that question and to be honest with you hadn't Hadn't thought significantly about it in advance.

[Rim Cothren] 11:26:56
When when we put these slides together, we were talking about signatories to the Dsa.

[Rim Cothren] 11:26:59
And obviously an individual is not a signatory, but it is their data.
And we do have policies and procedures associated with individual access.

So I would very much welcome your thoughts on individual access although this might not, this might or might not be the place to record that.

But I'd really welcome your thoughts I'll give that some thought, but nothing but not do anything for the moment right now.

Great. Thank you. One of the things that I point out is this is a common transaction here in California, and nationally so.

The runway for most people to support. This one is not big.

However, I would note that clinical labs are required.

Signatories to the Dsa. and if we moved forward with this, clinical labs might be required to respond to queries.

You know in particular, Is that a concern?

Or are there other organizations that might need time beyond January, the twentieth 24 to comply with a requirement like this?

Leo, I see your hand up. Yeah. thanks. rim

So I struggle, trying to interpret these things in the context of participants.

My experience tells me that depending on the technology that some of these small entities have been able to support thousands and thousands of queries.

It's not something that's gonna be in the wheelhouse.

So now the discussion goes into well, it's certainly not Dr.
[Leo Pak] 11:28:40
Jones, who's responsible but their emr vendor? Okay,

[Leo Pak] 11:28:47
Where should I inject the thought process of these policies and procedures?

[Leo Pak] 11:28:50
On what the capabilities of an Hio or an Hiv should be. and I asked the specific question just to get tease out one, a a specific aspect of this room, which is if a participant, joins a regional hio and

[Leo Pak] 11:29:07
submits all their data to the region of Hiv. Does that now shift the responsibility from the participant to the H.

[Leo Pak] 11:29:17
I, O. or they still require to support a query response.

[Rim Cothren] 11:29:21
And this is probably the same thing I would have across all the transaction patterns.

[Rim Cothren] 11:29:25
I think that that is an excellent question. I would agree with you, Leo.

[Rim Cothren] 11:29:28
It probably applies across all of the transaction patterns, and so we might as well talk about it a little bit.

[Rim Cothren] 11:29:33
Here. I think that I purposely did not put details of what those blue arrows look like, and, as you point out, it is likely not Dr.

[Rim Cothren] 11:29:46
Smith as an individual that is responding to this query.

[Rim Cothren] 11:29:49
This is an electronic query. This is not put a piece of paper in the fax machine.

[Rim Cothren] 11:29:54
This is to a system. And so this query either happens to their Tai.

[Rim Cothren] 11:30:00
There it it happens to the platform that they use. And so what is that platform?

[Rim Cothren] 11:30:04
It might be any Hr. in which case the requirement to respond would be the Ehr.
If they participate, as you say, with an HIO, or a QH IO, or national network, that responsibility might fall on that network or HIO instead.

But I think that that is at least how we are envisioning.

It is that Dr. Smith is responsible for making it happen.

How it happens is the tools is the responsibility of the tools that Dr. Smith uses. So I'm interested in your thoughts about you know what what are the concerns you would have with a requirement to respond to all queries from DSA signatories.

When that is responsibility that would fall either on any Hr.

Vendor or a QH: IO: Yeah. So this is obviously a very complicated topic.

It goes into all sorts of other areas that I'm sure we'll have for the discussions on.

But my biggest concern is the the perception that the signatures of these Dsas will have to be obligated to, and depending on how they read that or interpret that request they're gonna have to then evaluate whether their EMR vendor can support any of these things explicitly versus implicitly by way of an HIO.

So these are conversations, i've had with participants about these things, and most of them don't even understand the concepts, let alone trying to answer the questions.

Thanks, Lil. Are there any other thoughts or questions? I do want to point out the note from Stephen in the chat?

Thanks, Stephen Stevens, pointing out that information.
Blocking also already applies to laboratories, and the requirement to respond to a query already exists there.

Thanks for clarifying that Stephen

One of the other things that we haven't talked about here is that a transaction pattern like this has other requirements on the system we've been talking about digital identities.

And so there is a need for these organizations to agree on the identity of Sally, so that they can retrieve the right information.

It also is dependent upon knowing how to contact Dr. Smith and Sally's health plan, and so we've talked also about the need for a participant registry or directory or index or some other mechanism, and although we won't go into that in great detail today, we'll continue to be talking about that in some of these meetings, or in the IC.

Meetings as well let's go on to the next slide and this is a very similar pattern. but you can imagine that in not all cases will a participant in the data exchange framework know who may have information on

an individual. So, for instance, as Sally suddenly shows up in the emergency department with an acute asthma attack, the needs to be treated.

The emergency department may not know what plan is. Hers may not know who our primary care physician is, may not know who else may have information on, and therefore needs to do.

A broadcast or a limited broadcast of queries.

2 things that I would note about 3 things that I would note about this is this: from a recipient of a query.
This looks very much like the other Trans. transaction I have a an individual.

[Rim Cothren] 11:33:57
I'm requesting information from You about that and so there may be a duty to respond to those queries for all of the different types of organizations here.

[Rim Cothren] 11:34:08
The 2 things that potentially make this different is that there is a greater request here.

[Rim Cothren] 11:34:15
A greater requirement here to identify which we're organizations.

[Rim Cothren] 11:34:19
I might be requesting. So, rather than querying the tens of thousands of participants in the data exchange framework, you might only want to be querying those in the Sacramento Metropolitan area So when

[Rim Cothren] 11:34:31
we talk about a participant. registry there may be a need to be able to identify the service area of participants. So better to target queries, The other i'd like to come back.

[Rim Cothren] 11:34:43
To leo's comment about its broadcasts like this that can create a great deal of traffic, and the duty to respond.

[Rim Cothren] 11:34:51
There can be complicated as well. My question here is, Are there any new considerations when we talk about broadcasts?

[Rim Cothren] 11:35:00
And more generalized queries for information. also that may go to hospitals, to community clinics, to plans, to labs, to networks, to h ios in general, and Leo, I see your hand up again

[Leo Pak] 11:35:17
Sorry one of the things that we've been considering is the child in population health instance, that the State is bringing up, and in that we don't anticipate a broadcast query model, and maybe some do but if this

[Leo Pak] 11:35:36
was a prevalent approach to the population. health I I don't think this is a a model that would be sustainable at all.

[Leo Pak] 11:35:44
So maybe as part of the policies and procedures, we should scope out how some of these patterns are impacted.
Unless someone thinks that the population health mechanism is going to you.

Try to leverage this as a means to gather data.

Thank you, Lou, I I I guess I'd have a question either for Leo or for Helen, or anybody else. do.

Do we have coverage, for instance, in the permitted or required purposes that might address some of these issues?

Or is this something that we would need to address in this particular policy and procedure?

I'll go back and look but I think that policy is too high is really high level.

So I don't think it is addressed I think it would be addressed in this one.

Thank you.

Any other thoughts, comments, or questions. Yes, John yeah this I mean as we're talking about tefka and queue hands, and did not.

And you help it change and everything that's happening right I mean This is a I'm.

Not sure that this is a transaction that can be kind of supported at this mass level and be effective in return.

The results needed in it timely fashion. I mean, this is this: is queue hands bad enough, but the number of transactions that are going to be coming out from a broadcast perspective.

And this is like that for California so that's that's where I kinda get stuck on you know the the theory of the training transaction is clear, but the feasibility of the trans I think is not achievable necessarily
[John Helvey] 11:37:59
So I have tons of questions with regards to you know the broadcast model, and it's efficacy.

[Rim Cothren] 11:38:11
And returning, you know a good response. I I I hear you there, and I I at least understand the the issue.

[Rim Cothren] 11:38:20
I I think one of the questions for us is to what extent we believe that this is an important transaction, and we need to find a way to support it.

[Rim Cothren] 11:38:31
Where this is an unachievable transaction, or is of lower importance, and therefore we take it off the list.

[Rim Cothren] 11:38:39
I I really understand that there are technical issues here.

[Rim Cothren] 11:38:41
But if this is an important one, I think we need to continue to discuss it.

[Rim Cothren] 11:38:46
Louis, I was going to call on you because you also dropped something in the chat, so you might want to talk about that as well.

[Louis Cretaro] 11:38:53
If that's not the reason you've raised your hand thank you.

[Louis Cretaro] 11:39:00
Well from my chat. Comment was related to the triggering.

[Louis Cretaro] 11:39:03
The transaction, meaning that each ehr would have to develop.

You know, when their transaction would be set and executed by the doctor in the public slide.

[Louis Cretaro] 11:39:19
The the doctor, by virtual activity, may generate the transaction.

[Louis Cretaro] 11:39:26
That was what, and then related to this transaction I recognizing in this user case, some sort of priority, and it made me wonder if we we're going to or have the authority or cheating discuss the prioritization transactions
one over another. but having listened to the concerns, about the performance, and practic nature of the then I have it now.

[Louis Cretaro] 11:40:00
I'm wondering if the use case is could be modified slightly, and and if we had apis, and we were exchanged these transactions on a regular basis, and the patient was known to

[Louis Cretaro] 11:40:19
Yes, institution at the hospital at the time. Any updates to that patients.

[Louis Cretaro] 11:40:28
They come by virtue of an acknowledgement that you just saw, say a patient in the emergency room, and there are other providers would be noted, notified because there's been a prior relationship established in

[Louis Cretaro] 11:40:47
this in this exchange, and so in this, in this example, if Sally presented and was known, we would have already had her information.

[Louis Cretaro] 11:40:58
Theoretically from everybody who's recently seeing her if she was unknown.

[Louis Cretaro] 11:41:05
Then the broadcast may so. But if a patient presents at the emergency room, and on my Monday all the providers that have that patient now that she was in an emergency room over the weekend, you know this is Monday as an

[Louis Cretaro] 11:41:21
example. then. it seems to change this business case unless i'm missing something, so please help me out.

[Rim Cothren] 11:41:30
No, I I think that those are all very good points and thanks for that, Louis.

[Rim Cothren] 11:41:35
One of the questions that I might ask for the group, and I know that there are other hands up.

[Rim Cothren] 11:41:38
But just to to think about is this a transaction that we might in in lewis's vein of prioritizing that we might limit participants, and only certain participants are allowed to do broadcasts because it made certain

[Rim Cothren] 11:41:57
use cases and I'd pose that as a a question for the group as well.
[Leo Pak] 11:42:01
Leo, you have your hand up, thank you I think these trans transaction patterns.

[Leo Pak] 11:42:09
If they're taken in isolation discussions become very difficult, because you're trying to conceive the solution for a specific use case tied to one transaction pattern.

[Leo Pak] 11:42:22
My experience is that these transaction patterns complement each other, and in many situations there's more than you know, 2 or 3 that need to work in conjunction to really fulfill a particular use case not only from

[Leo Pak] 11:42:36
a practical perspective, but just from a maintenance perspective.

[Rim Cothren] 11:42:41
So my recommendation is let's look at the use case and then associate which transaction patterns are appropriate to that as opposed to looking at from this perspective, I think we would end up in a better place thank you

[Rim Cothren] 11:42:57
Leo wanna call people's attention also to stevens note here in the chat.

[Rim Cothren] 11:43:04
He brings up a record locator one of the things we've talked about with digital identities.

[Rim Cothren] 11:43:10
So that might also, if we implement a statewide person index, that would give us an indication of where Sally might have information in the system, and also might limit broadcasts.

[Rim Cothren] 11:43:23
So that's something we'll continue to discuss Diana.

[Diana Kaempfer-Tong] 11:43:27
I see your hand up. Yeah, So So what's not clear to me on this request is specifically coming from public health, where we have, you know, 200 plus programs.

[Diana Kaempfer-Tong] 11:43:39
Would this request be tailored so if they're asking for information? They don't get this you know.

[Diana Kaempfer-Tong] 11:43:47
Are we going to be expected to send them completely irrelevant information from programs that are unrelated to the request?
[Diana Kaempfer-Tong] 11:43:56
Or would this be more tailored to? You know she she is in with asthma.

[Diana Kaempfer-Tong] 11:43:59
Do you have anything related to? Maybe treatment for environmental pollutions, or something like that like how?

[Rim Cothren] 11:44:07
How would this affect the larger departments it's next excellent question that I don't have an answer to.

[Rim Cothren] 11:44:16
We should think about it in the context of the transactions, we should think about it in the context of potentially.

[Rim Cothren] 11:44:25
The technical standards is some standards are much better as su suited for more targeted queries.

[Rim Cothren] 11:44:29
But I think that's an excellent question thanks Diane Elaine.

[Elaine Ekpo] 11:44:33
I see your hand up. Oh, it's perfect timing because Diana actually touched on what I was going to ask about and make a point about is that

[Elaine Ekpo] 11:44:44
Maybe it's not so much about limiting broadcast but making putting the the on on the broadcaster to tailor their requests.

[Elaine Ekpo] 11:44:54
So much to kind of like a pra where we want.

[Elaine Ekpo] 11:45:00
We want them to specify the scope the detail what they're looking for. So that because i'm thinking about that's you know that's my department where they might not we might not have anything that's

[Elaine Ekpo] 11:45:13
relevant, and what we don't want is the broadcast feature being used to the extent where it becomes like my email

[Elaine Ekpo] 11:45:25
I get a lot of and i'm sure it's not unique to me.

[Rim Cothren] 11:45:29
But I get i'm on a lot of list serves and a lot of group emails, and then we don't want it to just kind of be white voice for those of us that it might not be tailored to thanks

[Rim Cothren] 11:45:40
Elaine morgan I see your hand up i'll take your question, and we'll move on. we're getting close to the top of the hours.

[Morgan Staines (he)] 11:45:48
So Morgan Yeah, Thanks for Hop i'll be quick.

[Morgan Staines (he)] 11:45:52
Just the I think. What Diana and Elaine are talking about.

[Morgan Staines (he)] 11:45:55
I would, I would suggest, bundle that into into your suggestion or question about whether we, whether we try to define some of this in use, cases about what are the what are the conditions under which a broadcast is appropriate what

[Rim Cothren] 11:46:09
should it look like thanks, Morgan let's move on to the next slide.

[Rim Cothren] 11:46:16
This is the third transaction part a pattern is targeted health information delivery, and that's when an event or some other encounter is created.

[Rim Cothren] 11:46:26
Health information, and there's a clear target of who should receive that information.

[Rim Cothren] 11:46:34
There are a number of potential technical standards that might support.

[Rim Cothren] 11:46:38
Something like this. This might be the end of a referral.

[Rim Cothren] 11:46:40
It might be delivery of a lab result. It might be a discharge summary targeted at my Pcp: It might be many different types of things.

[Rim Cothren] 11:46:53
Some of these and i'll just say now that some of the technical standards associated with this are easier to manage on a statewide basis than others are, and so this will be a more complicated discussion.

[Rim Cothren] 11:47:05
Perhaps when we get to technical standards. But the idea here is that, health information, or social services, information, or whatever is generated at a site, and
needs to be delivered either to an individual or an organization again you need to be able

[Rim Cothren] 11:47:21
to discover how to send that information, and need to be able to send it.

[Rim Cothren] 11:47:26
My question here is, Are there any requirements for organizations to either to support either end of this?

[Rim Cothren] 11:47:36
That? Do we want to require participants or individuals that are signing the Dsa.

[Rim Cothren] 11:47:42
To be able to send electric information electronically or receive information electronically for this type of pattern.

[Rim Cothren] 11:47:52
I think we've already identified that if I get an electronic request for information.

[Rim Cothren] 11:47:58
I must respond electronically in this case if I'm just directing information.

[Rim Cothren] 11:48:04
Are there requirements here, or is this merely a voluntary transaction pattern?

[Mark Savage] 11:48:09
Are there any thoughts? Yes, mark to your last question. One that immediately comes to mind is the individual's direction to a provider to send help information to a third party.

[Mark Savage] 11:48:31
So I think you know you could also say the the individual desire to contribute.

[Mark Savage] 11:48:35
Does it here. but you asked a more specific question I think that's take any consideration.

[Rim Cothren] 11:48:44
Great. thank you, Mark Steve, and I see your hand up too.

[Steven Lane] 11:48:48
Yeah, I'll just comment, you know. sending information pushing information is clearly a central part of helpful interoperability.

[Steven Lane] 11:48:59
It is not enough to rely on queries, because not every recipient, clinician, or caregiver, is aware of or capable of doing. The query. you know, sending can utilize different technology, including 

[Steven Lane] 11:49:14
direct messaging, secure, email, etc. I think sending and pushing information is incredibly important, and and i'll channel something that Mark wanted to say, but didn't. and that is a patient-generated health data of course, is incredibly

[Steven Lane] 11:49:29
important and the ability for individuals to send data to their providers and have the provider able to receive and incorporate that data into their system, so as to inform their decision, making, I think, equally important as they push

[Rim Cothren] 11:49:46
messaging use case great thanks, and what i'm hearing from both of those comments is that there may be certain participants where the answer to this is yes, that there must there might be, under certain circumstances, or requirement to be able to

[Rim Cothren] 11:50:04
receive information electronically, and there may be certain circumstances under what under which certain participants must be able to send information electronically.

[Rim Cothren] 11:50:17
Leo, I did see your hand up earlier, and it went down.

[Rim Cothren] 11:50:19
Did you still have a comment

[Leo Pak] 11:50:25
Okay, thanks, Mark. You have your hand back up good i'm realizing that when you said required the first time, I was thinking in sort of legal requirement.

[Mark Savage] 11:50:37
But it's probably important to think about this in terms of sort of a function requirement.

[Mark Savage] 11:50:42
If you start thinking about shared care, planning, care, coordination.

[Mark Savage] 11:50:47
Most people think that they need to send that out for the benefit of the patient's individual's health and and care among the care team members without really asking the question is this required legally.
It's required as a part of the use case and we are. We are building more and more towards that, so that the the I mean not just an individual having a having a plan of care with a with a specialist or a care doctor the more holistic approach

[Mark Savage] 11:51:17
to the care teams plural and they all need to know what's going on.

[Mark Savage] 11:51:21
You need to have that kind of reconciliation among prescriptions.

[Mark Savage] 11:51:26
Things like that. So if i'm thinking functionally I think the the number of instances where I would say required functionally increases quite a bit.

[Rim Cothren] 11:51:38
Thank you, Mark, let's move on to the last slide in this section

[Rim Cothren] 11:51:46
The last transaction pattern we wanted to discuss is a little bit more difficult, I think, but is something that often has come up in the context of us discussing things in the past, and that is the need to notify individuals or participants on on

[Rim Cothren] 11:52:02
the data exchange framework of events. that impact an individual.

[Rim Cothren] 11:52:09
In this case, for instance, if Sally suddenly shows up in the Ed her primary care, Physician wants to know that that event took place.

[Rim Cothren] 11:52:19
The Cms interoperability rule requires that hospitals Send out ads. we're trying to target this potentially a little bit more that rather than blindly broadcast adts or send them only to individuals that

[Rim Cothren] 11:52:34
Sally indicates that we might provide a way, for instance, for Dr. Smith to say, I want Sally on my list of people.

[Rim Cothren] 11:52:39
If she shows up in your emergency department, please let me know there aren't good technical standards for for how you make a request.

[Rim Cothren] 11:52:52
You know this is often described as a publish and subscribe, but you won't find a good publishing subscribe set of technical standards on the nationally recognized standards list today that it's widely

[Rim Cothren] 11:53:05
adopted. but the notification part is a push of information, and has a number of potential standards that might be used for that.

[Rim Cothren] 11:53:15
And this is a general question. to the group. Is Is this an important transaction pattern for us to be thinking about?

[Rim Cothren] 11:53:24
Is the time to think about it now? or is this something that needs more runway and more deliberation?

[Rim Cothren] 11:53:32
And how might this fit into the different participants, and who might be required to respond in a by pushing notifications out into whom? Leo, I see your hand up?

[Leo Pak] 11:53:42
Thank you. Room I think this is a good example of a use case.

[Leo Pak] 11:53:48
Driven standards applied model this if you wanna actually do this, and it's entirely.

[Leo Pak] 11:53:54
It does require multiple transaction patterns to fulfill this properly.

[Leo Pak] 11:54:00
So I think my comment here is this is a must as well as the other transaction.

[Leo Pak] 11:54:07
Patterns are a must, but it depends on the audience you speak to whether it is applicable, because because the use cases need to first be defined for that.

[Rim Cothren] 11:54:17
Thank you, Leo Jason. I see your hand up as well.

[Jason Buckner] 11:54:23
Yeah, I don't know that I have a fully formed sort of like statement here.

[Jason Buckner] 11:54:29
But it seems like we might have some old course instead of and and all of these.

[Jason Buckner] 11:54:36
So There's there's 4 of these workflows this being one of them.
This is a very valuable workflow when it can be supported by folks.

I don't know that I would note it as a required mandatory transaction, and the broadcast via required mandatory transaction and the targeted request right.

So, having all 4 of these I think we're in the spirit of having organization share data is important.

But I don't know that all 4 need to be mandatory. I I don't have a a better sort of like statement on that. but it it's got me scratching my head of that. No, and I think that. that's part of what I wanted people to start scratching their heads

about is, you know, if if these are useful transaction patterns, but are not necessarily transactions, it should be supported by everybody on a mandatory basis, or who should they be mandatory?

For if anybody so I would encourage everybody to continue to think on that, and i'm really interested in your feedback.

Steven, you have your hand up and we'll take your question, and then I think we need to start looking to close just like Leo.

I wanna say that I think these are all really important transactions that we've been discussing you know this one in particular might be an opportunity for us to provide some state level support for the pub sub kinds of transactions you’re envisioning. I don't think that really exists you know at a national level at this point, and if we're talking about the State Directory of providers and patients you know of provider, patient you know connections etc.

This could certainly fit right into That would be a great way to spend what money we have available.

Great. thank you, Steven. I think that's the less slide in this series.
I would encourage people to continue to think on this send any comments you have to the Cdi email address and or to me personally.

[Rim Cothren] 11:56:37
And i’m sure that there that we’ll be talking about some of these more, as we move forward with the the policies and procedures.

[Rim Cothren] 11:56:45
Also we talked about 4 patterns here. If there is something that we missed, please feel free to make those suggestions as well.

[Courtney Hansen] 11:56:52
And Courtney. I think i’ll turn things back over to you then, thanks for and thank you.

[Courtney Hansen] 11:57:00
Everyone for being here today and participating. This has been a great meeting.

[Courtney Hansen] 11:57:06
So 4 next steps next slide we will share a summer summary notes from today's meeting and post the final subcommittee charter as well as consider feedback.

[Courtney Hansen] 11:57:19
Received so draft language for the new pnps that are prioritized for development.

[Courtney Hansen] 11:57:24
As always, I encourage you to stand touch and send me any additional feedback on topics covered during today's meetings feel free to send it to me or to the Cdi email

[Courtney Hansen] 11:57:36
Your feedback is absolutely critical, and we want to make sure we get this right.

[Courtney Hansen] 11:57:39
And next slide. Our next meeting will be held virtually on October 20, fifth, from 10, A. N.

[Courtney Hansen] 11:57:49
To 1230. The slide shows all our confirmed meeting dates through March 2023

[Courtney Hansen] 11:57:57
And that's it. So thank you again, and I look forward to working together to implement the Dxf.

[Courtney Hansen] 11:58:01
And improve the health and well being of California. If there are no questions I will see you next time.