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

[Mario Schiavi] 13:00:45
disable. Emma will now cover meeting participation. members who are on site today are encouraged to log in through their panelists link on zoom.

[Emma P - Manatt Events] 13:00:56
Members are asked to keep their laptops, video microphone and audio off for the duration of the meeting.

[Emma P - Manatt Events] 13:01:01
The rooms, cameras and microphones will broadcast the video and audio for the meeting.

[Emma P - Manatt Events] 13:01:05
Instructions for connecting to the conference Room Wi-fi are posted in the room and please email Jocelyn Torres with any technical or logistical questions on site meeting participation for written comments participants

[Emma P - Manatt Events] 13:01:16
may submit comments and questions through the zoom. Q. A. box.
[Emma P - Manatt Events] 13:01:21
All comments will be recorded and reviewed by lc.

[Emma P - Manatt Events] 13:01:22
Staff participants may also submit comments and questions as well as request to receive data exchange framework updates to CdI at Chhs dot.

[Emma P - Manatt Events] 13:01:32
Ca: Gov. For spoken comments, participants and Iac members must raise their hand for us to unmute you to share comments.

[Emma P - Manatt Events] 13:01:39
The chair will notify participants of appropriate times to volunteer feedback.

[Emma P - Manatt Events] 13:01:45
If you're on site and logged in by a zoom, press, raise hand in the reactions area, and if selected to share your comment, please begin speaking, and to not unmute your laptop the rooms microphones will broadcast.

[Emma P - Manatt Events] 13:01:55
If you're on site and not using Zoom physically, raise your hand, and the chair will recognize you.

[Emma P - Manatt Events] 13:02:01
When hits your turn to speak, if you're off site today and logged in by a zoom press, raise hand in the reactions area, and if selected, you'll receive a request to unmute. Please ensure you accept before speaking, and if you logged on by a phone only press Star 9 to raise your hand.

[Emma P - Manatt Events] 13:02:17
Listen for your phone number to be called, and if selected, please ensure you are unmuted on your phone by pressing star.

[Emma P - Manatt Events] 13:02:24
6 public comment will be taken during the meeting at designated times.

[Emma P - Manatt Events] 13:02:27
It will be limited to the total amount of time allocated for public comment on particular issues.

[Emma P - Manatt Events] 13:02:32
The chair will call on individuals in the order in which hands were raised, beginning with those in the room, and followed by those dialed in or connected remotely through zoom.

[Emma P - Manatt Events] 13:02:41
Individuals will be recognized for up to 2 min, and are asked to take their name and organizational affiliation at the top of their statements.

[Emma P - Manatt Events] 13:02:47
Participants are encouraged to use the comment box to ensure all feedback is captured or email comments to Cdi. l.

[Emma P - Manatt Events] 13:02:54
At Chhs dot com and Now and we'll hand it to John Honeyon.

[John Ohanian] 13:02:59
Thank you, Emma Mario. Good morning, everyone. Thank you for joining us.

[John Ohanian] 13:03:04
Apologies to my colleagues for not being there in person under the weather today.

[John Ohanian] 13:03:10
But we're gonna get through this and it's really important so i'm glad that we're able to meet.

[John Ohanian] 13:03:14
We are. This is our second meeting of the call.

[John Ohanian] 13:03:19
Hhs data exchange framework implementation advisory committee during our time together we're gonna be covering touching on several implementation priorities.

[John Ohanian] 13:03:28
And programs we're gonna start with a quick roll call though.

[John Ohanian] 13:03:30
So if I can just have you announce yourself if I read your name, that'd be great beginning with Norland aspirin.

[John Ohanian] 13:03:37
Good morning!

[John Ohanian] 13:03:43
Okay, I know, Andrew Byman is not Able to join us today, so i'll go to Joe Diaz.

[John Ohanian] 13:03:51
Good morning David Ford

[IAC] 13:03:56
David said. He is coming, but he might be a few minutes late.

[John Ohanian] 13:04:02
Okay, is aaron there morning, right morning, Laurie: Yeah.
[John Ohanian] 13:04:10
Morning.

[John Ohanian] 13:04:17
No, Laurie. Okay, We’re gonna go to Cameron Kaiser.

[Cameron Kaiser] 13:04:20
Good morning morning Troy. Kg: Good morning, morning, and your keeper.

[IAC] 13:04:30

[IAC] 13:04:39
Any good things awesome. Good morning, morning morning. here, Diana Colin Good morning, Amy Miller.

[Amie Miller] 13:04:52
Present. Oh, good morning! good morning! hi! Jonathan Russell

[Cary Sanders] 13:05:02
Okay. Carrie Sanders here virtually morning Kathy Senator Lee Mcdonald

[Ryan Sommers] 13:05:17
No Ryan Stewart Ryan stewart's out today.

[Ryan Sommers] 13:05:20
This is Ryan Summers attending on his behalf.

[John Ohanian] 13:05:23
Okay, Ryan, for Ryan sounds like if it's feel it, too.

[IAC] 13:05:27
Morning, John. Thank you very much. Thank you very much to everyone.

[John Ohanian] 13:05:33
Excellent. so I'd like to begin today's meeting with an exercise to reinforce our vision for data exchange in California, which is that every California and the health and human service providers and organizations that care for

[John Ohanian] 13:05:45
them will have timely and secure access to usable information that is needed to address their health and social needs, and enable the effective and equitable delivery of services to improve their lives and well-being, and as we continue our work together.

[John Ohanian] 13:06:00
I wanna make sure that we're centered on the real world impacts that have data exchange on individuals in California.
And That's why I'm thrilled today? to introduce John Vale, who's the chief information officer?

The health plan of San Joaquin to share a story about how data exchange is making a difference.

Brian. Thanks for joining us. Thank you, John. Oh, good morning!

Thank you for this opportunity to contribute my thoughts on the importance of an H.E.

For healthcare. My name is Sharon Bill. I have a PHD.

In computer science and have been a health plan cio for 20 years, including most recently 11 years at the health plan of Samuel Keen. For the last decade I've been involved with the development and management of the Samuel Kane community. H.

E, and for which I am currently the board chair, as Jc.

H. E. as a 3 county Hio leveraging the manifest medics.

Hiv platform. When we started on our Hiv journey we were naive enough to believe that if we built it they would come.

But there are devils in all the details, and the creation of a safe and meaningful data exchange among health care entities as an inherently complex.

But were the objective in general, demographic data, contact, information, clinical and claims, data from various sources can be aggregated in the Hiv along with the social determinants of health and health equity data allowing a complete picture of the member or patient, that assistant improved and timely outreach. Earlier in the pandemic Hpsj.

Partnered with manifest medics to help expedite a program to identify our vulnerable, unvaccinated medical members.
[Cheron Vail] 13:07:30
Working together, we were able to quickly put an outreach program in place to assist people to obtain their vaccinations.

[Cheron Vail] 13:07:36
This was vital for managing the spread of Covid 19 and 2 of the most under vaccinated counties in the State.

[Cheron Vail] 13:07:45
The importance of an Hiv. for advancing healthcare quality cannot be overstated. Currently at Hbs J. We're faced with the challenge of coordinating follow-up care for members within 30 days of visiting an

[Cheron Vail] 13:07:56
er for behavioral health or substance abuse issue claims.

[Cheron Vail] 13:07:59
Data is not timely enough to coordinate outreach that will have an impact.

[Cheron Vail] 13:08:03
The Hiv receives data in near real time from clinical settings, including hospital Eds data and alerts of such events could be sent and relevant data could be subsequently and immediately accessed to begin the follow-up with

[Cheron Vail] 13:08:18
the member or patient without this capability for accessing timely information through an Hiv.

[Cheron Vail] 13:08:24
A vulnerable Californian may not get life saving attention in time.

That that concludes my remarks. Thank you very much, John, for this opportunity to address the committee today. Thank you very much.

[John Ohanian] 13:08:35
Thanks for thanks for that, and we look to all of you as well as you have perspectives from the field.

[John Ohanian] 13:08:43
Please reach out and let me know and we'd love to spotlight.

[John Ohanian] 13:08:45
Some of your stories here. as Well, so let's get onto our meeting objectives.

[John Ohanian] 13:08:50
We're gonna jump right in web timing wise we have a lot to cover.
[John Ohanian] 13:09:02
This work is collective work that has been our approach this whole time, and it continues to we continue to shape it that way as well.

[John Ohanian] 13:09:07
So we'll be soliciting feedback from all of you on the monitoring and auditing auditing policies and procedures and provide an update on the information blocking Pmp development and

it change the did the essay language and elevate information on on the process for signing the Dsa.

So you'll hear all about that we'll then move into some Q.

H Io input and guidance from all of you and share some some of our guiding principles and program structure thus far.

[John Ohanian] 13:09:40
We're then gonna discuss the findings from the data exchange framework.

[John Ohanian] 13:09:44
Grant program listing sessions there's been a lot happening on that end.

[John Ohanian] 13:09:49
I know a number of you are participating in that i've been participating in just great feedback from the field as well as soliciting feedback on the criteria of a qh io and technical assistance

grants. and then we're gonna land into the get soliciting feedback on next steps for the components of the strategy for digital identity.

[John Ohanian] 13:10:07
So Re will take us through that. So we can go to the next slide, as we kind of continue marching towards our January 30, first, 2,023 date, when health and even service entities will be executing the

[John Ohanian] 13:10:19
Dsa. I wanted to call your attention to couple of the implementation milestones and the green boxes which we'll be discussing in more detail today, so you could see those items there.

[John Ohanian] 13:10:32
And we go to the next slide to ensure everyone has a sense of of sorry about that.
Yeah, that's right. Thank you that is everyone has a sense of where we're going, and and what we hope to accomplish during our time we put together our meeting talk at roadmap.

For you. So, as you can see, we plan to continue the voting portions of our upcoming meetings to each of the data exchange framework implementation areas, we've been discussing though we spend more time on certain topics. given a great you know, depending on the meeting.

We try to best align with our implementation milestones and deadlines, and help us walk through that.

So with that I’d like to hand it over to Courtney to take us into our data, sharing agreement Pmps and Courtney.

Thank you for joining us today. Thanks, John good morning everyone I’m working handsome and the Assistant Chief Council for the Center for data sets of innovation.

So for the policies and procedures, as you all know, in July, 22, how late to just release the first set of 8 pmp.

Hi He's described signature requirements under the Dsa, and we hope that you are all familiar with them.

At this point this slide has a quick description for each of these Pmps.

There address the following topics: amendment of Dsa. Development

The modification of Pmps reach notification permitted, required and prohibited purposes.

Requirement, exchange, health and social services, information, privacy and security, State birds, individual access services and data elements to be exchanged.
The Vulcan views are available on the call.

[IAC] 13:12:22
Hsdxf website. We highly encourage folks. We plan to assign the Dsa.

[IAC] 13:12:26
To review the pants in addition to the dsa if you haven't done so already.

[IAC] 13:12:36
Probably to Jess, is developing 5 additional andies to support Df.

[IAC] 13:12:38
That implementation. This slide shows the pnp is that been prioritized for development?

[IAC] 13:12:43
Which address monitoring and auditing information. Walking require transaction patterns and technical requirements for exchange, real time, data exchange and the qualified hio designation. process.

[IAC] 13:12:58
Please note that we previously prepared the required transaction patterns and technical requirements for exchange pnp is 2 distinct policies and procedures.

As we began development we built it, made sense to combine the 2.

Given the clear links between the transaction fighters that signatories will be supporting, and the technical requirements or specifications that would be associated with each of the transaction patterns.

Next slide, perfect

But today we will focus on reviewing a draft of the monitoring and auditing Pmp.

You also had a great discussion around the Pink this pmp at the last, at last, following today's discussion, and any additional edits as appropriate Kelly to just anticipate releasing the document for public

comment. In mid November public comment will be open for 2 weeks.

Probably Hjs. will then review all comments received, and we hope to finalize the Pmp.
And release it, and they separate least note that we're also working to develop for other pmmps, as part of the second set we anticipate bringing drafts of these p andps for discussion at the December and January meetings of the TsA. Pn.

Sub committee and the Iac so we hope you're able to attend, and both of those meetings and now I will turn it over to Helen.

Right. Thanks, Courtney. So I wanted to start with an update on the information block and Pmp:

We had done a draft of that pmp which was discussed by the Dsa.

Ap. subcommittee at its meeting on October 20, fifth.

And they gave us. If you could give us a significant amount of feedback and based on that feedback, we're planning to revise the Pmp.

To fully focus on the exceptions that set forth circumstance under which a practice by a participant that would not be considered information blocking, and by information blocking we mean fill it failing to exchange information as required by the Dsa and the Pmps and just sort of as as background The guidance that we've been trying to follow throughout this entire Dsa Pmp development process has been not to reinvent the wheel to leverage existing State and Federal regulations, and laws whenever possible, in order to lessen the burden on on participants.

I'm. so consistent with that approach the draft of the information blocking Pmp.

That was brought to the Pmf. Subcommittee meeting last week.
Check the information blocking rules, the Federal information blocking rules very closely.

[Helen Pfister] 13:15:41
But there were concerns that, among other things, the Federal rules were too complex and not necessarily always appropriate.

[Helen Pfister] 13:15:51
In the California context, especially when it comes to social service organizations and other smaller entities that aren’t required to comply with the Federal rules.

[Helen Pfister] 13:16:01
And so, as a result, what we're planning on doing is to simplify the information blocking Pmp considerably.

[Helen Pfister] 13:16:10
So that it’s appropriate in the context of the California that exchange framework.

[Helen Pfister] 13:16:14
We also got feedback about making sure that we keep in mind the unique considerations that apply to social services data.

[Helen Pfister] 13:16:22
Since, unlike the Federal Information blocking statute regulations.

[Helen Pfister] 13:16:27
The California that exchange requirements but apply to social service organizations.

[Helen Pfister] 13:16:32
As well. for social service information as well as to healthcare information.

[Helen Pfister] 13:16:36
So we will be taking that into account as well as we revise the information.

[Helen Pfister] 13:16:41
Blocking Pmp and so we’ve begun making these revisions.

[Helen Pfister] 13:16:47
We plan to bring our vise draft to the Dsa. Apmp.

[Helen Pfister] 13:16:52
Subcommittee meeting in December fifteenth, and then to the Ic.

[IAC] 13:16:55
After that, and we'll look forward to all of your feedback. once we get to that point, so let me stop there and see if there's any questions about the status of this this pp Did you have questions.
Related to them. I actually had a question related to both of these. both of Courtney presented in this one.

So that just proceed. Okay, for the tension of comments on the Amp.

As was sent to us. Oh, last week, did you want comments back on that.

Yes, we'll be going over that pp later in the meeting.

Okay, alright, And then, did you want comments now on the information blocking?

Or is that for the next meeting? I mean I think if you have thought we would be happy to hear I mean again the we're making significant revisions.

So I'm not just any point in commenting on the original draft.

If you haven't have seen that but if You've come comments on the framework. it just laid out on this slide. i'm happy to very, very happy to to hear.

Listen, Hi, appreciate that you are not reinvating the wheel.

I know that you probably recognize the wheels not yet even fully advantage.

Very much right? Yeah. And so that would make your test super difficult.

And I I understand your main task is to try to adapt it to entities which are not under or subject to the information.

Blacking through the Federal level. that is that correct? Yeah.

There's 2 pieces. of it one is that in California It's going to apply beyond the data that's covered by the Federal rule.
So That's one consideration. taken to place and in California it's going to apply to entities that aren't covered by the Federal rules. That's what those are the 2 considerations that we're working with and trying to figure out how

[IAC] 13:18:52
to how to make it work. i'm just thinking in terms of how it hits users at the front line level.

[IAC] 13:19:01
It might be better to I don't know perhaps rebranded slightly differently.

[IAC] 13:19:08
Because information blocking itself is its own thing at the Federal level like Hipaa.

[IAC] 13:19:14
And what you're talking about. is specific to the dxf and what your expectations are on sharing information, I mean, and how you all adapt to California.

[IAC] 13:19:27
And so it's just my cost confusion if they think they're subject to info blocking when they're not so that that's my v one comment i'll make just for education and anxiety raising or prevention considerations, if you call it in full blocking people might actually think it's in full block, and I know it is in full blocking.

[Helen Pfister] 13:19:51
But you know the Federal. Oh, I do. Enforced in full block

[Helen Pfister] 13:20:05
Okay, and I think I see another hand as you, David Force hand raised

[David Ford] 13:20:12
Yeah, hi! everyone i'm so I couldn't be there in person today.

[IAC] 13:20:16
But if anyone on the call or skiers i'm happy to report from truck, either about a foot of snow on the ground this morning and more supposed to fall today, So I I I wanted to to come in quickly on on both

[David Ford] 13:20:31
of these policies and procedures as far as information blocking somewhat, building off of the comment that was just made.

[David Ford] 13:20:40
So speaking, for for physicians who are subject to the Federal information blocking rule.
I appreciate the effort here to hue to the Federal information blocking rules that's both helpful from an admistrative standpoint, and, we believe, actually strongly encouraged by the statute undergraduating this work.

Unfortunately, the way that we have to look at this is not just as what it says today. Right. So right now, this policy and procedure could hue to the Federal information blocking rule, and then it gets in the hand of a yet to be named, and yet to be established. Governance entity. who could, By the way, this is set up right now, could literally change it at any time.

So I think that's a challenge when we look at all such things. That we don't know what it could become in the future as far as the monitoring, and auditing policies and procedure and I and i'm sorry I was a little late getting onto the call so I don't know if you've discussed this yet, but the the piece of that policy and procedure that I think probably jumped out to a lot of us in the provider world was the ability of the governance entity to come on site and to ask for proof that it is complying with the data exchange framework.

So, as again I apologize. If someone already spoke this by some of when if anyone could speak to how you expect that to work, because that seems pretty onerous.

When I read it on the page if we could put a pin in that we haven't gotten that policy yet. and then let's get back. focus on that policy, just move that forward to when you do talk about it.

Although any other comments questions come in some reservations on information blocking, I think.
Can I just recognize, David, David, Your comment about this rule?

And then perspective, future, or making amendments to the policy, is your concern.

That that the Board would be able to. You know, laterally change this policy.

Once that board is established, I just wanna make sure I understand something

Yeah, and it goes back to a conversation we had and I and i'm sorry I don't remember if it was this version of the advisory committee, or the previous version of the advisory committee about the process by which

this future entity. once it's established can change the day do data sharing well, not the data sharing room, but the policies and procedures.

And it's the way that it's written right now there isn't even some sort of cadence to how they would do that like there could there be an annual update or something that effect so it means that

we have to look at this and say, Okay, Well, we might be okay with what this says, right now. but the minute it's in the hands of this this governance entity.

It could be changed. And then it could deviate from the Federal rule. So that's the part that I think it's challenging when we look at this.

Yeah, I think, just to be clear. there is a detailed process for changing the pmfs that requires solicitation of comments. notice.

I don't have any front of me at the moment but it's not, you know there is.

We definitely built in deliberately the feedback process, and a a a pretty lengthy timeframe for any changes.
So it's not like the government sent to could come in and sort of unilaterally, without notice, without specific comments, make any changes to any of the pmps, including the information blocking Pmp or the monitoring auditing.

[Helen Pfister] 13:24:28
pmp.

[Helen Pfister] 13:24:32
And the the policy, the Pmp. on changing the Pmp.

[Helen Pfister] 13:24:36
Is actually available. on the web on the web so we can pick up that if you, if you'd like, But then we definitely were very, very, very mindful of that, and wanted to make sure there was a deliberate process to any any

[IAC] 13:24:44
potential changes to these pmps and I think we're going to discuss.

[IAC] 13:24:52
When it comes to this standards. about what cadence we might consider for roof. Thank you.

[IAC] 13:24:58
Bye, bye, probably not relevant to this.

[IAC] 13:25:01
But I I think I think, David, that hopefully will 8 up.

[IAC] 13:25:07
Okay, your concerns, but at least addresses that process by which changes

[IAC] 13:25:21
I would just like the community to know that for this particular policy.

It's sort of like hipaa it requires training of staff, and it took us we personally an entire year to get our staff first to get a curriculum together, and then to push it out at staff and so I understand there's

[IAC] 13:25:44
a process for the policy change itself. i'm just saying that this one also impacts how you have to train your staff so they could comply with. Yeah.

[IAC] 13:25:54
And so this is like a bigger lift than many of the other can.

[Cary Sanders] 13:26:00
As far as impact. Thank you, Gary. Hi Thanks. I just I I think I just had a clarifying question.

[Cary Sanders] 13:26:13
I wanna make sure I understand so essentially if a social, so so so part of the change really.

[Cary Sanders] 13:26:23
You were describing Helen is that if it's a social service organization.

[Cary Sanders] 13:26:29
They may actually exchange information with the qualified h i o, and therefore

[Cary Sanders] 13:26:38
The the differences that they would just a a test that they are where they have an agreement that they've been working with the with the Hiv, or would they also you know, need to provide they're you know you

[Cary Sanders] 13:26:53
know books, records, etc., pertaining to the the records.

[Cary Sanders] 13:26:58
I I think I just wanna make sure i'm understanding what this is setting out.

[Helen Pfister] 13:27:02
Okay. Well, before I answer that, or are there any more comments on the information blocking Pmp: and the process there before we move on to monitoring audiences, pick your referring to monitoring auditing here.

[Helen Pfister] 13:27:17
As well

[IAC] 13:27:19
Anything else. Okay? So that's But let's move on to monitoring audio and kerry, we can talk about your comment and and and David as well, So so initially, Obviously, the point of this policy is to set

[Helen Pfister] 13:27:32
forth the processes that the governance, governance, and people use to verify the participants, comply with their obligations and the Dsa.

[Helen Pfister] 13:27:40
And so, as a sort of like governing principle, we start with at the governance entity will engage in any monitor activities that it means necessary to make sure that the participants who are supposed to execute the Dsi

[Helen Pfister] 13:27:52
have done so, and then to make sure they're compliance with their obligations to the 
Dsa.

[Helen Pfister] 13:27:57
And all the pmps, including specifically the ones listed on this slide.

[Helen Pfister] 13:28:02
Next slide, please. Nope: Alright, Next month. Okay. It also.

[Helen Pfister] 13:28:11
The policy is drafted also provides for the governance entity to set up a complaint 
process that will allow anybody to follow a complaint with the government's entity.

[Helen Pfister] 13:28:19
If a participant isn't complying with its obligations under dsa and the ideas or the policy 
provides that the governance entertain will make publicly available information about 
how such complaints will be submitted

[Helen Pfister] 13:28:31
and what the what the entities process will be for investigating those complaints, and 
then consistent with the Dsa

[Helen Pfister] 13:28:41
Any information, any confidential information. the governance entity degree receives 
as part of its monitoring and auditing activities will be kept confidential. So let's just 
stop there for the moment before we move on to the next But I think the next

[Helen Pfister] 13:28:53
slide to the ones with touch on the issues that that Carry and and David have have begun to comment on

[Helen Pfister] 13:29:07
Okay, Next slide.

[Helen Pfister] 13:29:13
Okay. So the policy of monitoring audio monitoring, auditing Pmp.

[Helen Pfister] 13:29:18
Also sets for that allegations by participants, and the first one here carries the one I 
think you were referring to, which is requiring that participants with but ran advanced 
written notice and during regular business hours have to make their

[Helen Pfister] 13:29:31
internal practices, books, and records relaying to compliance with thesite available to 
the governance entity.

[Helen Pfister] 13:29:36
So. let me stop there for comments because it's obviously better up.
There are. There are thoughts on that go ahead and start hi!

Hey, pat it ironic that books is on there. But anyway, I would think it would be more information which could be queried or sent remotely rather than in person.

Especially transaction patterns. It seems like they would be available at the interface level.

From whoever entity you are dealing with so that was by car.

That's similar to david's comment about the onsite That's my concerns about needing to be on site. this.

I mean that means you have to cancel your whole day of operations.

And yeah, I mean that's usually and whenever j co or anybody comes by.

It's kind of that dynamic whereas I think the intent is, you would like everybody actually they'd be high performing And this is, you know, oversight of that.

I think it's also a little bit too late if it gets to that point where you need to come on site. You know it's kind of like the last stage.

So I think it's kind of too much and too little both

Is there, Helen? Are you or others? a team able to speak to that on site language, and whether it comes from Federal any kind of Federal requirement round auditing or oversight I mean it's pretty standard language.

I think books and records tends to encompass, not just physical books and records.

But you know sort of electronic books and records as well.
I think that the onsite piece is a fair point, so that we should take into consideration we have flexibility when it comes to this language.

[IAC] 13:31:46
Thank you by that. Yeah. Lenny coins with Lhpc: So I think, just overall with this Pnp: as you know, representing plans that have to split any Pm: to the Hcs super high

[IAC] 13:32:05
level. There needs to be much more detail. I mean, I think, the verification that the Dsa.

Has been executed and annual at stations seems fairly straightforward.

[IAC] 13:32:19
But I think then, going to this issue of the actual auditing whether it's on site or remote, you know I think regardless

[IAC] 13:32:26
There needs to be much more definition To who will you actually be auditing?

[IAC] 13:32:30
Is this gonna be you know, based on entities about which there's been complaints?

[IAC] 13:32:35
What's the scope of the audit what's the audit tool.

[IAC] 13:32:40
And you know I realize the audit tool itself may not be in the Pmp.

[IAC] 13:32:43
But I think all of those details around process should be and then I don't know if you've touched on complaints yet, but I think they also need to be more detail actually in their pmp around what the complaint

[IAC] 13:32:56
process is, and also for what the process will be to actually notify the entity.

[IAC] 13:33:01
Yeah, you know for whom the complaints filed against.

[IAC] 13:33:05
Also, for example, what would be anonymity to the complaint, or will that be shared?

[IAC] 13:33:11
With the entity that has assigned the complaint.

[IAC] 13:33:15
So those are just some of the questions and I’ll submit feedback and writing. But I think all of this really needs to be blushed out.

[IAC] 13:33:21
Actually in this case, more detail around that process what you’re recommending is more teal.

[IAC] 13:33:30
Specificity is so. So for the audit the process go oniting entity.

[IAC] 13:33:35
The complaint process. notification. Yeah, and also things like, you know, notification.

[IAC] 13:33:43
Time frames like how long before an audit occurs, believe, participant be notified, and I think it would be at least 90 days would think so.

[IAC] 13:33:51
Just all of those sticky, tacky things that are

[IAC] 13:34:00
Yeah, just go ahead. When I read these the annual attestation really stuck out to me that seemed like in administrative, unnecessary, administrative step.

[IAC] 13:34:14
I was kinda like, What else has an annual attestation should be up so like you sign the Dsa.

[IAC] 13:34:21
You’re participating. I don’t know that we need annual attestation.

[Helen Pfister] 13:34:28
So I definitely to pause on that. I think my response to that is a good question.

[Helen Pfister] 13:34:34
What else requires an annual specification? But I guess my question back is like, what else involves a Dsa.

[Helen Pfister] 13:34:40
Signed by literally thousands of entities in the state and it’s. You know we’re trying to bear in mind that the governance entity has limited time and scope and staff, and so on, and so forth, and realistically

[Helen Pfister] 13:34:54
Is not going to be able to do extensive audits.

[IAC] 13:35:00
And so an annual attestation, coupled with a complaint process, is a way of trying to exercise and oversight Authority, without expecting more than is reasonable of the governance entertain my thought seems

[IAC] 13:35:20
to be more like focusing on whether it's exchange is happening, or if there's complaints coming in, and that's where you want.

[IAC] 13:35:27
But I don't know kind of a gallon or the legal issue that there's concerns there.

[Helen Pfister] 13:35:37
Okay, other comments. Yeah, we'll take that back for you some mission, David, I think you're up next, Please

[David Ford] 13:35:48
Yeah. So partly I wanted to to to tag on to lineage's comments that it would be helpful if there were some laid out timelines in here about sensor.

[David Ford] 13:36:02
I mean we I appreciate that there's an advanced written notice.

[David Ford] 13:36:07
But you know how long in advance does the provider get a written notice?

[David Ford] 13:36:11
How long do they have to prepare a response? those sorts of things could be really helpful in making this a lot more workable.

[David Ford] 13:36:22
The other thing that could be helpful here when the information blocking rule took effect to Federal Government was willing to stipulate that for the first year their enforcement mechanism would be a warning letter as the market

[David Ford] 13:36:37
adjusted to the information blocking rule and I was thinking maybe we could do something like that to get so it wasn't it didn't feel quite so heavy-handed if we just said you had a process where

[David Ford] 13:36:46
the governance entity could just so let folks know, especially as the technical assistance the outreach and education is happening.

[David Ford] 13:36:53
That there would just be a process to just let folks know like hey?

[David Ford] 13:36:55
You're supposed to be doing this you're probably not sureking your your responsibility
here.

[David Ford] 13:36:59
You may just not know what your responsibility is, could be a lot more collaborative

[IAC] 13:37:09
It makes a lot of sense. Thank you, David. I ask the clarifying question, David.

Hi! So the Tps don't take effect until january 2024 are you thinking one year after that?

[David Ford] 13:37:23
Or does that provide adequate notice? yeah, 2024 to 2025 for that cohort, and then a
2026 to 2,027 for the 2026

[IAC] 13:37:33
cohort. Okay, Thank you.

[IAC] 13:37:43
Elixir. Yeah, thanks, Jonah, and actually it's kind of funny.

There is a common sense for question in the public domain.

[IAC] 13:37:53
That essentially question that I was gonna see, which is that those participants that are
going to be relying on a call by Hjo to meet their clients requirements for the Dxf. it
makes sense for the Qao to be able

[IAC] 13:38:11
to a test on the app, especially of those smaller providers who you may face some of
the admin burden that the just go ahead and test for the moment we have them.

[IAC] 13:38:24
That would have sort of the answer actually increasing the attack of this.

[IAC] 13:38:30
Excuse me to meet you getting change Paris.

[IAC] 13:38:33
So this would the Qh. or so I think you're suggesting it should should there part of the
qh Ao.

[IAC] 13:38:40
I would assume, Paul mine process there be a a an allowance for them to to test on
behalf of all of their signatories that they're an active participant where they comply
with Require yes, or at least those that
[IAC] 13:38:55
are interested in leveraging about because there will be some maybe Aren't, providing fully, or even in terms, except the clients.

[IAC] 13:39:06
I can imagine marge medical systems that are part of several visual hiles, but also change data than it do national network.

And the quick that has been there more. but place for the long tail of smaller solar device under visa providers.

I'll let the this type of process for them.

Okay, Yeah, it's suggesting alright, hi yeah I when I saw the where it's monitoring and auditing to me.

Monitoring means performance, monitoring and I don't see any of those things in here which would be adam minimum, you know, down times business continuity access things which I think would be helpful to whoever's going to have

[IAC] 13:40:04
oversight they have as a dashboard, so they could know where the hot spots are.

[IAC] 13:40:13
Otherwise you have an impossible task. So that was one thing the other thing.

[IAC] 13:40:27
That you know if if you had a dashboard or whoever's going to monitor this that would call out certain metrics.

[IAC] 13:40:36
I think you're talking about transaction patterns and what I'm is imagining, and I would like verification.

[IAC] 13:40:43
Are you thinking of like one way transaction patterns where entity only receives things that doesn't ever you have things back?

[IAC] 13:40:52
They're a consumer of the information. but never a whatever you want to call it donator of information.

[IAC] 13:41:02
That's what I thought you meant by transaction pattern but i'm not clear on that
I don't know if my question is clear Is It for transaction patterns.

What are you looking for in terms of transaction patterns?

What is the hey, Sarin? There so we'll we'll be talking.

So we have one meeting with the Dsa subcommittee.

Talk about transaction patterns, some plan on meeting with them a lot more.

Our next coming meeting is the buffer bringing that here.

But in general the idea the patterns are how data moves to meet a business need.

So an example would be a brilliant response i'm looking for data.

I ask somebody for it and get it back. another would be notification.

Somebody was admitted into the Ed people that need to know should be notified that so those are the types of patterns that we're talking.

There will be a pp that talks about the requirements of different working organizations. Different types of organizations will have to support transaction patterns.

Transaction that are in technical requirements team We'll talk about it.

Or next, I see, and those are the specifics, that this policy will oversee if they're participating in and if they're required to respond to queries, and they never do God and that would be the type

of monitoring that that might trigger a complaint.
Got it. I continually ask Hospital X for data on Rib Conference, and they never have a response.

Bye. Okay, I understand. And then, when they can't do that, some of it, hey? might not even be aware of, and the technical assistance or feedback, some of them, maybe they are aware of just are not doing it and and and yes, you

[IAC] 13:43:01
can even imagine both of those you would hope it the organizations or monitoring their own technology systems and go, you know our.

[IAC] 13:43:10
But, as you say, some picture not aware of those errors, and yes, that that it may be something that's very simple to correct because of a technical.

[IAC] 13:43:19
Now function might be a lack of understanding about what permits are, or just a viper violation report.

[IAC] 13:43:32
Excellent.

[IAC] 13:43:36
Alright, let's do, Andrew, and then and I think we should onto the next topic appreciate it.

[IAC] 13:43:44
Thank you, Andrew Keith. from Lucille to California.

[IAC] 13:43:47
Certainly a line with some of the questions like a raised and like comments dovetail.

I think nicely with what Mr. Sue, from manifest medics raised.

[IAC] 13:43:58
When you think about the vastness of the participants we're talking tens of thousands of decisions, or or maybe it gets consolidated.

Hundreds of hospitals, and then all of the Social Service universe.

[IAC] 13:44:16
This is. This is the daunting task, and I think monitoring and auditing is a important function.

[IAC] 13:44:22
There are dependencies as a health plan, frankly, as any other actor in it, on information can see for others.

[IAC] 13:44:29
So remedy times or is is interesting and I don't know if this is a place for it here.

[IAC] 13:44:35
But we've got members who might be dependent upon getting information What's it?

[IAC] 13:44:40
How does it? How does this entity governance entity? have capacity and sort of real time to address issues?

[IAC] 13:44:48
So there's that the other. is so many of these things that become mandates on providers end up being rolled into plan monitoring functions like in this context, I think we appreciate the fact that

[IAC] 13:45:01
it's assigned to the participant that being said it doesn't belong the reliability of the health plan for their networks and and those requirements so there's a tension there But our ability

[IAC] 13:45:15
to produce information for our members and for providers.

[IAC] 13:45:19
Without having sort of certainty of a process to get compliance.

[IAC] 13:45:27
So I The The details I think that Linea was suggesting will help fill that out and look forward to that second draft.

[IAC] 13:45:35
Thank you, i'm hearing a lot of advocacy for having more specificities and timelines around responses and turnarounds for like

[IAC] 13:45:49
I'll be brief llena again. but just going back to maybe some of the comments I made, and and those that David made Andrew as well in terms of an audit selection. Can I can you confirm that you

[IAC] 13:46:01
are, in fact, thinking about this being focused on entities. where there's been complaints filed Okay, Okay, cause that's not even specified in the Pmp. and and I It's so.

I don't think it should be a zoom right?

[IAC] 13:46:15
Exactly rather than a random sample of out of the thousands of participants.

You know, doing and then just a small technical comment, the one that I noticed I was looking through the Pnp.

[IAC] 13:46:29
And porting back to your comments around the effective data policy.

The draft policy says it's effective 23 not 2024.

[Helen Pfister] 13:46:36
So just put this policy in all the others. obviously an important detail in terms of folks executing Well, it's expecting 2,023, because that's been full of the sign of the essay so part

[Helen Pfister] 13:46:47
of the monitoring is making sure most of signed.

[Helen Pfister] 13:46:49
It has to be effective, as in 2,023

Okay, the compliance is not required to 2020, correct, and nothing with policy changes that

[IAC] 13:47:06
Yeah. Then you set it down set about auditing, not being a random process, but really as a follow up to a complaint or an issue that has been identified.

[Helen Pfister] 13:47:20
Yes, I mean that's cdli's position.

So yeah, so we can definitely change the policy. remember that.

[IAC] 13:47:27
So well. yeah, we'll consider working. so I think we've got Ali and I know map Ajay had a while one and then people but Thanks.

So I just want to echo what that Alexandra actually said about the the role of Hivosa that they can play in this monitoring and auditing process.
I think, for those entities that are connected to qa ios

It would be appropriate for Q. A. try to provide those type of information and and folks that are entities that are using their own system, or a third party vendors.

I guess you know that could be managing by exception.

I think from from Ccdi. I perspective, one of the things that I think we need to consider in this process of auditing.

Is that, when the information is sent out by a help system, where provider? where is that?

And you know, where is that information gonna go? Is it gonna reach the the intended provider trap?

So example. if i'm admitted at the hospital is that information gonna get to my pckey?

Yeah, And I think that needs to be that's something that needs to be considered in the audio team because health systems I just can send information out to a vendor.

But is it actually reaching the the the to take action or intervention?

But he's looking for me

[IAC] 13:49:21
Ali alright. are you suggesting that There are certain policies, and some of it may not.

[IAC] 13:49:30
But, for example, like on the 18 notifications that this is the expectation is that these organizations are notified when there's a district that monitoring auditing this process, to identify whether those who are supposed to

alerted are all for the compliance process that that's right?

Yeah, and that's basically a cms rule for notifying
The patients primary good provided. Okay, Okay, Thank you.

So I think we probably need to move on for time reasons.

But this is without yeah. What? Sorry we have one more.

Just Matt that had a question and i'll just promise. I'll make it really quick.

I was thinking about the annual out of station, and and really encourage us to think about her administrative simplicity, but also just think that there is some value in my mind of their obligations.

Responsibilities and value of the work just in an annual way, or in a regular way.

So that, you know, they could be free participants. Hi!

Promise that was the thinking behind it. So, anyway. So this is not your last chance to weigh in.

There is public public comment process, which is a great segue.

We need to turn this over to Courtney to speak about how that is all going to to work.

So thank you all for your thoughts very helpful and we'll definitely.

Take them onto consideration, Courtney. Excellent! and thank you all for your comments.

So as we were talking about how Hhs will be releasing all the Pmps as they are developed in upcoming periods for public calls.

We anticipate that it will. we will release the first Vmp.
On monitoring and auditing in November.

[IAC] 13:51:21
That may be a little. Let me fluctuate given the comments we've received so maybe mid to late November.

[IAC] 13:51:29
We will also be releasing a template in which we to provide our comments.

[IAC] 13:51:34
We highly encourage you to use those as they will make reviewing and reviewing comments much easier and make it easier for us to more information will be communicated to stakeholders and made available on the Dx website.

[IAC] 13:51:50
We highly encourage you to review these policies and and procedures and provide comments.

[IAC] 13:51:56
Your input is absolutely critical, And we want to get this great Thank you in advance for your time to tell

[IAC] 13:52:05
Thanks. Great. So for the update to the Dsa.

We are making a necessary change. very, very minor to the Dxx Vsa.

[IAC] 13:52:19
Recognize that the Dsa. is an agreement between the entities that will be exchanging data, and it works with the agreement, and it can be as such.

[IAC] 13:52:27
The Dsa. will be revised to remove Calhoun.

[IAC] 13:52:30
Specific changes showed in bread on the the slide.

[IAC] 13:52:36
These note that the calendar test departments may still sign the Dsa.

[IAC] 13:52:40
And exchange data with other public and private participants.

[IAC] 13:52:43
In accordance with the agreement. I want to emphasize that this change does not reflect, or it's not diminish or change.
Is's role in the Dx but rather reflects how Hhs is responsibility to oversee an insurance successful notation an updated Dsa. will be posted to the college adjust Dx website after Today's meeting, and if there are no questions or comments on it.

I will turn it over to Brim to discuss sign in the Dsa.

Thanks. Corpse and we can make this relatively brief but we're really excited about development of assigning portal that allows people to actually sign the dsa just as a reminder or mandatory categories are required to sign the Dsa. by January thirty-first, 23 and that includes a large group of organizations. We've been creating a self service portal so the folks can queue up signing the Dsa electronic. But you buy a restaurant signature and the Dsa. That will be posted in that portal is the one that was just speaking, though, what that means is that people organizations that are required to sign the Dsa. Should be thinking now about how to go about that first of all, identifying who within the organization is possible to sign the Dsa. Or the organization of the mechanism allows an organization to sign on behalf of support organization. So, for instance, if you're a health system that operates 3 hospitals, a single single signature can be applied to all 3 of those hospitals, if that individual is authorized to sign for them, So that's part of the internal thought process that people need to be going through now is to identify who can sign on behalf organizations or specific entities.
And then collecting the information necessary or the portal.

[IAC] 13:54:51
So, for example, the names do organizations license numbers to help us identify those organizations.

[IAC] 13:54:58
The type of organization that is, being identified in the Dsa.

Contact information. and, additionally, the contact information for the individual is actually so signing.

[IAC] 13:55:10
How our intent is to announce availability the portal broadly later this month.

However, we're interested in organizations that are interested in being early adopters, early assigners the Dsa.

To contact us now, and we would help organizations through that process next week.

Or at least as early as next week and anybody That's interested in that, please either reach out to me, or probably more appropriately, drop an email to the Cdi at Chesca Ca: Dot email, address.

And but that really means an organization should be reviewing the Dsa.

[IAC] 13:55:54
Now. that means that if they need to do legal review, internally make sure that people are going through that thesa after today, will be posted in its final form and we've got some questions and so just to

[IAC] 13:56:11
be clear. This is not an invitation to negotiate terms on the Dsa.

[IAC] 13:56:15
Everybody will be signing the Dsa as a stand.

[IAC] 13:56:19
And then the p andps that we're talking about now, as well as the priorities, are referenced in the Dsa.

[IAC] 13:56:28
And become part of that signing process as well. So people should be also reviewing the Pmps, so that they understand their meeting and participating in the process of developing those team pieces over the next couple of months are There

[IAC] 13:56:45
any questions about that process, David. Yes.

[David Ford] 13:56:57
Hi again. So I think as I've done sort of some of the initial education of Cma members.

[David Ford] 13:57:04
I've gotten more questions about this actual process than anything else.

[David Ford] 13:57:08
And so I I understand that in a health system or an employed model medical group, the entity signs and not the individual physician. I'm.

[David Ford] 13:57:21
Wondering how that works in like an Ipa structure.

[David Ford] 13:57:24
And especially because we find that physicians may belong to more than one ipa and sometimes the Ipas have a shared electronic health records system.

[David Ford] 13:57:36
Sometimes they don't so just how in in those scenarios who signs Does the individual practice sign?

[David Ford] 13:57:44
Can the Ipa still sign if they're not employing physicians?

[IAC] 13:57:47
How does that all work? I I will start with the answer to that question.

[IAC] 13:57:52
Pick for the another could chime in i’d refer everybody to language.

[IAC] 13:57:57
Maybe 1 33 that identifies organizations that are required to sign.

[IAC] 13:58:01
They are organizations, not individuals. So at least part of the answer to your question.

[IAC] 13:58:06
David is an individual. Physicians are not expected to sign.

[IAC] 13:58:10
Organizations. and i've i've heard a few questions about May I operate in ehr etc.?
One of the things to bear in mind is that the Pnp.

On the data elements to be exchange calls out that organizations are required to exchange data that they maintain, which means they must have access to control over and the afford exchange that information.

And so organizations, for instance, that don't ban their own Ehr, perhaps don't control the data, and therefore, while they must be signatories to the Dsa.

Under the law may not be required to may be able to exchange that data through some other organization that actually manages Hr: it's a little bit of a a complicated I I it's hard to talk generally about the process

for each organization. But people really need to understand what their situation is whether they qualify as a mandatory signatory under av 133, and then what the data exchange requirements are under the piece piece and I know that that wasn't much of an answer for you David because it is a a complicated process for any given organizations. as far as who should sign on behalf of the ipas i'm apologize But i'm going to give an even bigger answer than Rem. it's really whoever is authorized to find the group.

So we would defer to the Ipa, for whoever they want to put forward that they believe off is authorized to buying the entire group.

So we don't want to dictate or mess with business processes.

So whoever signs on behalf of the group we will take as on essentially your word that you're able to find the group.

And I think you had a question. Yeah, couple of things if there's a recap to today's meeting, or is anybody able to include what you said about like. If you have an early sign an early adopter signer emailed Us.
That, Cdi. I like the abort about that. So some of us have a mental note right there in writing.

[IAC] 14:00:34
Is there information what exact information like this bullet of information about the individual signing there? Organization?

[IAC] 14:00:45
Their contact information what your actual structure data fields are that you're looking to collect, so that people can proactively be lining that up.

[IAC] 14:00:53
And I wonder if there is an organization type field. Covid vaccines.

[IAC] 14:00:59
We had a problem with that Really, General, you can log in and say, What type are you?

[IAC] 14:01:03
So now, when entities are going to care and saying how many vaccines did hospitals administer?

[IAC] 14:01:10
The data is not perfect because it's like Well, we collected It was kind of a free text field, So people put in clinics.

[IAC] 14:01:20
People put in provider, or so. So a couple of those things I I could try to list out the information, and I would leave something off, so we'll get a that information that that's a very good one.

[IAC] 14:01:36
That, you know, understanding that before you launch into the portals is is good, we're working on a set of instructions that would be posted on our website.

[IAC] 14:01:44
That would list out that information but we'll we'll get that out to to folks as well.

[IAC] 14:01:51
The to your question about types. Yes, that's a pig list based on Ab. 1 33.

[IAC] 14:01:57
So general cute care. hospitals physician organizations, medical groups, clinical labs.

[IAC] 14:02:06
The the it beers the language in 81, 33, as the types of organizations.

[IAC] 14:02:16
And and at this time a single other board or voluntary signatories.

[IAC] 14:02:24
I'll stop there, and if you have suggestions about how to deal with that, you know it's it's a conversation that we have internally about how to deal with, especially that other category that is called out I do want to

[IAC] 14:02:41
emphasize that we are trying to collect the minimum necessary So that way folks don't have to gather a ton of information.

[IAC] 14:02:49
I will flag up The one thing that you should have, Andy, in addition to kind of basic information is any kind of licensing number or one of the facilities.

[IAC] 14:03:00
And what is that that's one of the big red flags for me licensing number?

[IAC] 14:03:04
Is it an Mpi? Is it a building license like A.

[IAC] 14:03:08
Is it the thousands of doctors medical license number that's actually one of my like 40 concerns?

[IAC] 14:03:16
So it's the licensing number that's issued by your California rate later.

[IAC] 14:03:21
So your Cdpbh licensing number your

[IAC] 14:03:27
Are we doing Kla or California lab license number so very, very specific, And we'll give kind of that very specific language.

[IAC] 14:03:36
And then for entities that are not regulated don't have licensing numbers for just doing a simple Im

[IAC] 14:03:45
Okay, A question with the list of signers be made available those who are required to sign all those app signs.

[IAC] 14:03:58
So Oh, yes, Yeah. So we can help our clients and try to sign it 3 times so so there is intended to be on the C website.

[IAC] 14:04:08
A list of everyone who signed celebrating like these wonderful organizations.

And ultimately there may be a list of those who are supposed to sign and have it

3 questions. One is just to your confirmation of what might be very obvious.

But the compliance state is January 2024, even though the Signing dated January 2023, although for some entities it's 2026, correct Okay, the

second one is, and you may or may not want to answer this one.

What happens if entities don't sign again. and Then I could go to the third one, too, which is as somebody pointed out to us.

We have a clear license lab as well in the hospital as well as other things.

How can an organization that might be complex though how many people they're supposed to have son, so that's that's an excellent question, and I we're not going to tell an organization how to manage that we don't know the organizational

structure. we've authorized on go to to sign what we are asking is that if you have a single facility that falls into 2 different types for a hospital with a license lab then that would appear as 2 subordinate

organizations that that you would list out that way separately.

So that we could track both the hospital and it's compliance in the lab, and it's compliance.

But it is a it's why we're asking folks to now start to look at their organizations.

Understand what comprises them, and who is authorized to sign on behalf of which, so i'm understanding this to be, in a sense, from the State's perspective, and how many licensed organizations we have at

[...]

[...]

38
the State knows about. Would that be accurate and then if there's generally searchable resources or entity.

[IAC] 14:06:22
They'll search and find out how they looked in the state that would really really help.

[IAC] 14:06:26
Yes, we're working on that we're working on that there is

[IAC] 14:06:30
There is an issue with respect to medical group so we know they're responding organizations there again.

[IAC] 14:06:40
Numbers that are monitored by mhc isn't a unit of license, * medical right practice.

[IAC] 14:06:47
There is 4 8 clinic I register i'll look for that guidance.

[IAC] 14:06:56
Thank you, Yeah, i'm concerned. that we're numbers under the framework to be compliant if you're in the category, you must sign by.

[IAC] 14:07:10
So that's one level of compliance whereas like a couple of times today. I feel we've we've said compliance is 2024.

[IAC] 14:07:17
That's a different level. it's compliance to exchange is 24.

[IAC] 14:07:22
So under the framework, the first step of compliance is signing for that chunk of entities.

[IAC] 14:07:29
By January,

[IAC] 14:07:39
There's requirement for the majority organizations to exchange data by 24. and for some organizations have an additional 2 years to exchange data. So you're you're absolutely right, Now, thanks.

[IAC] 14:07:52
Yeah, Actually, i'm following up on a question that which I just asked about.

[IAC] 14:07:56
What about and i'm assuming just because this is new, and I know there's been a lot of educational efforts going on.
But like let's let's be out there's going to be a ton of organizations that do not sign.

By gee, you are 30 first, that are supposed to So is there going to be a proactive way that you all are like, Have a list, or any making outreach to these entities?

Or is this just gonna be like we're gonna trust that through continued education?

But more and more big thing on board, even if they missed that January 50 first State, and then the I guess the compliance applications to you

I it it's an excellent question so first of all It's a lot of education to make sure that people understand what their obligations are.

You know they continues to be confusing to some people about.

But do I not have signed until 2026?

If I fall into that group, don't have to sign a January, you just don't have to start exchange data until 2026.

You have to sign by 2022, 23.

So there is a lot of education that will be part of this.

We are going to be talking about Enforcement future piece, so we could talk about, you know.

But the exact language is to deal with that but you know what we're after.

People to be in compliance. and I I would imagine that a lot more outreach rather than penalties.
People. we'd be looking for but we will talk about enforcement, I think, when I like to be that just to add on to that, that, maybe 1 33 does not specify what enforcement actions it'll be taken by

[IAC] 14:09:42
the State for not compliance. so until there's policy My sense is that there will be a lot of outreach attempts and engagement, and understanding that there are a lot of organizations.

[IAC] 14:10:01
Anything else. just one last comment. If this could be baked into a M.

[IAC] 14:10:05
A queue that would be super helpful that we could reference it.

[IAC] 14:10:10
Thank you. very good, very excited, that we're launching this thing, so we we hope to get something early side.

[IAC] 14:10:21
I just want to make a nice announcement it's a really big step for helping Alright move on

[IAC] 14:10:33
We should be moving, I think to the qh io discussion Item, if i'm not let's take it.

[Cynthia Bero] 14:10:41
I think That's right good morning i'm happy to join you again to talk about the quality qualified health information organization program.

[Cynthia Bero] 14:10:53
I'm Cindy Barrow i'm a senior advisor at Manhattan.

[Cynthia Bero] 14:10:56
If we could go forward to the next slide that would be great.

[Cynthia Bero] 14:10:59
And you know, last month, or actually was the end of September.

[Cynthia Bero] 14:11:03
We introduced the concept of a Qh. io and i’d like to spend a little bit of time today, going a little further over the role of the Qh Io.

[Cynthia Bero] 14:11:11
And how an organization could become a Qh. I as you know.

[Cynthia Bero] 14:11:16
If because of all of the conversation that preceded this topic this is going to be complicated, there’s a lot of organizations, there’s a lot of moving parts, and we believe that most organizations on their own are not going to be well suited or capable of doing all that’s required under the Dsa.

They’re gonna need some help and that's the role of the Health Information Organization is really to help some of the signatories make their meet their Dsa.

Obligations that said, We also want to acknowledge that some organizations may not need a Qh.

Io. if they feel they could meet all of these requirements on their own.

I think that's daunting for many organizations but we are just acknowledging that participation in the in the data exchange.

Framework does not require the use of a qh io.

So we? So with that in mind, we started to build out some elements of the program, and as we were discussing some of those, and we want to share them with you today, But first I wanted to share some emerging principles.

If we could flip to the next slide, that would be great.

As we were having conversations, these same themes kept coming up, and I wanted to use this as an opportunity to ask you all if these feel like the right principles, the right themes that we should keep in our minds as we build out the rest of this program. The the first one is that we want the program to instill confidence.

That signatories should should be able to look at a list of Qhios and feel confident that this organization can help them meet their obligations.
Second, we want the program to be stable so that the land, you know, beneath your feet is not shifting and things aren't changing so rapidly that it's hard for people to make good businesses and develop good business.

[Cynthia Bero] 14:13:08
And last, we want the program elements to be fair where people have a reasonable amount of time to, you know, put things in place to remediate issues that occur.

[Cynthia Bero] 14:13:23
We wanted a fairness element in there and so I'm gonna pause now and see if these principles resonate with folks.

[Cynthia Bero] 14:13:29
If there's other things you think we should you know be considering, and also take questions from the group.

[Cynthia Bero] 14:13:35
Maybe we'll start with the questions and then we'll come back to the broader.

[IAC] 14:13:40
The broader discussion. Felix. Yeah, Thank you, Cynthia.

[IAC] 14:13:46
Yeah. as he imagine. he do have thoughts about the principals that are up here, I think.

[IAC] 14:13:53
But the notion of fairness, but out I'm not sure really get that?

[IAC] 14:14:01
The the close linkage that you heard from under Secretary Egypt.

[IAC] 14:14:05
At our first meeting between maybe 1 33 and the I think a pillar of the state's sort of broader health transformation calls.

[IAC] 14:14:15
Yeah, all the quality that we work at the partners manage healthcare is pursuing, and and so forth, where I'm going with this is that to your point you know there will be some particularly large well these source providers and

[IAC] 14:14:32
and there's a psa that she was not too, and probably won't need to rely on a qh io actually to meet the except requirements.

[IAC] 14:14:43
But there are going to be large spots smaller independent providers, especially in the community, and eventually with the onboarding of counties, human service organizations that may not even have that cannot comply

[IAC] 14:15:03
with the dsa without the services that the qh io provides.

[IAC] 14:15:11
So I think, instead of, or maybe at least in addition to fairness. i'm not into the fairness the notion of equity.

[IAC] 14:15:19
Really public key here to guide the Qh Io program.

[Cynthia Bero] 14:15:23
I think. You can understand that as trying to reach digital divide sports right between the haves and apps like those systems that already are perfectly well situated to comply sorry they want and those that were part of a large fun way and help you kind of get

[Cynthia Bero] 14:15:39
there. Thank you. I I think that's a good point Aaron. bye that point strongly supports these principles.

[IAC] 14:15:57
Ideally we, the participants Dean access all available data for a member button contract H. I.

[IAC] 14:16:06
O. if we see in order for that to occur all the Hiv.

[IAC] 14:16:14
We use that those principles support nationation, and as part of the Hi qualification.

[IAC] 14:16:25
Thank you. Any objective but objections, If we were to modify fairness to be more activity focused, perfect here

[Cary Sanders] 14:16:37
Thank you, Harry. Yeah, I just I you know I I I agree, and I appreciate Felix's comments.

[Cary Sanders] 14:16:48
I think equity is is right, and I was. I was gonna also suggest accessible, which I think is part of.

[Cary Sanders] 14:16:57
You know Equity, but I think you know the program has to be accessible to you know this.

[Cary Sanders] 14:17:05
The smaller you know, racially, ethnically diverse.

[Cary Sanders] 14:17:09
You know folks who, you know, need to to plug into the system the help, the human services, groups, etc., etc.

[Cary Sanders] 14:17:18
So I just you know I don't know if it's perhaps can be encompassed in equity, or if we wanna if it's worth pulling that out. But I think that that accessibility piece is going

[Cary Sanders] 14:17:30
to be extremely important. it's you know the the program needs will need to be, you know, proactive not, you know, reactive, but really providing that assistance and reaching out to to you know provide that level of

[Cynthia Bero] 14:17:49
ta! that might be needed. Thank you. I like that carrier.

[IAC] 14:17:58
One consideration for qh A. has been accessible I I Don't think we're talking necessarily about things like pricing the costs necessarily because they're costs of the which is business is one thing but what I think

[IAC] 14:18:13
you're saying is that every end you should have the ability to at least work with a qualified hjo.

[Cary Sanders] 14:18:17
If they eat too, and especially those who might be underserved the rural community, small, so provider practices, they should have equal opportunity to access the services that keep reaching for bodies that sort of the direction you are thinking I think it's

[Cary Sanders] 14:18:36
that. but I also think you know, even just to take it one step further.

[Cary Sanders] 14:18:43
That the level of the type of ta that's provided to a small practice versus what might be provided to a more say a established practice.

[Cary Sanders] 14:18:53
We'll need to be different and could be more and and we'll need to adapt and be you know accessible.

[Cary Sanders] 14:19:01
To, you know. I think providers at all levels of that spectrum.

[Cary Sanders] 14:19:07
So and and you know to to human services and other actors as well.

[Cary Sanders] 14:19:13
So I think it's it's a it's a little bit more than that, if that makes sense it's like a a kind of acknowledgment of different levels of ta and touch that might be needed

[Cary Sanders] 14:19:26
based on you know who the recipients are

[IAC] 14:19:33
Alright for others. sort of thoughts about that Okay, alright, thank you.

Lanes support this guiding principals. You can go right on.

I agree with Phelps about the furnace and typing.

I proteins, or include the protein in that their bullet.

[Ali Modaressi] 14:20:00
There. I also wanna I don't know if this is the right principle to add, But I think what you hire spring to the table is the inhancing the quality of the data, and that.

Is, I think the end goal here is that to have quality of data for the providers that they can make a decision on the treatment.

So. I think that would be another principle that with this board, adding, We're considering for the for the Q. A.

[Ali Modaressi] 14:20:34
I hope

[Ali Modaressi] 14:20:40
Thank you.

[Cynthia Bero] 14:20:45
Sorry. Hi there! And these are great principles and i'm wondering if they will be publicly displayed, so that people who are trying to choose between the Qh Ios can see what the whoever the entity and that's

[IAC] 14:21:07
evaluating this where they fell in terms of

[IAC] 14:21:11
But instability, fairness, and other things. one of the hardest things, as you are all aware, is, everything is spread very unevenly in these different settings.

[IAC] 14:21:25
In terms of resources, and know how and bandwidth, and so, anything that helps especially the least resource areas. to know quickly which are you perhaps the best ones to pick from, or something like you know, has stars would be

[IAC] 14:21:49
helpful and then so that's just the comment and then question is, i'm just curious as to whether Dh.

[IAC] 14:22:00
Hs has any idea of how many 2 h ios are thinking might apply.

[IAC] 14:22:07
Is it like if there's any just kind of hundreds whatever?

[Cynthia Bero] 14:22:17
Okay, I mean I I Don't know that we have an answer, but I hope it's measured in dozens and not hundreds.

[Cynthia Bero] 14:22:28
I think it will be overwhelming for a signatory to you know shop, if you will.

[IAC] 14:22:33
If there's hundreds, and that reflects the current ecosystem account.

[IAC] 14:22:42
Yes, it is order, maybe similar to the Co. covered California terms of a finite number of options, but

[IAC] 14:22:59
Got it impressive. Okay, therein I I just wanted to clarify that we're recommending.

[IAC] 14:23:07
Yeah. how they tie to confidence, and that signatorial on on hio each account for data on a member like I think to increase confidence system.

[IAC] 14:23:30
The expectation. what's that you can See that pay and I think in order for that to occur.

[Cynthia Bero] 14:23:47
Okay, thank you. Thank you very much that's all great feedback.
Maybe we could move to the next slide and start to talk a little bit about the overall structure of the program.

The idea is that we will be, you know, finalizing the criteria in the next.

You know, couple months, and be ready to accept applications to qualify. H.

Ios in early 2023 we will you know as we introduce last time we will be looking at criteria in those 4 major categories, and and there'll be more on that in the future.

But the sense is that once we open this application window of time that this will be an annual process.

It won't be the like rolling admissions into the qh io.

Process, but really an annual cycle, during which applications are accepted, reviewed, and H.

Ios are qualified, and then it sort of you know, stays that way until the next annual cycle.

And again, This is a reflection of that stability you know we don't want there to be a lot of coming and going, but really a stable number of qh ios that signatories can choose from let me go to the next slide and Then

i'll pause at the end of that one to get questions

The the assessment process where thinking, will result in 2 outcomes. you're qualified, or unfortunately you did not qualify there would be no tears or levels of qualification like you're a silver gold platinum qh io

It's just qualified, not qualified and if once that determination is made.
The hio will be notified, and if they are determined to not be qualified, they would understand why they would be, you know, provided details on what creativity not met, made met, sorry, and they would have an opportunity to appeal that to the governance entity. If that was a path they wanted to take for the ones that are qualified.

[Cynthia Bero] 14:25:48
They will be listed on Cdis website, and they will also get some instructions about how to represent their qualified status on their own website.

[Cynthia Bero] 14:25:57
Let me pause and see if that all makes sense to folks, and if there's any thoughts on it.

[David Ford] 14:26:17
David. Sure, thank you and I've been looking for a place to reuse something, and I I I think this is is. it may be a little tangential, but this seems like the the closest place to bring it up this whole Qh io process. We seem to be thinking about sort of the traditional community health information exchange.

[David Ford] 14:26:43
But when you look at what's happening in the marketplace, where the Federal Government is going, there's a big move and a big shift that's happening towards consumer mediated data exchange you know and with the information blocking rules, patients having access to their own data, and being able to mediate that exchange.

[David Ford] 14:26:56
So I guess i'm just wondering in all of their thinking about communities about qualified Hiv.

[David Ford] 14:27:03
Do you envision the path? For where in M. Health app?

[David Ford] 14:27:08
That does data exchange could become a qh io because I fear if we don't, we're we're potentially putting ourselves behind the times.

[Cynthia Bero] 14:27:21
You know that's a really interesting thought that that I Don't think we've had a much of a discussion on it.
Maybe I'll take that one back and and chat with some of my colleagues, and see if that is something I want to incorporate into the construct.

Right, hi in terms of the comment. Aaron made about bi-directional data exchange. one of the available criteria, as you're all aware, is tech i'm wondering if that is going to be taken into account whether or not they themselves. get certified as a that's correct you again, or not, or if that's not relevant to this, just wanna raise it.

No, it's a good question, and we are you know as I mentioned working on some of the criteria, and one of the areas we're looking at is you know the the participation, or qualification by another national network.

we are looking at that. but we we haven't you know finalize some of the thinking.

I think you'll see something like that in our December meeting.

Thank you. Why don't we go forward to the next slide?

So how do you know you're qualified HIV what happens next?

The recommendation is that you submit an annual attestation.

As an hio, and just really affirming that everything you put on the you know the criteria or the application.

When you first applied. can you continue to meet those?

And that that just says. you're still actively engaged you're still doing all the things that you said you could do, and that's what we ask.

And that there will also be a complaint process where people want to log a complaint about the performance of a QH. i. o.
They can, and that those complaints would be reviewed and investigated.

[Cynthia Bero] 14:29:33
A qh io. fails to submit an annual attestation, or if, following the investigation of a complaint, they're found to have no longer be meeting some of the standards, and the quality of service that we expect from

[Cynthia Bero] 14:29:49
Qhios. that Qh. io. would be placed on probation.

[Cynthia Bero] 14:29:55
You know. and and again that would be open to appeal to the governance entity.

[Cynthia Bero] 14:30:02
If you felt that you have put on probation inappropriately.

[Cynthia Bero] 14:30:05
The governance entity would also look carefully at the nature of the complaint, or the nature of the issues, to determine whether or not it can stay qualified while it's on probation.

[Cynthia Bero] 14:30:19
There may be something that's just really a significant issue that that means they cannot continue to be qualified.

[Cynthia Bero] 14:30:26
Post this investigation, but there'll be some review by the governance entity.

[Cynthia Bero] 14:30:34
And then, while they're on probation it'll say they are trying to remediate this issue.

[Cynthia Bero] 14:30:41
The signatories who are relying on the services of this Qh. Io will not be in jeopardy of failing to meet their Dsa. requirements.

[Cynthia Bero] 14:30:49
So this is an opportunity really for the Qh. io.

[Cynthia Bero] 14:30:52
To be notified. something's not going right have some time to remediate it.

[Cynthia Bero] 14:30:57
Their signatories won't be harmed but they they Will get a chance to to, you know, fix whatever issue was identified.

[Cynthia Bero] 14:31:05
Can we flip to the next slide, please? the recommendation is that the Qho. will have 6 months to remediate the concern.
So again. This is something that they demonstrated before they're not meeting that standard.

Now they'll have they should be able to return that to that level of service in 6 months, and if that happens they come off probation and and move back into sort of fully qualified status if they don't they will be disqualified and be removed from the program. That means their name will be taken down from the website, and they need to remove that qualification from their own promotional materials.

And then the signatories who were using that hio would have another 6 months to figure out how to meet their commitments under the Dsa.

They you know. So there again, we're trying to give ample time for people to make good business decisions and and ample time for people to remediate things that that went wrong.

Any hio that got, you know, removed from the qualified program would be welcome to reapply at the next annual cycle.

So this is a method of just making sure that those qualified organizations remain in good standing.

Provide that level of confidence. We talked about before and it's also a way to give them ample time.

If something, you know went wrong, may have time to fix it, and it also is fair to the signatories.

They have time to make adjustments so again reflecting all those principles. This is the recommendation that we are putting forth, and i'd love to hear your your feedback and thoughts on this as a means to monitor the quality vhios give them a chance to, you know, remediate issues and give signatories ample time to adjust as needed.
I just have a comment as a signatory is, in a slow, moving county process.

6 months is not enough time. I'm wondering if it could be a year.

Okay.

Thank you I'll I'll make note of that yeah I'm.

Not sure if I'm following the details of what would get one on probation, but it feels to me like it's guilty before prove it innocent, that could they be born with it window of time and then a window of

remediation It it seems severe hmm I I hear what you're saying.

I think probation is the the warning the the probation is saying we've had complaints either you didn't attest you're asked to a test annual and you didn't submit it or or you know there's been some complaints about a quality of service issue and we've been able to validate those complaints.

And you need to remedy it. So I think to you know the way I saw it is.

The 6 months was their period of time to remediate things, and that was the warning before they drop off as a qualified HIV.

Okay, and could there be guardrails into if the QH.

Io. is it really prefer warned as opposed to probation but on probation?

And they respond. so there's there's kind of a precedent, or at least anecdotal stories of d 8 A. A.
And I has X number of days, 120 days, 3 years, that they contact you on the 100 eighteenth day, or at the end of 2 years.

[IAC] 14:35:12
And X. So is there a place to say that in response to a Qatio responding either the governance, entity or Cdi with act upon it in x amount and time, because otherwise they could fix something and be sitting on probation for

[Cynthia Bero] 14:35:31
6 months. Okay, i'm the way and Thank you this is partly me making sure I communicate this clearly.

[Cynthia Bero] 14:35:39
I think it's any time within that 6 months you would be taken off of this warning or probationary status, and and be back as a fully qualified hio as soon as it gets remediated.

[IAC] 14:35:50
So if it gets remediated in a month you're back in in a good state, it's really just saying that you get a full 6 months to figure out how to get back to where you were that makes sense that part makes sense But

[IAC] 14:36:06
i'm. i'm concerned for the Q. hos how long the governance entity or the State has to respond to their remediation.

[Cynthia Bero] 14:36:15
I mean 5 days or on Pto or something.

[Cynthia Bero] 14:36:21
But how long do they have to respond? It seems to be a gap. The loophole.

[Cynthia Bero] 14:36:27
Okay, Thank you.

[IAC] 14:36:35
Lineage. Yeah. So question A couple of questions here, just about the implications of being this qualified.

[IAC] 14:36:44
And I see you know, on the slide. The second sub bullet of the second bullet says that signature is the Hio.

[IAC] 14:36:53
Services must be notified, and will have been granted additional 6 months to consider the transition of services.

[IAC] 14:36:59
So I mean, Does that mean? what are the implications of that? I mean?

[IAC] 14:37:02
Does that mean that any participant using this normally? Qh: I.

[IAC] 14:37:10
O, we'll have to transition to another qh Io to meet Dsa.

[IAC] 14:37:16
Requirements. And if so, then there's gonna be 6 months not enough like I mean the transition of an entire kind of network of providers other health entities using an hio to transition to a new hio you know I have no idea that he

[IAC] 14:37:34
tells of what would be involved there. But my good reaction 6 months just if there's no way.

[IAC] 14:37:40
Hopefully, this scenario would never happen. but

[IAC] 14:37:43
But if it were to it doesn't seem not to make that change Yeah.

[Cynthia Bero] 14:37:48
So I think that That piece of feedback was was heard that 6 months may not be enough, and the reason I I raised it that they are, you know, can consider how to transition.

[Cynthia Bero] 14:37:58
It may be that through some combination of services they already have, they feel like they can.

[Cynthia Bero] 14:38:06
Still, you know, the signatory feels like they could still meet the requirements of the Dsa.

[Cynthia Bero] 14:38:10
I I mean I'm not sure that we want to say you cannot use the services of that Hio. I mean it's it's really the Dsa's responsibility to make sure that they're meeting the requirements

[IAC] 14:38:21
of i'm sorry that signature is responsibility. to make sure they're meeting requirements for the dsa I wonder if one potential not a remedy per se But if an hiv does sort of lose their queue status if

[IAC] 14:38:36
There’s a way that it can be described what specifically they failed to qualify for the work.

[IAC] 14:38:44
There was a set of functions so that all of the signatories can make the determination.

[IAC] 14:38:48
Oh, I can you got on my own or I use another app to do that?

[IAC] 14:38:53
And I and I won't have to switch I might need to do some extra step.

[IAC] 14:38:57
Another thing or another plug in 20 Hr. in order to make sure that I beat the requirements.

[IAC] 14:39:03
So I I think what that would require is that in being disqualified.

[IAC] 14:39:07
There's like a summary of specific What Things the hio is no longer able to support.

[Cynthia Bero] 14:39:16
Thank you. 6 months with the option of an extension.

[IAC] 14:39:24
Also help. So if you can't keep in yeah set the notify the governance entity that you're looking completely on for new hio, and you need you know this much time in that way.

[Cynthia Bero] 14:39:40
Okay, together have it to compliance. Yeah, Maybe you know, probably the more realistic scenario.

[IAC] 14:39:46
I I again just and good reaction here is that if there are certain components that led to the H Io.

[IAC] 14:39:56
Being no longer qualifying that rather than at a local level, make this transition to an entirely new Hio would be for sure that that Hia was working back towards their Qao status.

[Cynthia Bero] 14:40:11
And then, in the interim, you know what to notice might be doing What? figuring out a the process, I don't know. So yes, maybe the extension would be the needed.

[IAC] 14:40:22
But in a practical sense. I assume that would sort of be the path of last sorry, and and I would.

[Cynthia Bero] 14:40:34
I would think that we should make sure that there is some language in these, that all this stuff, or something that provide for that. But we do expect this to be an exceedingly rare event qualified F.

[IAC] 14:40:39
One fine and therefore something is happened that they're no longer qualified. so we'll expect that. and it's hard for us to envision what we're so this may be a case by case if somebody if an organization, no

[IAC] 14:40:55
longer gets their queue status that that event would be surrounded with.

[Cynthia Bero] 14:41:02
And this is how we're notations that are currently purchasing to Yeah, that's a really good point Rim.

[Cynthia Bero] 14:41:14
This is something we hope never happens, basically. but we felt like we needed to outline that again. as to establish that level of confidence in the program we needed to. you know, make sure people understood that we are expecting.

[IAC] 14:41:26
H: ios to maintain their status. Yeah, just having a process.

[IAC] 14:41:31
Yeah, Yeah, Thank you. Thank you. Ali. Do you have a point on this?

Because I was also gonna move on to the next slide I Don't know if you well 2 things one is that without knowing the the criteria or qualifications are kind of to make a comment here .

But I agree with others that you know that's 6 months maybe short, so expanding that, or have the option of extending it, that would be great.

[Ali Modaressi] 14:42:01
So wanna bring up the compatibility. I that the call here is that if an Hiv loses that qualification over to a reason you know they can still operate as a third party vendor for their stakeholders

[Cynthia Bero] 14:42:17
and then we'll be subject to some other rules and at the State questions Troy.
This is tangential, but in the case of a massive earthquake, or fire, or something that might take out an hio

It's I mean we're talking about mitigation strategies when they're not fully functional right, and so maybe it doesn't fit here.

But I just wanna raise that living in California and having an earthquake last week.

Yeah. I think. the disaster scenario does, you know?

Be sure that one through to make sure I think you're right okay, So let's move on to the last slide. I believe.

And this is really just a recognition that standards are gonna change.

Transactions are going to change. The world evolves.

Things get more complicated some things. get easier but things will change so What we're working with today is is not going to be what we're working with in 5 years from now, 10 years from now.

And so we anticipate that there will be updates to the Dsa.

There will be updated policies and procedures that will incorporate new technology standards.

And new patterns, and the thinking is now from the Qh Io program perspective that these changes would get communicated to the Qh ios, and that they would have an opportunity to review it and respond within 90 days to say yes I can make that change within

the time frame defined, and the timeframe will vary depending on the complexity of the change.

That's being introduced. yes, i'm gonna meet the new standard.
[Cynthia Bero] 14:44:13
But it's gonna take me more time I can't do it in the 2 years you asked me to do it.

[Cynthia Bero] 14:44:19
I've got I need 3 years something like that and in that case the governance entity could grant an extension for the Qh.

[Cynthia Bero] 14:44:27
Io, and during that extension they would you know that extension. period they'd be in the sort of the same probationary status, and we'll come up with a better word for it.

[Cynthia Bero] 14:44:35
But where they would have to, you know, get their systems up to the new.

[Cynthia Bero] 14:44:41
The new standard, and then the third option is to say, no, I I just.

[Cynthia Bero] 14:44:45
This is too hard a journey for me, to take my organization's not going to go forward, in which case they would need to communicate that decision to their signatories, and make sure that they have sufficient time to trend off of that

[Cynthia Bero] 14:45:00
Hio services and find the the right collection of services to meet The Dsa.

[Cynthia Bero] 14:45:07
So again it's it's really what we're trying to outline now from a programmatic perspective is announcing a change announcing an evolution of standards or or technologies or requirements and giving the

[Cynthia Bero] 14:45:20
hio an opportunity to review those and indicate the their acceptance and their commitment to doing it into staying in the program, or for them to to back out and giving signatories a chance to make some other decisions So thoughts on

[IAC] 14:45:35
this kind of approach from a program management standpoint. Yeah.

[IAC] 14:45:43
So this isn't so much about what happens once the new standard is recognized and complicated.

[IAC] 14:45:51
What's kind of the intake process or how bill Cdi.

[IAC] 14:45:57
I, and the government is getting tea and various other aspects of the oversight structure.
[IAC] 14:46:04
Be able to keep rest of something that can move, you know.

[IAC] 14:46:09
Fits starts, and and it's pretty actually not good to pull right when it comes to technology standards, and and also the point to all the standards.

[IAC] 14:46:21
These tend to actually all at the national level. it worked off of the knot.

[IAC] 14:46:26
So you know both cdi sitter leveraging independent outside. I mean, I know that under the government structure there's gonna be a stickholder advisory body.

[IAC] 14:46:40
But on the issue of standards, and and technology in general, should there be a notion of potentially partnering with or causing with something like the California Interoperability Council.

[IAC] 14:46:55
But then Kaye and association exchanges, which currently governs c.

[IAC] 14:47:02
10 exchange network, and is actually, you know, price of actually a lot of the and at least that would probably be interested in trying to be a Qao.

[IAC] 14:47:15
You have built in body of expertise, right? That would be tracking these changes and be able to kind of pay them and not have them.

[IAC] 14:47:25
Kind of you were just a surprise out of the woodwork could be able to head off.

[IAC] 14:47:27
See situations like this right? What are our qhs all of a sudden I can't do it, or I can't do it.

[IAC] 14:47:33
The type of water

[IAC] 14:47:37
I I mean I I to me that feels like a good suggestion that you have some group base, either embedded or so for some contracted by governance to be able to especially the new Federal standards, just make sure that they're understanding what

[IAC] 14:47:53
those are, and they set the new transaction patterns to help we'd have to be subject office to processing say some I think what you're saying is there should really be.
And if we can use leverage existing by these to actually do this and help support this concept should learn

Okay, I think we're ready to move on to France Yes, i'll turn things over to Elaine and Juliet.

Great thanks so much. my name's Elaine sportockets, and i'm a deputy director at Cdi. So first I'm just gonna do a real quick overview we can go to the next slide, please.

There we go. So as you already are aware i'm sure Cdi is going to be issuing Grants 50 million work over the next 2 years. Actually, we're already into that 2 years so we're gonna be doing this quickly.

The grants are gonna be for education. at education, technical assistance, and qh io. On boarding for the signatories, so they can implement the data exchange framework real quickly.

The 3 goals are so that the signatories get the resources they need to address the critical operations and technical barriers with the implementation.

It's to one of the goals is prioritizing investments in the signatories operating and those under resource, geographies or serving historically marginalized populations and underserved communities The third goal. is to ensure alignment and filling those funding gaps.

Among other Federal and State grant programs, and then also there's the 3 grant domains. The educational initiative grants, and these are for
It provides funding for education to provide a information to the signatories.

You know, doing things like webinars and newsletters and things like that.

[Elaine Scordakis - CalHHS CDII] 14:50:00
The second Grant domain is the technical assistance, and this is just provide funding for vendor, identification, or contracting things like that, and the technical assistance these signatories will need and then finally, the third domain is the Q H.

[Elaine Scordakis - CalHHS CDII] 14:50:15
I o onboarding Grants, and I was great discussion previously.

[Elaine Scordakis - CalHHS CDII] 14:50:21
And I think this is gonna really help folks a lot and it's to provide funding for the initial cost of connecting to the

[Elaine Scordakis - CalHHS CDII] 14:50:26
And then, you know, adjusting their technical electronic health record workflows.

[Elaine Scordakis - CalHHS CDII] 14:50:31
Next slide, please. alright. So a couple of updates on where we are with the Grant program, so far, so with the educational initiative grants, we release the Rfa.

[Elaine Scordakis - CalHHS CDII] 14:50:44
In September, and then that closed out on Halloween.

[Elaine Scordakis - CalHHS CDII] 14:50:47
We got a great response, and we're currently going through those right now, and we expect to release the intent to award very fairly shortly.

[Elaine Scordakis - CalHHS CDII] 14:51:00
Just some some time this month. the ta grants, and the few H.

[Elaine Scordakis - CalHHS CDII] 14:51:06
I. O. on boarding, we expect to roll out in the first quarter of 2,023, and i'm gonna pass it over to Juliet, cause she's gonna really dig in a little deeper.

[Elaine Scordakis - CalHHS CDII] 14:51:15
So we can have some more discussion today about the Grant criteria for the Ta.

[Elaine Scordakis - CalHHS CDII] 14:51:21
And the Qh. I onboarding grants so if There's not any questions.

[Juliette Mullin] 14:51:25
I'll hand it over to juliet great thank you Elaine.
Sure if we can go to the next slide. So before we dive into our preliminary thinking on some of the criteria for the Ta. and H.

[Juliette Mullin] 14:51:41
Onboarding grants. We do want to do a little bit of level setting and sharing what we learned in our Grant listening session last month.

[Juliette Mullin] 14:51:48
So, as many of you know. and in fact, I saw many of our Ic members in these grant lessening sessions.

[Juliette Mullin] 14:51:55
The Cdi in October hosted 2 Dxf.

[Juliette Mullin] 14:51:59
Grant program, listening sessions. The purpose of these sessions was really to understand the barriers to implementation for signatories and identify opportunities for addressing those barriers.

[Juliette Mullin] 14:52:08
So the format as many of you will know because many of you joined.

[Juliette Mullin] 14:52:13
Is. we hosted them for sure. We hosted these things virtually, and we provided participants for the opportunity to provide Britain and verbal feedback throughout leveraging a polling functionality for a lot of the written feedback and

[Juliette Mullin] 14:52:25
then allowing people to kind of share verbal comments as well.

[Juliette Mullin] 14:52:30
Across the 2 sessions. We had just over 300 individuals join and provide feedback in the listening sessions the most common group of participants were people that had joined us. from county health social services or public health

[Juliette Mullin] 14:52:46
departments. We also had a strong showing from H. ios, from position organizations, and from acute general cute care hospitals.

[Juliette Mullin] 14:52:54
So we had a We had a good range. This is just representing the top 5 types of participants that we had but we had a very good range of of folks that joined those sessions, and provided input in these

[Juliette Mullin] 14:53:07
sessions. We really asked a partners to provide input across 3 core questions.

[Juliette Mullin] 14:53:12
So the first is, what did participants see as the operational technical or technological barriers for your program to implement the Dxf.

[Juliette Mullin] 14:53:19
And you'll note that that is a direct reflection of one of our key guiding principles for the program which is to address those barriers.

[Juliette Mullin] 14:53:27
So we wanted to really understand what those barriers were.

[Juliette Mullin] 14:53:30
Then the second question was, How might the grant address those barriers?

[Juliette Mullin] 14:53:34
So we got some feedback from participants there, and then finally

[Juliette Mullin] 14:53:38
We talked more broadly about how we might structure Adxf program and administer a program in a way that is as seamless and straightforward as possible for applicants.

[Juliette Mullin] 14:53:48
So if we go to the next slide we can share a little bit about.

[Juliette Mullin] 14:53:50
We learned so at a high level, and this is obviously a very high level pull up on the feedback that we received but at a high level participants in the listening session really surface barriers and opportunities across 3 key areas and those key areas

[Juliette Mullin] 14:54:07
really broke down into education challenges around atio, onboarding and making the technical connections necessary for the for achieving their Dsa requirements.

[Juliette Mullin] 14:54:21
And then the need for more broad technical assistance.

[Juliette Mullin] 14:54:24
So you will note right out the gate that we saw feedback coming in very aligned with the key domains we had identified of going into our conversations on Grants, and that we discussed in our last iac meeting just at a

[Juliette Mullin] 14:54:38
high level i'll share some of the barriers and grant opportunities that were surfaced.

[Juliette Mullin] 14:54:42
And then we can pause, and and I welcome some additional feedback here. From the listening session on the educational front, we heard a lot from participants about just a general need for more knowledge and understanding and opportunities to learn about what
the data exchange framework is what it will take for them as an individual organization, to be in line and meet their Dsa requirements here.

A number of grant opportunities were surfaced as we started to ask participants about this.

So, of course, a big one was just at a high level, providing more educational and training opportunities about the date exchange framework, providing more resources to learn about the date exchange framework, having clear and specific guidance and scope for each signatory group, so that signatory groups understand from their kind of unique perspective as that particular signatory group what their requirements are.

And then information from the qh ios perspective on how to become a qh io on the hio onboarding front.

We heard first of all, that in a a good percentage of the participants in the session were not or

Their organizations were not connected to an hio in current state.

So there is a an expected a sizeable group, as we expected there, of organizations that are not connected to an Hio who may need to become connected to an hio.

And they had a number of questions about what that looked like, and what the role of a Qh.

I would be in supporting them, and then they surfaced.

Of course, then the need to adjust their existing technologies to make a connection to a Qh. Io.

If if they've opted to go down that road and then finally, in the technical assistance rate, category, the number they surfaced a number of different challenges our around the staff bandwidth to implement this.
type of work around needing the expertise and support in identifying and assessing their options for qh ios

And then just kind of the broader piece around managing large projects of this type of complex organizations.

So as I noted the sort of as we look into that implications for our data exchange framework Grant program, it First of all, I think, solidifies for us that these 3 general domains are critical at a high level, and then helps us understand more about how we may target specific activities and funding within each category.

I'll also highlight before I pause we did receive broader feedback on the implementation of the program, and what it might look like to have a really effectively admitted program that is straightforward for signatories and and easy for them to participate in. We heard a lot there around having very clear grant criterias and requirement we heard around making sure we're giving people sufficient time to both to not just complete an application, but then go through the vetting process that's necessary within a lot of organizations having a simple application process and simple reporting requirements for grantees.

So in the upcoming slides we're going to talk a little bit about what we're starting to think about for the criteria, and I will kind of explain how we're applying some of the listening session feedback in that thinking. But before we move there would love to pause, see if there's anything that folks think are missing here.

Anyone who is in the listening sessions heard something additional that they want to call out beyond what I just highlighted here.

And I see Aaron that's his hand raise hi just real quickly.
I think that the list on the variance is very complete but but one seems kind of

I don't know missing. here is time and then we just talked about how long it takes to
switch from one hio to another, being 6 months to the year.

I would think of, take a similar amount of time, if not longer.

So I mean it. It might be could include the state that just time to tip any of this if they're barriers

Great. That's a great call out thank you all let's see your hand.

That's right, yeah, thank you, I think the the barriers that has been listed here that they’re real And we see that.

On a daily basis. you know one we had a great experience with the calhh program
where the funding came to the Hiv and and to and then reimbursing the providers and
what's good about

that is, that it kind of took the burden away from the busy providers to manage those apples.

We did it on their behalf, and and then because we have the high channels, have to
work with the Dmr vendors and and there was no need for the providers to be in the middle as

as you know. so it's statement time and it allowed us to work directly with their

Who was building, whether it was internal to the organization or external consultants,
or emr vendors to work with them directly. So

I you to? consider that. then, you know, have similar program to the calculation.

Yeah, facilitator, if you like, in terms of getting the pay administrative part of it done.
And working directly with the providers as well as their emr vendors.

Thank you great. thank you for sharing that and I think as we progress through our conversation today.

You'll see that it is where we are currently looking at what would the roles of the Qh.

Ios be in the grand program. and what are some of our options?

There. So thank you for that. lena. Yeah.

I just wondering if you could share what the response has been to the Rfa.

And if, just generally speaking, if you got the response that you were hoping to get in terms of applications from groups that will be educating in a diverse range of entities or participants that ultimately have to sign this Dsa

yeah great question, elaine do you wanna take that sure we do get 12 responses, and we're we haven't gone through all of them yet.

And as we're going through and we're kind of tracking what signatory groups they would like to do their outreach, too. So it's I think it's a little premature for me to give you a full

answer. I apologize in advance, but I think we'll have more information to share up.

Probably the next week or so, but what i've been through so far is very promising.

Great thanks, and I realize the applications are just like freeing.

So Dm. wearing my former head with from cow hips.
So I want to highlight David, Ford's question because he said in chat that he needed to
leave asking about consideration for organizational types, because some folks when
they saw the education, Grant are, if they also were like Wow, or not the

[IAC] 15:01:53
type of entity that's allowed to apply for this but we would be perfect, and we have
experience.

[IAC] 15:02:00
So, as David said want to make sure people see his question about entity types,
organization, types eligible for the next 2 levels of brands.

[IAC] 15:02:12
So just to clarify. So what I think David was asking is there's the option or the Qh. A. to
be for this facilitator aggregator.

[IAC] 15:02:21
And I think what David was saying is, what about other entities could support, facilitate.

[IAC] 15:02:26
So on boarding for other, say for organizations like the regional extension system.

[IAC] 15:02:31
So can I. In fact, if there was a regional extension center like, or if you'd like it or or
others, they could get 25 primary care practices especially practices all to submit
together and one application

[IAC] 15:02:48
with that exactly, and it's really difficult to not be provider centric.

[IAC] 15:02:57
There's still the other folks and entities that fall under the data exchange framework.

[IAC] 15:03:03
So we also need to not leave them before right now to think of the those entity types as
well

[IAC] 15:03:13
I think it's a it's a good consideration for us to think about whether there should be, and
that my my sense is, if there would be.

[IAC] 15:03:23
But there would be some sort of pricing guide that's Count Calhoun have basically a
menu and said what cost?

[IAC] 15:03:30
And you're gonna you know if you sign up you're green to actually get the job done for this cost and I would expect you may do something similar here where there's so basically like the cost to onboarding to my nextio.

IAC 15:03:43
So if you're submitting, 20 applications or on behalf of 20 organizations, then if there are 20 practices and every practice gets $10 for practice, then you're gonna about 20 practices for expense way, and you do good job, for that in that

IAC 15:03:59
one so regardless of whether it's a qh I or consider this another Party, they'd be subject to the same.

IAC 15:04:09
Right. So like in the Fpc world, I think of the Health Center controlled networks.

IAC 15:04:15
They might be like somebody like that. Are they eligible to apply for this grant funding?

IAC 15:04:20
Or do they fit so thinking brotherly about who the provider types are?

IAC 15:04:26
Because hearing there's 12 responses to the education grid sounds great, but it makes me wonder, like Wow!

IAC 15:04:33
Did that cover everybody that we need to educate. maybe it does.

Juliette Mullin 15:04:40
Thanks. thank you. Great thanks for knowing just with an eye on the time. we can go into the next slide then, and talk a little bit about some of our early thinking about the criteria. So they're kind of 3 core questions.

Juliette Mullin 15:04:56
We want to talk through today, and we're we're what we're considering terms of the approach for the Grant program on these questions and we welcome some feedback and input from this group on all 3 questions. So the

Juliette Mullin 15:05:08
first is really who can apply? and we're just talking about that now. So this perfect segue, the second is, how can funds be used?

Juliette Mullin 15:05:15
And then the third is going to be how much funding can grantees receive.

Juliette Mullin 15:05:18
And we want to talk about how our approach for thinking about each of these things.
So I think the first and foremost the thing with we'd say, first and foremost, is that the grant program both the technical assistance Grant program and the Qh Io grant program our We are planning on focusing those programs on organizations who first of all have signed the Dsa.

So just want to state that as a component of this, and then organizations who are not already connected to a Qh. Io. So if you are a signal, if you are a small hospital, and you are already connected to a Qh. Io.

Or currently an hio soon to become a qh io.

When it gets qualified, you would not be eligible for a grant to connect to a Qhao.

Because you were already connected to one the second key piece side highlight under consideration.

Is, and this is when we just spoke to a little bit.

One is that qh aos would be able to apply on behalf of signatories, provided the signatories cosine the application, and provide any necessary document that We need.

From the signatory as part of that and this is you know we've we've put together this consideration in response to a lot of what we heard in the Grant session about how challenging it can be for a small organization to apply for a grant themselves how that navigating that process can be very complex. And so this we have an opportunity here that we're looking at in leveraging the Qh los to to support with that administrative process as we were just speaking to prior to this, and Then the last piece i'll highlight is the piece around the signatory types that would be eligible for funding.
As we look at our very initial rounds of funding.

[Juliette Mullin] 15:07:06
We are considering limiting the initial rounds of funding to required signatories under Ab 133, and this is really intended to help the signatories that are going to have to be compliant and meeting the requirement by January of 2,024 to get their funding as quickly as possible, and start to do all the work that they need to do.

[Juliette Mullin] 15:07:29
To meet that deadline, so that would mean our very initial round rounds would be just for those required groups.

[Juliette Mullin] 15:07:35
So I will pause there and see if there's any thoughts or reactions to that.

[IAC] 15:07:39
And again I see your hand is raised. It might not be in to your immediate but some reactions.

[IAC] 15:07:45
But is any of the ta grant intended to be not great required?

[IAC] 15:07:55
H. I o related, so it, or qh io like What if somebody needs ta on care everywhere, or fire or exchange through Apis fire?

[IAC] 15:08:08
Or there is Cbo, and they need other technical assistance.

[IAC] 15:08:13
Or is it been strained to? Qa: jails?

[Juliette Mullin] 15:08:17
Or yeah, 2 different buttons yeah that's a great question. So that that is, we're actually gonna touch all that in the next slide.

[Juliette Mullin] 15:08:24
We are looking at permissible uses of funding for the ta grant.

[Juliette Mullin] 15:08:29
That would be broader than qh ios

[IAC] 15:08:38
So. one other thing you could possibly consider is the size of the membership served by the organization, asking for the Grants and thinking about getting off the ground.
The momentum. The more membership data within the ecosystem, the more valuable the network is, and back to that Thinking about the confidence of the data.

And Maybe that should be a consideration for the size of the grant, not the size of both the size of the brand, But but if there were limited buddies and 4 people they’re blessing fans there is money that the size of

the reach Yeah. great. do you like, Yeah, Well, first of clarification on the slide when suggestion is that?

Oh, we manage. Rice notorious, would be prioritized, for the first contract.

Is that just the odd morning So so I think you have a comment to raise on that front.

I think we we welcome feedback on that we're currently exploring it for both.

But we welcome feedback on on your thoughts there. Okay, Great: Yeah.

Well, I was actually struck by The couple of slides prior where it's showed that the florality, the best parity of attendees on listening sessions were actually counties which are encouraged, but not required, as of yet to sign the

Dsa. and and that really, actually that goes come with some of the interactions that we've had with some of our county partners, which is that Yup.

Many of them are not yet figuring out or or planning this, and how they're going to onboard onto a hio but they are doing is struggling with the exact question. step for teed up by the listening

sessions like that you heard in the feedback, which is no t 8 type of issues.

So I I think, this suggestion is, possibly a while.
It makes some negative sense to again really but not a territory providers and and signatories at the front of the queue for the onboarding grants that's for the ta just because that is

[IAC] 15:11:10
metro longer one way, and that is to even get entities, to figure out what questions they can, asking when it comes to preparing to sign on to and benefit from the Dsa.

[IAC] 15:11:24
That that staggered like that should probably actually be open to all of voluntary and mandatory.

[Juliette Mullin] 15:11:31
Christopher. speaking from the county perspective great thank you for that feedback Aaron i'm going to give a slightly different county perspective.

[Cameron Kaiser] 15:11:47
I certainly agree that many of the counties are not you know I i'm i'm gonna a lot of questions from C sled show, and some of the other local health jurisdictions about what this exactly means for them and

[Cameron Kaiser] 15:11:56
i'm reminding them that you know you're not required to participate.

[Cameron Kaiser] 15:12:00
You're encouraged to do so. and I think that the position of Chiac Ccho Hoak, and the other representative agencies would be to recommend that counties do participate.

[Cameron Kaiser] 15:12:12
But I also believe that the biggest value add for local health, jurisdictions is being able to get access to the they wouldn't have been previously able to do so, at least from my perspective.

[Cameron Kaiser] 15:12:24
We would primarily be consumers. I mean there’d be some social services data that would be contributed back.

[Cameron Kaiser] 15:12:30
But I think that primarily we would be net consumers of the data that's out there, and to make that the most useful for us.

[Cameron Kaiser] 15:12:37
I think we need to have as much debt in the system as possible, so I certainly agree that we're gonna need to answer this question particularly for the very small jurisdictions that may have a very limited it capacity to be able

[Cameron Kaiser] 15:12:48
to participate, and even some medium sized ones too, that may have some similar issues.

[Cameron Kaiser] 15:12:54
But i'm a 100% for prioritizing required signatories.

[Cameron Kaiser] 15:12:58
Now, because I will increase the value proposition to local health jurisdictions later.

[Cameron Kaiser] 15:13:03
If there's data to actually get to it i'm otherwise we'll be coming to the party and nobody's there.

[Juliette Mullin] 15:13:10
Great. Thank you, Cameron. When I ask you also have your memories, Yeah, I'm gonna jump in on this one too.

[IAC] 15:13:17
I think supporting some of the looks like this comments, and particularly thinking about calendar.

[IAC] 15:13:26
That you know. Maybe there is consideration for a prioritization of required signatories, but that certainly counties and others that are optional should also be eligible for that support.

[IAC] 15:13:40
I mean, I think, a totally appreciate the comments just now. prepare.

[IAC] 15:13:44
But I think from the plan side, we would actually say we.

[IAC] 15:13:48
We also wanna be consumers of the county information, and we need that to be really successful with calendar.

[IAC] 15:13:54
So I I would encourage an alignment Felix's comments around broadening would be helpful.

[IAC] 15:14:01
That's a really good comment I Think We should also be coordinating with the departments.

[IAC] 15:14:06
Efforts that market placement it does go live, and specifically calling out the need for counties to be supported in their sure data, especially with plans to identify right.
Let's keep going if we can go to the next slide alright.

So our next category here is how can funds be used

So we've actually already kind of spoken to some of this through our conversation just now.

But the Qatu onboarding grants they are focused on what it sounds like.

They're focused on, which is to say costs for the qh io vendor to connect to the qh io vendor costs and fees for the ehr vendor associated with that

Qhl integration. there may be other categories, and I think we welcome from this group.

Hearing any other categories, we should include as as one of the listed categories, and then we may consider having an other for applicants to tell us what they need.

On the technical assistance side. this would be a potentially very broad category.

So welcome feedback, both on anything. we might be missing here, or things we ways we might be able to narrow this at all.

Things that might be included in a technical assistance.

Grant is funding to pay for a consultant, and it expert, a legal expert, a project manager.

And one of those or several of those individuals would might be doing work like supporting.

Selecting a Qh. Io: So an organization may actually need a technical assistance.

Grant to help them identify the qh a that's right for them.
They might be supporting the contracting process of the Qhao. They might be supporting the general project management of implementation.

They might be supporting things relating to the clinical and operational workflow adjustments, or training that need to happen as part of the changes in the Ehr record.

So I'll Pause for a minute here. to see if there's any initial reactions to these general categories of funding.

And I know, Cameron, You had your hand raised for this one, or was it for the previous one?

No, not a problem. Feel, Felix. Yeah. Thanksgiving.

So on onboarding for the cost associated with integration with ehr vendors.

And I just wanted, make sure. Does that include both. Not just, for instance, importing data into the workflow which obviously a lot of tax providers are interested in and and keen on, but also really importantly, we export the outbound data creating a data feed from Vhr so that it can be passed along and sent to those that request it under the Dsa.

Because the latter's obviously the other side of the coin and it's also not just an initial cost.

But what an ongoing cost is, I think many of us can all recognize.

Yeah, I think kind of a broad. My broad answer to that would be.

We have not considered any specific limitations yet. On what exactly could be covered from Hr.

So I'll Pause for a minute here. to see if there's any initial reactions to these general categories of funding.

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Yeah, I think kind of a broad. My broad answer to that would be.

We have not considered any specific limitations yet. On what exactly could be covered from Hr.
Vendor costs. I think your point about initial versus ongoing is one that we're certainly looking at and welcome any feedback from the group on how we think about that piece.

[IAC] 15:17:38
Well, if I slap the mic i'm, kind of turning around your question and asking it to you.

[IAC] 15:17:46
Yes, yeah, exactly. I I think that's a you know from from an advocacy perspective on behalf of our users and numbers events that's kind of a layup I mean anything that supported on ongoing basis.

[IAC] 15:17:59
Is going to ultimately uplift the success of the Dsa. and in these costs they don't go away.

[IAC] 15:18:05
Whether they are that's where by the qjo passed on through the fees that that we that's prioritari subscribers and or are partially subsidized by the state and recognition of you

[IAC] 15:18:19
know, Qaja is kind of being up again. The health data safety that

[IAC] 15:18:28
It would definitely be very interested in the conversation about how that can be supported.

[Juliette Mullin] 15:18:36
Thank you that's helpful alias you have your hand raise.

Yeah, Thank you. So what is the process of identifying these technical assistance?

What is there a qualification process? was the timeline.

And whether Hrios can can apply for that or not.

[Juliette Mullin] 15:19:02
So we're still working out exactly what vendor selection would look like for this.

[Juliette Mullin] 15:19:07
Currently we've talked about a process through which really the applicant would be the one I identifying a vendor.

[Juliette Mullin] 15:19:15
That would meet their needs. I’m curious if you could say more about your question on H I O S and the technical assistance that an HIO might need to get a grant for or are you referring to HOS as

a provider of technical assistance. well,

Not to the extent that it’s been described here as a consultant and legal assistance, but to the extent of training the participants in and leveraging the data that HIV provides so it’s more of

a training on the tool sets. that they should provide to the participants, and that could be one of the cost items on the left side of this Hr.

[Ali Modaressi] 15:20:00
On-boarding Grants because it’s not other than on-boarding.

There is another level of service that so many trials provide, and with it that you know they can be compensated by the grant.

I think that’s helpful, and we can look at that, you know. Thank you.

[Juliette Mullin] 15:20:20
I do have my eye on the time I see Aaron you have your hand raised, so we’ll we’ll take Aaron’s comment, and then move to the last piece.

[IAC] 15:20:27
Yeah, just very Lady I I we could get some statement or clarity around ongoing fees, educational reference

[Juliette Mullin] 15:20:47
That’s right, thank you, and think that cut out a little bit for me there.

[Juliette Mullin] 15:20:50
But I think I heard you were asking for clarity on the ongoing piece.

[Juliette Mullin] 15:20:53
Which we will certainly be including as part of my criteria.

[IAC] 15:20:58
Alright, if we can go to the next slide Juliet I I know we’re looking certain that we may not get to the digital identity piece and it’s.

Do you want important? Yeah. So I wonder if we can?

[IAC] 15:21:15
Just get comments on this slide. after meeting members, you can show the timeline slide.

Just so, folks understand, or where, at a very high level, where this timeline looks like and transition absolutely, we can do that.

[Juliette Mullin] 15:21:33
So if we go to the next slide so just to to wrap us on Dxf Grant and it's, Joda noted, please feel free to connect offline with any feedback you have on that slide We just skip

[Juliette Mullin] 15:21:43
today. The immediate next steps as a lane spoke to earlier, as in the next over the in November we will be announcing

[Juliette Mullin] 15:21:51
We intend to announce the award recipients for the educational initiative, Grant and we'll have more information about what's coming there.

Our intent is to release the criteria for the technical assistance, and Qh. I.

[Juliette Mullin] 15:22:02
Onboarding grants. by the end of the year, as as was noted here, there are certain elements that will be really helpful for people to understand.

[Juliette Mullin] 15:22:10
Earlier in this process, such as the ongoing piece, so we will be releasing additional information.

By the end of the year there, and then our intent is to open the first round of applications in in Q one of next year.

So that's sort of the phasing we'll be keeping this group of prize as the timeline becomes more concrete, and I think with that I can transition to the next topic or hand off to the next topic rather

[IAC] 15:22:37
Thank you. but we're gonna turn over to rim and if we can advance, I think probably a couple of slides to 45.

[IAC] 15:22:45
So thank you, and I apologize for not introducing myself earlier at room conference.

[AIC] 15:22:51
A consultant cdi I feel like I know everybody in the room. so I didn't bother before want to talk a little bit about what what we've been doing internally.

[AIC] 15:23:05
And our next steps in digital identity. Today, this is an opportunity to really get feedback on our priorities.

[AIC] 15:23:09
The process is supporting through P. Recall that in our strategy traditional identities we really took 2 things is our focus.

[AIC] 15:23:20
First was defyng what a digital identity was as a collection of attributes.

[AIC] 15:23:24
That establishes the identity associated with the real person and then focusing on personal matching, trying to associate health and social services information with the correct real person with the correct digital identity.

[AIC] 15:23:39
However, there are other components that people often talk about associated with identity, and we want to talk about those a little bit today as well.

[AIC] 15:23:47
At least authentication and authorization. you logging on, based on digital credentials and being authorized to access information such as your health, social services, information are often included when people talk about identities especially identity and

[AIC] 15:24:06
access management, or ld dam you'll hear people talking about that quite a lot.

[AIC] 15:24:12
And also identity. assurance is sometimes included in identity and access management, and that's the process by which I prove that I really am who I say I am as a real person is the process of being

[AIC] 15:24:28
issued digital credentials that I use to authenticate and be authorized, for.

[AIC] 15:24:34
We go on to the next slide. it's kind of a process that you could take through that first I establish my identity through identity assurance so that I can verify who I am through authentication and gain

[AIC] 15:24:48
access to information through authorization that is hopefully collect, correctly
associated with B as a real person.

[IAC] 15:24:57
So this is a process, and what we really focused on is number 4 in the strategy.

[IAC] 15:25:05
But I want to talk about the other 3 components of that as well.

[IAC] 15:25:08
So let's go on to the next slide. and first is on the real definition of digital identity and
the strategy for digital identities called out what attributes we were going to use
associated with the digital identity And

[IAC] 15:25:25
i'm not gonna read through them here. you can look through the strategy and hopefully
get some more insight into why certain things were selected, and certain things were
not, however, that strategy our intent is to include that in the

[IAC] 15:25:42
technical requirements for exchange pp as the attributes of a would be used when
organizations sought to match.

[IAC] 15:25:52
A an individual to their health information, using these attributes and a couple of things
to note here.

[IAC] 15:25:59
Is that what you find on the left hand side are those attributes that seem to have the
most value in person matching.

[IAC] 15:26:07
They are not all of the demographic information about an individual.

[IAC] 15:26:10
And then on the right hand side, that we are establishing standards for those to use the
UsC.

[IAC] 15:26:17
Id to and us at Project and other Federal recognized standards.

[IAC] 15:26:23
They become available. let's go on to the next slide and The other thing that you would
find in the strategy for digital identities was a discussion on how to deal with person
backy, perhaps through a statewide person index and what

[IAC] 15:26:38
we established in the strategy is that that was tended to be secure at the same security and privacy.

IAC 15:26:45
Requirements that we're asking in organizations to put on health information, but extend their use of information in such an index, and that's used would be limited.

IAC 15:26:55
And it's in the dsa it's limited to only linking health and social services. information.

IAC 15:27:01
So what are our next steps there? What we set in the strategy is that we would explore a creation of a statewide person index, and we're doing that first within Calhoun's departments primarily

IAC 15:27:14
less than Dhcs. Cdph activities we're looking across the the departments as well to see what we can stand up within State government first, and then we'll explore the expansion of what we can do across

IAC 15:27:31
the departments to a broader, statewide access capability.

IAC 15:27:36
My questions to group here is, Are there other beer real?

IAC 15:27:41
Excuse me near term next steps that we should be exploring in addition to working with the department's internal

IAC 15:27:51
I at least saw 2 heads non that's if she's some encouragement that maybe we're headed in the right direction.

IAC 15:27:58
Let's go on to the next slide because this is starting to get warrant some of the areas that we haven't talked about before.

IAC 15:28:05
So let's touch first on identity assurance again.

IAC 15:28:07
This is how I prove that I am going to say I am.

IAC 15:28:11
Some of you may have gone through both identity assurance yourselves in the past.

IAC 15:28:18
I have been assured. My identity has been sure assured online 2 different times with Federal government.

[IAC] 15:28:25
And then I failed once with the Federal Government as well. So this is a difficult process.

[IAC] 15:28:33
It is probably the first step in allowing an individual, or perhaps their family and caregivers to access help information.

[IAC] 15:28:40
They need to prove who they are, and it is something that is required by many public and private sector organizations that have rules out in front of them.

[IAC] 15:28:48
Now to share health information with there, patients clients or members.

[IAC] 15:28:57
And so there is a need there. our next step is really to coordinate, collaborate across the Department's agencies for the need for identity assurance across the State.

[IAC] 15:29:09
There are a number of activities ongoing now within the state departments, and actually outside of Lhhs, as well.

[IAC] 15:29:15
From looking to what extent we could leverage that there's also a keyn federated identity pilot that seeks to establish a way.

[IAC] 15:29:25
The different identity providers can be trusted.

[IAC] 15:29:30
And you can think of this as like I said i've been identity proof twice within the Federal government I failed with, one of the agencies.

[IAC] 15:29:39
So why doesn't that agency trust one of their sister agencies? identity proofing?

[IAC] 15:29:45
And how do you establish trust across identity providers? You're gonna monitor?

[IAC] 15:29:50
What happens with that program and explore, Perhaps a statewide federated identity assurance coming out of that.

[IAC] 15:29:58
Now that's a long term project you don't say that. We're in the next 2 months could stand up identity assurance.

[IAC] 15:30:04
That's a very difficult thing to do but that's kind of a roadmap that you might think about my question to the group.

[IAC] 15:30:10
Here is what I did. It is identity assurance and appropriate activity.

[IAC] 15:30:15
What we're doing with the data exchange framework it's a need within State government is it a need for the data exchange framework as well.

[IAC] 15:30:24
And will participants in the data exchange framework.

[IAC] 15:30:27
Use such a service if if something, if if there is something that we can provide Erin, I see your hand up.

[IAC] 15:30:36
So I think I know the answer but I'll I'll just I'll for answers, please to answer. So in the previous lines it wasn't clear if you were indicating that identity assurance was necessary for step to build.

[IAC] 15:30:48
State webinars or if it's index first I don't think that it's necessary.

[IAC] 15:30:56
I there are examples where organizations have very robust person, matching and robust.

[IAC] 15:31:05
I identity management internally without identity assurance?

[IAC] 15:31:12
I can have a digital identity without cheating away, but face is attached to that.

[IAC] 15:31:17
However, there are advantages to identity assurance simply because what follows it usually is credentially.

[IAC] 15:31:25
Well, that means that I have additional credentials, attributes to my digital identity that are unique to me by login, Id and password is issue.

[IAC] 15:31:36
No one else, and therefore become you need so no, probably not a precursor that approve records, but potentially useful like.

[IAC] 15:31:47
Did that match your answer? Yes, Okay, good. I should have asked your answer before I told you any other questions.

[IAC] 15:31:54
Art? Are there thoughts about whether this is an appropriate activity, or that this is not an appropriate activity

[IAC] 15:32:05
But I think what I would probably say is stay tuned let's make some some sort of at least seen a few heads not being there.

[IAC] 15:32:12
This is This is difficult. This is expensive so there's there's just going to be more to come right.

[Amie Miller] 15:32:20
Let's go on to the next give me a question let's look at a question, and more of a comment.

[Amie Miller] 15:32:25
It seems like this: If this is done well, this will save a lot of people money who are having to duplicate this locally.

[IAC] 15:32:32
So this seems like very important and tremendously valuable work. Great.

[IAC] 15:32:37
Thank you. It is expensive and difficult, so I I would agree with you let's go on to the next slide, Please what often follows.

[IAC] 15:32:50
Then identity assurance is i'm sorry I got ahead of myself.

[IAC] 15:32:55
So go back. Want to authentication what often follows is credentialing in an inventory individual.

[IAC] 15:33:00
Sorry that's a techy term when I use that i'm talking about giving them a login, Id and password, or some other way to digitally prove their identity.

[IAC] 15:33:11
As well. it's what you'd log in using those credentials to access information, whether that be your Amazon account to make a purchase or to log on to my chart to take a look at your health information

[IAC] 15:33:27
in a dhr system it likely as I said before likely spans on the attributes.

[IAC] 15:33:34
It might be part of your digital identity. Now you have a login, Id and password along with your maid date of birth, etc.

[IAC] 15:33:40
That might be useful and identifying you. if that information is appropriately safeguarded and shared.

[IAC] 15:33:49
It does require identity assurance I believe it's a prerequisite, was it?

[IAC] 15:33:53
If I can't prove who I am that I don't get digital credentials to prove my identity to another system, and therefore might help be the basis for common identity and cross systems as well as press programs our our plan next step is

[IAC] 15:34:09
again to coordinate across departments within khhs for a need to see if there is a need for a common authentication.

[IAC] 15:34:17
Think of it as single sign on to state departments. whether that is valuable, especially in the wake of a shared identity.

[IAC] 15:34:27
Assurance shared logging credentials mighty So we're going to explore that as as potential next step here.

[IAC] 15:34:34
My questions for the group here are there concerns about creating and managing a common set of credentials.

[IAC] 15:34:42
This is also then, a target or identity. them and sorry there's specific concerns about even launching on this.

[IAC] 15:34:53
Even if we limit it to. We did the State Department.

[IAC] 15:34:58
There are also questions I have about whether there are other important initiatives of.
We might be needing to monitor Leverage in this area.

In identity insurance. There is some federated identity insurance going on.

It's not clear in our industry what might be going on and share critically. and authentication Troy, I see you again.

Yeah, like my comment is, I believe this will raise the 4, or how we do.

I did did it all identity insurance through this effort?

Which is really well needed, since I think every physician in the State, including myself, adding new disability, I can't open in our names with our credentials.

I. Did you hear of that one? Yeah, so so a better level of authentication than currently exists in meeting what i'll say, great as you as you have alluded to it, makes for a bigger target and then for a higher side of

Let's go into the next slide. then authorization is what comes after authentication.

Most of the time you authenticate to prove that you are to a system.

And now you are authorized to access information. Now, authorization is driven by the policies requirements of the data owners.

There isn't anything in particular about my identity that's associated with my authorization?

It is the policies of who the data, what I can what I am authorized to access, and then maybe govern by regulation law or even policies, procedures of the data exchange framework But it is something that the data owners

88
control rather than the individual, the certain extent, and therefore off the authorization is probably something that happens within the system or the data holder.

[IAC] 15:37:08
And this is something that is necessarily shared those business rules don't necessarily transfer to a sheer resource as well.

[IAC] 15:37:17
It does need to align with consumer expectations about being able to access their own data.

[IAC] 15:37:22
For who is granted access to their data. again, to be embodied in business rules, and it must align with the Dsa.

[IAC] 15:37:32
And any pps that we put in place about consumer access to their information, and to guarantee of what those business schools must allow.

[IAC] 15:37:41
This probably requires consent of some time to a company again, and consent, since at least in my definition outside of digital identities.

[IAC] 15:37:51
But it's always closely associated with It our plan here is to allow the department's agencies a private sector organizations to manage their own authorization mechanisms that we may share authentication but

[IAC] 15:38:06
authorization is managed at the data holder level, and then we would explore.

[IAC] 15:38:12
Consent is a big beach to empower organizations.

[IAC] 15:38:17
My question to you. Is there other activities that we should be considering here

[IAC] 15:38:27
Okay, i'll make a comment here, too. sorry or the current better regulation for,

[IAC] 15:38:39
I export. you might be aware of it's probably information blocking headline and the way that works out is that each entity has to figure out for itself.

[IAC] 15:38:50
What is it say? D. R. s designated record set and there is no uniformity, since there every organization is doing that.
And then there's the task of how they would segment out the information, and how that would play with any system that says, Okay.

I'm authorized to do these things but they want these things and I don't believe that any robust technology yet exists to mesh the consent or authorization piece with the automatic release.

So I'm just pointing that out as 2 difficulties with this piece it's not really part of the Dxf.

But then it's part of the yeah and and I appreciate that.

Thank you, and please don't ever apologize for comments see I'm just point out that the designated record set is part of the definition of

I, which appears in one of the data exchange frameworks, Dms. and

Regulating the information and organization's must share so that lack of uniformity, and the definition of the designated record set of applies there as well.

But those difficulties are exactly why we're thinking that this is something that needs to be at the data over level where they have at least the most insight in what is the appropriate information to share.

But and I see your github yeah so I'm wondering if the consent part can be if it's not already either inferred or clearly.

They're part of the dsa so that it's like not a whole other piece. and I don't know enough of the legal issues, or probably even the technical.

But what my mind thought of so I'm not sure that I completely understand your question.

Let's go on to the next slide which is about consent but then, let's come back to that and see if if we could, we could get there so again.
I said that I don't consider consent as part of digital identity, but it's often associated with it.

So it makes sense. It is also something associated with authorization.

Perhaps not being authorized to access my own data, but be being authorized to access a family member's information that I may be a caregiver on.

And so it allows consumers to determine what information people and systems are permitted to access, perhaps other than themselves, which is, there is a right to your own data that is explicit.

It is really dependent upon robust identities because if you can't prove who I am.

Then how can you possibly record consent? That I am giving to people to authorize my information?

And that's why, it's often very closely associated with digital identities.

But I point people to is the Dhcs.

Just yesterday. Hell a webinar announcing the authorization to share confidential medical information.

There's probably a way to say that acronym that I don't know but a pilot to explore, both sharing a physical ventil and social information through a standardized sent process and so to allow data holders to see what information and individuals sent it for.

Our intent is to really prioritize our work on identity, but to monitor the lessons that are learned through the Dhcs program.

Now, there are limitations there. That program makes use of very specific of legal levers to allow that uniform consent process.
But there still should be lessons to learn out of that, and make use of it.

There. and so This is mostly informationable. informational on our approach right now is to monitor that program.

Continue to talk about consent and see if there is a role for consent with the data exchange frame.

So I go back to you, Diane, and maybe you can help me understand a little bit more what you mean by consent being in the Dsa.

No, I cannot. What is the right thing to do?

We wanna make sure that people are empowered. but we also want to make sure that information don't get where it needs to.

And so walking that that line will be something we're always having to.

You asked about the app for them. If you spell the acronym, it is for consent.

Is the ask me for, of course, which we thought was pretty fun.

Yeah. Okay, Felix. yeah, we have 2 things one of this slide.

On on the subject of asked me a lot of us were on the webinar the pilot.

Opportunity is very intriguing I think great time we One thing I know you're this board doesn't directly.

Touch. ask me, but instead of monitor, and try to sync with it at the appropriate time in place, Is that
It seems like it's makes a lot of sense for areas that aren't already covered by based on hipaa such as before you can see a heart or something's use also exchange information but not to the covered

[IAC] 15:44:48
Ids Okay, at least some ice B: One little bit of pause watching webinar. Dr.

[IAC] 15:44:56
Scott operating the scope of of the ask form is that Phi which I don't know if that applies that all of a sudden, sharing health care information becomes a opt-in process.

[IAC] 15:45:14
Okay, information. So that to Hipaa, subject to an opt-in, all here is only with respect to those data that are subject things like Okay, really great to hear that.

[IAC] 15:45:29
Thank you. And typically backtrack on the the person matching over the only comment there is that, you know.

[IAC] 15:45:39
It seems like, even at some point you know He's a lot of qh ios, or perspective. Qhos.

[IAC] 15:45:42
They have the Mpi center price version of

[IAC] 15:45:57
that. I just encourage that there will be discussion with some of the lessons learned, and maybe even in a a proper Canadian leverage.

[IAC] 15:46:05
What's pretty up there? absolutely agree? with that i'm, monolithic statewide person Index is a huge undertaking, and not leveraging Good work that is already have happening.

[IAC] 15:46:22
So yes, thank you for if there isn't anything else.

[IAC] 15:46:27
I think that's the end of that section I think we're going to public comments.

[John Ohanian] 15:46:30
Yes, Okay, I can jump back in here. we're gonna enter into public comment.

[John Ohanian] 15:46:38
Please note that individuals in the public audience who might have a comment and inserted in the Q. A. I know we have some questions in the Q. A. So if you phrase them, and you want to bring them here, you can these please, raise your
hand or in the zoom teleconferencing.

[John Ohanian] 15:46:51
Go ahead and raise your hand there we will you recognize individuals who are on site
first, and then will recognize folks on the zoom, and we'll take you off you once we call
your name and we'll open up public comment now in the

[Emma P - Manatt Events] 15:47:05
room. Great First up we have. thanks, John. We have L.

[L. Johns] 15:47:12
Johns. Oh, you should be able to unmute Hello, Thank you.

[L. Johns] 15:47:18
This is Lucy John. I have a couple of comments.

[L. Johns] 15:47:23
I would like first to refer to the Qh. i.

[L. Johns] 15:47:27
O conversation a long time ago, and I hope people will remember at least a little bit of
it.

[L. Johns] 15:47:35
I would like to propose that the principles that were listed could potentially include the
word and concept of trust.

[L. Johns] 15:47:50
As I read what's going on confidence and a Qh Io is not the same as the trust which is
the apple foundation for interoperability.

[L. Johns] 15:48:03
So the in the district there needs to be trust by design.

[L. Johns] 15:48:12
Whenever thinking about all of the components and elements and inter relationships of
the qh ios.

[L. Johns] 15:48:21
So that's my first thought. Somebody commenting on those principles mentioned the
idea of quality of data being a principal.

[L. Johns] 15:48:35
This made me realize that maybe i'm not understanding what a Qh.

[L. Johns] 15:48:42
Io is, from my point of view and my experience. The last decade with interoperability is the qh los are transmitters update.

They are not vetting data for the quality of the data.

[L. Johns] 15:49:03
From my experience h ios. don't actually see the data they pass it along to be between and participants who need it, and responders who may have it.

[L. Johns] 15:49:18
So that's my thought about quality of data I also have a comment about the grants.

[L. Johns] 15:49:26
The ta and qh i o onboarding grounds.

[L. Johns] 15:49:33
When I first read about this and heard about it, my thought was that the standard was providing.

[L. Johns] 15:49:41
If you will, investment capital to lift up our entire ecosystem to enable interoperability; that they were not in the business of ongoing subsidy of operations which, in effect, would be enabling subsidized

[L. Johns] 15:50:02
pricing. So if i'm wrong about that I hope that somebody will correct me.

[L. Johns] 15:50:08
That may be discussed in the original appropriation which of course, I haven't seen my final comment about components of digital identity.

[L. Johns] 15:50:21
I always appreciate listening to rim he has a vast experience with this and so I hope that it's in order for me to suggest Rim, that whenever we're ultimately talking about state policy respecting level of confidence, we need to

[L. Johns] 15:50:41
be talking about I. O. 2 or higher we can't leave Oh, yeah. the notion of level of confidence up to every individual, C. Q. H. I.

[L. Johns] 15:50:59
O or is subscribers. There needs to be State policy about Well, what level of confidence is. and we have now a pretty well-defined, and certainly much discussed levels of confidence from nist and I o 2

[L. Johns] 15:51:19
from my point of view as a consumer is the absolute baseline.
Thank you. Thank you very much. Could we have that demo I don't see any other hands raised at this time.

Okay, Well, thank you, everyone for your comments. Just just a couple of thoughts as we then get into the closing.

And next steps, and I don't know how we do this every time.

But we are spot on time. So thank you. First to the entire team.

CdI team and that team calhjs who put this together?

A lot of thought into it, and and then I want to thank all of our members and all the attendees today.

You know there's so much knowledge around the table whether it's the virtual one, or the one you're sitting at, and it's It's very obvious that this can only get done with all of you your perspective in

the field your real real use of what's coming is critical that. it makes sure that it it helps and and doesn't hinder your work.

So I just appreciate everyone's continued dialogue if you feel like

You need additional time Please feel free to reach out we're happy to have conversations and ensure that we we fully understand all the issues that you're bringing up, and and ways that we can move forward so with

that our our next steps are that we're gonna take all of your helpful input into consideration and summarize notes and have that out to you.

Shortly, and if you look at some near time dates, if we can go to the next one next slide there's our dates.

Keep those in mind, both for our Ic. please look at the word out.
I know we've been adding folks to our mailing list every day.

So as people are interested, please have them send interest to our Cdi address, and we'll get them added. There's a number of things that we're working on going forward.

You heard the work on the Grant program right? Really excited to have that out there.

You know, at a state level we are not a regional level at a state level.

We're talking about digital. Id data sharing agreements and the exchange of information to help people.

And this is not an easy task. I heard comments like Major undertaking.

Bold, not easy work from this group today. So know that we really appreciate the partnership, and being able to do this, together with all of you.

So with that. Unless my team needs me to say anything else.