

**California Health & Human Services Agency  
Center for Data Insights and Innovation  
Data Exchange Framework Implementation Advisory Committee  
Data Sharing Agreement Policies and Procedures Subcommittee  
Meeting 8 Transcript (10:00AM – 12:30PM PT, June 27, 2023)**

The following text is a transcript of the June 27 meeting of the California Health & Human Services Agency and Center for Data Insights and Innovation Data Exchange Framework Implementation Advisory Committee, Data Sharing Agreement Policies and Procedures Subcommittee. The transcript was produced using Zoom's transcription feature. It should be reviewed concurrently with the recording – which may be found on the CalHHS Data Exchange Framework [website](#) - to ensure accuracy.

[Emma P - Events] 13:01:14

Participate today, participants may submit written questions and comments through the Zoom Q&A box. All comments will be recorded and reviewed by CDI staff.

[Emma P - Events] 13:01:23

Part participants may also submit comments and questions as well as we requests to receive data exchange framework updates to see the II at CHHs.

[Emma P - Events] 13:01:32

Questions that require follow-up should be sent to [cbi@chs.ca.gov](mailto:cbi@chs.ca.gov).

[Emma P - Events] 13:01:39

Members of the public and subcommittee members must raise their hand for Zoom facilitators to unmute them to share comments.

[Emma P - Events] 13:01:46

The chair will notify participants of appropriate time to volunteer feedback. If you logged in by a Zoom today, press raise hand in the reactions area.

[Emma P - Events] 13:01:53

And if selected to share your comment, you'll receive a request to unmute. Please ensure you accept before speaking.

[Emma P - Events] 13:01:59

If you logged on by a phone only press star 9 on your phone to raise your hand. Listen for your phone number to be called by the moderator and if selected to share, please ensure you are unmuted on your phone by pressing star 6.

[Emma P - Events] 13:02:11

Public comment will be taken during the meeting at designated times. It will be limited to the total amount of time allocated for public comment on particular issues.

[Emma P - Events] 13:02:19

The chair will call on individuals in the order and which hands were raised. Individuals will be recognized for up to 2 min and are asked to state their name and organizational affiliation at the top of their statements.

[Emma P - Events] 13:02:29

Participants are encouraged to use the CHHS box to ensure all feedback is captured or email comments to CDI at CHHS.

[Emma P - Events] 13:02:37

Dot ca.gov.

[DeeAnne McCallin] 13:02:43

Thank you, Emma. Thank you for joining us today for the eighth meeting of the Cal HHS Data Exchange framework.

[DeeAnne McCallin] 13:02:51

Data sharing agreement policies and procedures subcommittee. I am Diane McCallum, Deputy Director.

[DeeAnne McCallin] 13:02:58

For the as for the center of data in sites and innovation and beginning today. I'll be serving as the chair for this committee.

[DeeAnne McCallin] 13:03:10

So I joined CDI January thirtieth this week marks my the end of my fifth month. I used to listen to this subcommittee when I was on the IIC and previously on the advisory group.

[DeeAnne McCallin] 13:03:22

And so I would usually have ears on whenever I had availability to listen. I'm happy and pleased to be here today and since I joined CDI this is the first standalone subcommittee meeting because we hosted a few as many of you know as joint meetings, which were productive and effective, but it was time to

[DeeAnne McCallin] 13:03:41

bring it back to the subcommittee group. Today's meeting will include a review of several policies and procedures.

[DeeAnne McCallin] 13:03:49

That have been finalized and will soon be released. We'll also discuss draft language. For 2 PNPs.

[DeeAnne McCallin] 13:03:58

Under development the real time exchange and privacy standards and security safeguards. And before we go into the, roll call, want to thank Courtney Hanson who has been leading as the chair over the last, I don't even know.

[DeeAnne McCallin] 13:04:16

Definitely 9 months or so, probably longer. Thank you very much, Courtney, for your service to date as chair and for the sub- Community know that Courtney will still be heavily involved with these meetings being.

[DeeAnne McCallin] 13:04:29

A point person on the CDII team for the data exchange framework. So very pleased to but still have Courtney with us on the Alrighty, so we'll begin this meeting with a roll call of the members.

[DeeAnne McCallin] 13:04:43

Please say present as I read your name and I apologize in advance if I mess up any names. Certainly not intended.

[DeeAnne McCallin] 13:04:52

So, myself, I'm here and Courtney Hanson.

[] 13:04:56

Good morning.

[DeeAnne McCallin] 13:04:58

And she or take our

[DeeAnne McCallin] 13:05:07

Heard a little mute, Bill Barcelona.

[DeeAnne McCallin] 13:05:14

Shelley Brown.

[DeeAnne McCallin] 13:05:19

Jason Buckner.

[Michelle Brown] 13:05:22

Right, present.

[DeeAnne McCallin] 13:05:23

Thanks. Oh, and I see Shelly. Thank you.

[DeeAnne McCallin] 13:05:29

Jason?

[DeeAnne McCallin] 13:05:35

Alright.

[] 13:05:38  
Present.

[DeeAnne McCallin] 13:05:41  
Hello, Matthew Eisenberg.

[Matthew Eisenberg] 13:05:44  
Present.

[DeeAnne McCallin] 13:05:45  
Thank you. Matt Eisenberg.

[Matthew Eisenberg] 13:05:48  
That's the same at Eisenberg. I'm still present.

[DeeAnne McCallin] 13:05:49  
Oh, sorry. Just checking.

[John Helvey] 13:05:55  
Present.

[DeeAnne McCallin] 13:05:56  
NJ Jane.

[Sanjay Jain] 13:05:58  
Good morning, peasant.

[DeeAnne McCallin] 13:06:00  
Brian John Listen.

[DeeAnne McCallin] 13:06:08  
Diana Kemp.

[Diana Kaempfer-Tong] 13:06:10  
Present.

[DeeAnne McCallin] 13:06:12  
Justin.

[DeeAnne McCallin] 13:06:19  
Helen Kim.

[DeeAnne McCallin] 13:06:24  
Stephen Lane. Hello, Lisa Matsubara.

[Steven Lane] 13:06:25  
Good morning.

[DeeAnne McCallin] 13:06:35  
Devin McGraw. Hi. Jacky Nordov.

[Deven McGraw] 13:06:36  
I'm here. Thank you. Bye.

[Jackie Nordhoff] 13:06:41  
Present.

[DeeAnne McCallin] 13:06:42  
Hello?

[Eric Raffin] 13:06:44  
Present.

[DeeAnne McCallin] 13:06:45  
Hello?

[Paula Riese] 13:06:48  
Present.

[DeeAnne McCallin] 13:06:49  
Hi, Mark Savage. Hello.

[Mark Savage] 13:06:51  
Good morning.

[Tom Schwaninger, L.A. Care Health Plan] 13:06:55  
Good morning everyone.

[DeeAnne McCallin] 13:06:56  
Hello. Morgan Stains.

[Morgan Staines] 13:07:00  
President. Good morning everybody.

[DeeAnne McCallin] 13:07:01  
Hi, Elizabeth Stefan.

[Elizabeth Steffen] 13:07:04  
Morning present.

[DeeAnne McCallin] 13:07:05  
Hi, Lee 10.

[Lee Tien] 13:07:08  
Oh, present. Thanks.

[DeeAnne McCallin] 13:07:09  
Hello.

[Belinda Waltman] 13:07:13  
Present.

[DeeAnne McCallin] 13:07:14  
And Terry Wilcox.

[Terry Wilcox] 13:07:15  
Present. Good morning.

[DeeAnne McCallin] 13:07:17  
Hi, thanks. All righty. That is the roll call. Thank you.

[DeeAnne McCallin] 13:07:22  
If you're joining in late through into the chat that you've joined us and not required but it's great to have everybody here with us today.

[DeeAnne McCallin] 13:07:29  
Thanks a lot. Speakers today will be, covering the content during this next 2 h or so or myself and Courtney.

[DeeAnne McCallin] 13:07:38  
And then along with us are our trusted advisors and partners from and at help Helen Fister and Cindy Barrow, who most of you should be familiar with.

[DeeAnne McCallin] 13:07:53  
Alright, covering our meeting of our vision and meeting objectives. So the vision for the data exchange in California, once implemented across California, the data exchange framework will create new connections and efficiencies between health and social service providers.

[DeeAnne McCallin] 13:08:10  
Improving whole person care. The data exchange framework is California's first ever statewide data sharing agreement that requires the secure and appropriate exchange of health and human services information to enable providers to work together and improve an individuals health and well-being.

[DeeAnne McCallin] 13:08:29  
The objectives for today's meeting is to inform the subcommittee members of the policies and procedures that will be finalized and published.

[DeeAnne McCallin] 13:08:38

We will be discussing and soliciting input from the subcommittee and from members of the public on the Pmp's in development.

[DeeAnne McCallin] 13:08:46

And we'll be discussing a policy and procedure glossary and review any updated terms that have happened at during the exercise of creating and glossary pulling out the terms to make the policies and procedures a bit more manageable and have a one-stop shop place for the

[DeeAnne McCallin] 13:09:07

Alrighty, so now we're diving right in into the policies and procedures. I'll be covering the summary slide and what our game plan is for today and then be going to my partners here for presentation on the on the components of this slide lists the status of each of the policies and procedures in development.

[DeeAnne McCallin] 13:09:28

Earlier this month, CDI shared that the first 3 policies and procedures noticed on this slide have been finalized technical requirements for exchange California information blocking and prohibitions and early exchange.

[DeeAnne McCallin] 13:09:42

Today we're sharing that 3 additional policies and procedures have been finalized. These are the QHIO policy and procedure.

[DeeAnne McCallin] 13:09:50

The process for amending the DSA, which is an amendment to last July's policy and procedure and the development of and modifications to policies and procedures which is another amendment.

[DeeAnne McCallin] 13:10:05

The focus our discussion today will be draft language for 2 policies and procedures in development the real-time exchange and the privacy and security safeguards.

[DeeAnne McCallin] 13:10:16

So from our last couple of meetings we have discussed both of those but we knew coming into today's meeting that they would be the focus of discussion.

[DeeAnne McCallin] 13:10:27

So with that, I will pass it off to Helen, Vister from Manette to talk to us about the QHI.

[DeeAnne McCallin] 13:10:34

Oh, the qualified health information organization P and P.

[Helen Pfister] 13:10:39

Okay, so good morning everybody. So this is a PMP that you have obviously seen before.

[Helen Pfister] 13:10:47

Went out to public comment and we got feedback from the IC and this subcommittee in prior meeting.

[Helen Pfister] 13:10:50

And we are now finalizing this. And what this does is basically set up establish the qualified HIO program.

[Helen Pfister] 13:10:56

Which and that program which will be set with a separate document will establish the requirements and intermediary has to satisfy to be designated as a qualified HIO.

[Helen Pfister] 13:11:06

And you all got copies of the final PMP. And it's going to be published to the DXF website after today's meetings.

[Helen Pfister] 13:11:14

Any questions about that?

[Helen Pfister] 13:11:19

Okay, next slide please.

[DeeAnne McCallin] 13:11:24

Thank you, Helen. Alrighty, I'm going this is DN again covering the information on the process for amending the DSA.

[DeeAnne McCallin] 13:11:35

We did share this on our lap during the last IAC and the joint meeting with the subcommittee. Earlier, was that June?

[DeeAnne McCallin] 13:11:46

I think it was earlier June. So as we are updating the process for amending the DSAP and peach to establish a more steep streamlined approach for making administrative changes.

[DeeAnne McCallin] 13:11:57

Keywords being the administrative changes and to remove the requirement that signatories re-execute the DSA when if it is amended.

[DeeAnne McCallin] 13:12:08

The original policy and procedure had that every if the DSA was amended. Everyone would need to resign that.



[DeeAnne McCallin] 13:12:17

We are still keeping in everything that, is material it still follows a very transparent process and posting and sharing and information like that.

[DeeAnne McCallin] 13:12:28

So what is changing is administrative changes. Let's see, ensure administrative consistency across the DSA and all PMPs participants will have the opportunity to object to an administrative change during a 10 day public comment period.

[DeeAnne McCallin] 13:12:48

Standard procedures for amendings will not be required. So going to task force and everything like that. And then the execution of the agreements.

[DeeAnne McCallin] 13:12:58

So we will be, it the PMP is being revised has been revised to remove the requirement for participants to execute amendments to the DSA.

[DeeAnne McCallin] 13:13:07

We have something like 1,400 DSA already signed so and that number will continue growing and to be able to push those out to re-execute those.

[DeeAnne McCallin] 13:13:20

Those actual online electronic DSA would be an administrative burden, basically too many. And then we include on the slide the definition of an administrative change.

[DeeAnne McCallin] 13:13:34

So I do see one hand raise and I encourage others who might have questions or comments on this to raise their hand and we can you can have the floor now Matthew.

[Matthew Eisenberg] 13:13:43

Thanks, Diane. I guess the questions I have are a 10 day period doesn't really give much time for participants to review and formulate responses if there have been significant changes or they have concerns about the what we might call administrative.

[Matthew Eisenberg] 13:13:58

I wonder if that why the 10 days were selected. And then I guess what what would be the process if if a PMP really was significantly changed and it was no longer acceptable for a participant to honor the framework what's the process of saying that we can't support this new change

[DeeAnne McCallin] 13:14:19

Okay, the 10 days was based upon it not being significant and material and extremely administrative in nature. Yes, there could be subject different subjective opinions on what that is.

[DeeAnne McCallin] 13:14:33

We will help to guide that type of stuff and we'll be very transparent in pushing and making sure that subcommittee members, I see members, signatory lists are all pushed this information.

[DeeAnne McCallin] 13:14:48  
The

[Matthew Eisenberg] 13:14:49  
Yeah, what may be insignificant in some minds may be different for others. And I just, I think that a 10 day period really won't give anybody a chance to comment.

[DeeAnne McCallin] 13:14:54  
Noted.

[DeeAnne McCallin] 13:14:59  
Okay, thank you and I do see others agreeing with you. Suggestions of 10 days also is too short and a suggestion of up to 30 days.

[DeeAnne McCallin] 13:15:11  
So we will consider. The PNP as it was should have been shared. As we'll share, still has in the old ones, the one from July, 22 still has the information on how a non administrative change would be made.

[DeeAnne McCallin] 13:15:30  
So that is not touched, not changed revised. So that's the place to look for that.

[DeeAnne McCallin] 13:15:36  
John H.

[John Helvey] 13:15:40  
Yeah, can you give us an example of what you would consider an administrative change? And then what you would consider a significant change.

[DeeAnne McCallin] 13:15:50  
I can off the top think of one, the change about, not requiring signatories to re-execute the DSA.

[DeeAnne McCallin] 13:16:00  
That is how that's what this actually change came to be when we realized that every DSA that has been signed would need to be and working on the glossary and definitions.

[DeeAnne McCallin] 13:16:12  
Where we were like saying, okay, so if we made this one small. Change, we would need to have everybody re-execute a DSA.

[DeeAnne McCallin] 13:16:21  
So that is an administrative change.

[Helen Pfister] 13:16:21  
Oh

[DeeAnne McCallin] 13:16:26  
Do any of my colleagues or anyone have an example or? Hypothetical or what might be a more

[] 13:16:34  
There were some of the definitions in the. Yeah, there were some there were some like definitions in the glossary where we changed definitions from shall mean to me for example those are very simple definitional administrative change.

[Helen Pfister] 13:16:35  
Yeah.

[] 13:16:51  
Alright, that was going to be my example. So changing definitions, another example as everyone knows, there's pending legislation, once legislation, one of those bills.

[] 13:17:07  
Numbers. Our health and safety code. So the renumbering. Would be an administrative change just so we can make it.

[] 13:17:17  
Through. The DSA. And then there's a similar change in the PMPs that we'll talk about.

[] 13:17:21  
Be more substantial change would be something that actually changes the burden on participants. So if, you know, we're going to add a new requirement that all participants will need to follow as that would go through the regular course.

[] 13:17:40  
There's already, a regular course through the PNP if there's legal changes that need to be administered need to change immediately in order to comply with law so those would still go through those regular course.

[] 13:17:55  
We're really looking at. Not significant changes just you know, grammar errors.

[] 13:18:03  
Definition changes, making definitions that may have had a couple words changed, consistent across the different documents that we have.

[John Helvey] 13:18:16

I like Devin's comment in the in the chat. I you know I think that that She added that then I wouldn't see any problem with it 10 day.

[John Helvey] 13:18:25

Good. Change public comment period.

[Matthew Eisenberg] 13:18:33

Yeah, I agree. Although again, either we define what is administrative and specified that there's no impact to DSA signatories on their obligations to participate in the network.

[Matthew Eisenberg] 13:18:47

And therefore these things were really just truly changing numbers based on changes to bill numbers then let's just be clear about that.

[Matthew Eisenberg] 13:19:00

We really need to exclude anything that would require anything being that might be considered by some administrative that wouldn't be considered by others where their obligations to participating in the framework would change.

[Matthew Eisenberg] 13:19:11

And if that's the case, we definitely need more time for people to review that. But it's one or the other.

[Matthew Eisenberg] 13:19:16

You either say these are basically we're just changing periods and you know. And updating numbers and then it's insignificant, but be very explicit about that.

[Matthew Eisenberg] 13:19:25

Otherwise, you know, if not. You've got to give people time to review it.

[John Helvey] 13:19:31

Yeah, I agree with that. A 100%.

[DeeAnne McCallin] 13:19:34

No, I did. Thank you.

[DeeAnne McCallin] 13:19:40

And the next one. Is very similar. So the development of and modifications to PMPs. So this is an amendment to a July 2022.

[DeeAnne McCallin] 13:19:55

Final P and P and the purpose. Of this PMP describes the processes by which CDI develops new PMPs and modifies existing PMPs.

[DeeAnne McCallin] 13:20:10

So what is changing administrative changes? CBI is amending that this PMP to allow administrative changes to be approved on an expedited timeline.

[DeeAnne McCallin] 13:20:20

The definition of administrative change is a line between the amendments of both this P and P and the process for amending the DSA PNP.

[DeeAnne McCallin] 13:20:27

Participants will have the opportunity to object to an administrative change during a 10 day public comment period. So this the modification amending this one was so that so is to be in alignment with the amendment.

[DeeAnne McCallin] 13:20:43

To the how to amend the DSA.

[Matthew Eisenberg] 13:20:50

Yeah, that this gets a little trickier. I understand the alignment but the real issue is the DSA we don't wanna have people having to sign the DSA every 6 months or 12 months.

[Matthew Eisenberg] 13:21:00

It's just that's impossible. But the policies and procedures that people need to follow are their obligations and I think again they need to be you know, participants need to know what is truly administrative.

[Matthew Eisenberg] 13:21:11

I would include an exclusion for anything that changes their you know, their obligations. And I still think 30 days for for a view is a reasonable approach.

[Matthew Eisenberg] 13:21:23

Why why try to RAM it through in 10 days. Just let people look at it. If it if there's any question that this is really not just a very simple modification based on.

[Matthew Eisenberg] 13:21:31

You know, the legislative cycle, then they can comment. I think 10 days is just not reasonable.

[Helen Pfister] 13:21:36

And just to flag for folks who are on the phone and not, don't see the slides.

[Helen Pfister] 13:21:41

There is a definition of administrative change on the prior slide and we welcome any comments you have on that. And it does specifically refer to a change does not have a material impact on the participants.

[DeeAnne McCallin] 13:21:52

And that term would be the same in both of these PMPs and as would be the same in the glossary as well.

[Matthew Eisenberg] 13:21:53

Again.

[DeeAnne McCallin] 13:22:00

Basically the home of defined terms.

[] 13:22:04

And I just want to clarify that the.

[Matthew Eisenberg] 13:22:04

I would just add some language. About obligations for signatories and participating in the framework.

[] 13:22:15

Thanks Matt. I just wanna clarify very quickly before Devin you jump in. The 10 day period is a 10 day period to object to materiality at the change.

[Deven McGraw] 13:22:16

Yeah.

[] 13:22:26

So if anyone does not think that them to change. Or doesn't think that the change or thinks the the change is material it goes to the obligations of the participants.

[] 13:22:37

That's what that 10 day period is for. It is not a full public comment review period. It is And days to object to an administrative change.

[DeeAnne McCallin] 13:22:50

Devin.

[Deven McGraw] 13:22:51

Oh, okay. Thanks for that clarification. I must have glossed through this stuff too fast because I was gonna say people will argue about whether something's material or not.

[Deven McGraw] 13:23:00

So just having the word material in the definition was not necessarily going to address people's changes, but with Courtney what you just pointed out to us that I know I missed is you get 10 days to say it's material and it needs to be defaulted to the other process.

[Deven McGraw] 13:23:15

Sounds like. Okay. That makes sense. Thank you.

[Matthew Eisenberg] 13:23:19

Yeah, I agreed, but still if I'm on vacation for a week and I'm the one who's sort of looking at all the policies and procedures.

[Matthew Eisenberg] 13:23:26

10 days is inadequate. Because you know, I'm just gonna miss it. So I just think we need to be fair to people.

[Matthew Eisenberg] 13:23:31

They should be able to review this information.

[DeeAnne McCallin] 13:23:37

Thank you.

[DeeAnne McCallin] 13:23:43

Alright, with I do not see any further hands raise and we do see the comments about the 10 days not enough time.

[DeeAnne McCallin] 13:23:52

It's not Matthew alone. So with that, thank you for the discussion and we'll move on to the next.

[DeeAnne McCallin] 13:23:58

Topic. So from here we're actually gonna pass it on to Courtney to talk about one of the focal points of today's meeting, the privacy and, standards and security safeguards policy and procedure.

[] 13:24:16

Thanks, Dan. And so I'm going to share my screen and we're just going to walk through.

[] 13:24:24

The current version of the privacy and security. So this is the one that went out to all folks and I really appreciate everyone who took the time to respond and give us some written feedback by the 20 first.

[] 13:24:38

So I'm going to walk through just each section and then pause and let folks. Time in if they have any questions.

[] 13:24:48

Or comments or suggestions. We wanna make sure we get this right. I see you Mark, do you have your hand raised?

[Mark Savage] 13:24:57

Just an initial question. We're looking at a version that we've all seen and commented on.

[Mark Savage] 13:25:03

Should we assume that there are changes to what we're now looking at or that There's already been a decision not to change anything.

[Mark Savage] 13:25:12

How should we understand that? Thank you.

[] 13:25:15

We have not made any changes. Based on the public comments or the comments we receive from. And written.

[] 13:25:24

I'm sorry. We have not made any changes based on the written comments we've received at this time that was to help inform our conversation and help steer if there's particular sections that we want to clarify.

[] 13:25:34

So we are still considering all comments that we received. This is really to walk through and make sure.

[] 13:25:41

Everything has been that we're hitting every. Section and then I will have specific questions on a few of the portions.

[] 13:25:54

Based on some of the comments. Does that make sense? Diana.

[Mark Savage] 13:25:56

Thank you.

[Diana Kaempfer-Tong] 13:26:00

Yeah, just follow up on that. So do you want us to repeat comments? We've already made to you guys publicly or just.

[Diana Kaempfer-Tong] 13:26:08

Have conversations if other, new things are product.

[] 13:26:13

This is really geared toward new, comments. We do have all of the other ones. Unless there is a benefit that, you know, obviously sometimes there's a benefit to having other folks here comments.



[ ] 13:26:27

So we'd lead to your discretion if you'd like to. Bring them, to the public meeting to have for discussion.

[ ] 13:26:31

But we do have all of them. So the ones just for us were already going to consider.

[Diana Kaempfer-Tong] 13:26:36

Great, thanks.

[ ] 13:26:39

Really?

[ ] 13:26:43

Yeah, I'm not sure if I'm looking at this. From too low of a tactical level, you know, for a bullet 3 in particular.

[ ] 13:26:53

What? You know what I'm struggling with is that this There's like a an iceberg underneath.

[ ] 13:27:02

Regarding the. Yeah, the immediate response, the real-time response. And the, validation that a system would have to do.

[ ] 13:27:13

For consent and which may vary by program. Or be a partial consent. So. I think it would be very expensive to modify the systems to comply.

[ ] 13:27:30

With this and I realize. You know at this level This is okay, but I just feel like you need to sunshine

[ ] 13:27:42

The fact that and able to protect against unauthorized disclosure. Some of these systems are going to have to have some kind of in my opinion some kind of business rules engine.

[ ] 13:27:51

The checks to see if consent was authorized and. To look at those program specific protections against the release of some of the information and the and i'm speaking in particular in social services area i put a comment in the chat earlier that in the, QHIOS, you know, foster carers is called out

[ ] 13:28:18

specifically. I didn't know why, but that's an area of concern where There's a lengthy legal process.

[ ] 13:28:24

And, you know, that client. Information is protected for a lot of reasons. One of which is safety and adoptions are also fall under another area.

[ ] 13:28:35

So I wasn't sure why we called that out. And I apologize for just now, you know.

[ ] 13:28:40

Picking up on that but if that was you know, mandatory. Or influence of mandatory that foster care data would be exchanged.

[ ] 13:28:50

I think we have we may have some concerns. So I need a little guidance if. You know, I certainly agree with this.

[ ] 13:28:59

The statement, but there has to be some kind of acknowledgement that compliance with this exchange signing up to this.

[ ] 13:29:07

It's not gonna be possible until a lot of system. You know changes are made tactically speaking I'll stop there.

[ ] 13:29:18

Thanks, Lily. That's very helpful to keep. In our considerations and as folks now we are you know this is a very multi faceted approach to trying to get this framework.

[ ] 13:29:35

Into a place where we can make sure make it actionable. I appreciate those comments and we will consider them in how we actually can.

[ ] 13:29:49

Again make this an actionable part of. The framework for privacy and security. We are really looking to set the baseline.

[ ] 13:30:06

So what should all participants follow in order to for all, so what should all, what do folks want all other participants to follow in order to feel like their information is safe?

[ ] 13:30:20

What do we want to ensure? To make sure that, you know, the individuals feel their information is safe in this exchange.

□ 13:30:30

And so this is really kind of the bare minimum that we have set forth. The place that you call out is really in our purpose section.

□ 13:30:41

And so we define what that means under this. Policy further down. So if you have specifics that you want to suggest, I think your perspective, your social service perspective is very valuable.

□ 13:30:52

And I would encourage you to. Point out some of the places where it might be helpful to. Talk about what they like which baselines that are floors that were in implementing are going to be problematic and how.

□ 13:31:10

So going back to this policy. Pad up the purpose section. So this is kind of the general overview of what the purposes for this policy and procedure.

□ 13:31:21

And in short, it is. Ensuring that participants will use appropriate safeguards to protect privacy and security FDHI.

□ 13:31:30

And or PI. Maintain a secure environment that supports and the exchange of PHI and or PIS.

□ 13:31:38

Protect against unauthorized disclosure, access, use disruption or modification of PHI and or PII.

□ 13:31:46

And protect against any loss of PHI and or PII.

□ 13:31:52

Do folks have any other comments on the purpose section? Is anything missing? Is anything? To too broad, too much overreaching.

□ 13:32:08

Give it one more moment for hands.

□ 13:32:12

And I apologize, I don't have sharing my screen. I can't see the chat. So folks have anything in the chat that they want to bring to the conversations, please raise your hand for this discussion.

□ 13:32:26

Seeing no hands. A quick overview of the Matt.

[Matthew Eisenberg] 13:32:33

Yeah, no, I think we're, I don't know if we've gotten there yet, but, what, the, concern that I'll have is in a later section that, deals more with sort of, again, I'm no lawyer, compelling participants who are non HIPAA

[Matthew Eisenberg] 13:32:48

covered entities to follow federal HIPAA law. I don't know how that will actually work, but we can get to that when we get to that section.

[] 13:32:56

Thinks that.

[] 13:33:00

Seeing no other hands. A quick overview on the policy. Develop, implement. Maintain administrative physical technical safeguards to reasonably and appropriately protect confidentiality, integrity and availability of PHI.

[] 13:33:17

And a secure environment that supports access use. Thanks, James.

[Matthew Eisenberg] 13:33:22

Hey, Courtney, just now it's dawning on me. So just so I understand the intent of this policy for covered entities we already have to do this.

[Matthew Eisenberg] 13:33:31

This is required under Right. So just again, this is what I was actually trying to say before, stepping back.

[Matthew Eisenberg] 13:33:39

Is this policy really intended to inform non-covered hip entities? Because if it is, then we should restructure it.

[Matthew Eisenberg] 13:33:46

Because if that's the issue, that's different. Cause for the rest of us who are covered entities.

[Matthew Eisenberg] 13:33:50

We have to do this whether it is signatories or not. So I'm just trying to understand what's the real purpose of this policy?

[] 13:33:58

The purpose is to make sure that all participants are protecting the information in the same way and ensuring that they are aware of the laws that they apply.

□ 13:34:09

As I'm just gonna scroll down very quickly, I do, we do have this PNP broken into participants who are covered entities or business associates and so when we get down there, let's, we can get a little bit more into the weeds.

[Matthew Eisenberg] 13:34:27

Yeah, I guess I'm just trying to clarify again for me. I what's the obligation for signatories?

[Matthew Eisenberg] 13:34:35

Has it. For the framework, if I already need to know what my applicable laws federally as a covered entity.

[Matthew Eisenberg] 13:34:44

I just it seems like we're trying to do everything at the same time. But the focus here will probably be on non-covered entities.

□ 13:34:53

In large part yes it is a larger focus on non-covered entities and we'll see that later where it shows the obligations of covered entities.

□ 13:35:04

So there's a little bit more, but most of it is informing folks of what laws may or may not apply to the information when they receive it.

□ 13:35:14

So moving on to procedures for general for all participants. General privacy requirements so generally you access use maintain disclose How and social services information consistent with applicable law.

□ 13:35:31

And any authorization.

□ 13:35:34

And then if a participant receives any . I. Through this process through the DSA. That you will comply with any applicable law that may still follow that information.

□ 13:35:49

And we give some examples just as folks may be aware of what laws could apply to the information that they are receiving.

□ 13:35:57

And then the

[DeeAnne McCallin] 13:35:57

And, Courtney, this is Diane. Occasionally when I see chat since you cannot, I'll interrupt and throw in.

[DeeAnne McCallin] 13:36:06

We have a comment of applicable law in California is not just HIPAA, CMIA, which is listed here at the California Confidentiality.

[DeeAnne McCallin] 13:36:17

The Medical Information Act. Ipa is listed, which that's also in this section.

[] 13:36:23

Yeah. Thanks, Dan. And as folks know, and through our definition, applicable law is of course all federal state.

[DeeAnne McCallin] 13:36:24

So.

[] 13:36:34

Any law that may apply to the information and as the privacy folks here know there are many many different ones and it really depends on what information.

[] 13:36:42

We're talking about and so the really we're trying to put folks on notice that there are some laws that may follow that information.

[] 13:36:52

And you should be aware when you're requesting the information that you may have to comply with laws that you may not normally have had to comply with.

[] 13:37:00

And so general privacy requirements. Any questions, comments, concerns?

[] 13:37:13

Not seeing any hands. Oh, Belinda.

[DeeAnne McCallin] 13:37:15

There is one. People come in and there's a comment before we go to Belinda. And just so you're, you're aware of, we do collect all these and have them after the meeting.

[DeeAnne McCallin] 13:37:29

No recent major data breaches involving government entities. And no recent major data breaches involving government entities and there's a link for people to use as a resource if they're interested.

[DeeAnne McCallin] 13:37:35

So back to Courtney and Belinda.

[Belinda Waltman] 13:37:37

Great. So I wanted to share. I think the questions and concerns that Lee, Matt, Louie and others are kind of getting to and it's coming down in the section.

[Belinda Waltman] 13:37:51

It's about the non-covered entities, but really my questions are coming from the lens of an organization who is a covered entity who is shared data with a QHIO that downstream shares it with a non-covered entity.

[Belinda Waltman] 13:38:00

3 questions. One is that non-coveridency is not maybe not as well versed at protecting PHI and behavioral health data as a cover D.

[Belinda Waltman] 13:38:09

So what kinds of training will there be and then how well compliance with this policy be both monitored and enforced or that non-covered entity.

[Belinda Waltman] 13:38:17

And then let's say that that non-covered entity unfortunately doesn't safeguard the data and there is a breach.

[Belinda Waltman] 13:38:23

Under, hipaa, once PHI is disclosed to a non-covered entity.

[Belinda Waltman] 13:38:30

It's no longer subject to HIPAA. So what does that mean for breach reporting? And does that non-covered entity have enough information about where that data came from?

[Belinda Waltman] 13:38:39

To be able to provide notifications upstream to the right covered entity whose data was actually leaked. And then lastly, if the covered entity were responsible for that.

[Belinda Waltman] 13:38:49

Data loss or breach. There are different reporting agencies that they would have to report to including OCR and state bodies like, you know, CDPH, attorney general.

[Belinda Waltman] 13:39:01

So if the cover's covered entities data was lost at the non-covered density level. What happens in terms of reporting and do those other agencies state in federal?

[Belinda Waltman] 13:39:11

Are they in alignment with this policy such that the covered entity would still be protected.

[] 13:39:18

So you're testing my memory to make sure I'm answering all of your questions. What type of training is required?

[ ] 13:39:26

We'll get down to the bottom of this policy and procedure. There's a requirement that all entities will have annual privacy training that trains at minimum on all the privacy laws that they have of the data that they have and that they will be receiving data from.

[ ] 13:39:41

There is also a requirement that they have appropriate policies and procedures in place. So we are relying on entities to train.

[ ] 13:39:50

There are many different trainings out there that can assist, entities that are new to this world.

[ ] 13:39:56

And how to get up to speed but we are requiring that they do be trained and have appropriate policies and procedures.

[ ] 13:40:03

For I'm gonna skip over enforcement for a moment and I'll have Dan respond to that after.

[ ] 13:40:10

As far as the breach requirements. All of that has been.

[ ] 13:40:17

Set aside in our breach notification policy and procedure. So our breach notification policy procedures sets out the how folks will respond to a breach how they'll notify the appropriate people and all the requirements through That and so I think that'll address questions 3 and 4 a bit for you.

[ ] 13:40:41

And as you know, all of it really depends on what privacy laws apply. So I understand that your questions is a big to covered entities.

[ ] 13:40:50

We have tried to make our policy broad enough that there are, there are laws that have breach notification requirements that are not HIPAA that other entities may have to follow.

[ ] 13:41:01

So keep that in mind as you review our breach notification policy. That's one that was finalized back in July of last year.



[ ] 13:41:12

And then Diane, did you want to touch on the enforcement?

[DeeAnne McCallin] 13:41:16

Yeah, I can touch on it. I can't go too deeply. Cdi does not currently have the authorization for enforcement.

[DeeAnne McCallin] 13:41:25

But we do expect that in the future, we know that enforcement is a necessary component of data exchange framework and it's unfortunately just not there yet today but that, and ideally with the governance board and whatnot.

[DeeAnne McCallin] 13:41:45

That will come and hopefully sooner rather than later.

[ ] 13:41:52

Thanks, Dan. And then I do wanna flag that other. As there are other licensing entities that may have authority.

[ ] 13:42:00

To enforce the DXF. Through licensing.

[ ] 13:42:08

All right, Louie.

[ ] 13:42:14

Thank you. I just wanted to make a comment about. Statement that was made about you may need to be aware of other a laws that.

[ ] 13:42:27

You need to, comply with when you request data. And I don't think that just you know, applies to non-covered entities like social services.

[ ] 13:42:38

So, you know, social services as a lot of privacy and confidentiality laws. And so all of the health care agencies.

[ ] 13:42:50

You know going to know those laws when they're requesting information. From us. That, you know, we have, other protections beyond.

[ ] 13:43:03

You know, HIPAA. In fact, a lot of privacy laws in California are stronger than HIPAA.

[ ] 13:43:09

At least as I understand. So. So, it's kind of a 2 way street there.

[ ] 13:43:14

I mean, I still think it comes back down to some kind of business rules engine that you know, he has references to consent.

[ ] 13:43:24

And or privacy restrictions. Then apply to the data. But you know, that's I'm still getting tactical about it, but I still think there's an element of.

[ ] 13:43:37

Of unknown. Now it's there by healthcare for social services protections if that makes sense.

[ ] 13:43:46

Absolutely, and the privacy and training or the policies and procedures and training. Goes both ways. So all entities are required to do that and know what, and train on what laws for the information that they will be receiving.

[ ] 13:44:01

And Louis. You know, I work in the health space so we listed mostly health laws that whose information might slow down.

[ ] 13:44:12

If you have social services laws that you know that the information attached to the information and rather than the holder of the information, we would love if you can drop that in the chat and then we can, consider adding that so that way folks are aware that they may need to be.

[ ] 13:44:27

Keeping an eye out for those laws as well.

[ ] 13:44:30

Morgan.

[Morgan Staines] 13:44:33

Thanks, Courtney. Devin's handed at this in in a comment. In the chat.

[Morgan Staines] 13:44:40

For this. PNP seems to seem to assume that the HIPAA covered entities.

[Morgan Staines] 13:44:54

Might or might not be someone's business associate. And that's a that's a concern to us and we've my office has struggled with that quite a bit.

[Morgan Staines] 13:45:05

Now make reference to this up to one of my favorite bits of of guidance from the feds where they where they said that a healthcare provider could share information.

[Morgan Staines] 13:45:16

About a patient with the housing authority. Yeah, if the provider thought it would be helpful for the patient.

[Morgan Staines] 13:45:24

But they didn't answer the question about whether the housing authority might need to be the business associate.

[Morgan Staines] 13:45:31

Of the treatment provider and I think we need. Oh, we need some we need to seek clarity about that.

[Morgan Staines] 13:45:42

I don't know if Clarity about that. I don't know if Clarity is possible about that, but we need to try.

[Morgan Staines] 13:45:44

That's a big concern. In our office about is we get uncomfortable when our data leaves the protection of the umbrella.

[Morgan Staines] 13:45:56

We know that that happens. Sometimes, but we don't like to volunteer for it.

[] 13:46:05

Thanks Morgan. Well, think on that and may reach out to you for. Further.

[] 13:46:13

Any questions about it? Currently as folks know, there is not a business associate agreement attached to the data sharing agreement.

[] 13:46:24

And that's because not all of the sharing will create a business associate relationship. And so at this time we're really different participants to figure out who their business associates are and definitely negotiate a business associate agreement.

[] 13:46:37

As required by law. So we are not at this point getting in the middle of. Deciding who's is and isn't a business associate agreement we think that or who is or isn't a business associate.

[] 13:46:54

And we think that decision is really handled best at the. Participant level as your the best one to know what who is doing.

[] 13:47:03

You know, business on your behalf. And so we really don't want to dictate the business of our participants.

[] 13:47:11

And so that's been our thoughts. If you disagree, Feel free to send me an email.

[] 13:47:18

We can. Look at that as well. Diana?

[Diana Kaempfer-Tong] 13:47:25

Yeah, thanks. I just wanna, underscore and you know agree with Louis on his comments coming from a department with you know hundreds of programs many of which have their own very specific laws that are more protective.

[Diana Kaempfer-Tong] 13:47:42

Than HIPAA or CMI. As well as the IPA, which even in its own.

[Diana Kaempfer-Tong] 13:47:47

There's some instances when it is more protective. For instance, when it's, you know, when disclosures are permitted and not.

[Diana Kaempfer-Tong] 13:47:56

It just, it feels like there needs to be emphasis on both directions because for covered entities to have to, and I know it mentions, applicable law, but just, you know, kind of underline and emphasize that.

[Diana Kaempfer-Tong] 13:48:08

Yeah, we need to understand HIPAA, but you know, they also need to understand. some of these more laws that they haven't had to consider previously or haven't even maybe even known about

[] 13:48:24

Thanks Diana and if again if you want to drop some laws in the chat that you would like to suggest the added to the section.

[] 13:48:35

We're happy to take a look at that. I do wanna flag Information Practices Act is already in there.

[] 13:48:39

And for folks who are unaware of information practices act covers all state department information. And so you may have seen it if you're doing business with.

[] 13:48:48

Department of Healthcare Services or Public Health or Department Social Services. The hospital, developmental services.

[ ] 13:48:55

7.

[Deven McGraw] 13:48:57

Yeah, the businesses associate point, that Morgan raised made me think of something that, I see what happening quite frequently, which is that in absence of understanding or based on concerns about sharing data with entities that are not other HIPAA covered entities.

[Deven McGraw] 13:49:20

There is this tendency to require business associate agreements for that sharing. Even in the context where there's no vendor relationship.

[Deven McGraw] 13:49:27

Anytime there is a treatment disclosure between one entity for treatment of a patient and another, that's a treatment disclosure.

[Deven McGraw] 13:49:35

It doesn't make that recipient your business associate. You're not hiring them to be a vendor for you, you're sharing data with them.

[Deven McGraw] 13:49:43

And so consequently, I do think we probably have a little bit of work to do. I don't know necessarily in this policy.

[Deven McGraw] 13:49:54

Demanding business associate agreements with every single endpoint that you're exchanging with as part of executing on the state sharing framework.

[Deven McGraw] 13:50:03

Creates an information blocking problem, creates obstacles to information sharing because it's not legally necessary nor does it necessarily create an environment where that, oh, that we're gonna make that person a business associate and therefore they're going to be subject to HIPAA because whether they're business associate or not is a legal

[Deven McGraw] 13:50:24

construct. Do they meet the definition? If they don't, they're not a business associate.

[Deven McGraw] 13:50:28

And so insisting on a BA contract, I'm not Morgan, I wasn't suggesting that you do this.

[Deven McGraw] 13:50:32

I have seen this as a pattern in entity after entity after entity. We have business associate agreements with the people who water our plants outside of the facility.

[Deven McGraw] 13:50:43

Like it's, you know, but even more common is the. Oh, I'm exchanging with the provider down the street to treat this same patient.

[] 13:50:49

Okay.

[Deven McGraw] 13:50:51

I need to execute a business associate agreement with that provider or I can't share the data.

[Deven McGraw] 13:50:57

So I do think for the success of this enterprise. Clarification around, you know, applicable law and when consent is required and all of that is definitely helpful and I applaud the work that's been done so far.

[Deven McGraw] 13:51:12

By the department and also by, you know, the continuing ongoing work to try to make those clarifications.

[Deven McGraw] 13:51:21

I also find there's a lot of misinterpretation going on about sort of who's covered by what laws and what requires consent.

[Deven McGraw] 13:51:27

I, but I do think it's really important. That people's fear about doing this wrong.

[Deven McGraw] 13:51:33

Which is a legitimate one, not end up creating obstacles because we haven't done quite enough to address it.

[] 13:51:41

Thanks Devin and you gave me a great. Place to plug our state health information guidance which talks about how you can share information.

[Deven McGraw] 13:51:50

Yeah.

[] 13:51:54

With or without consent tells you when you need consent and various scenarios. And specifically in our volume 2 sharing health information to address food and nutrition insecurity in California has a flow chart about when you need a business associate agreement.

[] 13:52:11

And so that was a specific ask from our stakeholders because a lot of the social services providers were being asked to sign businesses associate agreements.

[] 13:52:21

When they were, when it was. Not required. And so if you have a question about whether our business is, agreement is required, that is a great guidance.

[] 13:52:33

That may help you in that decision. Dan. And if. I was just saying if someone can drop the chat or drop in the chat, the link to our shit, that would be great.

[DeeAnne McCallin] 13:52:36

And Morgan can certainly go before me.

[] 13:52:48

Go ahead. Morgan.

[Morgan Staines] 13:52:48

Thanks, Yeah, yeah, that, thanks, Devin. Yeah, I think, my department used to demand a business associated agreement of everybody we got over

[Morgan Staines] 13:52:59

We don't wanna have those where we where we don't need them. But I am, I remain concerned about particularly the social service.

[Morgan Staines] 13:53:08

Type certain type of providers where the purpose of the of the disclosure is to facilitate treatment, you know, the more realistic view of the of the health of the customer.

[Morgan Staines] 13:53:25

But the social service provider pretty clearly does not meet the hipa definition. Of a health care provider.

[Morgan Staines] 13:53:33

And that's it. There's a there's a gap there that continues to concern us.

[Morgan Staines] 13:53:39

If there's if there's consent, then then it's covered but i think we'd like to we'd like to think that there might be a zone there where where, not, not to diminish patients rights to, control their information to some extent, but That's it.

[Morgan Staines] 13:54:06

Don't, don't typically don't require consent. No, so there's a There's a potential gap in there that concerns us.

[] 13:54:16

Yes. I understand there is also a great scenario in the egg volume too. I think it's scenario one about sharing contact information with a social services provider and it walks through the differences between.

[ ] 13:54:38

What is permitted under HIPAA versus what's permitted under CMIA or Confidentiality of Medical Information Act.

[ ] 13:54:46

Which may be a little bit different. But it also references that, OCR guidance that Morgan was discussing about sharing for treatment, with a homeless shelter for treatment purposes.

[ ] 13:55:01

But. In absence of a business associate agreements, the DSA and its PMPs are really, what we are looking at and that's why this part is in security safeguards PNP is important because setting the floor for what is going to be required.

[ ] 13:55:22

Especially in the absence of a business associate agreements.

[DeeAnne McCallin] 13:55:26

Great. I did drop 2 links of the in the chat and there was a question an entry in the QA that concluded with what considerations have been made in this regard.

[ ] 13:55:28

Yeah.

[DeeAnne McCallin] 13:55:41

Regarding applicable law and, California law covered in she's non-covered in a cheese.

[DeeAnne McCallin] 13:55:47

I'm going to mark that one as answered live. Then I'm mentioning this that if the person who submitted it feels that this conversation has not covered that, please.

[DeeAnne McCallin] 13:55:57

Chime in again, but I am tagging it for answered live for the last like 15 min or so conversation.

[DeeAnne McCallin] 13:56:04

Thanks.

[ ] 13:56:06

Thanks, Dan. Alright, so moving on to general privacy requirements for de-identification. We did receive a comment.



[ ] 13:56:19

It looks like there's a little bit of confusion. So, that this. Section was requiring participants to de-identify all information, which is not the purpose of it.

[ ] 13:56:28

This section is. Requiring that if you receive participant information from wherever the source. If you're going to de-identify and use de-identified information, then you must use the HIPAA de identification standards.

[ ] 13:56:43

So Hippa State Harbor or an expert determination. And so, I think that we will add just a little bit to clarify that this is not requiring that all information is be identified.

[ ] 13:57:00

Otherwise this would not be a very, useful project. But are there any questions, concerns about requiring HIPAA DID identification of all PHI and PII.

[ ] 13:57:14

If a participant wants to use the identified information.

[ ] 13:57:21

Alright, seeing none.

[ ] 13:57:29

We will go to. That participants who are covered entities and business associates under HIPAA.

[ ] 13:57:36

So under HIPAA, you are. If you're covered in to be our business associate.

[ ] 13:57:43

We are requiring that you follow all applicable law and HIPAA as part of these requirements. So all pickable law will also encompass.

[ ] 13:57:54

All of the different laws that we were discussing of information that you may receive. So all of those social services, public health laws that the health space may not be as aware of.

[ ] 13:58:07

That will require that you follow those whenever they apply. And then for business associates complying with your business associate agreement as well as all other applicable laws.

[ ] 13:58:21

And any concerns questions?

[] 13:58:36

So moving on to participants who are not covered entities. Or cover components of a hybrid entity or business associates under hip best.

[] 13:58:46

Mark, is this a comment on the previous section?

[Mark Savage] 13:58:51

Yes, sorry. I'll just flag that I've made a comment on that both at the last meeting and in my public comments and I heard you at the beginning that you're still considering that, but if you think it's useful to to talk about it here, which is whether you can have have terms in a business associate

[Mark Savage] 13:59:10

agreement. That are inconsistent with the data exchange framework. It says you follow the business associated agreement. That seems to be backwards.

[Mark Savage] 13:59:20

So if there's if you think there's something worth discussing here, I just mentioned that if you're still considering it and hopefully there is a chance of.

[Mark Savage] 13:59:28

Correcting that as others have done like go and see which is an example I gave you in my comments that I don't need to discuss it further.

[Mark Savage] 13:59:36

Just logging.

[] 13:59:39

Thanks Mark. I defer to you if you want to try to, Let other folks in on the conversation.

[] 13:59:48

Otherwise, we're happy to consider and we'll get back to you or.

[Mark Savage] 13:59:53

It's nothing more than what I've said at the last meeting and I just went into. Great detail with citations.

[Mark Savage] 14:00:00

In my letter. Thank you.

[] 14:00:01

Thanks Mark. We appreciate your comments and All right. Moving to so participants who are not covered into these hybrid or business associates.

□ 14:00:18

So unless up, otherwise prohibited by applicable law. If you are not one of those 3 entities you will still comply with certain provisions of HIPAA as well as all other applicable laws.

□ 14:00:37

So you may not use and disclose PHI or PII that's received from a participant except I as set forth in a section of HIPAA.

□ 14:00:51

Which includes ballot authorization.

□ 14:00:56

And a few other things to the participants of course. For treatment payment operations. And I believe.

□ 14:01:08

Public health purposes. But folks can jump in and agree with me. I just don't have the citation quite memorized.

□ 14:01:17

Or as otherwise permitted by a bookable law. So again, we are not looking to mess with folks that are already doing things.

□ 14:01:26

This is really a gap filler. So this is not. Trying to prohibit folks who are already covered by laws that are as, you know, folks have already said are often more stringent than hip hop, if you already have permitted access.

□ 14:01:41

Exceptions in your laws. This is really a gap filler for if there is we want to make sure that if there's certain data that does not have any protections around it, if it falls under some sort of little hole.

□ 14:01:54

That it get some protection. And so I wanna make sure that we're not interrupting. Business and making it difficult for folks to provide the valuable services they're providing with this.

□ 14:02:09

So we've added the, or we have in there that you can share as permitted by your applicable loss.

□ 14:02:17

But I wanna make sure that that's. Enough for folks. So if you disagree, please let me know.

[ ] 14:02:25

Not seeing any hands.

[ ] 14:02:30

And then we're requiring that folks, participants comply with minimum necessary. And then the verification requirements that are established in HIPAA.

[ ] 14:02:44

And seeing no hands. On the privacy side.

[ ] 14:02:52

Right. So moving on to security.

[ ] 14:02:58

So every participant must develop, implement, maintain, you know, administrative technical physical safeguards, controls, the confidentiality integrity availability of health and social services information.

[ ] 14:03:11

And provide a secure environment. That supports the exchange of PHI. Regardless of whether you are covered by HIPAA, we are requiring that all in so if you that everyone use appropriate safeguards to prevent unauthorized disclosure access use disruption loss or modification of PHI.

[ ] 14:03:36

And then if you are a covered entity, business associate or a covered component of a hybrid entity, you'll comply with the HIPAA security rule and all other applicable law.

[ ] 14:03:46

If you are not, covered into the businesses that are covered component of that. Hybrid entity, you will comply with certain provisions.

[ ] 14:03:56

Of the HIPAA security rule. And so those are establishing the appropriate administrative physical and technical safeguards that are required.

[ ] 14:04:10

It's not the entire HIPAA security rule, but it is a substantial portion of it.

[ ] 14:04:20

Before I move on, do folks have concerns? Does that feel right?

[ ] 14:04:28

Or my security people.

[ ] 14:04:33

Hey Morgan.

[Morgan Staines] 14:04:35

Yeah, I'm not sure I can, I think I can articulate it any in in great detail, but yeah, but a concern that we, you know, that we.

[Morgan Staines] 14:04:44

That were you know picking out some provisions and not others.

[Morgan Staines] 14:04:51

An idea.

[] 14:04:51

Are there any specific provisions from the security rule that you're concerned were not brought over?

[Morgan Staines] 14:04:58

No, I can't. I'm just a concern, but I do, I get the, reality on the ground is, Yeah, that we have to consider the capabilities in the field as well.

[Morgan Staines] 14:05:16

That yeah, it's a concern.

[] 14:05:17

Thanks Morgan. Yeah, thank you Morgan. If you think of specific provisions, we would love to hear them.

[] 14:05:26

And we'll give you everyone. Couple days to respond. With additional comments after this so if you think of them please feel free to email us and then of course the after we've revised the draft it'll go up for another public comment.

[] 14:05:40

Stephen.

[Deven McGraw] 14:05:42

Yeah, I mean, I feel like we've had a lot of discussions about this topic. Not always with specific text in front of us, but around the balance between not, wanting to make social service with specific text in front of us, but around the balance between not, wanting to make social service agencies and others who are

[Deven McGraw] 14:06:04

unaccust but instead but not but having a baseline of security safeguards that everyone should reasonably be expected to adopt if they're going to be handling this data.

[Deven McGraw] 14:06:13

And I kind of thought you kind of hit the mark. It's. Maybe, you know, ultimately over time we could explore increasing the expectations as organizations get a bit more.

[Deven McGraw] 14:06:28

Have a bit more experience with handling this data on the other hand it doesn't necessarily mean they're getting any more money.

[Deven McGraw] 14:06:33

To help build out that kind of infrastructure. So, you know, my own thought as I looked over this is you know, that you picked up on the main pieces of what is in the security rule, but without telling people you, gotta comply whether you're covered by the security rule or not.

[Deven McGraw] 14:06:53

So that was my sense. But, but obviously if people, if there are specific. Things that feel missing then we then and then we should talk about it including what that means for organizations in terms of requiring them to abide by it.

[] 14:07:07

Agree and thank you for, acknowledging that we are trying to way and it's all a little bit of a give and take.

[] 14:07:21

I know that Louis has his hand raised. A and

[] 14:07:28

I think that all of it is very much a balance. But I agree if folks have things that they want to.

[] 14:07:37

Consider adding from the HIPAA security role. Agree with Devin if you're able to bring it up in this.

[] 14:07:44

Forum so we can discuss them and discuss what it means for the entities that Don't already have to follow it.

[] 14:07:52

That would be I think very valuable. Louie?

[] 14:07:58

Well, I. Agree with. The comments made earlier that we had to try to find a balance.

[] 14:08:07

I seem to recall. Talking about this a lot last year. And, at some point. If if we telted this, small social services organizations and even the larger ones will have a lot of expense.

[ ] 14:08:21

To comply and we've defeat the whole purpose of the legislation. If we make it too difficult. No, I think we incorporated.

[ ] 14:08:31

Enough into the policy and procedures. To ensure that the you know we have the privacy protections that we could I still have concerns.

[ ] 14:08:43

I don't wanna repeat them again about consent management and and the changes necessary to meet this but i think if we go too far the other way with it they just won't be able to.

[ ] 14:08:54

Compliant all. So it seems to be. You know, roots on the ground issue about what we can do, without causing us not to be able to get the information that everybody needs.

[ ] 14:09:10

You know, in the best entrances the best interests of the of the patients and clients. You know, while maintaining their protection.

[ ] 14:09:19

So. I understand Morgan's perspective completely, but I think will just lose participants because they just won't simply won't be able to do it.

[ ] 14:09:30

I already worry that there's enough there that they won't be able to do already. And unfortunately, from my perspective.

[ ] 14:09:38

Some of those are on on the front line. Where the under served are are being handled by the smaller a lot smaller groups and they they won't have the resources.

[ ] 14:09:52

So like I said earlier, there's an iceberg of resources underneath this that, you know, I need to be.

[ ] 14:09:59

Secured somehow in the financing for them. Thank you. Absolutely. Thank you for your comment.

[ ] 14:10:12

Any other? And I don't see any other hands. Any other comments? I just want to give one more chance because I do think this is a very important section and I think that this is worth discussing as a group if.

□ 14:10:27

Folks have concerns.

[DeeAnne McCallin] 14:10:33

And for everybody to know, Courtney, we'll have Linus site into the chat after presenting and after the Zoom is closed out later today as well.

□ 14:10:47

Thanks, Dan.

□ 14:10:50

Alright, and then we have. One last requirement for all participants about secure destruction this is, what caused us to reopen privacy and security.

□ 14:11:03

We added this to technical requirements and then felt it was more appropriate in, the security portion of the privacy and security PNP.

□ 14:11:12

When we put it out for public comment we got comments throughout the p and here we are So this is the language that we had previously worked on.

□ 14:11:21

About secure destruction. It differs to industry, best practices. And how to destroy.

□ 14:11:32

. I. That was either received.

□ 14:11:37

An error. Any comments, concerns?

□ 14:11:45

Questions?

[Steven Lane] 14:11:48

Makes sense.

□ 14:11:52

Thank you, Stephen.

□ 14:11:55

Alright. Moving on, we have a section on. Sanjay.



[Sanjay Jain] 14:12:04

Hi, one quick question. I was looking for the definition of securely destroying the data.

[] 14:12:12

Sure, I can scroll down.

[Sanjay Jain] 14:12:13

How do we define that?

[] 14:12:17

Sorry for everyone. So we define it as consistent with applicable law and with generally accepted industry standards.

[Sanjay Jain] 14:12:31

Well the thing is if we let's say we get the file in through SFTP right the SFTP server Generally nowadays on cloud.

[Sanjay Jain] 14:12:40

So is there any guideline like We just delete the file based on best of our knowledge. Or do we need to really chase the down and chase it down to all the replicated servers and then delete the file from everywhere.

[Sanjay Jain] 14:12:55

You know, those kind of details. I was, looking to get some clarification on.

[] 14:13:03

I am the privacy person and not the security person. I would ask other security folks what the best industry standards are.

[] 14:13:14

Again we're looking not to impact for business practices that folks already are aware of that are working.

[] 14:13:22

But if generally participants aren't sure how to. What the industry standards are and we can take that into a consideration and maybe change or providing.

[] 14:13:39

Guidance materials.

[] 14:13:41

And. I'm gonna pick on rim. If you have any. But you can have, I'm hoping you're on.

[Rim Cothren, CDII CalHHS] 14:13:55

Sure, sorry, I was just dropping something. I was just dropping something in the chat. There is a NIST document that talks to destroying data, primarily destroying media.

[Rim Cothren, CDII CalHHS] 14:14:07

Be really interested in people's thoughts about whether there is a section of that that might be appropriate. It'd be something that, I think we're really interested in input on what are common practices that you make.

[Rim Cothren, CDII CalHHS] 14:14:24

Be using. At least in our search we didn't find much in the way a federal guidance in this topic.

[Rim Cothren, CDII CalHHS] 14:14:33

Outside of that NIST document that I dropped into the chat. So this is still something that we're considering internally.

[Rim Cothren, CDII CalHHS] 14:14:40

We really interested in other people's thoughts.

[Sanjay Jain] 14:14:46

Thank you.

[] 14:14:50

Thanks, Anne.

[] 14:14:54

Scroll back up. Sorry everyone.

[] 14:14:59

So we have our own privacy standards and safeguards relating to specifically to protective behavioral health information and this is a section that was in the last documents that really calls out.

[] 14:15:15

The protections that are for behavioral health information. And so it really just highlights the applicable laws that folks may need to ensure that they are complying with.

[] 14:15:33

And the laws that they may be subject to and receiving this information. Any. Questions, concerns, comments on this section?

[] 14:15:58

And, go back, to our last section, which is policies and procedures and training.

[] 14:16:05

So this is requiring that all participants across the board so covered into these non-covered entities must have written privacy and security policies and procedures to support the access use.

[ ] 14:16:19

And or PI. And prevent disruption, modification, or loss of pH IMPII that are consistent with and satisfy applicable law for this policy.

[ ] 14:16:30

So there has. To be something at minimum. That folks.

[ ] 14:16:37

Are implementing that.

[ ] 14:16:40

Meets at least applicable law. Or bare minimum like the bare minimum privacy and security policies and procedures that you need to have in place.

[ ] 14:16:50

Before you start receiving some of this information. Before granting access to it. We are requiring a participants trained properly trained their staff, contractors, agents, employees, and other members of the workforce.

[ ] 14:17:08

And at minimum that includes information security training and privacy training. It is, it must. Least address applicable law governing the health and social services information that the participant will be accessing using or disclosing.

[ ] 14:17:26

And they must have a refresher training. No less than annually. And then maintain records for at least 3 years or a longer period as maybe it's required by a pickle box.

[ ] 14:17:40

And if folks want me to scroll down to the definition of workforce, let me know and I'm happy to do that.

[ ] 14:17:47

Do folks have any questions, comments, concerns? Diana.

[Diana Kaempfer-Tong] 14:17:52

Yeah, I'm just wondering. On these trainings and the proof of, training.

[Diana Kaempfer-Tong] 14:18:00

Is there any there doesn't seem to be any language or mechanism for an entity to verify? That the training has been completed by people who will be accessing their data, especially if as we've mentioned, and the them through this if there is some special kind of law.

[Diana Kaempfer-Tong] 14:18:20

Or, you know, something that applies to the data that is different than what that organization may be used to.

[Diana Kaempfer-Tong] 14:18:30

So I'm just I'd like to make a comment that it'd be nice for there to be either some.

[Diana Kaempfer-Tong] 14:18:34

Mechanism for us to see the training or request the training or in some way get our own assurances that it's been completed.

[] 14:18:45

Thanks Diana.

[] 14:18:49

Do you folks have any? Concerns. Agree with Diana's comments.

[] 14:19:00

Really? I think there's practice differences in the 58 counties for this and so I maybe some guidance is appropriate because I know in the county that I worked at, our staff and social services.

[] 14:19:21

We were a health and human services agency and social services staff. You know, took privacy of training for for HIPAA and their own and signed it signed off with their annual review time that you know they had acknowledge the protection of the privacy and PII.

[] 14:19:45

But I'm not sure if it made it to, Oh, and I, learning management systems in the county, so they all have that, but I do think there is, required training and counties on their LMS systems.

[] 14:19:57

So. You know that might be a way to distribute the training and formally crack it. Just a suggestion.

[] 14:20:05

You know, it's more tactical. Okay, it's that level a lot. So I think.

[] 14:20:12

That some companies may be doing that already.

[] 14:20:16

I have the technical people who are taking note. I am the legal privacy. So I appreciate your comments.

□ 14:20:24

Even when I can't always respond to them.

□ 14:20:32

Any questions? Comments concerns on policies and procedures training. Is there anything we're missing? Anything that we're overreaching?

[DeeAnne McCallin] 14:20:43

It's a new comment in chat to. Contemplate whether we should include requirements on risk assessments.

[DeeAnne McCallin] 14:20:54

And then a few things on Rims input on this.

□ 14:20:55

And so.

□ 14:21:02

I will scroll back up since that's part of requiring. That's part of the hip a security role that we did not require is a hip or risk assessment which are often extremely expensive.

□ 14:21:17

And take a very long time. In order to complete do folks have concerns that we have not required it?

□ 14:21:27

I would. And I'm not sure who dropped that in the chat, but if someone wants to kind of start the discussion about.

□ 14:21:37

Whether we should require risk assessments, whether and if they should, whether they need to meet the same levels of.

□ 14:21:44

A hippo risk assessment which as I've mentioned is extremely burdensome. Mark.

[Mark Savage] 14:21:48

This is Mark Savage. I dropped it in the chat. I'm not a security expert and I haven't.

[Mark Savage] 14:21:54

Done it. My understanding is that those risk assessments. Are sort of tailored to the nature of the organization so perhaps complicated for a large health system.

[Mark Savage] 14:22:06

Don't know that it's equally complicated for a solo practitioner or a practice of 2, it is within the regulations and it seems like it's done.

[Mark Savage] 14:22:18

In advance in order to prepare for and prevent. Things so it seems like a like training seems like a good thing.

[Mark Savage] 14:22:26

That's the reason for just dropping the question in the chat. Thanks. Hope that gets the conversation started.

[] 14:22:31

Thanks, Matt. Do we have any?

[DeeAnne McCallin] 14:22:33

And I'll I'll flag Courtney. We're a few minutes beyond. Agenda timing.

[DeeAnne McCallin] 14:22:41

We're probably still okay, but close to wrapping up for this segment. But again, for everybody to know that we take the chats, the QA, And we do ask for any written comments a couple came in since our email last weekend in advance of this meeting.

[DeeAnne McCallin] 14:23:00

A couple came in since our email last weekend in advance of this meeting and we look for them. The subcommittee this week and then we will be posting for public comment this particular PMP.

[] 14:23:09

Thanks, Dan. I will wrap up in just a minute. I do think this is an important thing to hit with a group.

[DeeAnne McCallin] 14:23:14

Great.

[] 14:23:15

Does anyone wanna speak to whether they their thoughts on requiring risk assessments or not. And if people aren't going to speak up, I might start calling on people.

[] 14:23:27

Lily.

[] 14:23:30

Well, my experience with risk analysis and accreditation is that it's very expensive and timely and that it can it also you know, incorporates not just the system, but the networks as well.

[ ] 14:23:45

And you know, it's a very structured process. It's usually done annually, at least my experience with it.

[ ] 14:23:54

I'm not saying it's a bad idea. I think we just need to acknowledge, you know, tactically what it takes to do and and the expense and I'm not sure that small organization.

[ ] 14:24:06

That has to meet the same requirements. Would be easier with the exception of the number of you know people that they had to do but the network and system analysis would all be pretty much the same.

[ ] 14:24:22

And considering that everybody has to comply with a certain level of. Of software to be able to do performance function.

[ ] 14:24:33

There may be some standardization around that could simplify it for them, I think the process itself is.

[ ] 14:24:40

Is the same and expensive. And if they have to bear the cost. That's another factor.

[ ] 14:24:49

Thanks, Lily.

[Diana Kaempfer-Tong] 14:24:52

Yeah, I just I have to agree that the the cost burden not only for small organizations, but for massive organizations.

[Diana Kaempfer-Tong] 14:25:02

Who don't, you know, aren't subject to these normally would be. Absolutely burdensome, especially when we're as.

[Diana Kaempfer-Tong] 14:25:11

Stuck to the budget as we are. Yeah, air marking. Money for that would be.

[Diana Kaempfer-Tong] 14:25:18

Overly burdensome.

[ ] 14:25:22

Thanks Diana. Deathin.

[Deven McGraw] 14:25:27

So I just wanna make sure, cause I, I wanna make sure I'm addressing the right topic.

[Deven McGraw] 14:25:33

I was distracted. A minute ago by something that someone sent me that I had to pay attention to.

[Deven McGraw] 14:25:40

This is about this whether people should be required to perform a security risk assessment. Is that that's the It's the baseline of security.

[] 14:25:43

That was brought up in the chat.

[Deven McGraw] 14:25:48

Like if you don't know where all the data is, that's essentially what a security risk assessment is, is to understand what your data assets are and where they are that you need to protect.

[Deven McGraw] 14:26:00

Which servers do you have them on? To what extent do people have them on their laptops? And that's when you can think about, okay, given my environment.

[Deven McGraw] 14:26:10

What kinds of protections do I need to deploy? It's sort of like saying you're gonna write a paper without an outline.

[Deven McGraw] 14:26:18

Maybe people do that these days. I never did. At any rate, it's, just, it's the baseline of where you get of how you make sure that, I mean, It shouldn't be any more costly than any of the other security provisions that are in there.

[Deven McGraw] 14:26:39

Maybe people just generally misunderstand what's meant by a security risk assessment, but it's essentially asking you.

[Deven McGraw] 14:26:45

Understand. What kind of environment you've built, where all you where your data is coming in to the organization and where you put it.

[Deven McGraw] 14:26:55

And who accessed it and do people download it onto you know local computers and things of that nature which then helps you figure out all right here here's where all the data is so here's what I need to protect.

[Deven McGraw] 14:27:09

It's just a planning document, frankly. So it's It I'm not sure why people think that that triggers some additional cost.



[Deven McGraw] 14:27:17

Beyond what some of the other stuff that's in here would cost. The actual implementation of security safeguards to to in order to protect that data.

[] 14:27:31

7. Does anyone wanna respond to Devin?

[] 14:27:42

Louie then John.

[] 14:27:46

Yeah, I, my experience with, risk analysis or risk assessment and accreditation is, you know, we've had to hire outside vendors to come in and take a look at.

[] 14:27:59

You know our vulnerabilities confidential reports maintained by the network people the system people what they had to fix when they had to fix it I don't disagree with you that it's a baseline.

[] 14:28:12

But I don't think those came very cheap. Well, I know they didn't. And I've worked for other agencies besides.

[] 14:28:21

The county I work for the Air Force for you know many years and you know, that was, an expensive endeavor that we had of course and I just don't think small organizations can afford to hire those folks to do that.

[] 14:28:37

Now, I don't dispute their need or their purpose. I'm just telling you that.

[] 14:28:42

I think that's another. Burden that's going to be placed on organizations to do and fundamentally they should be doing it.

[] 14:28:52

I, you know, it's hard for me to argue against doing them and my from my experience, but they come with cost.

[] 14:28:59

And we have to acknowledge that.

[] 14:29:03

Thanks, L. And then we will start moving on.

[John Helvey] 14:29:09

Yeah, I would just add that, you know, I think that it shouldn't be required that they have an external.

[John Helvey] 14:29:18

I mean they have to have an industry appropriate right with the assessment done and that's gonna depend on where you would.

[John Helvey] 14:29:25

And the Equals system or what it is that we do. So I wouldn't. Put in there anything that said we have to have an external or you have to spend a lot of money but I do agree with that.

[John Helvey] 14:29:41

Why? It's a internal list assessment would be an appropriate step.

[] 14:29:48

Thanks, John. I

[DeeAnne McCallin] 14:29:50

And good feedback, Courtney in both the chat and the QA for that is captured for us.

[] 14:29:59

I was just going to say thank you everyone and if you have any final thoughts on this. We would love to hear it.

[] 14:30:07

So feel free to email us and the next. I think we're giving everyone 2 days.

[] 14:30:12

To give us. Any other comments that you have? So. If there's any other thoughts you have on risk assessment.

[] 14:30:19

Please let us know. And then we will incorporate all of your feedback and into the next draft that will go out for publiccomment.

[] 14:30:28

And with that, thank you all. We really appreciate all of your feedback on privacy and security.

[] 14:30:36

This is a very, very important issue and we appreciate your help in getting it right. And I will turn it over to Cindy to discuss real time.

[DeeAnne McCallin] 14:30:45

Right, so we're gonna be switching to Cindy Barrel for a sharing screen on real time and John your hands still raise.

[Cindy Bero] 14:30:55

Great. Well, thank you very much, Courtney. And, we're gonna switch gears now and start to discuss.

[Cindy Bero] 14:31:03

The real time exchange policy and procedure. You'll remember this as one that was introduced at the beginning of the year.

[Cindy Bero] 14:31:11

We had put it up for public comment in February and at multiple of our meetings we've discussed various elements of this policy and procedure.

[Cindy Bero] 14:31:21

I think the challenge that we've been facing has been this. Tug between a an objective and a subjective standard for what how you define real-time.

[Cindy Bero] 14:31:36

And at our last meeting, I think we arrived at the conclusion following a lot of precedent set by federal standards.

[Cindy Bero] 14:31:42

That we real-time means there is no delay being inserted between the moment. And the data.

[Cindy Bero] 14:31:51

So then that really transitions the discussion to be more about one of what is what do we mean by delay?

[Cindy Bero] 14:31:59

What would what would a delay be? So what I'm gonna do today is walk through the policy and procedure in somewhat the same fashion that Courtney did.

[Cindy Bero] 14:32:08

I'll pause from time to time to take on questions and comments. So starting with the purpose, the objective of this, that remains the same that has not changed.

[Cindy Bero] 14:32:23

It really is to define what we mean by real-time access to or exchange of health information. The policy itself.

[Cindy Bero] 14:32:30

Says that, you know, as we discussed in our prior meeting that the objective here is to make sure that information could be exchanged without intentional or programmatic delay.

[Cindy Bero] 14:32:43

So what does that mean? So then the next second paragraph here. Goes on to define. Programmatic delays and it gives us 3 sort of you know delay types that would be accepted from that definition.

[Cindy Bero] 14:33:03

So it's a programmatic delay is a delay. Other than one of these. And the first one is a delay caused by events or circumstances beyond the participants control as a power outage.

[Cindy Bero] 14:33:15

There's, I don't know, something goes wrong here. It's beyond your control.

[Cindy Bero] 14:33:18

You're unable to respond in. In a reasonable time. Second one is a delay that is consistent with one of the exceptions in the information blocking PNP.

[Cindy Bero] 14:33:30

If you need to stop and pause because of of a condition in the information blocking, then that's not considered a delay.

[Cindy Bero] 14:33:40

And then the third one would be If you are delayed in responding because you do not have an electronic health record or a primary information system that holds your health and social services information that would not be considered.

[Cindy Bero] 14:33:57

A delay. So let me pause and stop. In here and see if folks have any comments or questions.

[Cindy Bero] 14:34:12

Mark.

[Mark Savage] 14:34:15

Thanks. So the way I'm the way I'm reading this is, the sort of the affirmative requirement is in a timely manner.

[Mark Savage] 14:34:24

And if there's no programmatic delay or intentional delay then they can be shown then just doing it in a timely manner is is, meets the requirements of the policy and I wish there were more guidance.

[Mark Savage] 14:34:43

Than that. And earlier comments I. Gave some ideas that I guess weren't, weren't, didn't meet the need.

[Mark Savage] 14:34:53

But you can see the difference between in a timely manner for example and what. What was, I believe was there at a much earlier time, but sort of within 24 h.

[Mark Savage] 14:35:04

It really helps people, everybody across the state understand what the what the what the goal is and that does a much better job in my opinion than in timely manner.

[Mark Savage] 14:35:18

Another suggestion that I threw out was to define the affirmative. Requirement that when it's available internally it should be available externally.

[Mark Savage] 14:35:29

It's a little looser, cause you don't know when it's available internally, but It's still a it's still a I think a more definite standard that everybody is getting it at the same is getting it at the same time.

[Mark Savage] 14:35:40

Anyway, I wish the affirmative requirement was clearer than in a timely manner. Thank you.

[Cindy Bero] 14:35:48

Thanks. Yeah.

[Matthew Eisenberg] 14:35:54

Thanks. Yeah, no. So couple of comments. First real time is a terrible word in a timely manner is probably as good as we're gonna get.

[Matthew Eisenberg] 14:36:03

Because we're not gonna define 2 h, 2 min, 2 s, 2 days to meet. So second.

[Matthew Eisenberg] 14:36:08

It would be really helpful and we'll get to the procedures later because I'm not sure they make a ton of sense here because really with with health information exchange typically we're talking about a request for the data.

[Matthew Eisenberg] 14:36:21

But anyway, I think that it would be really helpful to consider whether this should really be incorporated in the technical.

[Matthew Eisenberg] 14:36:30

What's the other policy that really defines technical requirements for exchange. I mean that's really what we're talking about and and I think that would make a whole lot more sense, frankly, than a separate policy that doesn't have a lot of There's not a lot there there, frankly.

[Cindy Bero] 14:36:35  
Requirements for exchange. Yeah.

[Matthew Eisenberg] 14:36:48  
And then I'm gonna say it one more time. I feel strongly that when we can point to clear federal regulation around information blocking that we use that.

[Matthew Eisenberg] 14:36:57  
As this as the source of truth as that evolves rather than going back and forth because here we specify the California policy, which I'm not a big fan of to begin with because it's gonna get out of sync for sure and then all of us who are signatories are never gonna be able to sort of meet both

[Matthew Eisenberg] 14:37:13  
the federal and the state regulation. So big proponent when there's a clear federal mandate. Stick with the federal mandate.

[Matthew Eisenberg] 14:37:20  
Don't try to reinvent the wheel for the state because you're just adding burden.

[Cindy Bero] 14:37:26  
Thank you.

[Cindy Bero] 14:37:29  
Other comments?

[Cindy Bero] 14:37:37  
Let me, move forward into the, procedure. Section.

[] 14:37:42  
Can I can I just just one just one comment I think in response to those Matt and Stephen, your comment in the chat.

[] 14:37:52  
That the California information blocking prohibition is synced and tied to the federal rule but because the framework applies to a broader set of participants.

[] 14:38:02  
It needs to be defined. It is defined to apply to those. Tell me get the point that we need to make sure that we're always linking and following, what the federal requirements are with the federal rules say, and that's a principle that we're in.

[ ] 14:38:24

And one other thing, we agree, Matt, that real time is just a very difficult and horrendous thing that we have to address here and it's in the law.

[ ] 14:38:35

It's in 1 33. And it and it's come up which is why it's got its own policy because there was a lot of concern about what does real time mean.

[ ] 14:38:43

And the federal rules are lacking there's no We're at a point. There's an FAQ that, Stephen has supplied and we tried going that route and there was comments that it was specific enough.

[ ] 14:38:57

We tried to go more. As Mark you noted to actually have like time some time parameters The group felt it went too far.

[ ] 14:39:04

So we're we're trying to find you know the golden locks. Policy here and it's obviously, very challenging.

[Matthew Eisenberg] 14:39:13

Yeah, you know, this is not the first time that legislative language doesn't actually sync up with the world.

[ ] 14:39:18

Laugh

[Matthew Eisenberg] 14:39:21

If that was the case, you know, I don't know why you would never have these discussions, but yeah, so I guess just Just because it's in the in the law, I get it and but we're gonna have to figure out some sort of way to address that in a way that's understandable and

[Matthew Eisenberg] 14:39:33

practical.

[ ] 14:39:36

Okay.

[Cindy Bero] 14:39:39

So moving on to the procedure section. So you know in the relationship to the technical requirements for exchange comes out very clearly here.

[Cindy Bero] 14:39:49

Because it references the different types of transactions that have been defined in that PNP. So in response to an order or referral, you have to reply with the information becomes available and I think that's consistent with Mark what you were saying when the information is available to be made available.

[Cindy Bero] 14:40:08

Without any of these intentional or programmatic delays. And in response to a request, it has to be made available upon receipt of the request again as long as there is not an intentional programmatic delay inserted.

[Cindy Bero] 14:40:23

And then lastly, there is the notification of an admission discharge or transfer event and that should be shared at the time of the event.

[Cindy Bero] 14:40:33

So that really, you know, and as, we commented, this is a very brief.

[Cindy Bero] 14:40:39

Policy and procedure there's there's not a lot of there there but you know that so let me open it up again for questions So Matt.

[Matthew Eisenberg] 14:40:50

Yeah, thanks Cindy. So B and C are pretty simple, right? And those really aligned with the technical expectations of exchange.

[Matthew Eisenberg] 14:41:00

The challenge here is we get orders and referrals in all sorts of different ways. From all sorts of different participants.

[Matthew Eisenberg] 14:41:09

And, it would really be actually impractical for us. To use for example a fax referral for someone who may never actually go to our organization to then make data available.

[Matthew Eisenberg] 14:41:23

You know, we, so I'm not really sure what the order referral. Pop procedure expectation is, but to be totally honest, it's just not technically or feasible given the way the huge variation of kinds of orders and referrals we get.

[Cindy Bero] 14:41:43

So a faxed order may not have the same. Response requirement that an electronic order would.

[Matthew Eisenberg] 14:41:50

Correct. Correct. It may there may be no intent for example to, to share information. It may be an order for a procedure or laboratory test.



[Matthew Eisenberg] 14:42:02

Imaging, you name it, or, referral to see someone in, in our organization that may or may not actually be appropriate.

[Cindy Bero] 14:42:11

Yeah, I, yeah.

[Matthew Eisenberg] 14:42:11

Couldn't anyway, there's order and referral is really problematic. So I just don't, I, that's the only thing that's sort of out of line with the other policy.

[Matthew Eisenberg] 14:42:22

So I'm just not sure why it'

[Cindy Bero] 14:42:22

Yeah, and right now I'm gonna go refer to the definition for that after I stop sharing and not because I it may be that the order and referral because it's a definition a formal definition it may be an electronic order referral that we're referencing.

[Cindy Bero] 14:42:39

I just don't remember the definition of that one.

[Matthew Eisenberg] 14:42:40

And we get a ton of electronic referrals now that also may not apply in or be intended to have a full, you know.

[] 14:42:41

Well.

[Cindy Bero] 14:42:44

Okay.

[Cindy Bero] 14:42:48

Electronic response. Yeah, Jonah.

[Matthew Eisenberg] 14:42:49

Electronic response

[] 14:42:52

And yeah, RAM you can kick me into table something wrong here, but I think the reason why A is written this way and it sounds like we might need to change it.

[] 14:43:01

Is because it speaks to the transaction pattern, the query response. So it is actually linked and that's I think part of your point.

[] 14:43:11

To the to that transaction pattern which is described in the technical requirements. But it doesn't necessarily say.

[] 14:43:18

In this case that this is in response to an order where information is being sought and there is a relationship and all the caveats that you mentioned, which I think is an issue that we have to.

[Helen Pfister] 14:43:32

Oh

[] 14:43:33

Okay, thanks. Good comment.

[Cindy Bero] 14:43:34

Okay, and Louie.

[] 14:43:39

Thank you. I just wanna tie a couple of things together. Especially with item B. So I think this is where we see the tie to privacy and security.

[] 14:43:50

So when I talked earlier about, you know, a business rules engine. Or if I was to think about a system.

[] 14:43:57

Responding in near real time. Where are the changes would need to be made in my opinion would be a check to see whether a consent was.

[] 14:44:06

Granted whether that particular data element was, could be released programmatically. And you know, and then the response be provided.

[] 14:44:17

And I think that's the system level kind of work that I think has to occur. For social services systems to be able to respond.

[] 14:44:28

You know, besides the standards for the transmission of the data. I don't think that rules engine is in existence where they're going to and immediately respond.

[] 14:44:38

And that's where I think. There's a risk of unauthorized disclosure. If you don't have something that checks for those.

[] 14:44:45

Those rules on that particular piece of data that's being requested. That's where I think the risk comes in.

[] 14:44:53

So I'm trying to, you know, tie you 2 things together. You know since we're at this this point.

[] 14:45:01

That's what at least that's my thought on it. Thank you.

[Cindy Bero] 14:45:04

Yeah, thank you.

[Cindy Bero] 14:45:12

Any other questions or comments?

[Cindy Bero] 14:45:20

Okay, great. So thank you very much and we will take all that feedback and incorporate it.

[Cindy Bero] 14:45:27

And right now I'd like to transition back to the slides if I could.

[Cindy Bero] 14:45:37

Right. So, as you all have heard earlier that we are in the process of aggregating the definitions that are found across the DSA and multiple policies and procedures into a centralized glossary.

[Cindy Bero] 14:45:53

And the aim here is really to make it easier to have a single reference that could be that could be a companion to each one of these PNPs as we you know bring the data exchange framework forward.

[Cindy Bero] 14:46:07

So what I'd like to do now is just describe a little bit about this glossary. I believe you all received a draft of it.

[Cindy Bero] 14:46:14

So you could get a sense of what it looks like and then transition to a few items within the glossary that we wanted to discuss today.

[Cindy Bero] 14:46:24

So, as I described, we are bringing these together. There's currently 70 definitions that have been generated through the.

[Cindy Bero] 14:46:35

The authoring of the DSA in each of the policies of procedures. They have been brought together in this 20 page document.

[Cindy Bero] 14:46:43

The definition is there along with its reference to each of the documents in which it appears or is referenced by way of another definition and that we are working closely with our technical colleagues to get this document ready to post to the data exchange.

[Cindy Bero] 14:46:59

Website. Today what we wanted to do was to speak specifically to, 4 definitions in that glossary.

[Cindy Bero] 14:47:10

And the reason we wanted to talk about those is that as we were pulling the content together, we did notice that there was a slight alignment of terms that needed to occur or some editing that needed to occur.

[Cindy Bero] 14:47:24

To make the meaning of these more consistent and more appropriate and so we wanted to bring those to your attention today.

[Cindy Bero] 14:47:34

So if we could go to the next slide, I think Helen is going to address the first of these.

[Helen Pfister] 14:47:39

Sure, yeah, there were 4 definitions that fall into the categories that Cindy just described. Definition of health and social services information, the definition of individual and various permutations of that.

[Helen Pfister] 14:47:51

The definition of participant and the definition of personal representative. And so next slide please, starting with HSSI.

[Helen Pfister] 14:48:00

The original definition which was in the DSA itself as well as some of the PMPs that were published last summer.

[Helen Pfister] 14:48:07

Included, de-identified data. Anonymized data pseudonymized data.

[Helen Pfister] 14:48:14

Metadata and schema and as we sort of proceeded down this path we realized that it doesn't really make sense to include those.

[Helen Pfister] 14:48:22

Types of data in that definition. I mean the definition of HSO site for the most part. Is used when talking about the data that participants must or do exchange under the debt exchange framework.

[Helen Pfister] 14:48:33

So the new definition, takes out the references to those types of, of data, the identified.

[Helen Pfister] 14:48:40

Anonymized my metadata and schema. And also makes it clear that the definition of HSSI for purposes of framework.

[Helen Pfister] 14:48:48

Means individually identifiable information. To the extent that there may be instances where certain provisions of a PNP should apply to, for example, the identified data, we would address that by specifically calling that out in the PMP itself.

[Helen Pfister] 14:49:03

So let me stop there and see if anyone has questions or comments. About that.

[DeeAnne McCallin] 14:49:13

We have Mark.

[Helen Pfister] 14:49:14

Okay, yep.

[Mark Savage] 14:49:16

Could you, hello, thank you. Could you say a little more about what you mean by metadata because I think of that as sort of important information about identifiable information.

[Mark Savage] 14:49:28

You just said it was you meant to that it was meant to exclude it, but it seems like it really needs some kinds need to be included.

[Mark Savage] 14:49:35

I'll take for example.

[Mark Savage] 14:49:38

Something I've seen and dear to my heart race and ethnicity data adding a metadata element that says what's the source of the value?

[Mark Savage] 14:49:45

Is it self reported? Is it a clinical observation? I would want, we would want that to go with.

[Mark Savage] 14:49:51

Yeah, identifiable race and ethnicity data. So I just, that's why I'm asking for, can you say a little more, maybe you don't mean all metadata, maybe you only mean some kinds.

[Helen Pfister] 14:50:01

I think it depends. As Steven points out in the comments, it is a very broad term and definitely welcome comments from folks on the committee as to whether we should be.

[Helen Pfister] 14:50:10

Building that out more or I hear your point Mark. So would love thoughts on how on whether that needs to be adjusted if so with the best way might be to do that.

[Helen Pfister] 14:50:25

Steven?

[Steven Lane] 14:50:26

Yeah, I just, you know, I think There are a lot of types of metadata that are incredibly important.

[Steven Lane] 14:50:34

You know, provenance being one of them. And I think that we should address them individually.

[Steven Lane] 14:50:40

As needed to support exchange over the framework. I think just referring to metadata broadly could just infuse people.

[] 14:50:52

And if I can jump in. The idea is more to remove the specification of metadata because I think it was confusing.

[] 14:51:01

And if the metadata still meets the definition of HSSI, it would still be. So we're just looking to.

[] 14:51:11

So for example, if anonymized data is not de-identified and still would be PHI that would still be included in HSSI.

[] 14:51:19

Similar for metadata if it's still met the definition of you know, PHI. PIS and it would still be HSSI.

[Steven Lane] 14:51:31

Yeah, that does make sense as Devin put in the chat. I think removing the term metadata.

[Steven Lane] 14:51:40  
It does does support clarity.

[Helen Pfister] 14:51:45  
Any other questions or comments on this?

[Helen Pfister] 14:51:50  
Okay, great. Moving on to the next slide. So there were several terms used in the DSA and the various PMPs that were published that summer that all more or less meant the same thing.

[Helen Pfister] 14:52:03  
There was a definition of individual which is defined as a specific person that's with subject of the HSSI being accessed used or displaced.

[Helen Pfister] 14:52:11  
There was a definition of individual user. Which meant the person who's subject to PHI or PII.

[Helen Pfister] 14:52:16  
And then there was a recipient of services, meaning a patient of person who is a recipient of services, including social services.

[Helen Pfister] 14:52:22  
And, we went through all the PMPs and we looked at how that were, those words were used in all the different contexts in which they were used and we came up with a single definition.

[Helen Pfister] 14:52:34  
To use in all those places, which raves as set forth in the bottom of the slide and basically is the infant term individual names a specific person.

[Helen Pfister] 14:52:42  
That's the subject of HSSI. That's being exchanged, use, Disclosed.

[Helen Pfister] 14:52:47  
And access views, Disclosed or exchange. So it's really part of our attempts to simplify and harmonize and reconcile.

[Helen Pfister] 14:52:55  
The DSA and my customers PMPs and the PMPs that we've been drafting.

[Helen Pfister] 14:52:59  
All along the way. Questions or comments on that?

[Steven Lane] 14:53:05

Just the terminology. I mean, in many policies, they use the terms access exchange and use.

[Steven Lane] 14:53:14

And I think that, you know, exchange includes disclosures. Following that would be. Clarifying.

[Helen Pfister] 14:53:23

Okay, we can take a look at that other comments. Devin.

[Deven McGraw] 14:53:28

Yeah, and this, this isn't necessarily solved by the original definition. I actually think the streamlining makes a lot of sense, but you do sometimes run into a, the potential for, Some discrepancy around like who's the subject of the information if you've got a patient record that mentions a family member

[Deven McGraw] 14:53:46

for example. Under HIPAA we still consider that to be the record about that patient. It happens to have PII.

[Deven McGraw] 14:53:56

About another person. It's not necessarily PHI about that person, cause it's not necessarily about health care delivered to that person, but it might have a diagnosis.

[Deven McGraw] 14:54:32

We might need to do that to make sure that we have not. Stepped into a hornet's nest and provided a bunch of

[Deven McGraw] 14:54:40

Subject rights around people mentioned in records that we didn't really intend.

[Helen Pfister] 14:54:45

Yeah, no, I think that's a good point. We did go back and look at how the terms are used.

[Helen Pfister] 14:54:51

And I think I didn't see that anywhere, but it's a really good point. And if you see any where you think that is an issue, we obviously welcome you porting it out.

[Deven McGraw] 14:54:51

Okay.

[Deven McGraw] 14:54:56

Yeah.

[Helen Pfister] 14:54:57



Going an order on my screen, Lee.

[Lee Tien] 14:55:00

Yeah, I was just gonna sort of. Make the roughly the same point but from the health and social services information side rather than from the medical side because I can imagine a lot of say state endpoint agencies dealing with records that are families or of say a you know mothers and children and So maybe there's a specific person that you

[Lee Tien] 14:55:27

could say, oh, they're the person that's the recipient of treatment in a medical context but you know you might actually be the entire family or household might be the subject of some other kind of information so I just wanted to to add that definitional issue. Thanks.

[Helen Pfister] 14:55:46

Yep, got it. Okay. Morgan?

[Morgan Staines] 14:55:50

Yeah, I think just, I'll be quick just echoing what's been said.

[Morgan Staines] 14:55:55

But yeah, we're, you know, we're a huge organization and not a hybrid.

[Morgan Staines] 14:56:02

Anything we perceive about people we tend to treat it as BHI. because we can't do otherwise.

[Morgan Staines] 14:56:12

So, Devin and Lee Razor. Raise a good question.

[Helen Pfister] 14:56:15

And I see it coming from Mark in the chat that says that this is gonna require going back and amending all the finalized PMPs and yes we realize that and that is going to be a one of the one of the projects for the fall.

[Helen Pfister] 14:56:29

I don't see any more hands, so let's move on to the next slide.

[Helen Pfister] 14:56:36

So the definition here, so the original definition of the word participant basically said that it meant each health organization that's listed in.

[Helen Pfister] 14:56:44

Basically, 81 33 and California healthful safety code 130290 F. As well as any other personal organization that's a signatory to the DSA.

[Helen Pfister] 14:56:54

So basically, voluntary signatories. And then we gave a list of examples of, types of potential participants.

[Helen Pfister] 14:57:00

And we are proposing to streamline that to make 2 changes. We. Are proposing to take out the list of example participants because it's not exhaustive and it didn't it seemed to lead to more confusion than clarity.

[Helen Pfister] 14:57:17

And then also want to make it clear that it means an organization that signs to DSA because not even though they're required to do sub by law as a practical matter not every entity listed in the California Health and Safety could actually sign the DSI at this point.

[Helen Pfister] 14:57:34

So we wanna make it clear that the word participant really means to folks that have signed the DSA.

[Helen Pfister] 14:57:39

And in some instances, during the course of DSA signature process, there were sort of parent organizations that sign on behalf of their subsidiaries or supportive entities.

[Helen Pfister] 14:57:50

And so the term participant would include not just the parent organization, but also the subordinate entities that were covered by the parents signature.

[Helen Pfister] 14:57:58

So let me stop there and see what folks have to say about that.

[Helen Pfister] 14:58:03

Wait.

[Lee Tien] 14:58:04

Yeah, this is a very dumb question. But the Wow, you know the EMR systems are not themselves signing the Right.

[Helen Pfister] 14:58:07

No such thing.

[Lee Tien] 14:58:16

They're only, they're in it and there, but their legal obligations will end up being defined by their BAAs with the.

[Lee Tien] 14:58:23

With the entities they actually serve. I mean that's what I'm I'm just curious whether there's any whether we what the gap is in terms of what the say an EPC cast is allowed to do and anyone else.

[Helen Pfister] 14:58:40

So I'm not sure I'm quite following the question. If anyone else did follow it and wants to jump in on the CBI outside, please feel free to do so but I'm not sure I quite got it.

[Lee Tien] 14:58:48

Well, they're not, they're not participants, right? Because they don't. Oh, there's a whole bunch of obligations that are being placed on all the participants and but, a whole bunch of obligations that are being placed on all the participants and but epic as say the the vendor that is moving records

[Helen Pfister] 14:58:51

Right. Right.

[Lee Tien] 14:59:05

around the They are not subject to them and I'm not sure what the I'm confused and that's why so this might have been a dumb question about what their relationship is to any of the rules and regulations or the PNPs here.

[Lee Tien] 14:59:22

And whether or not there will be leakages through them. That's I guess that's what I'm really Just asking, sorry.

[Helen Pfister] 14:59:29

Yeah, yeah, I hear you. Okay, so yeah, I mean that's sort of a struggle right because I mean the way the data exchange framework and DSA and the P piece of structured is that the obligation to comply is upon the participants.

[Helen Pfister] 14:59:43

They're the ones that are signing some of the document. And there are a couple of ways they can do it.

[Helen Pfister] 14:59:46

They can participate by exchanging data themselves in accordance with what the framework acquires. Or they can do it through a qualified health information organization or other third part of it.

[Helen Pfister] 14:59:56

That facilitates their ability to do so. How to do it is up to each individual participant and if an EMR a vendor.

[Helen Pfister] 15:00:02

Doesn't provide the functionality that enables them to, compile with their obligations, then they would have to come up with.

[Helen Pfister] 15:00:10

Another solution passed during a QHIO or something else. But other than that, I'm not sure I can give any more specific guidance because it's so up to the individual circumstances of the participant in question.

[Lee Tien] 15:00:23

Thanks.

[Helen Pfister] 15:00:28

Any other questions on this?

[Helen Pfister] 15:00:33

Oh, okay, yeah, go ahead.

[] 15:00:37

I put a question in chat because just because I don't know. Is there a place, where the signatory can identify their subordinate entities when it's necessary?

[] 15:00:48

And assume that there if none are identified that they don't have any. I started thinking about if an HHS director in a county environment was signatory, but they would have other subordinates that they wouldn't be applicable to this.

[Helen Pfister] 15:00:53

Yeah.

[] 15:01:04

So if they.

[Helen Pfister] 15:01:04

So I will, sorry. I will look to some reason more in the weeds. I'm a DSA signatory process when I am but as I understand it when an entity signs DSA they can indicate whether they're also starting on behalf of their subordinate entities.

[Helen Pfister] 15:01:20

So there is a central source of truth as to who which entities a signatory is standing on behalf of.

[DeeAnne McCallin] 15:01:25

Helen, this is Dean. I can step in. It is on our DSA signatory list that is posted on our website so I'll drop the link in but that is where there is learn a subordinate entities as entered by the entity signing the.

[DeeAnne McCallin] 15:01:44  
DSA.

[Helen Pfister] 15:01:53  
Any other questions or comments on this?

[Helen Pfister] 15:01:57  
Mark.

[Mark Savage] 15:02:00  
Yeah. I've wrestled with a similar question around individuals. They're not participants qu quote unquote, but they have benefits and rights underneath and under the terms of the agreement and I think it's If we just think of participant, the least.

[Mark Savage] 15:02:20  
The way I've answered the question for myself is to think that. This defines participants and who has to do what under the agreement, but there it's not an exclusive.

[Mark Savage] 15:02:31  
Group of people that there are others beyond participants who also are benefiting from the agreement and That's been my way of trying to square the circle.

[Mark Savage] 15:02:40  
But I just, what I'm largely what I want to do here is just mention that,MR vendors isn't the only.

[Mark Savage] 15:02:45  
Thing. All Californians. Or another example.

[Helen Pfister] 15:02:51  
Right, for another example, there's an individual access policy that we developed last summer and individual years, individual human beings, individual patients.

[Helen Pfister] 15:02:59  
Clients, whatever you want to call them or are beneficiaries of that. So you're absolutely right.

[Helen Pfister] 15:03:06  
Any other comments on this? Okay, next slide. So the last. Next one.

[Helen Pfister] 15:03:14  
Okay. The last definition we made a change to was the definition of personal representative and we did 2 things.

[Helen Pfister] 15:03:22

The original definition referred to them as a person who under applicable law has the authority to act on behalf of an individual.

[Helen Pfister] 15:03:29

Asset for under HIPAA essentially. And we change that language a little bit instead of saying has authority to act in a half of an individual we said has authority to make health care decisions on behalf of an individual.

[Helen Pfister] 15:03:42

And that tracks the language of HIPAA. More closely. And then we also added a reference to the provision of the help California health and safety code that.

[Helen Pfister] 15:03:50

Talks about, that that basically addresses the same, the same concept. So.

[Helen Pfister] 15:03:54

Questions or comments on that?

[Helen Pfister] 15:04:06

Okay, seeing none, I think we're back off to over to the end for the kick us.

[Helen Pfister] 15:04:11

So kick off the public comment period.

[DeeAnne McCallin] 15:04:15

Thank you, Helen, and thank you everyone for all of the conversation and discussion we've had.

[DeeAnne McCallin] 15:04:21

Chad and QA. Let me find my place. All right. Individuals in the public audience who have a comment may insert it in the QA or otherwise.

[DeeAnne McCallin] 15:04:34

Raise your hand using the Zoom teleconference options. And you will be called in the order your hand was raised.

[DeeAnne McCallin] 15:04:41

Please state your name and organization affiliation and we ask that you keep comments respectful and brief.

[Emma P - Events] 15:04:56

We can give it a few moments, but at this time I do not see any hands raised.

[DeeAnne McCallin] 15:05:05

While we're waiting, I'm going to navigate to QA to look.

[Emma P - Events] 15:05:37

I think we can safely say that there are no hands raised and we can close public comment.

[DeeAnne McCallin] 15:05:46

And for all to note, there was, someone did. Have a Q&A entry about 3 or 3 of them are so with a number of questions.

[DeeAnne McCallin] 15:05:56

So we have noted those and recognise that they were there because they knew that. It would they would not be able to make that brief so they should shared all of their questions in QA earlier and we thank you for that.

[DeeAnne McCallin] 15:06:11

Next steps and closing. Thank you for your participation in today's meeting. From here we will consider the feedback provided during this sub community meeting.

[DeeAnne McCallin] 15:06:27

We will publish finalize policies and procedures. We will continue to advance policies and procedures and development and where applicable solicit public comment.

[DeeAnne McCallin] 15:06:35

We know that we will be posting the privacy and security policy and procedure that one was posted in January of this year.

[DeeAnne McCallin] 15:06:45

For very limited sections of the PMP and the comments that came in were far more broad than that which made us reopen the entire thing.

[DeeAnne McCallin] 15:06:54

So it is time for, from this conversation in the last couple of months work from January's comments that were submitted up through February fourteenth.

[DeeAnne McCallin] 15:07:04

We will be reposting that one for public comment. We will be finalizing and releasing the data exchange framework.

[DeeAnne McCallin] 15:07:11

And that really stemmed from some of the IAC, perhaps subcommittee members. Making this suggestion maybe indirectly about how long the definition section was in each PMP and then our seeing how crosswalking there were subtle differences between some PMPs that happen in inadvertently over, 18 months time of

[Helen Pfister] 15:07:25

Oh.

[DeeAnne McCallin] 15:07:38

development. And so we will be taking into account the feedback that you provided us, especially on the 4 of the 70 the other ones.

[DeeAnne McCallin] 15:07:44

Pretty good numbers that we only had for to do a deeper dive into. From ones that were already established over the last.

[DeeAnne McCallin] 15:07:54

Number of months. And we will post a summary of today's meetings as we always do on the CDII data exchange framework website.

[DeeAnne McCallin] 15:08:02

So committee members may provide feedback on the real-time PMP and on the privacy standards and security safeguards policy and procedure and anything else we've discussed today by the close of business Friday's, June thirtieth.

[DeeAnne McCallin] 15:08:19

As always, I encourage you to stay in touch and to send in the additional feedback on the PMPs or other topics covered during today's meeting.

[DeeAnne McCallin] 15:08:30

And then what we have are is the recap of upcoming meetings. So the IAC implementation advisory committee meeting number 8 is scheduled for July twentieth.

[DeeAnne McCallin] 15:08:41

At 9 30 am and the IAC meeting number 9 is currently tentatively scheduled for August 20 eighth.

[DeeAnne McCallin] 15:08:50

The next DSA PNP subcommittee meeting is scheduled for August seventeenth so it has been a number of months since we've had these meetings separate.

[DeeAnne McCallin] 15:09:00

Appreciate having feedback also from you if you thought there is continued need for having them separate from the IAC or if you prefer the joint.

[DeeAnne McCallin] 15:09:10

A feature of having those meetings at the right time and at the right moment. And with that, I think.

[DeeAnne McCallin] 15:09:17

Whoops, little too fast there. Will it come back? Maybe not. There we go.

[DeeAnne McCallin] 15:09:24

Data exchange framework. Number 10, the information is power webinar series. We have one scheduled for July 20 fifth at 10 am and one on.



[DeeAnne McCallin] 15:09:33

Webinar on webinar number 11 on August 20 fourth there is with our third party administrator also a webinar tomorrow on the next round of the DSA signatory grants meeting.

[DeeAnne McCallin] 15:09:48

I think that's it. 10 am I can quickly navigate to see if that is the correct time 10 am pacific of course yes, at 10 am tomorrow morning and you should be able to find information on that on our website or reach out to us if you do not have that.

[DeeAnne McCallin] 15:10:04

And with that, that concludes today's meeting. Thank you again and we look forward to working together to implement the data exchange framework and improve the health and well-being of Californians.

[Mark Savage] 15:10:18

Thank you

[DeeAnne McCallin] 15:10:20

Thanks everyone

[Matthew Eisenberg] 15:10:20

Thanks