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 9 Transcript (1:00PM – 3:00PM PT, September 27, 2023)

> The following text is a transcript of the September 27, 2023 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.

[Alice H - Events] 16:00:28
Hello and welcome. My name is Alice and I'll be in the background to support with Zoom. If you experience technical difficulties, please type your question in to the Q&A.

[Alice H - Events] 16:00:38
Live close captioning will be available. Please click. Click on the CC button to enable or disable.

[Alice H - Events] 16:00:46
There are few ways attendees may participate today. Participants may submit written questions and comments to the Zoom Q&A box.

[Alice H - Events] 16:00:54
All comments will be recorded and reviewed by CDI staff. Participants may also submit comments and questions as well as requests to receive data exchange framework updates to CDI at CHS.

[Alice H - Events] 16:01:09
Ca. Any questions that require timely follow up should be sent to CDI at CHHS.

[Alice H - Events] 16:01:18
For spoken comments, members of the public and PSA PNP subcommittee members must raise their hand for Zoom facilitators to unmute them to share comments.

[Alice H - Events] 16:01:28
The chair will notify participants of appropriate time to volunteer feedback. If you logged in via Zoom interface

[Alice H - Events] 16:01:36
The reactions button on screen. If selected to share your comment, you will receive a request to unmute.

[Alice H - Events] 16:01:43
Please ensure you accept before speaking. If you logged in via phone only. Press star 9 on your phone to raise your hand.

[Alice H - Events] 16:01:50
Listen for your phone number to be called by the moderator and if selected to share your comment, please ensure you are unmuted on your phone by pressing star 6.

[Alice H - Events] 16:02:00
Public comment will be taken during the meeting at designated times and will be limited to the total amount of time allocated for public comment on particular issues.

[Alice H - Events] 16:02:09
The chair will call on individuals in the order in which their hands were raised. Individuals will be given 2 min.

[Alice H - Events] 16:02:15
Please state your name and organizational affiliation when you begin. Participants are also encouraged to use the Q&A to ensure all feedback is captured or again you may email comments to CDII at CHS.

[Alice H - Events] 16:02:31
Ca. But that I'd like to introduce Deanne McCallin, Deputy Director. For the center of data insights and innovation.

[DeeAnne McCallin CDII] 16:02:40
Hi everyone. Thanks for joining us today. The ninth meeting of the Cal HHS data exchange framework, sharing agreements.

[DeeAnne McCallin CDII] 16:02:51
Policies and procedures subcommittee. As you heard, I'm Diane McCallan. I'm the chair of this subcommittee.

[DeeAnne McCallin CDII] 16:02:59
And today's discussion will focus on 2 policies and procedures that are under development. Proposed amendments to the data elements to be exchanged P and P and a new participant directory PNP that is in its infancy for development.

[DeeAnne McCallin CDII] 16:03:17

We will begin this meeting with the quick roll call of subcommittee members. So you say present as I read your name.

[DeeAnne McCallin CDII] 16:03:28
Already with me is my colleague Courtney Hanson

[Courtney Hansen] 16:03:35
Okay.

[DeeAnne McCallin CDII] 16:03:35
And so good sound check for everyone too. Thanks, hi. Ashish at Traha.

[DeeAnne McCallin CDII] 16:03:47
Bill Barcelona.

[William (Bill) Barcellona] 16:03:49
Present.

[DeeAnne McCallin CDII] 16:03:52
Kelly Brown and I do also see a hand raise so I don't know if it's an audio problem or anything or you want to say hello.

[Michelle Brown] 16:04:03
Hi, yeah, thank you. I'm just testing. I'm having all kinds of problems today.

[Michelle Brown] 16:04:07
But I'm here. Thank you.

[DeeAnne McCallin CDII] 16:04:08
Here you, thank you. Jason Buckner.

[Jason Buckner] 16:04:12
Present.

[DeeAnne McCallin CDII] 16:04:14
Hi, Louis Contrero.

[Courtney Hansen] 16:04:17
Awesome.

[DeeAnne McCallin CDII] 16:04:18
Matthew Eisenberg.

[Courtney Hansen] 16:04:20
Present.

[DeeAnne McCallin CDII] 16:04:22
John Helvey.

[John Helvey] 16:04:24
Present.

[DeeAnne McCallin CDII] 16:04:25
Sanjay Jane.

[Sanjay Jain] 16:04:27
Present.

[DeeAnne McCallin CDII] 16:04:29
Brian Johnson.

[DeeAnne McCallin CDII] 16:04:36
Diana Kim for Tong.

[Diana Kaempfer-Tong] 16:04:39
That's what I'm using.

[DeeAnne McCallin CDII] 16:04:40
Justin, I caught your first name. I didn't see it before I clicked. Cultenbach?

[DeeAnne McCallin CDII] 16:04:48
Helen Kim.

[Helen Kim] 16:04:51
Present.

[DeeAnne McCallin CDII] 16:04:52
Stephen Lane.

[Steven Lane] 16:04:54
Present.

[DeeAnne McCallin CDII] 16:04:56
Sunny low.

[Sunny Lowell - Dept. of State Hospitals (she/her)] 16:04:58
Thank you.

[DeeAnne McCallin CDII] 16:04:59
Lisa Matsubara.

[DeeAnne McCallin CDII] 16:05:05
Devin McGraw.

[Deven McGraw] 16:05:07
I'm here, thank you.

[DeeAnne McCallin CDII] 16:05:09
Jackie Nordoff.

[Jackie Nordhoff] 16:05:11
President, good afternoon.

[DeeAnne McCallin CDII] 16:05:13
Eric Rafael.

[DeeAnne McCallin CDII] 16:05:18
Mark Savage.

[Mark Savage] 16:05:22
Good afternoon.

[DeeAnne McCallin CDII] 16:05:24
Hello, Tom Schwaninger.

[DeeAnne McCallin CDII] 16:05:30
Morgan stains.

[Morgan Staines] 16:05:34
There you go. I'm here. Okay.

[DeeAnne McCallin CDII] 16:05:36
Alright, Elizabeth Stephan.

[DeeAnne McCallin CDII] 16:05:43
Lead 10?

[DeeAnne McCallin CDII] 16:05:49
And, Belinda Watman.

[DeeAnne McCallin CDII] 16:05:55
I didn't hear you, but I see you and it looked like you went up audio and then Terry Wilcox, I think she told us she was not gonna be able to join.

[DeeAnne McCallin CDII] 16:06:07

Trying to advance.

[DeeAnne McCallin CDII] 16:06:10
Hmm.

[DeeAnne McCallin CDII] 16:06:14
It's not advancing, Oh.

[DeeAnne McCallin CDII] 16:06:21
Thanks. Alrighty. So, today your facilitators and speakers will be myself and Rim Catherine and we're also supported by our colleague Courtney Hanson all with us.

[Morgan Staines] 16:06:34
Okay. Restaurant where everybody else seems. No.

[DeeAnne McCallin CDII] 16:06:39
Really? And do you remember that it's self mmute during these 2 HA good attendance here.

[DeeAnne McCallin CDII] 16:06:46
Thanks for joining everybody today. It's a pretty good crowd. We have to remind us the vision for the data exchange framework that every Californian and the health and human service, for the data exchange framework that every Californian and the health and human service providers that every Californian and the health and human service providers and organizations that care for them, we'll have timely and human service providers and organizations that care for them will have timely and secure access to

[DeeAnne McCallin CDII] 16:07:02
usable that addresses their help and social needs and enable the effective and equitable delivery of services to improve their lives and well being.

[DeeAnne McCallin CDII] 16:07:12
I ask that we all keep this North Star in mind throughout today's discussion. Thank you all for your efforts to help improve the health, lives and well-being of Californians.

[DeeAnne McCallin CDII] 16:07:23
Or meeting objectives today or to provide an update on the status of Pmp's in development.

[DeeAnne McCallin CDII] 16:07:30
Discuss proposed revisions to the data elements to be exchanged PMP, which is currently a final PMP that's published on our website but it's proposed revisions and discuss comes concepts and approach for the participant directory PNP.

[DeeAnne McCallin CDII] 16:07:50

Alright, so this slide summarizes the list of, what we tend to call like a PMPs that are in flight.

[DeeAnne McCallin CDII] 16:07:59
Earlier this month, CDI, I just. Close, disclosed to the public comment we close to public comment.

[DeeAnne McCallin CDII] 16:08:06
2 pm ps amending the privacy standards and security safeguards and amending the requirement to exchange HSSI or health and social services information.

[DeeAnne McCallin CDII] 16:08:19
Those are both in the post public comment where we're working through the the comments that were fielded we have the individual access services and administrative modification that was posted late last week for input from stakeholders on that PNP.

[DeeAnne McCallin CDII] 16:08:40
And then today we're gonna be discussing in detail as focal points of these 2 h data elements to be exchanged and the participant directory.

[DeeAnne McCallin CDII] 16:08:51
So the public comment period for the 2 that I mentioned privacy standards and requirement to exchange. I'm shortening the words a little bit there.

[DeeAnne McCallin CDII] 16:09:00
Was open between August, the 20 s and September, the eighteenth. We received over 100 individual comments from the public for that window that closed on September, the eighteenth and we are currently reviewing the comments to inform the final.

[DeeAnne McCallin CDII] 16:09:15
A final PNP. Thank you to everyone who submitted their comments on that. Late last week we released a administrative change, a proposal to the individual access services PNP.

[DeeAnne McCallin CDII] 16:09:31
We have. Revised we're floating the revision of this PMP to ensure consistency with the data exchange framework glossary of defined terms.

[DeeAnne McCallin CDII] 16:09:40
And to clarify the use of certain terms. These revisions should not result in any change to the meaning of the PNP or to Cdi's expectations for participants who are signatories to the data sharing.

[DeeAnne McCallin CDII] 16:09:54

And are otherwise not considered to be substantive. We are seeking public comment only with respect to whether these are indeed administrative modifications or not through a simplified process.

[DeeAnne McCallin CDII] 16:10:07
That process was laid out in the development of in modifications to PMPs procedures that was amended earlier this summer.

[DeeAnne McCallin CDII] 16:10:16
That object to the determination that these are administrative changes may submit an objection through an, changes may submit an objection through an online form provided on the data exchange framework website.

[DeeAnne McCallin CDII] 16:10:29
If you go to our website and you're not able to find where that is, you need to scroll down to the public comment section and that's where you will should see the materials and we're also going to try to get a link posted near the top, but it's on our web page and the objections are due by October, the 20 third.

[DeeAnne McCallin CDII] 16:10:47
This was where a few meetings ago we had proposed a 10 day window and we heard stakeholders in the input from of this group and the IAC that said 10 days just doesn't fly in our reality and it is a 30 day window.

[DeeAnne McCallin CDII] 16:11:02
And so you'll see that in this first proposed administrative change PNP.

[DeeAnne McCallin CDII] 16:11:09
And I think with that. Unless there's anybody that has any questions or comments, this would be a moment for you to do that.

[DeeAnne McCallin CDII] 16:11:16
Raise a hand and then we can go into, when presenting on the data element. So we'll pause for a minute before rim takes the floor.

[DeeAnne McCallin CDII] 16:11:29
It don't see any QA or chat.

[DeeAnne McCallin CDII] 16:11:35
Alrighty, ready to go, Rim. I will mute and I'll move this forward.

[Rim Cothren, CDII CalHHS] 16:11:39
Great, thank you. So people are gonna have to listen to me talk for a little while.

[Rim Cothren, CDII CalHHS] 16:11:43

I have quite a bit of material to go through over the next I think it's an hour and a half for the next 2 agenda items.

[Rim Cothren, CDII CalHHS] 16:11:50
I would really encourage people to raise their hands. And interrupt me if you have any questions or any comments on anything we were talking about today.

[Rim Cothren, CDII CalHHS] 16:11:56
I'll also try to watch chat but I'm not always really good at that so don't assume that I'm gonna catch your comments in chat.

[Rim Cothren, CDII CalHHS] 16:12:03
And feel free if you do put something in chat to raise your hand and do it verbally as well.

[Rim Cothren, CDII CalHHS] 16:12:09
We're gonna start off by talking about the data elements to be exchanged P and P and the discussion today really covers proposed amendments that we believe will be substantive amendments and so we're looking for the feedback of this sub committee to help us develop those changes.

[Rim Cothren, CDII CalHHS] 16:12:29
This is an existing policy and procedure that was published back in July, 2022 and admitted and amended administratively in December of 2,022.

[Rim Cothren, CDII CalHHS] 16:12:39
So it's been quite a while since this PNP has been before the subcommittee. Just to remind you, the data elements to be exchanged, policy and procedure really establishes 3 different things.

[Rim Cothren, CDII CalHHS] 16:12:50
It is the data elements of participants must make available. To or exchange with other participants and we're not going to be talking about any of those today.

[Rim Cothren, CDII CalHHS] 16:13:00
We're not proposing any amendments to those data elements. But it also speaks to the standards that must be used to represent that data, the code sets, etc, and the formats that must be used when exchanging that data.

[Rim Cothren, CDII CalHHS] 16:13:16
And we're going to touch on both of those today. The. Amendments that we're talking about, we believe again, should be substantive and they really come from questions.

[Rim Cothren, CDII CalHHS] 16:13:31

They've been raised by participants. And brought to CDI really for questions. They've been raised by participants and brought to CDI really for clarification and brought to CDI really for clarification as people get to CDI really for clarification as people get ready to be compliant with this PNP, as people get ready to be compliant with this PNP, by January, 2020

[Rim Cothren, CDII CalHHS] 16:13:45
there are also some administrative changes to this PNP that we may. Also introduce but we're not talking about the administrative changes today just the substantive changes.

[Rim Cothren, CDII CalHHS] 16:14:00
I emphasize that there are no proposed changes to the data elements of participants must provide access to or exchange in any of the proposed changes here.

[Rim Cothren, CDII CalHHS] 16:14:08
It's gone to the next slide

[Rim Cothren, CDII CalHHS] 16:14:11
Slides. There is specific proposed language that you also received in a redlined copy of this policy and procedure that we're looking to introduce.

[Rim Cothren, CDII CalHHS] 16:14:24
And what I want to do is talk a little bit about the reason that we're bringing this to the subcommittee and proposing this change and specific questions that I have for you.

[Rim Cothren, CDII CalHHS] 16:14:34
The first one, you see the language of it here. You will recall that the, the policy and procedure today identifies USCDIV 2 as the standard for data elements including code sets would be used to represent those data elements.

[Rim Cothren, CDII CalHHS] 16:14:52
And it requires that organizations use those. However, there are existing interface interfaces out there today that provide value to those that are using them.

[Rim Cothren, CDII CalHHS] 16:15:03
The technical requirements for exchange PNP allows point-to-point connections that are already in existence using any open technical standard, but this PNP does not.

[Rim Cothren, CDII CalHHS] 16:15:15
This PNP as it stands now. Requires organizations to standardize their format perhaps the poster child for how you might think about this one is an existing lab interface that does not use Link is required by the USCDI v 2, but the systems that are already using that interface might see value in that interface without having to rebuild it by January of 2,024.

[Rim Cothren, CDII CalHHS] 16:15:45
So my questions for the subcommittee here. Should the data exchange framework allow use of formats and terminology other than those specified in USCDI or the other standards that are listed in the PNP today.

[Rim Cothren, CDII CalHHS] 16:16:01
That do not align with national standards. And if we do do this, should we sunset that provision.

[Rim Cothren, CDII CalHHS] 16:16:12
And you can see in the language here that we're suggesting that yes, that be allowed. But that it sunset in 2 years, pushing people towards the national standards.

[Rim Cothren, CDII CalHHS] 16:16:21
Thanks, Stephen. I see your hand up.

[Steven Lane] 16:16:23
No, surprise, right, now. So,

[Rim Cothren, CDII CalHHS] 16:16:26
I was counting on you to weigh in here because I I knew that you would have both a practical and a national thought to this.

[Rim Cothren, CDII CalHHS] 16:16:36
So thank you.

[Steven Lane] 16:16:36
Yeah, I mean the example that you presented of the lab interface that does not include Link, is, is a great example, right?

[Steven Lane] 16:16:46
And, and as you say, there, there could be some value that's being derived from that.

[Steven Lane] 16:16:51
The challenge that comes to my mind is related to information sharing requirements and avoiding information blocking and the fact that information blocking itself points at USCDI, version one today and, and we understand likely by 1 1 25.

[Steven Lane] 16:17:13
It will be version 3. So. Providers, you know, certified health IT developers and HIs HIs HIs are already going to be required to be able to exchange that data.

[Steven Lane] 16:17:28

You know, today, you know, with the one standards and, and in just over a year with the 3 standards, and in just over a year with the 3 standards most likely, depending on the final rule.

[Steven Lane] 16:17:37
So it seems like having California lag, you know, yet another year behind that. Seems impractical and you know Again, who who are we?

[Steven Lane] 16:17:49
Who are we actually protecting, you know, by giving them, you know, all the way through? 25 and into 26 when the the nation or if presuming that the nation moves to, you know, continues to with information blocking.

[Steven Lane] 16:18:05
Prohibitions and moves to V 3 by the beginning of 2025.

[Rim Cothren, CDII CalHHS] 16:18:11
Thanks, Steven. So I wanna make sure your recommendation would be that we allow for this, but only do it until the beginning of 2025 rather than 2 years.

[Steven Lane] 16:18:21
You know, I didn't say that, but I think that's a good recommendation.

[Rim Cothren, CDII CalHHS] 16:18:24
Okay. Mark, I see your hand up.

[Mark Savage] 16:18:28
Thanks. I'll add on to what Stephen's saying. I'm not even recommending.

[Mark Savage] 16:18:33
Let's go until 2025 seems to be a significant. To lay in. Gonna raise a couple of use cases just illustrate how I'm looking at this.

[Mark Savage] 16:18:46
One would be shared care planning with multiple chronic conditions. So somebody that's really using the system.

[Mark Savage] 16:18:53
And if everybody is using point-to-point. And legacy, proprietary standards for not just exchange, but terminology.

[Mark Savage] 16:19:01
They don't have to use USCDIV 2. How does that information get integrated with the with all the different providers?

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[Mark Savage] 16:19:10
So that they're all sort of exchanging seamlessly. Without special effort, mind you. It just, I don't see it.

[Mark Savage] 16:19:17
Second use case. Really important to California to this whole effort. Social drivers of health. Bringing in social service organizations and CBOs.

[Mark Savage] 16:19:29
Who are trying to provide care for that 80 to 90%. That's not explained in the clinical setting.

[Mark Savage] 16:19:36
It's not handled in the clinical setting. Gravity project designed. How's an implementation guide and a reference implementation for using Fire Api's to exchange with the fire servers.

[Mark Savage] 16:19:49
But if all of this is proprietary and point to point, how are they, how are they supposed to be brought in and a part of this.

[Mark Savage] 16:19:55
System that we designed in order to promote health equity in California. So, I see this is not a good idea.

[Mark Savage] 16:20:05
And The fact that the technical requirements of exchange, which are the exchange standards, Say one thing, this gets to terminology and data form it and it just it multiplies that multiplies the problems in my mind.

[Mark Savage] 16:20:21
H the so I wouldn't do it at the very least. I would think of this as being.

[Mark Savage] 16:20:27
An exception. So If somebody's got certified as certified DHR, They and they also have a point-to-point connection.

[Mark Savage] 16:20:38
They shouldn't be using the point-to-point connection. So this should be, this should be, if you're going to do it.

[Mark Savage] 16:20:44
Please only do it if it's the only way that they can Can exchange if there are other ways of exchanging that's what that are more consistent with the data exchange framework.

[Mark Savage] 16:20:54
That's what's coming. That's what we should be doing.

[Rim Cothren, CDII CalHHS] 16:20:56
Thanks, Mark. John, I see your hand up.

[John Helvey] 16:21:02
Yeah, I agree both with Mark and and Stephen. I don't think that this should, I think that this should be an exception.

[John Helvey] 16:21:10
I don't think there should be a timeframe put on it. I think anything that we do to slow down data sharing.

[John Helvey] 16:21:18
Is a problem and it doesn't help us reach our end goals and if we think that we're gonna by one year extension.

[John Helvey] 16:21:25
We're gonna eliminate a problem. I don't believe that we are. There's other problems to link than just.

[John Helvey] 16:21:33
Whether it's there and whether it's coming across in a an approved format, so to speak, Earth outside of a point to point.

[John Helvey] 16:21:42
I mean, point to points can be. Still be using HIV standards. I think that we got a bigger problem.

[John Helvey] 16:21:51
If we delay. People submitting this data. I think that you know from a HIV perspective those are the things that we can work on our work with our participants on on the quality and the thoroughness and the compliance.

[John Helvey] 16:22:07
But I don't think that this should be postponed.

[Rim Cothren, CDII CalHHS] 16:22:11
Thanks, John. Sanjay, I see your hand up.

[Sanjay Jain] 16:22:16
Good afternoon. So. I understand that using the formats and terminal, they are very important for data exchange but using the legacy form it gives the flexibility to all the required participant to start the data exchange.

[Sanjay Jain] 16:22:35
Sooner than being capable or technically capable to implement the fire technology for example. There are many participants who are not that technically capable.

[Sanjay Jain] 16:22:47
To implement those formats whatever is recommended in p and ps for example social service organization COCs if we are getting data from them currently what we are doing we are exchanging data using a simple CSV flat file and that serves the purpose that we get the data from them and we send it data to them.

[Sanjay Jain] 16:23:10
But if we add more complexities. That by this date you have to follow this standard that may discourage the participant to start.

[Sanjay Jain] 16:23:21
Data exchange. Thank you.

[Rim Cothren, CDII CalHHS] 16:23:22
Thanks, Sanjay. I would want to point out here that the current language at least says that uses established point-to-point interfaces.

[Rim Cothren, CDII CalHHS] 16:23:31
So this exception would not. Would not permit new interfaces to be created outside of this. This is for legacy interfaces only, Sanjay.

[Rim Cothren, CDII CalHHS] 16:23:42
So at least that's what's being proposed here.

[Rim Cothren, CDII CalHHS] 16:23:48
Thanks for your comments. Jason, I see your hand up.

[Jason Buckner] 16:23:52
Yeah, thanks, R. I thought there was a higher level reference to US CD IV 2 where it in a policy somewhere that stated that you must share those data months to the extent that you actually collect and store them.

[Jason Buckner] 16:24:08
And so. If that is the case and I interpreted that correctly. It seems a little crazy to say you're collecting a link code, but you're not required to submit it.

[Jason Buckner] 16:24:22
Like, why would we allow that? What, how does that benefit a Cali member?

[Jason Buckner] 16:24:33

I would say that from our perspective, Don't support this whatsoever. If you're not collecting alloy code.

[Rim Cothren, CDII CalHHS] 16:24:39
So.

[Jason Buckner] 16:24:42
Right, you're not required to produce a link code because you're not collecting that. So it seems like a get out of jail free card for an odd sort of use case I can't imagine.

[Rim Cothren, CDII CalHHS] 16:24:54
So Jason, don't. Don't leave here because I want to clarify something. You're right.

[Rim Cothren, CDII CalHHS] 16:24:59
It's in this PNP. It's in the first section of this PNP where it calls out the data elements to be exchanged and it requires all.

[Rim Cothren, CDII CalHHS] 16:25:09
Organizations most organizations to exchange data elements in the US CDI, V 2 if they maintain those. So you're correct about that.

[Rim Cothren, CDII CalHHS] 16:25:17
But it says the data elements. If they maintain them. So that requirement would be if you have a lab result.

[Rim Cothren, CDII CalHHS] 16:25:27
You must exchange it. This would say that you can exchange it using a code set other than what's in US CDI, but you still must exchange it.

[Rim Cothren, CDII CalHHS] 16:25:37
So this would apply, for instance, if you use proprietary. Codes in your LEM system, will you still have that information?

[Rim Cothren, CDII CalHHS] 16:25:45
You must exchange it. But you but this provision would allow you to change it using the proposed codes.

[Rim Cothren, CDII CalHHS] 16:25:52
So I'm gonna move on to, Diana's, question here, but if you want to think on that and come back, raise your hand again, please.

[Rim Cothren, CDII CalHHS] 16:26:04
Diana, you have your you've had your hand up for a while.

[Diana Kaempfer-Tong] 16:26:08

Yeah, thanks. Being able to use, a legacy format terminology like this with, And expiration of 26 or if, you know, 25 if that's floated would.

[Diana Kaempfer-Tong] 16:26:23
Be beneficial and. We would be very, grateful about that as it would help with large organizations that have you know, married laws and challenges and attracting and all the other things that we have to go through to finish our systems.

[Diana Kaempfer-Tong] 16:26:44
So. We would be in favor of this change.

[Rim Cothren, CDII CalHHS] 16:26:46
Great. Thank you. I wanna point to a couple of things that are in the chat real quickly. We had asked whether there were funding ramifications for changes and what the agency types be impacted.

[Rim Cothren, CDII CalHHS] 16:26:59
Not exactly sure. There it's a good question if anybody has thoughts on that, be happy to hear them.

[Rim Cothren, CDII CalHHS] 16:27:08
Will there be any operational impact to those agencies and their patients? I think that is the question that I'm hoping to get some feedback on.

[Rim Cothren, CDII CalHHS] 16:27:16
I think that's what people. Have been asking Matt asked, do we have any idea who uses and how many such point to point interfaces would be affected?

[Rim Cothren, CDII CalHHS] 16:27:25
No, I don't, Matt, and I think that's also a good question here, that I was hoping perhaps there would be some insight into that from the folks here.

[Rim Cothren, CDII CalHHS] 16:27:37
I don't know if John or Jason as representatives from HIOs might have some idea about how many.

[Rim Cothren, CDII CalHHS] 16:27:45
Interfaces you guys see these days that don't use national standards. And then I point.

[Jason Buckner] 16:27:52
A lot. A lot.

[Rim Cothren, CDII CalHHS] 16:27:55
So, Matt, that's not a quantitative answer, but it gives you kind of a gestalt of where that might be.

[Rim Cothren, CDII CalHHS] 16:28:05
And then point to Steven's, comment, the point in the entire initiative is to advance data sharing in California and I agree with that.

[Rim Cothren, CDII CalHHS] 16:28:14
Wholeheartedly, which is why I wanted input at this meeting. You know, it this is in my mind, this is kind of a value trade off.

[Rim Cothren, CDII CalHHS] 16:28:23
Are we looking to, advance national standards? Are we looking to make data move? That may be harder to understand and use.

[Rim Cothren, CDII CalHHS] 16:28:33
And you know, that's what I'm looking for input on. So, and that's what you guys have been laying in on.

[Rim Cothren, CDII CalHHS] 16:28:38
So I appreciate that.

[Rim Cothren, CDII CalHHS] 16:28:40
Diana, did you have something else to say? I don't, I, your hand is still up and I may have interrupted you.

[Diana Kaempfer-Tong] 16:28:45
No, I don't.

[Rim Cothren, CDII CalHHS] 16:28:53
Matt, your hand is up.

[Matthew Eisenberg] 16:28:55
Yeah, no, I just wanna offer. An opposing view that is a realist view. You know, most of these point to points if they're getting value and no one's going to turn them off.

[Matthew Eisenberg] 16:29:08
Right? Somebody's using them. I'll continue to use them. And it, you know, this isn't, this process isn't to penalize folks who have useful interoperability even if they're proprietary.

[Matthew Eisenberg] 16:29:21
I certainly would love to get everybody up to speed. Using standard date elements as soon as possible. But I imagine this will be onerous for some.

[Matthew Eisenberg] 16:29:33

So I wonder if. One year period to get people to transition. With the goal of saying you know we need to get you there sooner rather than later might be more appropriate.

[Rim Cothren, CDII CalHHS] 16:29:48
Thanks, Matt. Let's

[Louis Cretaro] 16:29:53
I agree with Matt only my concern and the basis for my question is. It takes at least a year to get funding approved depending on the agency type, which I'm still not clear of.

[Louis Cretaro] 16:30:05
If I only if I use my own experience as a reference and I had accounting lab sending something to the state.

[Louis Cretaro] 16:30:13
And that was a point to point. Using those codes. I would have a patient's lab results depending on that or.

[Louis Cretaro] 16:30:24
You know some other patient data and the goal would be to you know, to serve the patients first.

[Louis Cretaro] 16:30:30
So everybody wants to move to the standard. And nobody's objecting to that. That's why we're all here.

[Louis Cretaro] 16:30:37
But there's a process to doing that. Usually it's funded and then there's technical changes to support the you know the protocols and then any other application changes that have to be made and that always turns into time and money.

[Louis Cretaro] 16:30:52
So my question is we want everybody wants this, but we have to recognize there's a natural process that we have to go through and we can't just set a date and expect That's not a natural process if the date is too soon to allow for the least one year planning for the budget and then to understand what changes needed to be made.

[Louis Cretaro] 16:31:16
I don't know how that applies to you know, the link codes. My information is dated.

[Louis Cretaro] 16:31:23
And maybe somebody can help me here, but. Were those the codes that were supposed to go to snowman or my memory totally?

[Louis Cretaro] 16:31:31

Off on that.

[Rim Cothren, CDII CalHHS] 16:31:32
It depends on the on the data set at the data element. But there are a mix of standards in US CDI that, that are called out there.

[Rim Cothren, CDII CalHHS] 16:31:43
We standardized on USCDI, V 2, which is, I'm sure Stephen will remember the publication date, but it was quite some time ago.

[Rim Cothren, CDII CalHHS] 16:31:52
And it was cited in this PNP, more than a year ago. So that's, a pretty long standing, set of standards there.

[Louis Cretaro] 16:32:01
But I have been on this committee. Since well over a year. I think this is second year and I've never seen those date elements in this committee.

[Louis Cretaro] 16:32:13
I do not recall that. We might decided that I looked at those. Today and I'm sitting here wondering.

[Louis Cretaro] 16:32:21
You know, what we expect social services to provide out of those date elements. I don't want to turn this conversation.

[Louis Cretaro] 16:32:28
Into that one but these aren't the data elements that I think thought was thinking health care would benefit from getting from social services.

[Louis Cretaro] 16:32:40
So. And I don't wanna mix conversations. My point is.

[Louis Cretaro] 16:32:46
And somebody else made it as well. What are the agencies that we're talking about here? How many of them and what's the process that they have to follow to be able to convert and then what would that timeline likely be?

[Louis Cretaro] 16:33:00
Because we can't put people. Out of business. For serving or patients.

[Louis Cretaro] 16:33:08
For clients. So that's my concern with a deadline like that.

[Rim Cothren, CDII CalHHS] 16:33:09

Thank you. Yeah. Thank you for your. Or your, your comments there.

[Rim Cothren, CDII CalHHS] 16:33:18
As it stands now, the deadline is, January and is something that's been published for a year.

[Rim Cothren, CDII CalHHS] 16:33:27
And a half come January. But, the that the requirements are far reaching. I wanna point to a few other things that are in, the comments real quickly.

[Rim Cothren, CDII CalHHS] 16:33:41
Please take, I mean, in the, chat real quickly, people wanna take a look there.

[Rim Cothren, CDII CalHHS] 16:33:46
I'm gonna move this on to the next slide because it's very much related. And, I just wanna point out that in section C of this same policy and procedure, it calls out the standards that must be used and it points towards fire, excuse me, it points towards HL 7 D 2.

[Rim Cothren, CDII CalHHS] 16:34:10
CDA. R 2 and fire r 4 And the proposal here would be to allow for legacy interfaces here as well.

[Rim Cothren, CDII CalHHS] 16:34:24
Sanjay, for instance, mentioned that there may be flat files rather than messages or do.

[Rim Cothren, CDII CalHHS] 16:34:32
Or resources that are being exchanged today. Our prior discussion on terminologies and, formats notwithstanding.

[Rim Cothren, CDII CalHHS] 16:34:45
Do people have different thoughts? On whether. standards, for the content itself.

[Rim Cothren, CDII CalHHS] 16:34:55
Should be allowed. For instance, should we allow legacy systems using flat files rather than an HL 7 V 2 message, CDA document or a fire resource be allowed to continue.

[Rim Cothren, CDII CalHHS] 16:35:11
You'll see here that at least in the proposal here is that that never be sunseted. But that's a question here as well.

[Rim Cothren, CDII CalHHS] 16:35:21
I'm mostly I think here looking for people that have a differing opinion about how we might deal with.

[Mark Savage] 16:35:24
Hmm.

[Rim Cothren, CDII CalHHS] 16:35:29
Failure to use an existing national standard, to exchange this information.

[Rim Cothren, CDII CalHHS] 16:35:47
I'm kind of taking silence is if you advocated for some time to do terminology changes, you would advocate for doing format changes.

[Rim Cothren, CDII CalHHS] 16:35:58
If you advocated to not allow for that, you would continue to not allow for this as well.

[Rim Cothren, CDII CalHHS] 16:36:17
Chat has been very active and I have failed to keep up with it. Is there anybody that would like to mentioned something that they've dropped in chat.

[Rim Cothren, CDII CalHHS] 16:36:30
Verbally.

[Steven Lane] 16:36:30
I mean one question, one issue is really this whole issue just because something is included in USCDI, does that mean you have to collect it and send it?

[Steven Lane] 16:36:41
Putting something in the USCI, at least from a information blocking, you know, federal rule compliance perspective.

[Steven Lane] 16:36:48
Does that mean you have to include, you have to collect it? It just means that if you collect it, then you have to send it.

[Steven Lane] 16:36:54
Yeah, Jason, thank you for shaking your head. You know, that's very important. So this is the burden is simply to say that if you've got it put it into your interface, you know, and if we're gonna give you all the way through, 2,024 to do that, you know, most most people could do that.

[Steven Lane] 16:37:09
I think the people who would mostly struggle with that or the people who don't have it in the first place.

[Steven Lane] 16:37:13

But again, saying that we point to USCDIV 2 does not mean that you have to collect new data.

[Rim Cothren, CDII CalHHS] 16:37:18
And thanks, Stephen. Our belief is that that's reflected in our policies and procedures as well.

[Rim Cothren, CDII CalHHS] 16:37:27
You'll see that, throughout this, when it talks about if you maintain the information with maintain being defined as if you have access to the information control they the information and authority to share the information.

[Rim Cothren, CDII CalHHS] 16:37:40
It does not require you to collect the information. So thank you for that.

[Steven Lane] 16:37:44
Yeah, and for I forget who it was who said that they weren't sure what was in USCDI between Matt and myself.

[Steven Lane] 16:37:51
We've dropped all the relevant references into the chat.

[Rim Cothren, CDII CalHHS] 16:37:54
Thank you.

[DeeAnne McCallin CDII] 16:37:56
Yeah, and Rim, you're actually on top of the chat more than you know. If we, don't, if we're not able to address any non members questions, we can do that during the like public comment section as well.

[DeeAnne McCallin CDII] 16:38:12
We can circle back to things if need be.

[Rim Cothren, CDII CalHHS] 16:38:21
Alright, well I don't hear anything new. I did see. Few things in the chat that said that thoughts were mirrored here.

[Rim Cothren, CDII CalHHS] 16:38:32
At least what I've heard. Is that if we allow for a period it should be shortened.

[Rim Cothren, CDII CalHHS] 16:38:39
There was quite a bit of comment that we should not allow, for use of legacy that that delay will.

[Rim Cothren, CDII CalHHS] 16:38:52

Go again, advancing interoperability in California, which is the, approach here.

[Rim Cothren, CDII CalHHS] 16:38:57
So we'll take those comments back. I'm gonna move on to the next proposed change and this one is going to sound very related.

[Rim Cothren, CDII CalHHS] 16:39:07
But it deals with the fact that there are standards that are named. In the data elements to be exchanged today, namely, HL 7 V 2 and CDA are 2.

[Rim Cothren, CDII CalHHS] 16:39:23
That cannot exchange all of the data elements in USCDA, V 2, USCDI, V 2 as they stand today that those current standards don't support all of the data elements.

[Rim Cothren, CDII CalHHS] 16:39:38
Natively or specify the use of different code sets then those data elements suggest. We've been asked about What does that mean for the use of some of the standards that are allowed?

[Rim Cothren, CDII CalHHS] 16:39:52
So for example, if I am allowed to use an H 7 v 2 message. And it does not support.

[Rim Cothren, CDII CalHHS] 16:40:01
A USCDI data element such as an STOH element that I have. What do I do about that and what we're suggesting here.

[Rim Cothren, CDII CalHHS] 16:40:12
Is that. The use of standardized data elements, formats and terminologies that are in.

[Rim Cothren, CDII CalHHS] 16:40:22
For example, USCDI, be used to the extent that they can be supported in these, these formats.

[Rim Cothren, CDII CalHHS] 16:40:33
The, what that really would mean is that You must. Exchange to specify data elements such as those in USCDI, V 2.

[Rim Cothren, CDII CalHHS] 16:40:43
Using those terminologies, but only if those elements and terminology are supported by the name data format.

[Rim Cothren, CDII CalHHS] 16:40:51
Standard such as a CDA or 2. Stephen, I see your hand up.

[Steven Lane] 16:40:56

I like the way you've skinned this cat. And I think I would just include.

[Steven Lane] 16:41:03
Language that allows these requirements to advance as newer versions are, incorporated, right? That makes it so that we don't have to go through a multi-year cycle, you know, when CDA is updated, etc.

[Steven Lane] 16:41:20
You're right that until v 2 or now it's gonna probably be v 3 becomes required by the 3 becomes required by the federal regs, and now it's gonna probably be V 3 becomes required by the federal regs, again, likely the first of 2025.

[Steven Lane] 16:41:34
A lot of the certified health IT and other systems required by the federal regs. Again, likely the first of 2025.

[Steven Lane] 16:41:40
A lot of the certified health IT and other systems aren't going to be, you know, brought into line with that idea in the rulemaking as I understand it is that the HTI one proposed role which will you know presumably be a final rule before the end of the year you know it is going to set us on that path where all of the other standards will align and will catch up.

[Steven Lane] 16:41:56
But, you are right that there are none of this v 2 is not required by any federal rules at this point in fact this is one of those places where we in California are trying to move ahead of the federal requirements.

[Steven Lane] 16:42:08
But of course will be leapfrog into V 3 by the federal requirements once those are published.

[Rim Cothren, CDII CalHHS] 16:42:18
I don't see any other hands up. I do see a question.

[Rim Cothren, CDII CalHHS] 16:42:29
Alright, I scrolled it off the screen. A question from Jason. Have we identified specific USCDIV 2 data elements. That's TDI, V 2 data elements.

[Rim Cothren, CDII CalHHS] 16:42:39
That's TDA R 2 does not support. I unfortunately I am not, the expert that I'm going to support.

[Rim Cothren, CDII CalHHS] 16:42:47

I unfortunately I am not, the expert that I'm going to be doing a good job to call these out.

[Rim Cothren, CDII CalHHS] 16:42:50
I, unfortunately I am not, the expert that I'm going to be doing a good job to call these out.

[Rim Cothren, CDII CalHHS] 16:42:53
This is pointed out to me by people that are in the weeds on the standards a little bit more often than I am.

[Rim Cothren, CDII CalHHS] 16:42:55
I would put forward perhaps as an example that the richness of patient demographics, it's called foreign v 2 that includes not only sexual orientation, excuse me, sex assigned at birth, but sexual orientation, gender identity.

[Rim Cothren, CDII CalHHS] 16:43:09
Race and ethnicity preferred language i don't know that all of that is supported well in both CDA or 2 and in HL 7 V 2 standards.

[Rim Cothren, CDII CalHHS] 16:43:21
In particular, people have raised concerns with some of the STOH. Measures such as sdh interventions and whether they can be carried in some of these formats they are supported perhaps better in fire than they are in the other 2 standards.

[Rim Cothren, CDII CalHHS] 16:43:41
John, I see your hand up.

[John Helvey] 16:43:45
Yeah, I don't, I think there's, you know, an evolution issue here. As we talked about those specific data elements because Many EMRs don't even give you a place to collect that.

[John Helvey] 16:43:56
Or have that built in workflow or you know, don't collect it in the process.

[John Helvey] 16:44:02
So whether you can whether you can share the data or not. And even if you can collect the data, you're not collect most people aren't collecting it.

[John Helvey] 16:44:12
A lot of people so. You know, to I'm a little bit unclear on the ask.

[John Helvey] 16:44:23
That. Is being presented here.

[Rim Cothren, CDII CalHHS] 16:44:28
So let me see if I can clarify things. A little bit if you collect data today. And it is.

[Rim Cothren, CDII CalHHS] 16:44:38
And it is in USCDIV 2, then you're required to exchange it.

[Rim Cothren, CDII CalHHS] 16:44:44
And if you are exchanging CDA or 2 documents and you cannot follow the standards of the CDA template in front of you.

[Rim Cothren, CDII CalHHS] 16:44:54
And include the USCDI, V 2 data element, then one of the 2 has to give.

[Rim Cothren, CDII CalHHS] 16:45:00
You either break the standard. Or you, don't exchange all of the data elements. And what we're saying here is rather than break the standard, the standard takes precedence that you must exchange data that you maintain.

[Rim Cothren, CDII CalHHS] 16:45:17
If it can be represented in the standard that is listed in the USC, excuse me, in the data elements to be exchanged as an allowed standard.

[John Helvey] 16:45:37
Hey, in some ways it feels like we want things to be perfect before we start. Moving down the path and I just You know, nothing is gonna be perfect.

[John Helvey] 16:45:48
So, yeah. I understand. It's a it's a hard place in Iraq and Yeah, I don't have anything further that.

[Rim Cothren, CDII CalHHS] 16:45:57
Thank you. Jason, I see your hand up.

[Jason Buckner] 16:46:00
Yeah, I mean, I, we've done absolute mass amount of work to ensure that we comply.

[Jason Buckner] 16:46:07
And include all USCDF, Data, on on CDR 2. EHR vendors.

[Jason Buckner] 16:46:15
That have paid attention to this are good at it. We see it, yeah, on their CVAs.

[Jason Buckner] 16:46:21

We haven't run into a particular data element on our side. That can't be put into And R 2, Epic does a great job of mashing them in various spots.

[Jason Buckner] 16:46:33
I mean, and some of the other HR. So anyway, like, I don't have like a huge strong opinion here.

[Jason Buckner] 16:46:40
It just seems like. From our perspective, there's not a real problem to solve here. So it just Maybe someone else is having problems with identifying where.

[Jason Buckner] 16:46:50
A V 2 element goes in the in the CDA. That's just not a problem that we've experienced.

[Jason Buckner] 16:46:55
So.

[Rim Cothren, CDII CalHHS] 16:46:55
Thanks, Jason. I think that that's a really important perspective here. I would hate to make things more complicated to solve a problem that doesn't exist.

[Rim Cothren, CDII CalHHS] 16:47:06
So I think that's really useful.

[Rim Cothren, CDII CalHHS] 16:47:08
Any other thoughts?

[DeeAnne McCallin CDII] 16:47:12
Rim, good discussion you're tracking. 2 min back and 2 slides on this topic.

[Rim Cothren, CDII CalHHS] 16:47:18
Yeah, so that'll eat it a little bit into our next topic discussion. Let's go on.

[Rim Cothren, CDII CalHHS] 16:47:23
To the next slide. We actually didn't propose a change, for the next item.

[Rim Cothren, CDII CalHHS] 16:47:30
Which is it's been raised with us that, it may be difficult. To exchange claims data.

[Rim Cothren, CDII CalHHS] 16:47:38
Using some of the standards we've identified. Whoever's advancing slides, could you go ahead and advance it to the next one?

[DeeAnne McCallin CDII] 16:47:45

Yeah, I'm in that it's stuck for me.

[DeeAnne McCallin CDII] 16:47:49
We should be on slide 22.

[Rim Cothren, CDII CalHHS] 16:47:53
So we're not proposing a change for this right now, but as you recall, the, technical requirements for exchange requires that organizations support the IET profiles for a query based document exchange which is most aligned with exchanging CDA documents.

[Rim Cothren, CDII CalHHS] 16:48:16
There is no CDA template or claims, but plans required to exchange claims. And so one of the questions that's arisen is should we expand the standards to a common claim standard like X 12.

[Rim Cothren, CDII CalHHS] 16:48:35
I will point out that X 12 is not on SAP, which we've used as our reference for nationally and federally adopted standards.

[Rim Cothren, CDII CalHHS] 16:48:43
I don't mean to say that we automatically step up to everything in S. FAP, but we do look for standards there before we propose them for use on data exchange framework.

[Rim Cothren, CDII CalHHS] 16:48:57
R for a fire R 4 remains a viable standard. That does support claims and what's been pointed out to me in some of my conversations on this topic is that CDA R 2 does support most of the useful information that most queries are likely to find useful in claims.

[Rim Cothren, CDII CalHHS] 16:49:13
Such as medications, procedures, diagnosis, etc. They can be represented, although not in a claim format.

[Rim Cothren, CDII CalHHS] 16:49:21
We're at least not suggesting at this time that we do any updates specifically to add claims standards to this mix, but I wanted to open that up.

[Rim Cothren, CDII CalHHS] 16:49:31
For the folks here just to make sure that there weren't contrary opinions. And that that would require claims information exchanged by a plan using IG profiles to put as much information as possible into a CDA document, for example.

[John Helvey] 16:50:09
Do we have any? Be interested to hear from Sanjay.

[Sanjay Jain] 16:50:17
Well, yeah, so we.

[Sanjay Jain] 16:50:21
This is again the same thing. What we are doing currently is, again, we are using flat files, data and sending to our HI partner for claims and now.

[Sanjay Jain] 16:50:33
If we go that route, though, so I'm pretty sure it's not just us. There may be many more organization doing that.

[Sanjay Jain] 16:50:42
So there would be a change needed for all of them to. To move to the new standard and Yep.

[Sanjay Jain] 16:50:48
It's always good to follow standard. I'm always with that, but it may create a extra layer of work and rework.

[Sanjay Jain] 16:50:55
If someone or is already sharing data using flat file.

[Rim Cothren, CDII CalHHS] 16:51:00
Thank you. Point out there are a couple of comments also in the chat. From Jason does not believe we need.

[Rim Cothren, CDII CalHHS] 16:51:09
An alternative standard and that Matt agreed, that that would be a big expansion in scope.

[Rim Cothren, CDII CalHHS] 16:51:15
So thank you both for that. Are there any contrary opinions?

[Rim Cothren, CDII CalHHS] 16:51:25
If not, or whoever is controlling slides may add if we can go on to the next slides really about next steps it will take here I really appreciate the next slides really about next steps it will take here I really appreciate the robust discussion I think we wore. I really appreciate, the robust discussion.

[Rim Cothren, CDII CalHHS] 16:51:42
I think we wore everybody out a little bit on the very first topic, but in my mind it was the robust discussion.

[Rim Cothren, CDII CalHHS] 16:51:48

I think we wore everybody out a little bit on the very first topic, but in my mind it was the important one for everybody out a little bit on the very first topic, but in my mind it was the important one for us to address.

[Rim Cothren, CDII CalHHS] 16:51:51
It was really good is that, we will take feedback that we heard today, and, adjust the, the proposed changes, to this, PNP, taking that into consideration.

[Rim Cothren, CDII CalHHS] 16:52:09
There are also administrative changes to this P and P that need to be made such as those that we.

[Rim Cothren, CDII CalHHS] 16:52:17
Already described for individual access. There it needs to be aligned with glossary terms and clarify some of the defined terms within it.

[Rim Cothren, CDII CalHHS] 16:52:29
A lot of the language, other PNPs have defined terms that this PNP uses and so we need to make some of those changes as well.

[Rim Cothren, CDII CalHHS] 16:52:38
We didn't talk about those today but they are not substantive. Well combine those all into a single package and then we'll issue this for public comment.

[Rim Cothren, CDII CalHHS] 16:52:48
We anticipate that that likely happen in October. And we'll do that as a single public comment.

[Rim Cothren, CDII CalHHS] 16:52:56
So that won't be an expedited process like we talked about before. If there are issues that come out of the public comment that I need to or CDI.

[Rim Cothren, CDII CalHHS] 16:53:07
CDI needs to come back to this subcommittee. For, further input that would happen at our scheduled meeting in early December.

[Rim Cothren, CDII CalHHS] 16:53:17
Hi, DAY. And then our plan would be to, finalize and publish any amendments that come out of this, before the end of the calendar year, that is our hope.

[Rim Cothren, CDII CalHHS] 16:53:28
Are there any questions about next steps?

[DeeAnne McCallin CDII] 16:53:34

I'll throw in there was a good question about where this, like red line PNP is that might help people have line of site and it's in the actual sub committee materials folder which Jason Justin dropped into the chat but that was a really good kind of question.

[DeeAnne McCallin CDII] 16:53:53
I too went to the wrong place so you can find the red line that mirrors rim slides for data elements in the material for this today's subcommittee meeting as opposed to in the PNP section.

[Rim Cothren, CDII CalHHS] 16:54:06
Thank you, Dean. So why don't we turn on to the next topic. We're not going to talk about specific language here and on a PNP today, but I do want to focus this on talking about the PNP and the requirements.

[Rim Cothren, CDII CalHHS] 16:54:20
The first 2 slides here are really a reminder of the content that we've talked about with the IC at past meetings.

[Rim Cothren, CDII CalHHS] 16:54:30
You'll recall that, health and safety code, 1 30 to 90 that codifies the AB 133 requirements for data exchange framework allows.

[Rim Cothren, CDII CalHHS] 16:54:39
Organizations. To use any health information exchange network, health information organization, or technology that adheres to specified standards and policies that the data exchange framework.

[Rim Cothren, CDII CalHHS] 16:54:52
So the question here is how do participants are on the network find the methods that other participants are using if they want to ask them for information or they want to send them information.

[Rim Cothren, CDII CalHHS] 16:55:07
We anticipate that Many, perhaps most participants will use an intermediary to exchange data with others and probably the 2 most common intermediaries are going to be nationwide networks or frameworks or health information.

[Rim Cothren, CDII CalHHS] 16:55:24
Organizations, HIOs including qualified HIOs, but there may be some additional vendors that are used to do this.

[Rim Cothren, CDII CalHHS] 16:55:30
However, some may choose to use their own. Technology solutions or point to point connections. And so the question that the participant directory is intended to answer is

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how does one participant know how to request information from or send information to another participant.

[Rim Cothren, CDII CalHHS] 16:55:50
How do they discover the choices that other participants have made? And so the purpose of the participant directory is to fill this facilitate.

[Rim Cothren, CDII CalHHS] 16:55:57
Exchange but not meet other needs of or other use cases that are often attributed to provider directories. This is not a provider directory.

[Rim Cothren, CDII CalHHS] 16:56:10
It doesn't tell you what the office hours are for doctors. It doesn't tell you whether they're accepting new patients or what plans they accept it is merely about the choices that people are making in order to exchange data.

[Rim Cothren, CDII CalHHS] 16:56:23
Move on to the next slide, please. So again, with the IC, we've talked about doing this.

[Rim Cothren, CDII CalHHS] 16:56:28
As a phase approach and that we would begin by. focusing on organizations and facilities and that we would collect and communicate.

[Rim Cothren, CDII CalHHS] 16:56:39
We being CDI I would collect and communicate participant information on the choices they're making on how to exchange, HSSI.

[Rim Cothren, CDII CalHHS] 16:56:49
And that we would facilitate that collection and distribution through the DSA signing portal that participants already have access to.

[Rim Cothren, CDII CalHHS] 16:56:59
And allow organizations to voice their choices there collect that up and make it accessible to other participants to that means.

[Rim Cothren, CDII CalHHS] 16:57:09
In the future, we may look at something that's more robust that adds real time APIs for making changes to entries or downloading entries.

[Rim Cothren, CDII CalHHS] 16:57:20
And in a further, advancement of this, we, anticipate adding individuals now individuals not patients and consumers but providers.

[Rim Cothren, CDII CalHHS] 16:57:33

Care coordinators, other professionals in these organizations in case it is necessary to send individuals information.

[Rim Cothren, CDII CalHHS] 16:57:43
But Those 2 are both for an earlier date. So we're also looking at a first version of this policy and procedure right now that focuses again on organizations and facilities.

[Rim Cothren, CDII CalHHS] 16:57:56
And collects. The necessary information to. Communicate the choices. That organizations will make.

[Rim Cothren, CDII CalHHS] 16:58:07
So over, if we go on to the next slide, please, over the next few slides I've got.

[Rim Cothren, CDII CalHHS] 16:58:14
3 primary questions that I want to consider who must enter information into the provider directory what information must be entered and how are choices made available to other participants.

[Rim Cothren, CDII CalHHS] 16:58:29
And we'll have a slide on each one of those or maybe a couple of slides on each one of those as we go through and that's where I'm really looking for input.

[Rim Cothren, CDII CalHHS] 16:58:36
And bear in mind that this is input to go into a policy and procedure, but it'll define some of the details on the participant directory itself that we're currently developing.

[Rim Cothren, CDII CalHHS] 16:58:47
So it will determine how what options are for entering data and how data is made available. The purpose of this PNP therefore is to establish requirements for CDI on creating a participate participant directory and then participate on participants to maintain their information in the directory.

[Rim Cothren, CDII CalHHS] 16:59:12
And again, bearing in mind that we're talking about just. Phase one right now.

[Rim Cothren, CDII CalHHS] 16:59:17
That we're talking about a way to create, excuse me, we're talking about creating a way to input and access.

[Rim Cothren, CDII CalHHS] 16:59:25
Participant choices that we're at we've also with the IC discussed it will rely on detailed information.

[Rim Cothren, CDII CalHHS] 16:59:34

Available from networks and frameworks rather than including that detailed information in our participant directory.

[Rim Cothren, CDII CalHHS] 16:59:40
And we'll focus on organizations facilities and add users such as physicians at a later phase. So Dean, I did see your hand pop up there for a second.

[Rim Cothren, CDII CalHHS] 16:59:52
Did you have something you wanted to point to?

[DeeAnne McCallin CDII] 16:59:57
You all you kind of clarified it just when you said, enter data, it's really the choices and the information, not the HSSI. It's not like other data.

[DeeAnne McCallin CDII] 17:00:08
It's the participant information or participant data. But kind of a waiting detail. And then we have John.

[Rim Cothren, CDII CalHHS] 17:00:16
Thank you. And, and please every time I say data, please hear. Participant choices, we're not talking about HSSI here, you're not entering any HSSI with CDI.

[Rim Cothren, CDII CalHHS] 17:00:33
Okay, John, you've had your hand up patiently for a while.

[John Helvey] 17:00:37
Arthur, there are already, aren't there? There are already. Care quality and directories.

[John Helvey] 17:00:45
The data in those directories are what's key for us to, leverage those networks.

[John Helvey] 17:00:51
Wouldn't that be leveraged in this case?

[Rim Cothren, CDII CalHHS] 17:00:54
I would, I think that's a good point and it's good for us to talk about that right now.

[Rim Cothren, CDII CalHHS] 17:01:00
So yes, and when When I put on this slide, cause I put the words down here when we're, relying on detailed information from networks frameworks, QA, O's, another, that is what I'm talking about, that e health exchange and care quality both manage directories themselves.

[Rim Cothren, CDII CalHHS] 17:01:18

They're authoritative for the data that's in them and care quality both manage directories themselves.

[Rim Cothren, CDII CalHHS] 17:01:24
They're authoritative for the data that's in them and that we should leverage that data.

[Rim Cothren, CDII CalHHS] 17:01:24
So the type of choices that we're making here is that if a participant has chosen to receive requests for information on care quality, John, how do you know that?

[Rim Cothren, CDII CalHHS] 17:01:37
How do you know to go look for them there? Or you could discover that on care qualities directory by itself, but more importantly, if they've chosen to use your HIO to.

[Rim Cothren, CDII CalHHS] 17:01:55
Be asked for information. How does somebody discover that? And so that's what we're talking about.

[Rim Cothren, CDII CalHHS] 17:02:02
Is that. A participant has chosen to use this nationwide network for queries.

[Rim Cothren, CDII CalHHS] 17:02:13
But this QHIO. For pushes of information and for ADT alerts. And that is the level of information that we're looking for.

[Rim Cothren, CDII CalHHS] 17:02:26
The detail of how you reach them on care quality. Care quality knows and already publishes and we are not gonna reproduce and try to keep in sync.

[Rim Cothren, CDII CalHHS] 17:02:36
But what you need to know Is that care quality is how you, reach that organization or query.

[Rim Cothren, CDII CalHHS] 17:02:48
And Sack Valley Med chair is how you reach them for pushing or ADTs.

[John Helvey] 17:02:52
Yeah, and I think that's a, you know, that's a good point. I think that, you know, if we're gonna provide a resource for Californians.

[John Helvey] 17:03:00
That there should be some level of reference point to how do you get the, the health exchange or care quality.

[John Helvey] 17:03:10

The problem is you can't just. Broadcast out. A query and not have it be targeted in some fashion because You're not gonna get all the results back in time.

[John Helvey] 17:03:22
To process it in order to keep the attentions of the people that are searching for it. So it just doesn't work that way.

[John Helvey] 17:03:29
So. It's a it's a bigger discussion a bigger problem to think that you know this is all solved directory.

[John Helvey] 17:03:39
It's not. It's not all solved by a directory. So. But I think that's leveraged.

[John Helvey] 17:03:46
I like the ideas of entering the additional information and what you're utilizing them for. And support that.

[John Helvey] 17:03:52
I just think the. The other component. I don't know the value that it truly brings. Episodically, right?

[Rim Cothren, CDII CalHHS] 17:04:04
Thanks, John. Jason, I see your hand up.

[Jason Buckner] 17:04:07
Yeah, I mean, like, look, we need a directory. Like you can't function on knowing where to query without a directory.

[Jason Buckner] 17:04:13
It's kind of a foregone conclusion, right? The most important component of a directory I think is a little different if you are querying versus if you are pushing.

[Jason Buckner] 17:04:24
If you are querying, it is a technical and point listing. Right, this is where to go to point your system to query me for a CDA.

[Jason Buckner] 17:04:35
For a, and that could, and that can say, I, I guess have a super strong opinion on there.

[Jason Buckner] 17:04:40
You know, see care quality entry. Versus listing an actual like. Web service. In like I don't really.

[Jason Buckner] 17:04:47
Care we can look it up in the care quality, of exchange directory if that is the point. For ADTs, it's not an endpoint that you necessarily going to publish that people are going to go hit.

[Jason Buckner] 17:04:58
To me it's much more of a contact. Of this is the email address, phone number, name of the individual you call when you want to receive ADT notifications from the source.

[Jason Buckner] 17:05:09
So I just want to make that distinction that it's a little different for query versus push.

[Rim Cothren, CDII CalHHS] 17:05:13
I think that's really important and thank you for that. We're gonna get a little bit more into the different types of exchange, Jason, but I think you raise a good issue.

[Rim Cothren, CDII CalHHS] 17:05:23
That It, what we need may not be equal for all of those. So thanks for that.

[Rim Cothren, CDII CalHHS] 17:05:34
Let's go on to the first slide because the next slide because I'd like to actually get into some of the questions here.

[Rim Cothren, CDII CalHHS] 17:05:40
We're starting to touch on them already. But I wanna start getting into them so let's start by talking about who needs to enter information.

[Rim Cothren, CDII CalHHS] 17:05:48
And so one of the choices you could make is it is only participants that aren't intermediaries that enter their information.

[Rim Cothren, CDII CalHHS] 17:05:55
After all, those are the organizations are actually creating HSSI. They are the ultimate recipients of the information delivery, the intermediaries are the organizations that they use to get the information there.

[Rim Cothren, CDII CalHHS] 17:06:10
However, alternatively we could require that intermediaries inter data about themselves as well. For example, QHOs required to participate in at least one nationwide network or framework, do they need to declare the one that they are using?

[Rim Cothren, CDII CalHHS] 17:06:26
So that is a possibility as well. Also it is possible. That some of our participants aren't gonna have the bandwidth or the knowledge to enter the data that's necessary.

[Rim Cothren, CDII CalHHS] 17:06:40
Should they be allowed to delegate? Entry of that information is especially if we're looking at detailed information such as an email address.

[Rim Cothren, CDII CalHHS] 17:06:49
You're putting in, do you believe that participants are going to know the correct information for those things.

[Rim Cothren, CDII CalHHS] 17:06:55
I would pull back just a little bit to Jason's point. What we are proposing, what we talked about with the IAC and what I'm proposing here today is that there are no fire endpoints.

[Rim Cothren, CDII CalHHS] 17:07:09
There are no web services. URLs or no certificates that are in this directory in particular I'll point to some of the nationwide networks and frameworks actually prohibit in their policies to, that some of the nationwide networks and frameworks actually prohibit in their policies to, make that information available out to members outside the network.

[Rim Cothren, CDII CalHHS] 17:07:30
And so we can't violate the policies of those organizations. Tafka is an example of one that makes that.

[Rim Cothren, CDII CalHHS] 17:07:34
That is a prohibition of their policies to allow that information to be published elsewhere. So we are not talking about detail then information like URLs and certificates.

[Rim Cothren, CDII CalHHS] 17:07:45
But to Jason's point for rosters or something like that, you may be talking about real contact information.

[Rim Cothren, CDII CalHHS] 17:07:52
So let me pause there for a second and see if there are thoughts about who, should be responsible for and required to provide.

[Rim Cothren, CDII CalHHS] 17:08:02
Information for the participation direct participant directory.

[Rim Cothren, CDII CalHHS] 17:08:16
Yes, Jason.

[Jason Buckner] 17:08:16
Well, I mean, The DSA signatory. That is allowed to exchange the data.

[Jason Buckner] 17:08:22
Needs to designate who that is. Opinion. So they could say that's me and I'll populate it.

[Jason Buckner] 17:08:29
They could say it's a Q Ohio. They could say it's a vendor, right?

[Jason Buckner] 17:08:33
I mean, the DSA signatory is ultimately the person that I think indicates that. Unless some missing something like I don't know what an alternative would be, Real.

[Rim Cothren, CDII CalHHS] 17:08:42
Well, so, you, you did mention something that I didn't say bear in mind that we can write all the policies and procedures that we want, but a non signatory to the DSA is not bound by our policies.

[Rim Cothren, CDII CalHHS] 17:08:56
So we are talking only about signatories here. And because that's the only place where we can impose policy.

[Rim Cothren, CDII CalHHS] 17:09:05
I think the distinction here that I'm making Jason and I'm asking about is Do we ask a different question of a hospital?

[Rim Cothren, CDII CalHHS] 17:09:13
Than we do of your organization. Because a hospital produces HSSI but your organization is largely a conduit for that HSSI and is not a producer.

[Rim Cothren, CDII CalHHS] 17:09:25
Or direct or ultimate consumer of it. You're merely Merely, I'm sorry, I don't need to be insulting, but you are you are the means by which that question is asked and data is transmitted.

[Rim Cothren, CDII CalHHS] 17:09:40
And so is it important for people to know what Manifest Metex. Is doing or is it the choices that you were making or is it only important for hospitals, plans, psychiatric hospitals, clinical labs, as we move forward also, social services organizations, state departments, etc, to put that in because those organizations that are the producers and consumers of

[Rim Cothren, CDII CalHHS] 17:10:13
HSSI.

[Jason Buckner] 17:10:14

Good job. I think it.

[John Helvey] 17:10:15
This is John, I think it, I think that the participants should. Participants or their design. And if they delegate that to you know, HIO or participant HR or QHIO.

[John Helvey] 17:10:29
Then I think that that should be their choice. I mean, it's gonna be. Okay. We're gonna be sitting there with them while they do it.

[John Helvey] 17:10:44
Because they don't know the answer. So I think it should really be left up to the participant.

[John Helvey] 17:10:48
To either do it themselves or delegate someone to do it. And as far as intermediaries, if you signed the .

[John Helvey] 17:10:58
And you become a QHIO, you already know that we're connected to the 2 national networks that.

[John Helvey] 17:11:03
Are required in the DSA, which is the health exchange with the past year the care quality. So.

[John Helvey] 17:11:13
You know, for other intermediaries, I think it would be important to have that information if they signed the data exchange framework or the.

[John Helvey] 17:11:20
But, the QHIO is gonna be pretty much a given.

[Rim Cothren, CDII CalHHS] 17:11:26
Thanks, John. So what I heard from John is that it should be required of all of the participants that are creating or consuming, information.

[Rim Cothren, CDII CalHHS] 17:11:35
Or they may, they may delegate that to, for example, a QHIO.

[Rim Cothren, CDII CalHHS] 17:11:43
So that's what I heard there. Thanks for that, John, and that you would advocate for requiring intermediaries to at least list if they are connected to a QHIO or a nationwide network or framework.

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[Rim Cothren, CDII CalHHS] 17:11:59
And which one? I see John nodding. I know I added a few words there, but hopefully.

[Rim Cothren, CDII CalHHS] 17:12:07
Caught the gest.

[John Helvey] 17:12:09
Yeah, I think if you're if you're a participate in a DSA. Whether voluntary or mandatory.

[John Helvey] 17:12:16
You know, you should be able to put out there how how you're sharing data. And really kinda what you're sharing.

[John Helvey] 17:12:24
Right? Are you a QHIO or your HIO? Are you? And ADP alerts.

[John Helvey] 17:12:33
Vendor. Those types of things. I think that intermediaries, it'd be nice to know what it is that they.

[John Helvey] 17:12:40
Are doing to know whether or not you do. You know, whether or not they're a target for our participants to be queryable.

[Rim Cothren, CDII CalHHS] 17:12:48
Okay, great. Thanks, John. Save that thought because I wanna come back to it on the next slide as well.

[Rim Cothren, CDII CalHHS] 17:12:56
A couple of things in the chat real quick. Sanjay said it'd be very important to have participants have a unique identifier.

[Rim Cothren, CDII CalHHS] 17:13:03
I think we agree with that and although I hadn't slated that for discussion today. Our intent or at least our internal thinking right now is that there would be a unique identifier associated with a signing of the DSA.

[Rim Cothren, CDII CalHHS] 17:13:23
Now we can leverage NPI or tax ID numbers, etc, but many of the people here know that especially with NPIs, it can be very confusing about multiple NPIs to single issue to single facilities and which one you're using.

[Rim Cothren, CDII CalHHS] 17:13:39
So, that is at least our thinking, but we do need to skin that, problem at some point is that a unique identifier would be important.

[Rim Cothren, CDII CalHHS] 17:13:51
And then I see Jason, you hear agreeing that participant generating the HSSI should be able to delegate the entry to an aggregator or enter it themselves.

[Rim Cothren, CDII CalHHS] 17:14:00
And so that that choice. I think is, an important one. So thank you.

[Rim Cothren, CDII CalHHS] 17:14:07
Hi there other thoughts on that?

[Rim Cothren, CDII CalHHS] 17:14:12
So, Dan's moved us on. So then the next question is, so what information do we collect?

[Rim Cothren, CDII CalHHS] 17:14:18
And I wanna say again that at least our thoughts is that that is not a fire in point. But that may be something that Please think about that today if you have specific comments on that today.

[Rim Cothren, CDII CalHHS] 17:14:35
I'm interested in hearing them. But if you have comments between now and our next meeting when I'm proposing that I would come with actual language for the PNP, please share them with me.

[Rim Cothren, CDII CalHHS] 17:14:47
However, what we are. Of what we specifically want to address today is the name of the entity that, is being, that is, the Health Information Exchange Network, HIO, or technology that's being used.

[Rim Cothren, CDII CalHHS] 17:15:06
So that might be a network or framework. It might be a QH. It might be another intermediary such as an HIO or vendor that provides services or it might be self.

[Rim Cothren, CDII CalHHS] 17:15:16
Did you contact me directly? That we collect the types of exchange that are being used for that. And so, that would allow you, for instance, a participant to specify that they're using a nationwide network for query.

[Rim Cothren, CDII CalHHS] 17:15:32
A intermediary that is not a QHIO for push and, QHIO for ADT and so it would allow you to, differentiate that and John, this is where I'm thinking about.

[Rim Cothren, CDII CalHHS] 17:15:49

Perhaps if there is a requirement on intermediaries that they would also be required to identify the types of exchange that they support.

[Rim Cothren, CDII CalHHS] 17:16:00
So think about that if you have specific thoughts. And then one of the questions that's come up in past conversations is which whether someone might differentiate.

[Rim Cothren, CDII CalHHS] 17:16:11
The required purposes for which that channel is used that they may choose to use one channel for queries for treatment and a different channel.

[Rim Cothren, CDII CalHHS] 17:16:21
For queries for payment health care operations in public health which are required purposes. I wanna try to keep this simple.

[Rim Cothren, CDII CalHHS] 17:16:29
So that it's manageable, but I wanna make sure that we that we also support the options that we expect the majority of organizations to need.

[Rim Cothren, CDII CalHHS] 17:16:38
I will point out that I think we have to list self as an option. But that is an incredibly high bar that anybody that identifies himself.

[Rim Cothren, CDII CalHHS] 17:16:51
Means that they need to be prepared to create potentially thousands of point to point interfaces. And so that's why we anticipate that most organizations will choose an intermediary like QHIO, a nationwide network or framework or some other intermediary to do most of these exchanges.

[Rim Cothren, CDII CalHHS] 17:17:08
Let me pause there and I'm just interested. Do you think? Do you think that it is necessary in required?

[Rim Cothren, CDII CalHHS] 17:17:15
For organizations to identify the connection they will use by type of exchange as called out the technical requirements for exchange.

[Rim Cothren, CDII CalHHS] 17:17:25
And do we need to allow them to specify different purposes? For each one of those channels.

[Rim Cothren, CDII CalHHS] 17:17:36
John since you raised it before I'm gonna kick this off with talking to you. What's not on this slide is that if we are requiring intermediaries to identify nationwide network or

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framework or QHIO or somebody else that they're connecting to that they would also need to identify a type of exchange.

[Rim Cothren, CDII CalHHS] 17:17:57
That's what I heard you saying before whether they are a vendor that supports ADTs or they, support a query based exchange.

[Rim Cothren, CDII CalHHS] 17:18:07
If that, if I heard that incorrectly, please correct me.

[John Helvey] 17:18:11
No, I was thinking, I agree with you. I was thinking more of our they acute him at HIV.

[John Helvey] 17:18:21
Are they on a national network? Did they require a point to point connection? You know, that type of stuff.

[Rim Cothren, CDII CalHHS] 17:18:25
So a richer set of data than what I'm talking about here potentially.

[John Helvey] 17:18:31
Or intermediaries. Right. Yeah. For entities, I think you make it as simple as possible and you leverage.

[Rim Cothren, CDII CalHHS] 17:18:33
For intermediaries, yes, for intermediaries.

[John Helvey] 17:18:40
You know, if it's national networks or QHIOs, I mean, Hey.

[John Helvey] 17:18:47
You've got that information. I don't think required purposes. I don't know what value that brings.

[Rim Cothren, CDII CalHHS] 17:18:57
Okay, thank you for that. I want to point to, a comment here.

[Rim Cothren, CDII CalHHS] 17:19:08
A unique identify fire, would drill down to, subordinate levels. We do anticipate that, it may not be Good enough to just say a health system, but the different facilities that a health system might all have a different identifier.

[Rim Cothren, CDII CalHHS] 17:19:26
So yes, we, we would anticipate that. Jason.

[Jason Buckner] 17:19:30
Yeah, I mean, this seems like all the information that. There's nothing on here that stands out and it's like, oh, we shouldn't require that lake.

[Jason Buckner] 17:19:38
We should just honestly. Download the E Health Exchange or Care Quality Directory.

[Jason Buckner] 17:19:45
Take a look at it. The fields that they have identified they've been using for years and it's been an effective directory so we don't need to.

[Jason Buckner] 17:19:51
Reinvent the wheel too much here. It's a little Sort of like sad to hear that this is basically contact information and there's not gonna be any endpoints listed, but I hear you.

[Jason Buckner] 17:20:05
We'll, sort of crawl before we can. We can walk and we definitely support the listing the required purposes on here.

[Jason Buckner] 17:20:14
And that specifically is, due to you know, if you expose your data and you say, I'm gonna use care quality for this.

[Jason Buckner] 17:20:22
There's no discriminatory policies on that network that say you have to respond to anybody.

[Jason Buckner] 17:20:28
On that network. And or outside of California. For those purposes of use. So We definitely want to keep this required purposes in from our perspective.

[Rim Cothren, CDII CalHHS] 17:20:43
Sorry, thanks for that, Jason. I think it's important that we talk a little bit about that perspective.

[Rim Cothren, CDII CalHHS] 17:20:49
That is an example of something that's not in the e health exchange or care quality directories. I don't believe they currently include purpose for use.

[Jason Buckner] 17:20:58
That's right. That's exactly right.

[Rim Cothren, CDII CalHHS] 17:20:58

You're not in your and I see a comment in the chat from Matt, this level of detail, including the various required purposes is very complicated for most health systems would not likely be available to most DSA signatories.

[Rim Cothren, CDII CalHHS] 17:21:16
I think that's the reason that I'm bringing this up and the need for. Delegation and are we making this too complicated?

[Rim Cothren, CDII CalHHS] 17:21:25
I also don't want to solve a problem here that doesn't exist as we talked about before.

[Matthew Eisenberg] 17:21:27
Yeah, RAM, we, we push data to the FDA for adverse event reporting through, you know, through their own best platform.

[Louis Cretaro] 17:21:29
Yeah.

[Matthew Eisenberg] 17:21:35
They're one of like 6 people on the planet. You know, the DSA signatory is not going to be able to put that in there.

[Matthew Eisenberg] 17:21:43
And that that level of detail is crazy for this what we're trying to accomplish. I get it.

[Matthew Eisenberg] 17:21:46
I understand that everybody would love to know the full extent of the interoperability we participate in for all of those.

[Matthew Eisenberg] 17:21:52
Required purposes. Gosh, it would take me and I, I do this every day, hours to sort of catalog that.

[Matthew Eisenberg] 17:21:59
So it would really be kind of crazy.

[Matthew Eisenberg] 17:22:02
And you're never gonna get that from the signatory.

[Rim Cothren, CDII CalHHS] 17:22:02
Thank you, Matt.

[Rim Cothren, CDII CalHHS] 17:22:07
Thanks, Matt.

[John Helvey] 17:22:07
Yeah, and to your point, I think. Treat this like HIPAA minimum necessary, right?

[John Helvey] 17:22:15
Minimum necessary to be effective. Don't over complicate.

[John Helvey] 17:22:19
Sorry, if we're missing data, if we're missing data down the road or missing something, then we could build the gaps later, but.

[Matthew Eisenberg] 17:22:20
Keep it simple.

[John Helvey] 17:22:27
You know, build it with something that's gonna be efficient.

[Matthew Eisenberg] 17:22:28
Yeah, you know, frankly, and this is come up before, what we really need for this directory is a point of contact at each organization.

[Matthew Eisenberg] 17:22:36
Cause if that's what you need, cause that's where you're gonna have to go.

[Matthew Eisenberg] 17:22:39
To try to flesh this out, it's gonna be kind of crazy.

[Rim Cothren, CDII CalHHS] 17:22:42
So talk to me about that for just a second, Matt. I wanna make sure that I get that right.

[Rim Cothren, CDII CalHHS] 17:22:47
So. If we take your organization, for instance, Are you talking about that we would have a point of contact at Stanford or that we would have a point of contact at the QHIO that you're using for a service.

[Matthew Eisenberg] 17:22:55
You'd have a point of contact for Stanford for. Right, and correct. You'd have a point of contact and we could decide whether, you know, you need one for release of information, which is our medical records and you can get all that information on our website.

[Matthew Eisenberg] 17:23:09
Or somebody who you can talk to about interoperability in our organization. It's usually a program manager of some sort.

[Rim Cothren, CDII CalHHS] 17:23:15

Thanks, Matt. Dan, I see your hand up.

[Diana Kaempfer-Tong] 17:23:21
Yeah, whether it's through, point of contact, like Matt was talking about or through the, the directory having required purposes for those of us who are limited in how our data can be used by statutes.

[Diana Kaempfer-Tong] 17:23:37
It would be helpful for this to be somewhere noted that required purposes. Has to be shared in some way.

[Rim Cothren, CDII CalHHS] 17:23:52
Other thoughts on this point?

[John Helvey] 17:23:57
Create the opportunity for quick wins.

[Rim Cothren, CDII CalHHS] 17:24:03
Thank you, John.

[Matthew Eisenberg] 17:24:06
Yeah, but by the way. You know, yeah. To have a national facility directory, I'd love that.

[Rim Cothren, CDII CalHHS] 17:24:07
Yeah, I saw you. Yeah.

[Matthew Eisenberg] 17:24:17
That would be great. But, you know, it doesn't exist. We don't really even have a reliable provider directory with direct addresses through NPEs.

[Matthew Eisenberg] 17:24:26
We, you know, it'd be great, but we don't, we don't really have a national way to do this today.

[Rim Cothren, CDII CalHHS] 17:24:33
Thank you, Matt.

[Rim Cothren, CDII CalHHS] 17:24:36
What I'm hearing is a lot of keep it simple to get started with. Put ourselves in a place to be successful with this.

[Rim Cothren, CDII CalHHS] 17:24:46
That's I think good advice. Let's move on to the to the next slide. This is actually an easier left.

[Rim Cothren, CDII CalHHS] 17:24:54
So we're collecting information. You should have access to it. And it's actually a relatively simple question that I'm asking here.

[Rim Cothren, CDII CalHHS] 17:25:03
Is access to this information only provided to participants and therefore we need to authenticate organizations that are going to be, accessing this information and downloading it for their use.

[Rim Cothren, CDII CalHHS] 17:25:16
Or is this something that CDI could or should or might be required to publish so that it's publicly available and easy to access.

[Rim Cothren, CDII CalHHS] 17:25:26
And if you if it is not published. Should there be provisions in the PNP that prohibit organizations from disclosing this information to other non participants.

[Rim Cothren, CDII CalHHS] 17:25:39
I bring this up because it was specifically in a discussion that we had with ONC recently, where they pointed out that the type of information we're talking about here is prohibited from being disclosed.

[Rim Cothren, CDII CalHHS] 17:25:51
And therefore, . That the TFC directory isn't going to be published and there are provisions that prohibit sharing detailed information outside of the TEFC network.

[Rim Cothren, CDII CalHHS] 17:26:07
So the question comes here is is it for instance is it a security risk to provide this information or are we making it a barrier?

[Rim Cothren, CDII CalHHS] 17:26:17
Bye, having you authenticate rather than just publish it. John, I've seen you come off mute and try to get a word in.

[John Helvey] 17:26:24
Yeah, I think we follow what care quality and the health exchange do. I mean, If you have a need to know, you have the access to the information.

[John Helvey] 17:26:36
And so if you're if you're gonna share data. Or your signatory to the VSA.

[John Helvey] 17:26:43
Then you need to have access to certain data. Other than that, I don't think you need to have access to certain data.

[Rim Cothren, CDII CalHHS] 17:26:50
Okay, thank you. I would point out that yes, you have access to, exchange data because you're a participant.

[Rim Cothren, CDII CalHHS] 17:26:59
I don't. I cannot get to that data. I am prohibited from getting to it because I'm not a participant on the network and you're talking about following that model.

[Rim Cothren, CDII CalHHS] 17:27:07
I see in the chat here it looks Jason like you agree with that. This should be something that's participant that's provided to any participant.

[Rim Cothren, CDII CalHHS] 17:27:15
But only 2 participants. Hi, are there any contrary thoughts to that?

[Jason Buckner] 17:27:17
Yep, that's right.

[Steven Lane] 17:27:23
That makes sense.

[Rim Cothren, CDII CalHHS] 17:27:25
Thanks, Stephen. And I would assume that that means that there should be a provision that says, well, if Jason is allowed to get to it.

[Rim Cothren, CDII CalHHS] 17:27:35
Jason isn't allowed to share it with somebody that's not a participant too. So we would need to put that provision in there that It's only to be shared among participants.

[Rim Cothren, CDII CalHHS] 17:27:47
Stephen, I see your hand up.

[Steven Lane] 17:27:48
Yeah, I mean, I think in some sense we should see access to the directory. As a carrot that brings people into exchange, right?

[Steven Lane] 17:28:04
We also don't want to limit people's ability to exchange, you know, if they're still sitting on the fence, you're trying to figure this all out, etc.

[Steven Lane] 17:28:13
But that, that, you know, when I, when I agreed that that's where I was coming from.

[Steven Lane] 17:28:18

It's like, you know, we, we want to invite you into this club. We want to make this really easy.

[Steven Lane] 17:28:23
You know, when you join, you can exchange. You can learn all this important information. But, but I do have some misgivings about keeping it to private also because you know, then are we potentially keeping people out of exchange who aren't ready to You know, learn the secret handshake.

[Rim Cothren, CDII CalHHS] 17:28:40
Thanks, Stephen.

[Rim Cothren, CDII CalHHS] 17:28:44
Any other thoughts on this? Sure, absolutely.

[Matthew Eisenberg] 17:28:45
Hello.

[Courtney Hansen] 17:28:46
Can I jump in?

[Courtney Hansen] 17:28:50
So if can talk a little bit more about the need to keep this confidential. So we are talking about CDII estate entities, subject to the Public Records Act.

[Courtney Hansen] 17:29:03
Holding all of this information. So what is the reason that it is confidential? Is that going to be personal information in it?

[Courtney Hansen] 17:29:12
Is going to be what you know. Hi, as Room said, is there security risk? What is the information?

[Courtney Hansen] 17:29:20
That can't be shared.

[Jason Buckner] 17:29:31
So.

[John Helvey] 17:29:31
I think some of the detailed information can't be shared. For sure. You know, the reason we're exchanging data or purposes or things of that nature.

[Jason Buckner] 17:29:39
Changing data.

[John Helvey] 17:29:45
What national networks were connected to. Yeah, things like that. If it's a participant directory.

[John Helvey] 17:29:53
That because it's. State has to be. Hey, able to be shared publicly. The details of that need to be kept silent.

[DeeAnne McCallin CDII] 17:30:05
And this is DN. I'm gonna check, but. To the point of If it's a national network, isn't that already?

[DeeAnne McCallin CDII] 17:30:14
Discoverable? I think somebody already dropped one of those in the chat today.

[Matthew Eisenberg] 17:30:20
We need to be clear here. This is like who's a participant? One thing. Right?

[Jason Buckner] 17:30:20
Yeah.

[Courtney Hansen] 17:30:22
Yeah.

[Matthew Eisenberg] 17:30:26
You know. Here's a QIO, they're a participant. Any detailed information about how we exchange information, endpoints, technical information, that's a security risk.

[Matthew Eisenberg] 17:30:38
So those, that has to be shielded. Okay, so I think we're talking about 2 very different things, right?

[Matthew Eisenberg] 17:30:44
A full extensive directory that we think technically that says how do I connect with somebody else? That's the last thing you want to share publicly.

[Matthew Eisenberg] 17:30:51
But, you know, who's a signatory? You know, who's, who's their QHIO of choice?

[Matthew Eisenberg] 17:30:57
You know, who do you contact if you have questions? You know. Everybody does that.

[Rim Cothren, CDII CalHHS] 17:31:01

Thanks, Matt. I think that's the type of information we're looking for. Courtney, I'd also point you that Jason said, Matt is spot on on those comments.

[Rim Cothren, CDII CalHHS] 17:31:11
So at least there's 1 s to that.

[DeeAnne McCallin CDII] 17:31:13
And that's also in Rims previous slides if I'm understanding it all correctly. Is not the technical information kind of to the one comment of underwhelming.

[DeeAnne McCallin CDII] 17:31:24
Like it's them and closer to the minimal. It's unfortunately not an endpoint directory.

[DeeAnne McCallin CDII] 17:31:31
But the upside is we're not publishing or even contemplating collecting or having the information that gives the ones and knows what you folks know.

[DeeAnne McCallin CDII] 17:31:42
How to exchange.

[Rim Cothren, CDII CalHHS] 17:31:43
Let, let me ask a very pointed question and see if we can get to this. If I have identified.

[Rim Cothren, CDII CalHHS] 17:31:52
Then I use Sack Valley Med chair. For query response. Is that a security risk for that to get out?

[Rim Cothren, CDII CalHHS] 17:32:04
Because if it is. Then you know that is at least a minimum of what we're talking about here.

[Rim Cothren, CDII CalHHS] 17:32:09
So, Matt, to your point. Do we have to get all the way down to URLs and certificates or does the method or the organization I'm using, does that already pose a security risk in your mind?

[Matthew Eisenberg] 17:32:24
So clearly the endpoint pieces are a security risk. The rest of the information I think for for the for the data for the that exchange framework First of all, there's gonna be one to many.

[Rim Cothren, CDII CalHHS] 17:32:37
Try.

[Matthew Eisenberg] 17:32:38

We participate in so many national networks. We're connected to every HIV in the state through those networks.

[Matthew Eisenberg] 17:32:43
You know, again, what we need for the DAT exchange framework is who's participating. Who's their point of contact?

[Matthew Eisenberg] 17:32:52
Who's their QHIO of choice? Approved QHIO. If they want to share other, national networks and frameworks that they participate in voluntarily fine knock yourself out you can get that off of the website but that's as far as you probably should go That's that's my opinion.

[Rim Cothren, CDII CalHHS] 17:33:08
Okay, John, I saw you come up mute.

[John Helvey] 17:33:12
I just agree with that.

[Rim Cothren, CDII CalHHS] 17:33:23
Courtney, are there any other follow on questions you want to ask there? Thanks, for your participation today.

[Rim Cothren, CDII CalHHS] 17:33:30
Appreciate it.

[Courtney Hansen] 17:33:30
Helpful.

[] 17:33:32
No, that's

[Rim Cothren, CDII CalHHS] 17:33:35
All right, let's go on to the last slide. We really are in the home stretch now.

[Rim Cothren, CDII CalHHS] 17:33:40
The last slide is a relatively easy one. I just want to point out that we are considering there are probably at least 3 other pieces of information that need to be recorded at least 3 other pieces of information that need to be recorded and the participant directory it might be a good place for them.

[Rim Cothren, CDII CalHHS] 17:33:51
As you know, there are a number of mandatory signatories are required to start sharing data by 2024, but there are a group of signatories that may choose to exercise their rights under the law to delay exchanging data until 2026.

[Rim Cothren, CDII CalHHS] 17:34:08
We're proposing that we keep a list of those so that you could differentiate the signatories that are sharing data in 2024 from those that are not available to share data until 2026.

[Rim Cothren, CDII CalHHS] 17:34:20
We're also, if you recall, the DSA has provisions to terminate the DSA for voluntary participants only.

[Rim Cothren, CDII CalHHS] 17:34:28
But that if a voluntary participant indicates that they do wish to terminate the DSA that that should be a positive list, that you can access those organizations that may have been signatories yesterday but are not signatories today and therefore there needs to be a positive list for that.

[Rim Cothren, CDII CalHHS] 17:34:45
And also one of the issues it's been brought up to us is that organizations change hands, go out of business, cease operations, and we need to manage a list of participants, those that have signed the DSA, but are CCN operations and therefore might not be the targeted queries or pushes of HSI anymore.

[Rim Cothren, CDII CalHHS] 17:35:07
I wanna just pause here for a second. There's been a lot of good discussion, a lot of us for us to take back.

[Rim Cothren, CDII CalHHS] 17:35:13
Is there anything that we did not touch on today that you want to make sure that we touch on today any final thoughts before we move on.

[John Helvey] 17:35:23
Would that last part that you talked about, would that also include acquisitions and mergers? Health systems clinics and things of that nature.

[Rim Cothren, CDII CalHHS] 17:35:29
So. So what I didn't put on here and we need to figure out probably the the proper point for it is that the DSA currently captures subordinate organizations that are under the DSA.

[Rim Cothren, CDII CalHHS] 17:35:48
If there's an acquisition and the authority for the DSA changes that there probably is a requirement to update that.

[Rim Cothren, CDII CalHHS] 17:35:54

So I think that John, you ask a question that we do need to address. This PNP may be a convenient place.

[Rim Cothren, CDII CalHHS] 17:36:03
To deal with acquisitions and change in ownership as well. So, potentially. Thank you for that.

[Rim Cothren, CDII CalHHS] 17:36:10
Jason, I see your hand up.

[Jason Buckner] 17:36:12
Yeah, I mean, definitely not something for today. And I don't have a solve here, R, but I just wanna flag that.

[Jason Buckner] 17:36:20
The other national networks are definitely a quid pro quo and they have a gating mechanism if you will to ensure that.

[Jason Buckner] 17:36:28
So if you onboard to the yield exchange. You don't get listed in the directory until they have tested and validated that yes, you are making your data available.

[Jason Buckner] 17:36:36
It's a good check. You don't get on a directory unless you're truly exposing your data.

[Jason Buckner] 17:36:42
We don't have. Such a mechanism with the data exchange framework. I'm not necessarily suggesting we should.

[Jason Buckner] 17:36:49
But I think it will, there will be scenarios, the CDI should be prepared to accept complaints of.

[Jason Buckner] 17:36:57
Folks are asking for my data and I'm being a good steward and providing that data as I should but when I request data from them.

[Jason Buckner] 17:37:04
You know, they're doing an upgrade and I can't get them in the queue and it's 6 months until I can connect to them or whatever.

[Jason Buckner] 17:37:12
So it's just something that to stick in the back of Cdi's. App to think about for the future.

[Rim Cothren, CDII CalHHS] 17:37:17

Thank you, Jason. Appreciate that. Louis, I see your hand up.

[Louis Cretaro] 17:37:26
Yeah, at some point I'd like to discuss this further. I, I wanna talk about the data elements again.

[Louis Cretaro] 17:37:36
I see, you know, where social services could benefit from the data elements there. But I really think health care is missing an opportunity to get the kind of social services data.

[Louis Cretaro] 17:37:48
That I thought would be beneficial to. Health care and there's a number of used cases that aren't represented.

[Louis Cretaro] 17:37:57
In this data, the set of data elements and I don't know how we address that or when.

[Louis Cretaro] 17:38:04
But, I'm very concerned about that. I think they're You know, are we starting?

[Louis Cretaro] 17:38:10
From square one in terms of the technology and. And you know the health care kind of processes that we're following to participate but I don't think we're going to get the full benefit of the exchange.

[Louis Cretaro] 17:38:25
Unless we look at the social services use cases and give healthcare some other data than what's represented in what I'll call a healthcare set of data.

[Louis Cretaro] 17:38:38
Versus social services. I think there's a section maybe that could be added to that and I don't know the ramifications of that, but I like an opportunity.

[Louis Cretaro] 17:38:47
At some point. I know my colleagues could say a lot more, but I could give some examples in some form somewhere or email.

[Louis Cretaro] 17:38:58
I don't know how to address it because I'll be honest with you. I was kind of disappointed.

[Louis Cretaro] 17:39:04
I thought there was more work going on in that area. About what those elements would be when we got to the point that we could exchange.

[Louis Cretaro] 17:39:13
And I think they'll be beneficial to healthcare and to the clients. Obviously, most importantly. Oh.

[Rim Cothren, CDII CalHHS] 17:39:21
Thanks for that. Well, and I think you've said that twice today. I'll just say that I certainly heard it and, maybe that's something that we can schedule for one of our future meetings to delve into a little bit more, but thank you for that comment.

[Louis Cretaro] 17:39:22
That's all I want to say. Thank you.

[Rim Cothren, CDII CalHHS] 17:39:38
Stephen, I see your hand up.

[Steven Lane] 17:39:40
Yeah, I just wanted to respond to Louis. I think, you know, he's spot on.

[Steven Lane] 17:39:47
Again, one of the goals of this entire effort at the state level is to improve the exchange of data.

[Steven Lane] 17:39:52
With social service providers. The challenge that we face is that there are no data standards. You know, that as we were discussing earlier about USCDI version 2, we incorporated a few STOH related data elements, you know, at great effort, you know, and hats off to Mark in particular who really championed that and, and, and who continues to work with the Gravity Project to try to define those

[Steven Lane] 17:40:21
standards that will be added to USCDI versions in the future once they are mature. But you know that work is moving ahead, you know, slowly and you know we can't we can't require exchange of data that doesn't exist, using standards that don't yet exist.

[Steven Lane] 17:40:41
So I think Louis, where we're all in support of your desires, but we also know that it's going to take some time.

[Steven Lane] 17:40:50
What we're doing now is we're laying the foundation. What we're doing now is we're laying the foundation.

[Steven Lane] 17:40:52

What we're doing now is we're laying the foundation of connectivity that will eventually allow more of connectivity that will eventually allow more of that exchange in the future.

[Rim Cothren, CDII CalHHS] 17:40:55
Thanks for that, Stephen. Why don't we go on to the last slide in this series? It's really about next steps.

[Rim Cothren, CDII CalHHS] 17:41:03
So, what we're going to be doing as we take today's discussion back is we'll refine development of the participant directory as I said before that is that is something that is in the works now based on today's.

[Rim Cothren, CDII CalHHS] 17:41:18
Discussion and we'll develop a draft PNP that will discuss with the DSA subcommittee at its next meeting in October.

[Rim Cothren, CDII CalHHS] 17:41:28
So, that, also means if you have thoughts out of band. Between now and that meeting.

[Rim Cothren, CDII CalHHS] 17:41:35
Ideas feel free to share them. will then discuss that, draft PNP revise it as necessary after our next meeting and then it will go out for public comment as well.

[Rim Cothren, CDII CalHHS] 17:41:50
The The intent is that if there are additional issues that that would come back to to this committee too so, that, would be in the December timeframe that would be a very quick turn, a little bit of a crowded turn for public comment.

[Rim Cothren, CDII CalHHS] 17:42:13
So we will be talking about this topic for our next 2 meetings and then, you should anticipate a public comment on this PNP in the future.

[Rim Cothren, CDII CalHHS] 17:42:23
Dianne, I think that's all we had on participant directory unless there is something that I missed either in chat.

[Rim Cothren, CDII CalHHS] 17:42:31
Or anything else that you wanted to make sure we got raised today.

[DeeAnne McCallin CDII] 17:42:35
I'm not on that one.

[DeeAnne McCallin CDII] 17:42:40
Alright. For a second. Good job everybody lots of great input. Thank you.

[DeeAnne McCallin CDII] 17:42:48
We appreciate it and you can keep it coming in. Good job everybody lots of great input. Thank you. We appreciate it and you can keep it coming in.

[DeeAnne McCallin CDII] 17:42:54
Of course, email us if someone can drop in or as Rim said. Give them a, well, maybe not.

[DeeAnne McCallin CDII] 17:42:58
He didn't say, Call out, but we're here for you. All right, we're going to public comment now.

[DeeAnne McCallin CDII] 17:43:06
Individuals in the public audience who have a comment may insert it in the QA or otherwise presently room we have one unanswered one though I think it might be a topic that we did put potentially touch upon with data elements in US CDI.

[DeeAnne McCallin CDII] 17:43:22
But if you have a question that you would like to ask, raise your hand using the Zoom teleconferencing options and you will be called on on the in the order in which your hand was raised.

[DeeAnne McCallin CDII] 17:43:32
Please take your name and organization affiliation. Please keep a comments respectful and brief.

[DeeAnne McCallin CDII] 17:43:39
Turn my piece of paper to see what the next instruction is. Old school paper. Menat events will recognize individuals with their hands raised on zoom and take them off of mute.

[DeeAnne McCallin CDII] 17:43:52
So let's pause to see if anybody has any public comments.

[Alice H - Events] 17:43:57
There are currently no hands raised at this time.

[DeeAnne McCallin CDII] 17:44:12
And in case anybody is listening and they do not have line of sight into the QA, into being able to submit a QA or to the chat, our email addresses, cdii@chs.ca.gov.

[DeeAnne McCallin CDII] 17:44:29
And that's where you're able to submit a comment or a question there as well.

[DeeAnne McCallin CDII] 17:44:45

Okay, I'm gonna go in to next steps and closing remarks. Manette, if events, if you see anyone coming in with any hands raised or anything as I move on, please let us know.

[DeeAnne McCallin CDII] 17:44:58
Thank you.

[DeeAnne McCallin CDII] 17:44:59
Or basically interrupt me. Alright, so a summary of next steps. What we We have the early exchange PMP which has been finalized but it's waiting for it's dependencies upon the privacy standards and security PMP so that should be coming soon.

[DeeAnne McCallin CDII] 17:45:21
We are working through the public comments received and finalizing the PNPs and releasing them where we will be.

[DeeAnne McCallin CDII] 17:45:29
Hopefully some of you have noticed that we've tried to streamline some of our communications where there's gonna there's a weekly update.

[DeeAnne McCallin CDII] 17:45:35
And that's a place that if you missed day one to 3 of or so one to 4 or so of a final PMP having been published you should see it in this new weekly cadence.

[DeeAnne McCallin CDII] 17:45:47
If there's a PNP published for public comments or for the administrative feedback, whether it's an administrative change, you should start to see this in this DXF weekly update.

[DeeAnne McCallin CDII] 17:45:59
So privacy standards and security and requirements to exchange. Ideally, we're releasing as final soon.

[DeeAnne McCallin CDII] 17:46:06
Individual access services. This is the one that is open for public input period through a form that is different than the Excel workbook that has been used for the broader more substantive changes.

[DeeAnne McCallin CDII] 17:46:19
It's essentially like an online form where you are have the opportunity to give feedback whether you think something is administrative or more importantly if you think it's not.

[DeeAnne McCallin CDII] 17:46:30
We discussed data elements to be exchanged amended and we'll take all of the feedback today and we're looking towards trying to release a drop of it for public comment.

[DeeAnne McCallin CDII] 17:46:40
And the participant directory, which is the first. Version of a PMP from today's feedback.

[DeeAnne McCallin CDII] 17:46:48
To actually publish it now in the P&P styling format so that we can then go to public comment and get broader stakeholder inputs.

[DeeAnne McCallin CDII] 17:47:01
I lost, to my slides, okay. Alrighty, so this slide provides an update of where we where we are anticipating this group's soliciting the feedback and the public's feedback.

[DeeAnne McCallin CDII] 17:47:15
I almost feel like it might be what I just spoke about. We are reviewing previously published in a broad strokes for all PMPs that are previously published to ensure.

[DeeAnne McCallin CDII] 17:47:26
Consistency with recently finalized PNPs and the PNP glossary of defined terms.

[DeeAnne McCallin CDII] 17:47:32
We're assessing opportunities to clarify expectations to support ongoing data exchange framework implementation and address any concerns raised by stakeholders since the publications of finalized materials.

[DeeAnne McCallin CDII] 17:47:45
So a lot of those were finalized about 15 months ago. So that's where there's new insights, new feedback, what a new PNP, and might bring to mind something in another PMP that might need to be reviewed and assessed and potentially updated.

[DeeAnne McCallin CDII] 17:48:00
That in the last quarter of this year, CDII anticipates releasing certain proposed PNPs for public review to harmonize definitions and language across PMPs and support the implementation.

[DeeAnne McCallin CDII] 17:48:16
So those would be administrative changes. We anticipate some of these though to be substantive in nature and others to be administrative such as formatting updates to definitions for consistency across all of these different documents.

[DeeAnne McCallin CDII] 17:48:30
Opportunities for the public to provide feedback will vary depending on the type of change as consistent with the development of modifications to Pmp's PNP.

[DeeAnne McCallin CDII] 17:48:42

So that is what is new now. There are there's now 2 different streams for providing public comment, whether it's substantive or administrative.

[DeeAnne McCallin CDII] 17:48:54
HS and CDII will consider the feedback provided by your the committee today. Thank you for that feedback and input.

[DeeAnne McCallin CDII] 17:49:03
We will continue to advance PMPs in development and we're applicable, solicit public comments and we will post a summary of today's meetings.

[DeeAnne McCallin CDII] 17:49:13
That's where the material, the slide, the recording. The transcript the QA that that type of information is all posted once it's remediated and Curated for posting on Cdi's websites.

[DeeAnne McCallin CDII] 17:49:28
And the subcommittee members and members of the public may provide any additional feedback on the following instructions on following instructions that are on our website.

[DeeAnne McCallin CDII] 17:49:39
Meeting schedule right now. I I see the implementation advisory committee meeting number 10 is in about 12 days or so.

[DeeAnne McCallin CDII] 17:49:49
October tenth at 10 am. Meeting 11 is November, meaning 12 is December. And then we also have October 30 first.

[DeeAnne McCallin CDII] 17:49:59
It should be as full as today's was and then another one December fifth and that December fifth one could be tight if one of these PMPs that we discussed today has a lot of the elements to, review and exchange, but many of you do join us on the IC meetings and we do encourage you to continue to do that and appreciate your time at those meetings as well.

[DeeAnne McCallin CDII] 17:50:20
We do have our information and power webinar series continuing and we have 3 dates through October, November and December.

[DeeAnne McCallin CDII] 17:50:28
These are posted on our websites and there's registration links for those. They were also have the dates on this slide deck.

[DeeAnne McCallin CDII] 17:50:36

So with that, thank you again. I look forward to working with you all and maybe seeing some of you soon.

[DeeAnne McCallin CDII] 17:50:42
And working towards the implementation of the data exchange framework, that's where these upcoming meetings in October, November, December, look for our messaging about whether the meeting is fully virtual hybrid or in person and there's probably not going to be any that are all slowly limited to in person but there we have it and if anybody has anything they need to share we have a couple of minutes if need be.

[DeeAnne McCallin CDII] 17:51:07
Thank you, Rim, for everything you went and put into this meeting today. Covered a lot of important information.

[John Helvey] 17:51:16
Great meeting, thanks all.

[DeeAnne McCallin CDII] 17:51:20
And I'll call it. Thanks everyone. Have a great afternoon.