CAHIE
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Finding a Trusted Partner

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What is CAHIE?

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1. Collection of stakeholders promoting statewide information sharing
2. Community that responds to and participates in state and national activities
3. Voluntary self-governance for statewide HIE in California

How do we work?

Active Committees and Workgroups

- California Interoperability Committee
- Directory Services Workgroup
- Patient Identification Workgroup
- Medi-Cal HIE Milestone Workgroup
- Sensitive Data Workgroup
- Emerging workgroups in barriers, ADT transactions

Find out more about Committees and Workgroups at http://www.ca-hie.org/projects/workgroups

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How do we work?

Voluntary self-governance for statewide HIE

A "Trust Network"

- Single, multiparty data sharing agreement to govern exchange across organizational boundaries

  California Data Use and Reciprocal Services Agreement, or CalDURSA

- Technical services to ensure trust among organizations and facilitate secure data sharing

  California Trusted Exchange Network, or CTEN

Find out more about the CTEN at
http://www.ca-hie.org/projects/cten

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What is a "Trust Network"?

What is required to establish trust in information sharing?

1. Know your conversation is not overheard
2. Know the information can be trusted
3. Know who you are talking about
4. Know who you are talking to
5. Know how the information will be used
6. Know you have permission for the conversation

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Not just in California…

In over-simplified terms…

ONC's Roadmap outlines where we go next with interoperability to improve patient care

While it speaks about a learning health system…
…much of it is about trust

Is this Resource Location?

N. Reliable resource location
"Know who you are talking to"

- What is this about?
  - No longer reasonable to know everything about your trading partners
  - NOT provider directories and NOT Direct addresses
- What is California doing?
  - Establishing Directory Services as part of CTEN to discover individuals, organizations, and the means by which to exchange with them

This Is It! ⇨

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What are we trying to achieve?

Discover individuals and organizations, and the means by which to exchange information with them

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What are we trying to achieve?

Discover individuals and organizations, and the means by which to exchange information with them

- Must be more than a directory of Direct addresses
  - Direct is an important (near-term) use case
  - Must contain all means to exchange: Direct addresses, Exchange endpoints, FHIR resources
  - Must link methods to individuals and organizations

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What are we trying to achieve?

Discover individuals and organizations, and the means by which to exchange information with them

- Must be more than a directory of Direct addresses
- Must include context
  - Providers practice at more than one location, in more than one context, each of which may have different means of exchange

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What are we trying to achieve?

Discover individuals and organizations, and the means by which to exchange information with them

- Must be more than a directory of Direct addresses
- Must include context
- Information must be up-to-date
  - Information changes
  - We are exchanging PHI based on this information

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What are we trying to achieve?

Discover individuals and organizations, and the means by which to exchange information with them

- Must be more than a directory of Direct addresses
- Must include context
- Information must be up-to-date
- Must prepare for more than just providers
  - Focus today is to individual providers and provider organizations, but the list of stakeholders is larger

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What are we doing?

Making use of IHE's profile for Healthcare Provider Directory (HPD)

Sometimes you have to work with the tool you have

This! ⇨
- Creating a means to discover individuals, organizations, and the means by which to exchange information with them

NOT This! ⇨
- **NOT** just creating a directory of Direct addresses
- **NOT** just creating a provider directory

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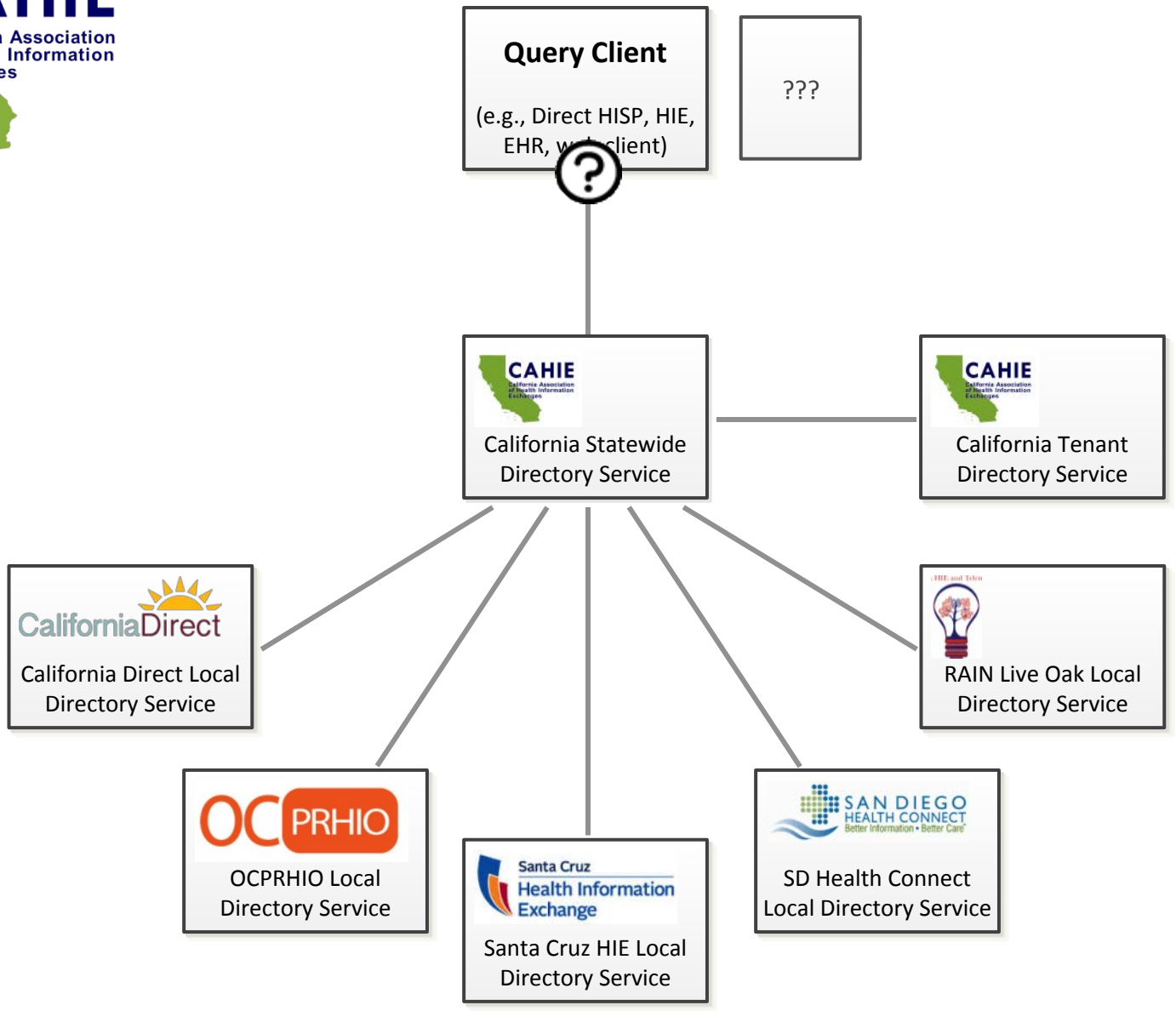
How are we doing it?

- Management is distributed
  - The best way to keep the data accurate is to manage it at the authoritative organization
- Architecture is federated
  - One means to achieve distributed management
  - Distributes the workload
- Use is governed by policy
  - Need to establish how everyone behaves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(e.g., Direct HISP, HIE, EHR, web client)
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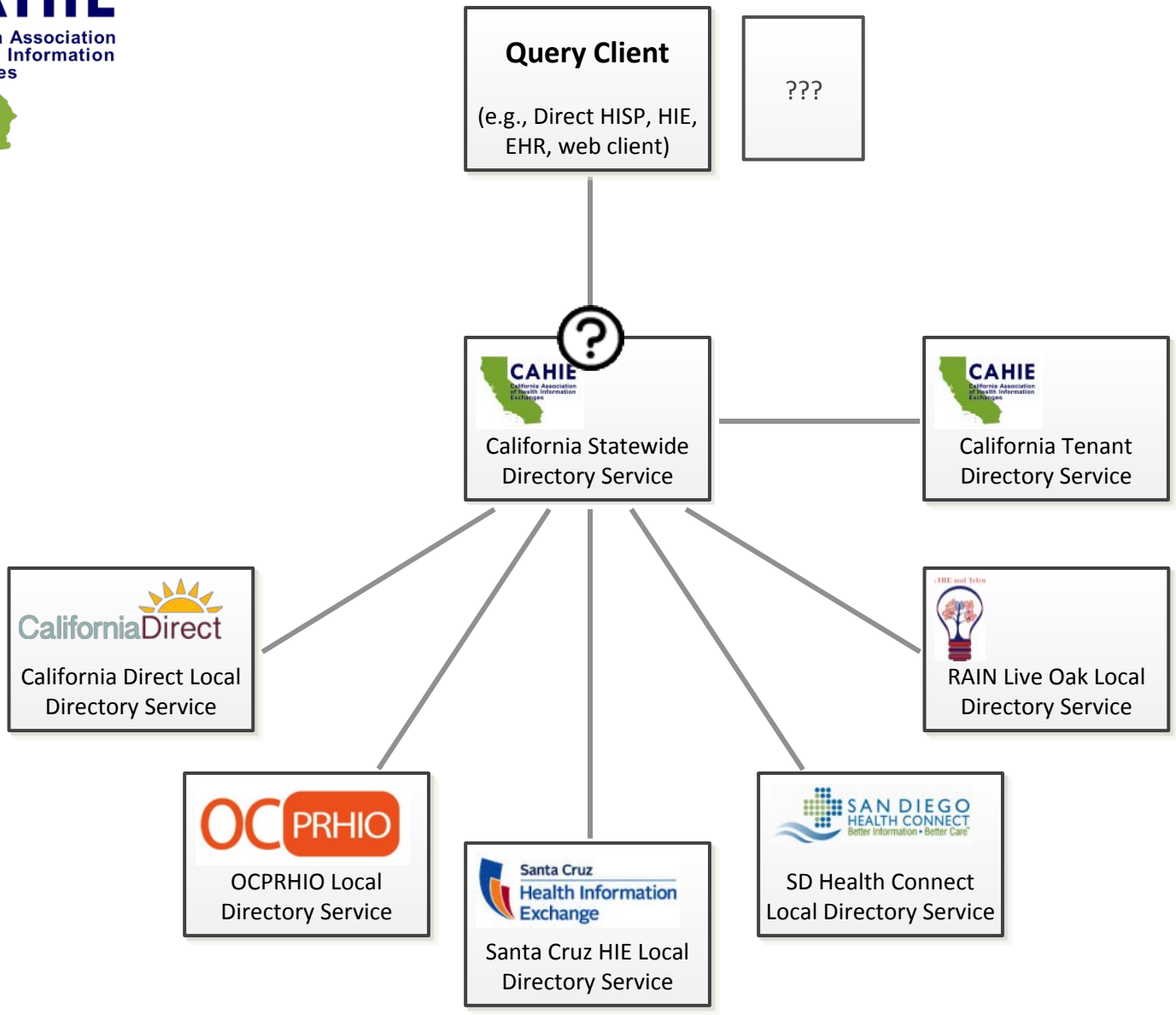
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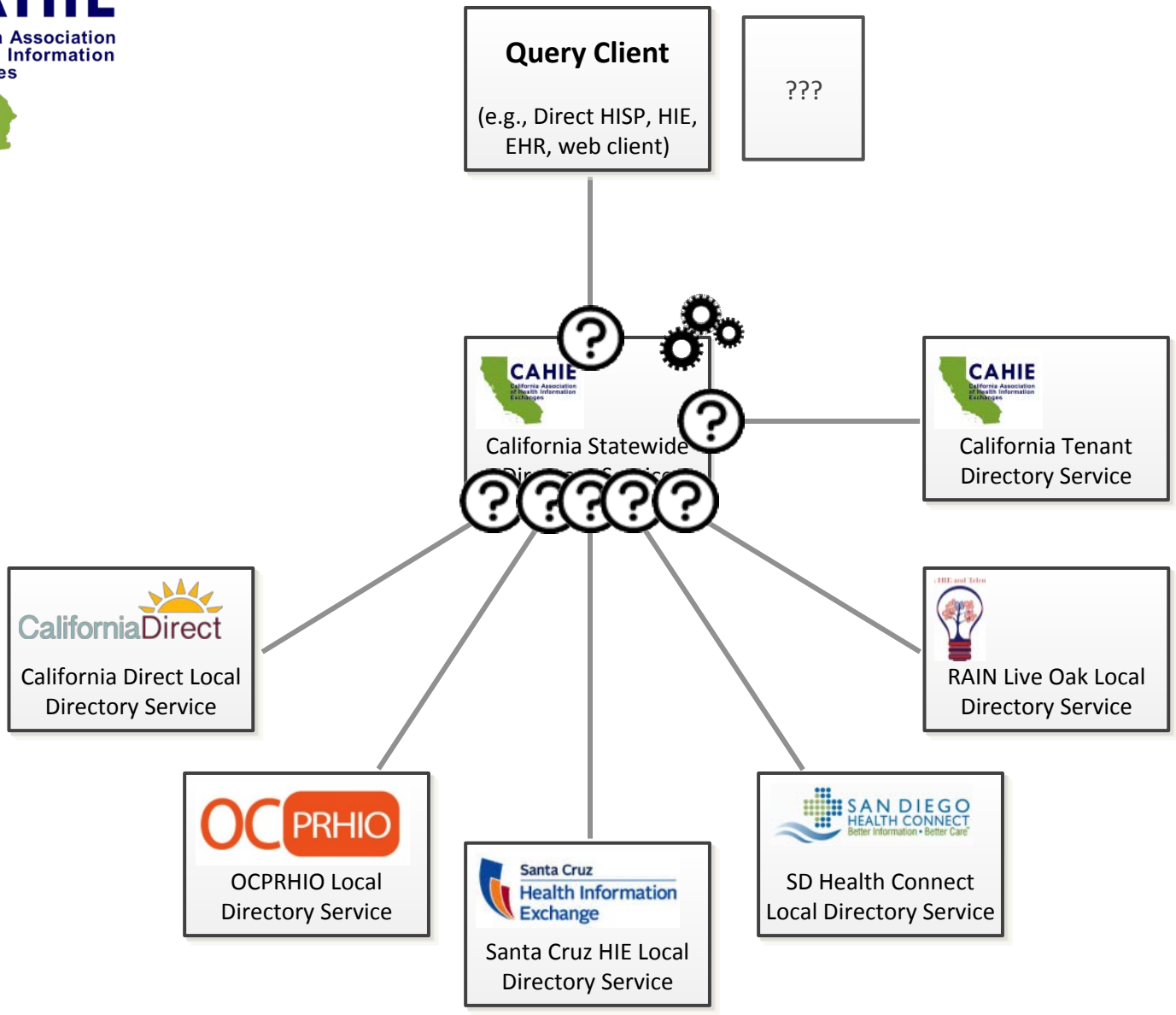
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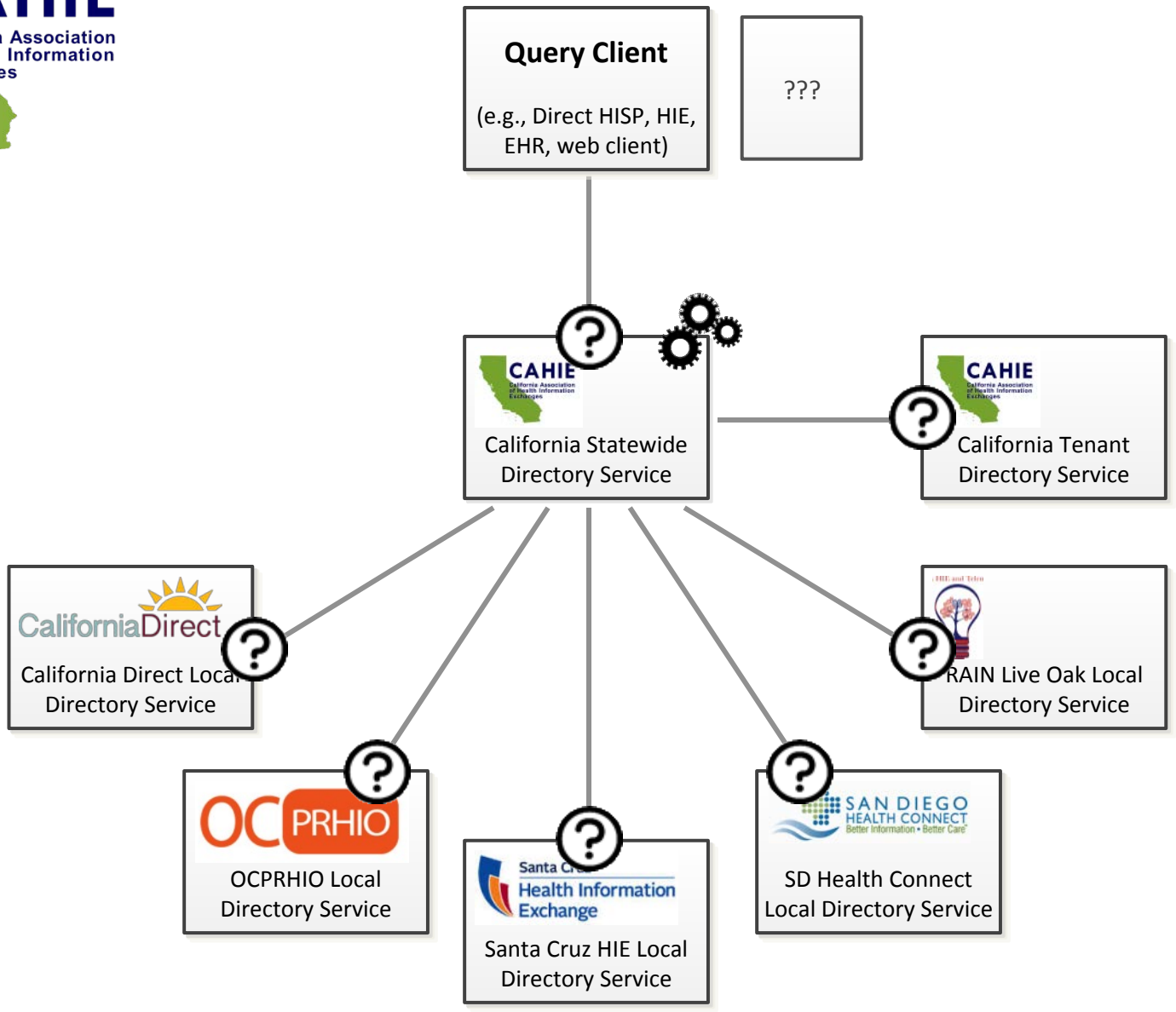
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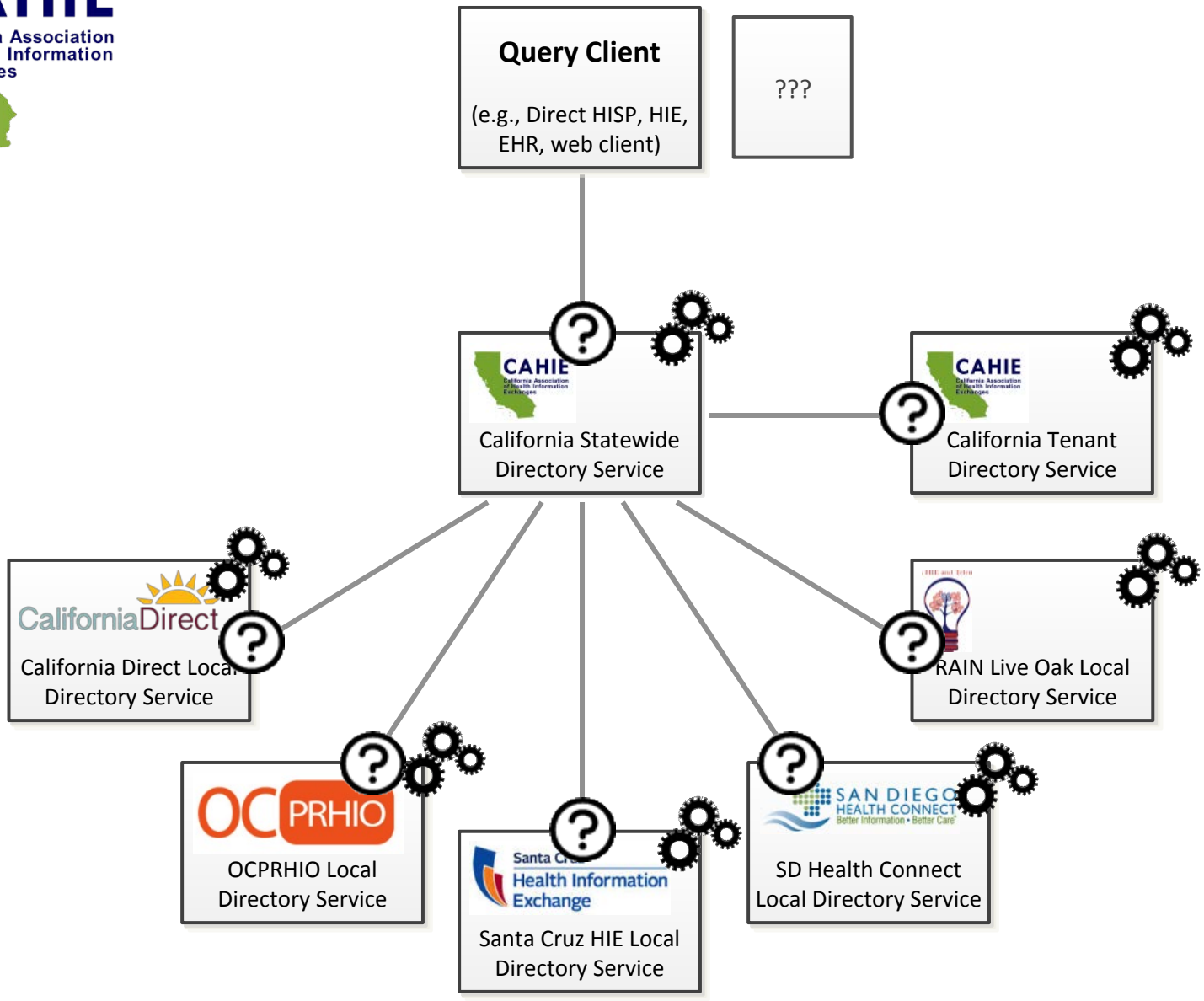
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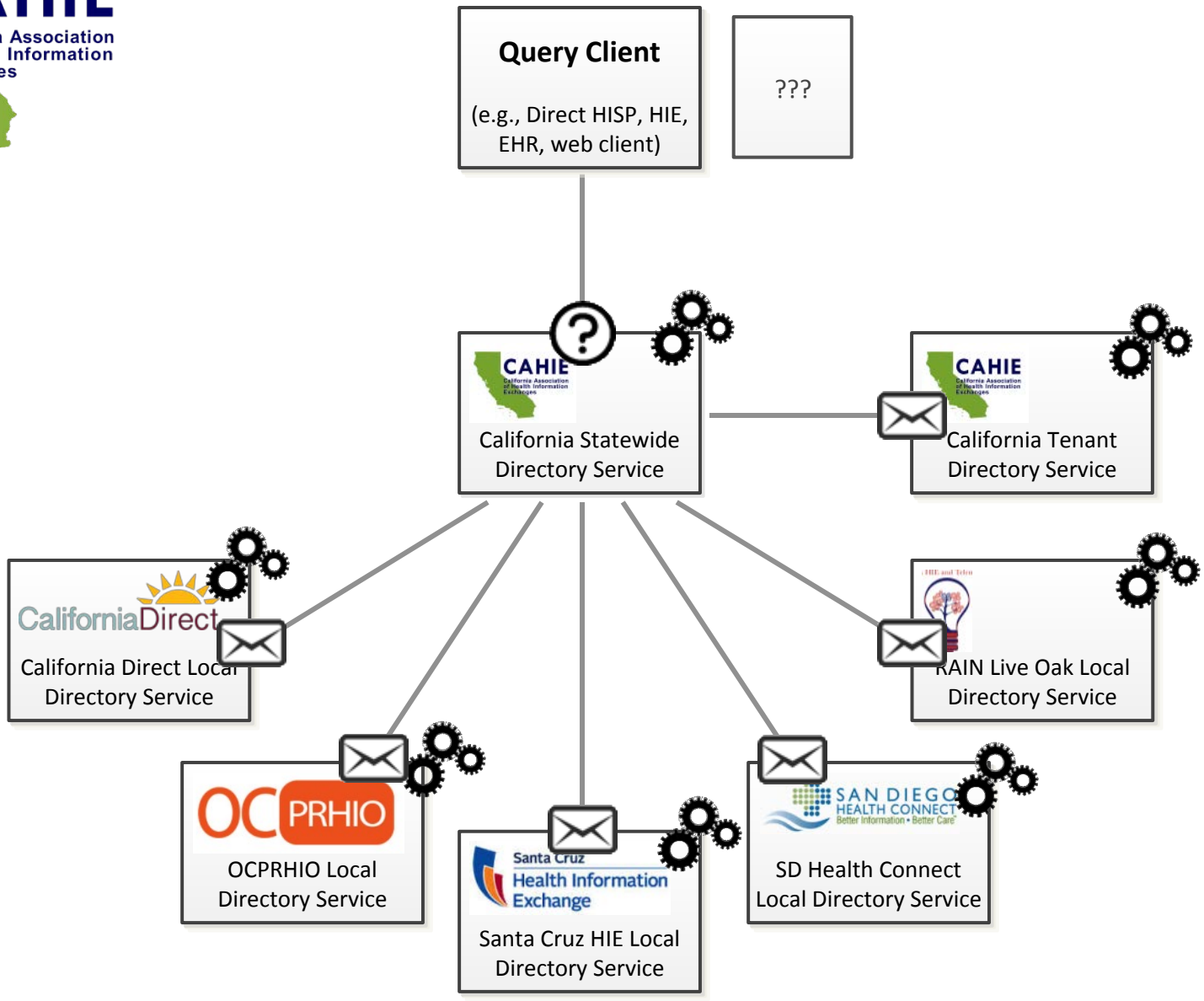
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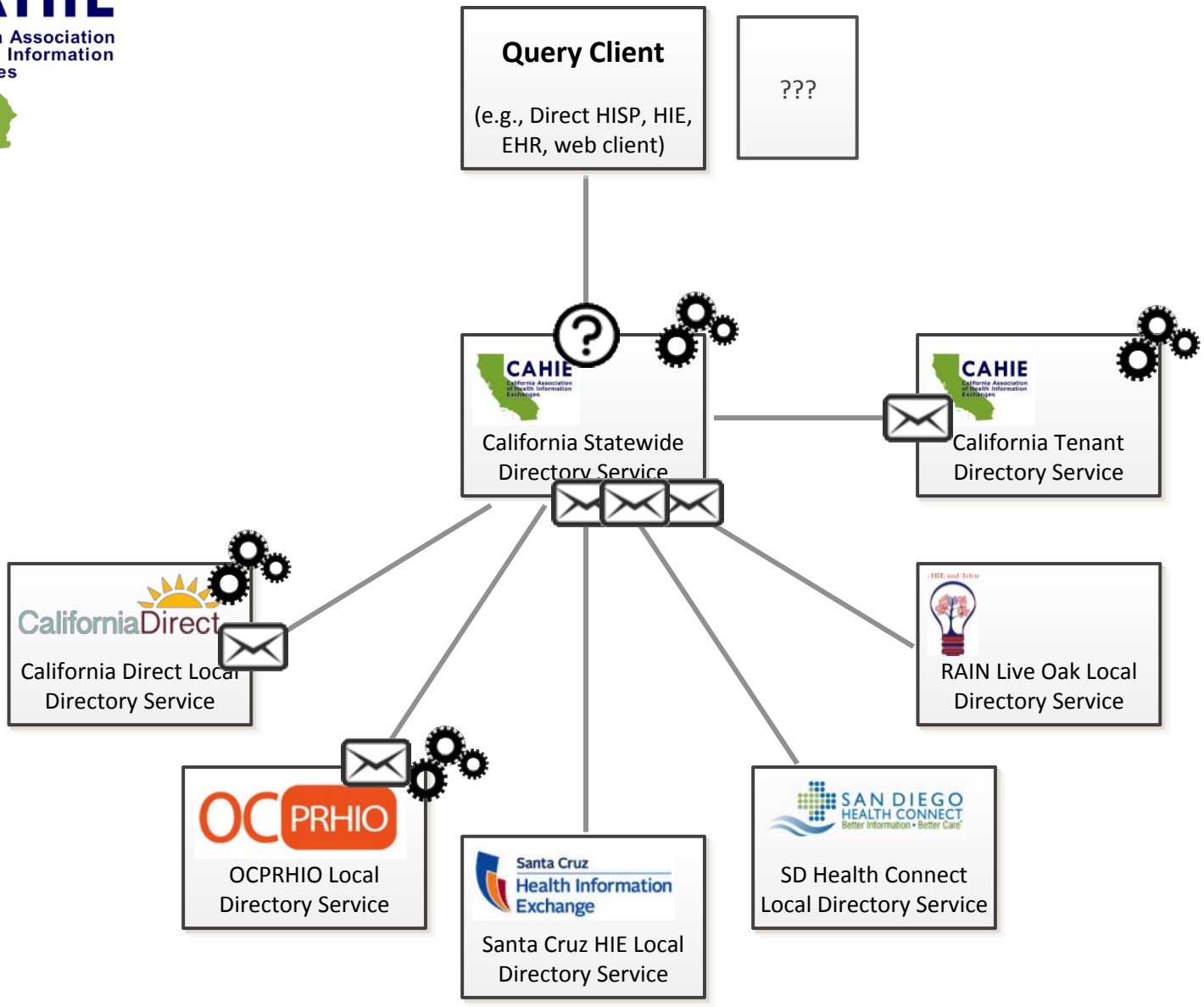
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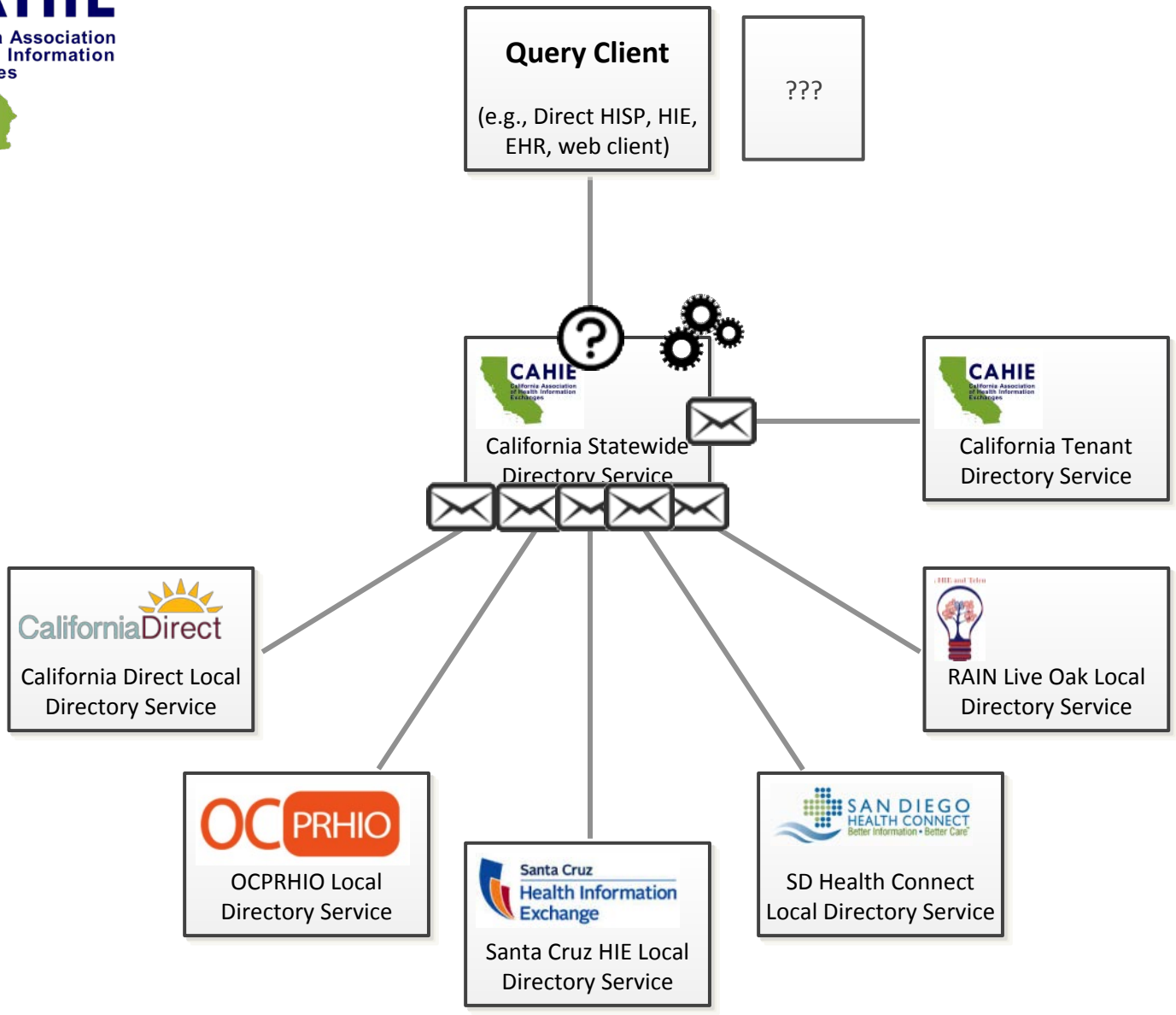
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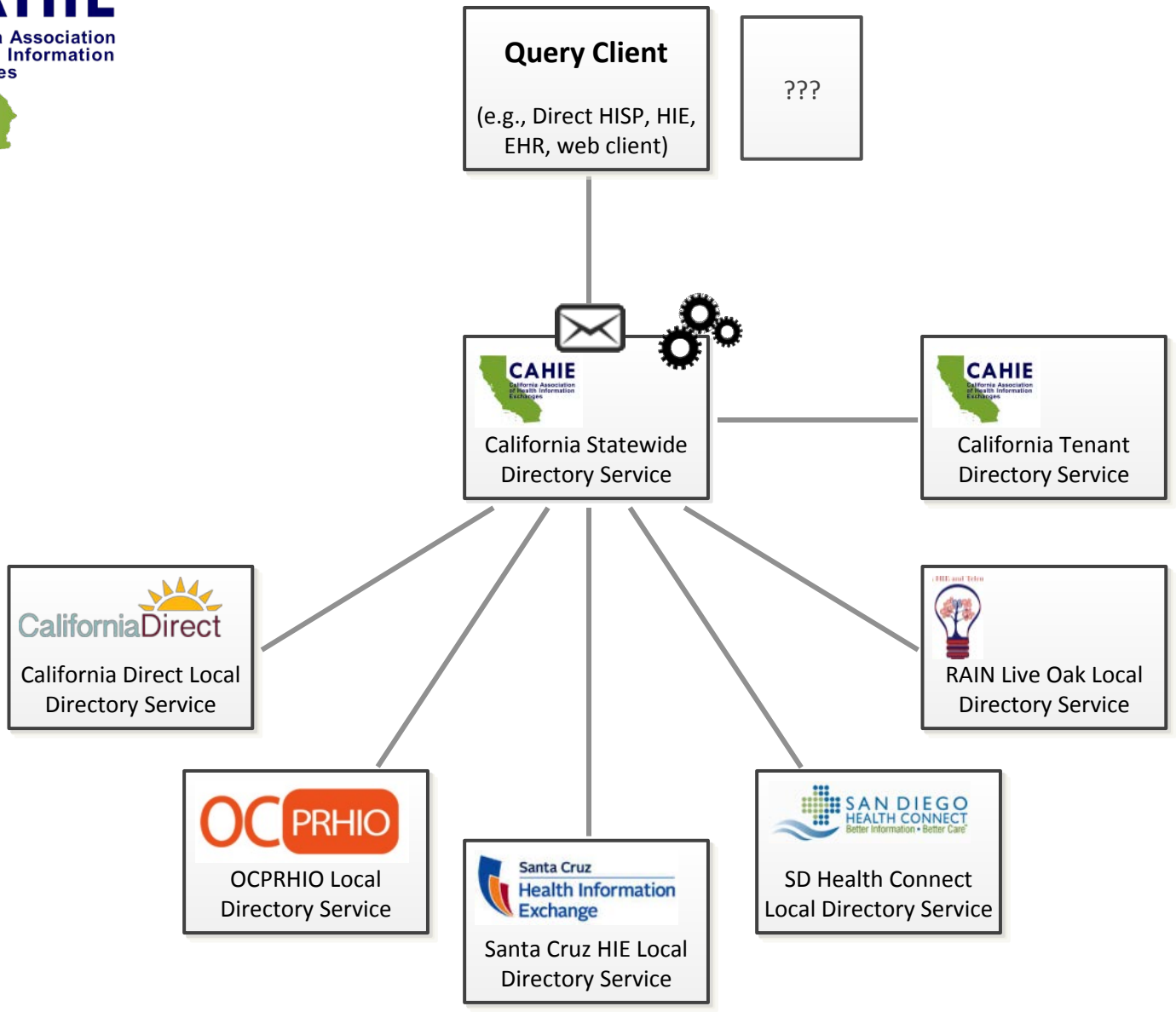
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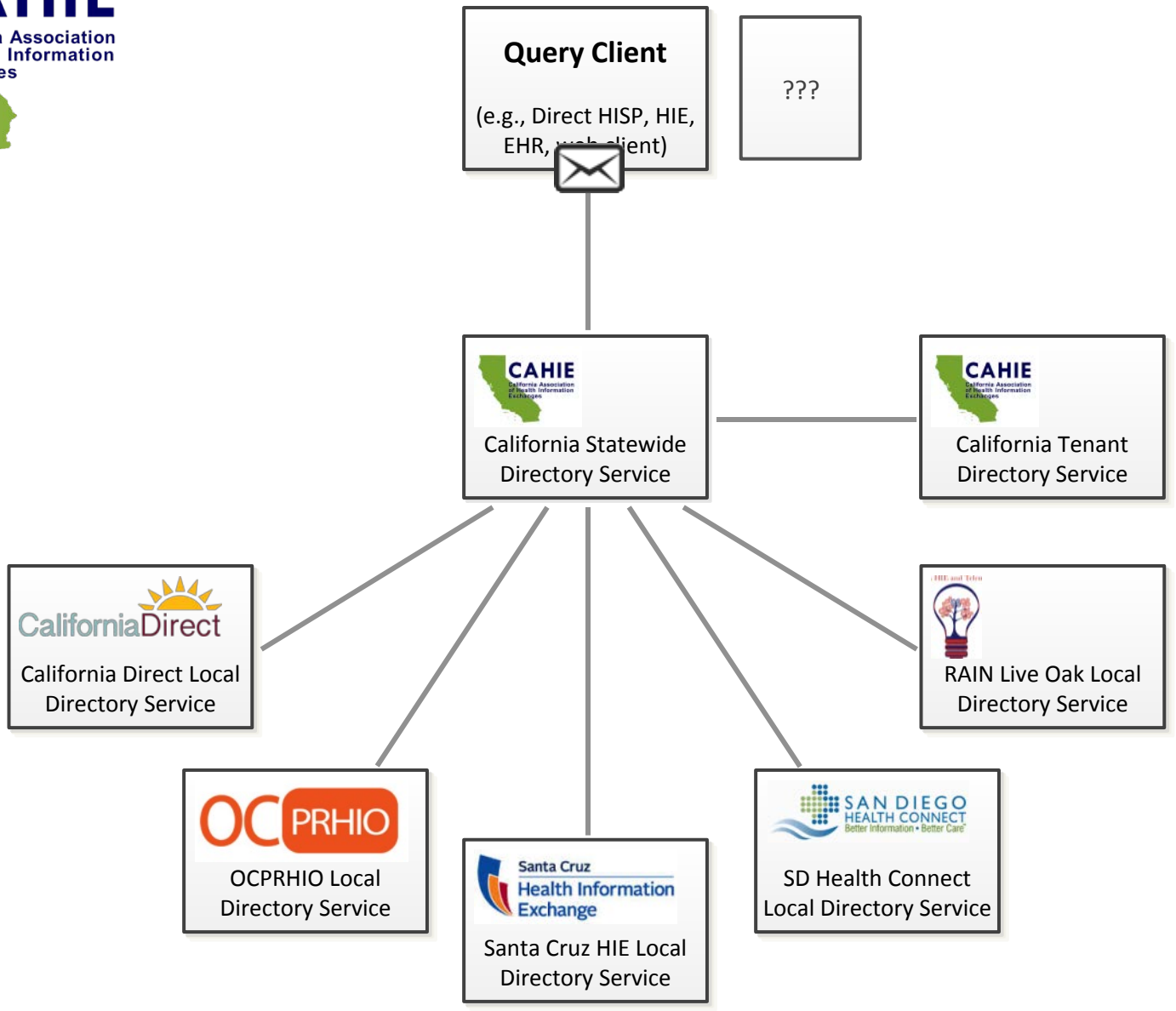
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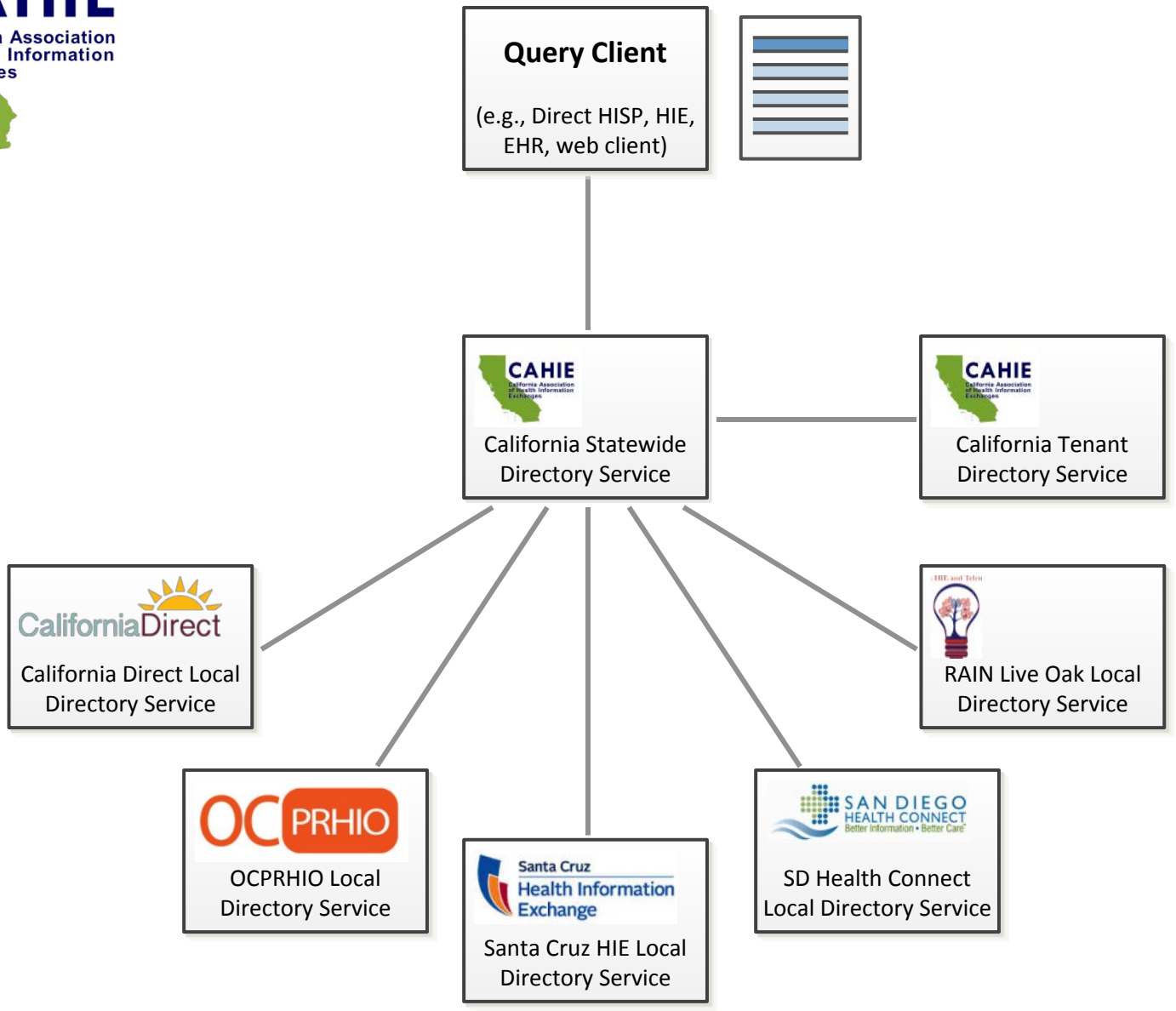
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Where are we?

- Live in production with five participating organizations
  - Talking to other potential participants
- Demonstrating at California Connects

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Where are we going?

- Exploring query clients to allow those not yet supporting HPD to query for information
- Exploring tenant directory services to allow those not yet supporting HPD to share they directories
- Exploring extract services to allow those not yet supporting HPD to “access” for information

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Where are we going?

- Thinking about Care Services Discovery (CSD)
- Watching the Argonaut Project, FHIR, and provider directories

Where are we going?

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Sidebar…

Do you know about the Medi-Cal HIE milestone?

- Part of recent awards for technical assistance for the EHR Incentive Program
- Provides help for EPs wanting to start using HIE with CTEN participants

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Questions?

Contact Information

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