



PMIX Operations Subcommittee

Date/time: Tuesday, November 9, 1-2p ET (12-1p CT, 11a-12p MT, 10-11a PT)

Meeting Link: [Microsoft Teams](#) **Dial-in:** 850-739-6261 **Meeting ID:** 951243620#

Conference Call Attendance

Affiliation:	Name:	Attendance:
State Representatives:		
California	Tina Farales	Y
Delaware	Jason Slavoski	N
Florida	Erika Marshall	N
Georgia	Vlad Schorstein	N
Kentucky	Jean Hall	N
Maine	Jennifer Marlowe	N
Missouri	Haley Alder	Y
Nebraska	Kevin Borchert	Y
New York	Shirley Madewell, Alexa Bontempo	Y
Washington	Eric Grace	Y
Other:		
Bamboo Health	Natalie Browning	N
BizTek	Denise Robertson	N
IJIS	Ron Larsen	Y
NABP	Danna Droz	Y
NIC	Celena Wheeler, Christie Frick	Y
OpiSafe	Chris Ennis	N
Scriptulate	Neil Chatterlee, MD	N
Sherry Green & Associates	Sherry Green	Y
Tetrus	Sanjay Ungarala	N
Committee Support:		
CDC	Wes Sargent	N
ONC	Carmen Smiley	N
PDMP TTAC	Patrick Knue, Don Vogt	Y

Conference Call Agenda/Minutes

- Roll Call (10 for quorum)
Quorum not established
- Approval of Minutes from 7-13-2021, 9-14-2021, and 10-13-2021
Tabled due to quorum not established
- Subcommittee participation
Kevin Borchert (NE) discussed that many members are not regular attendees which is impacting this subcommittee's ability to get work done. Suggestions from members: reconnecting with members to confirm their desire to continue to be a subcommittee member or just attend as guest when available; sending a Doodle poll to determine their reason such as needing to identify a different date/time; updating the by-laws to include voting/non-voting advisory members; and maybe restrict quorum consideration and voting privilege to those who attend xx% of meetings.
- Patient Matching Workgroup
Kevin Borchert (NE) stated that a survey would be sent out to the Patient Matching Workgroup members to identify type of solutions (i.e., business, technical, statutory) and prioritize challenges, opportunities, and consequences
- Subcommittee Goal #1: Identify Functionality for data sharing hubs
 - ✓ Expand current schema to improve audit trails to track request to requestor and/or master account level (if delegate made request) – approved to send to PMIX Executive Committee
 - ✓ Interoperability between hubs – discuss in more detail with technical and business people
 - ✓ Robust data security of information – discuss with security expert
 - ✓ Improve search capabilities of audit trail information - presentation on data elements
 - ✓ Data clean-up to increase match rates (ONC)
Kevin Borchert (NE) said that he would talk with Carmen Smiley (ONC) about the data clean-up to increase match rates within a hub.
 - ✓ Provider repository (NE and ME)
TTAC offered to have a demo put together for the next Operations Subcommittee meeting. Danna Droz (NABP) said she will check on PMPI's functionality and, if it exists, will do a demo as well.
 - ✓ Transparent and seamless interaction between existing hubs without requiring the user to select a hub (FL)

✓ Group discussion: not something to be determined by the hub, rather it should be the PDMP to make that decision and the vendor implements their choices.; Ron Larsen (UT) said that Bamboo Health was able to configure it this way for transactions between NV and UT. Consensus: the choice of hub for outbound requests should be decided by the PDMP with their vendor operationalizing it. This item is not a function for the PMIX Standards Organization to decide on.

✓ Data translation between various versions of standards to move data across systems (ONC)

Group discussion: translating integration requests at hub level would require decryption by hub. Danna Droz (NABP) stated that the request is decrypted at Gateway, translated, re-encrypted, and sent to the PDMP for responding. She added that there are agreements with the HIE and Bamboo Health on responses for Gateway to decrypt and translate. Kevin Borchert (NE) asked should the hub be responsible for this? Consensus – data translation should be the responsibility of integrator, PDMP vendor, or PDMP and not the hubs. He added that conceptually it would be beneficial for interoperability, but it might promote potential risk to secured data.

- *Dynamic dashboard detailing agreements (e.g., state worksheets) between state PDMPs (GA)*
- *Allow data provenance (e.g., meta-data) to know when last updates were made (e.g., name changes) to help reconcile information across systems (ONC)*
- *Allow for additional data to be used within current security and confidentiality parameters (second call for information) (ONC)*
- *Central patient repository used to only check appropriate sources that might have additional information for matching (NIC)*

➤ Subcommittee Goal #2: Explore best practices in EHR integration/interstate data sharing

Not covered due to time.

➤ Next Meeting – Tuesday, December 14th

➤ Action Items