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The quality of the data that data submitters send to the network plays a vital role in enhancing the accuracy and match rate of our identity resolution processes at MiHIN.

To improve the match rate and accuracy of identity resolution processes, we are working to create a more standards based <u>Common Key</u> implementation based on:

• Leverage assigning authority ID (the OID or object identifier representing the organizational source of the patient identifiers) and local ID (the actual patient identifier assigned by that source)

• Updating the Common Key API interface to support standards based IHE interaction paradigms including Patient Identity Management, Patient Identity Feed, Patient Data Query as well as others aligning with MPI metrics of XCA (cross community access) or XCPD (cross community patient discovery)

An object identifier (OID) has a central utility in providing a traceable source for the meaning of an identifier appearing in a cross-system communication. The need to know who owns the identifier is critical in case questions arise concerning the meaning of the identifier. OID values and mappings are instrumental in strengthening patient matching and contributing to the creation of a robust and accurate longitudinal patient record that our network participants can leverage within their workflows.

MiHIN will be working with senders of data to make clear information in their feeds related to distinguishing facility identifiers, as well as the sources of patient identifiers within different types of messages.

We will be clarifying with data senders which individual facilities or other participating organizations (e.g. practices, PHOs, etc.) share a common patient identifier pool and if those same set of identifiers are used across the different types of data they are sending, including but not limited to HL7 v2 messages, C-CDA, ACRS files, etc.