



Who Is the Patient, Who Is the Provider? Trusted Identity for Health Care Transformation

Hosted by Verato

September 2, 2026

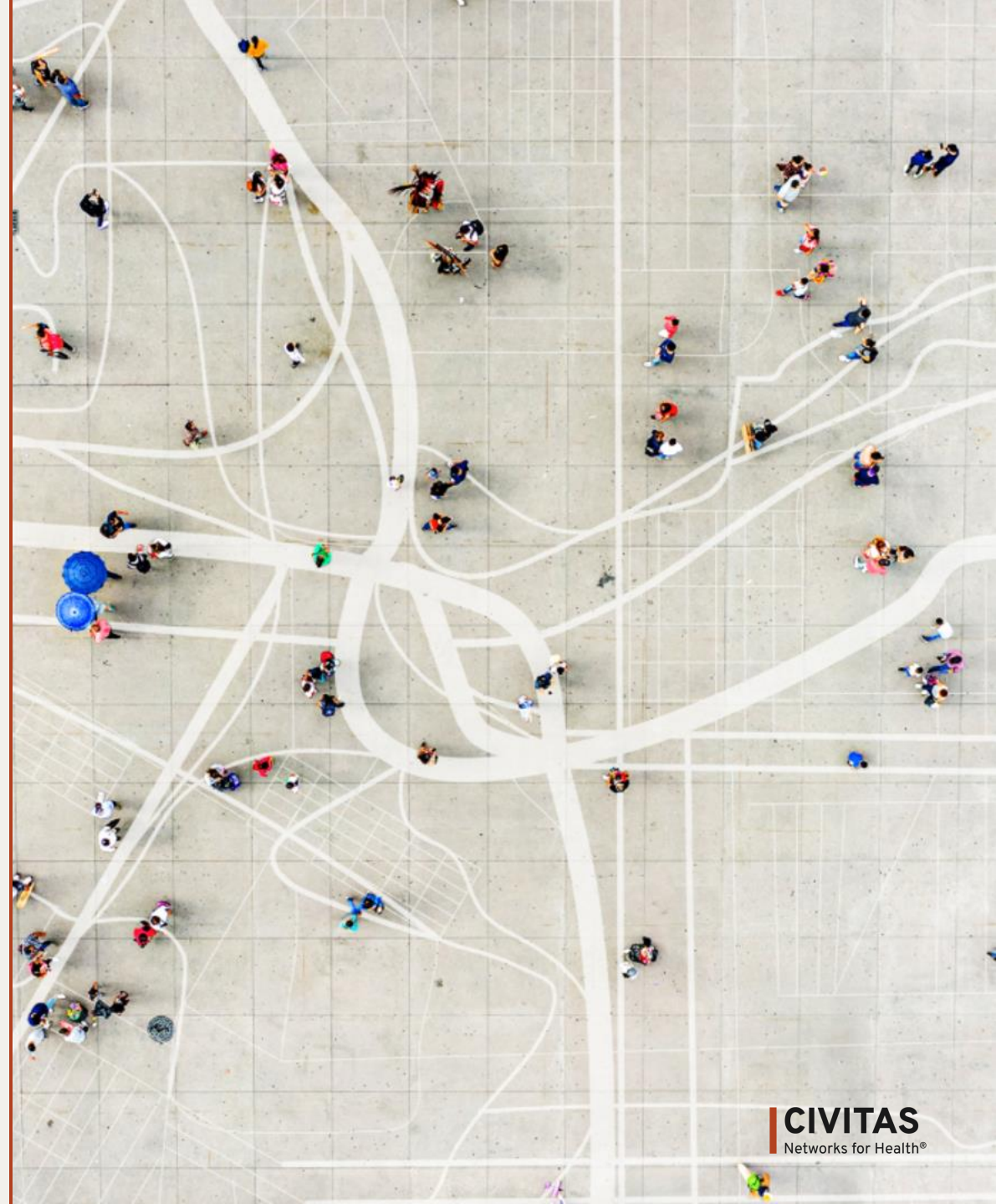


Agenda

- Welcome & Civitas Updates
 - Jolie Ritzo, CEO, Civitas Networks for Health®
- Who Is the Patient, Who Is the Provider? Trusted Identity for Health Care Transformation, Hosted by Verato
 - Dan Chavez, Executive Director, Serving Communities HIO (SCHIO)
 - Martin Hougaard, VP, Product Marketing, Verato

Housekeeping Reminders

- This is a webinar where all participants are automatically muted and your video is not displayed.
- If you would like to ask a question, please use the Q&A function on the right-side taskbar.
- This webinar is being recorded, and the recording will be shared after today's event.
- For questions following the webinar, please reach out to contact@civitasforhealth.org.



An aerial photograph of a park with a complex network of winding, light-colored paths on a paved surface. Numerous small figures of people are scattered throughout the scene, some walking, some sitting, and some standing in groups. The paths intersect and curve in various directions, creating a web-like pattern. The overall tone is bright and airy, with a soft, slightly desaturated color palette.

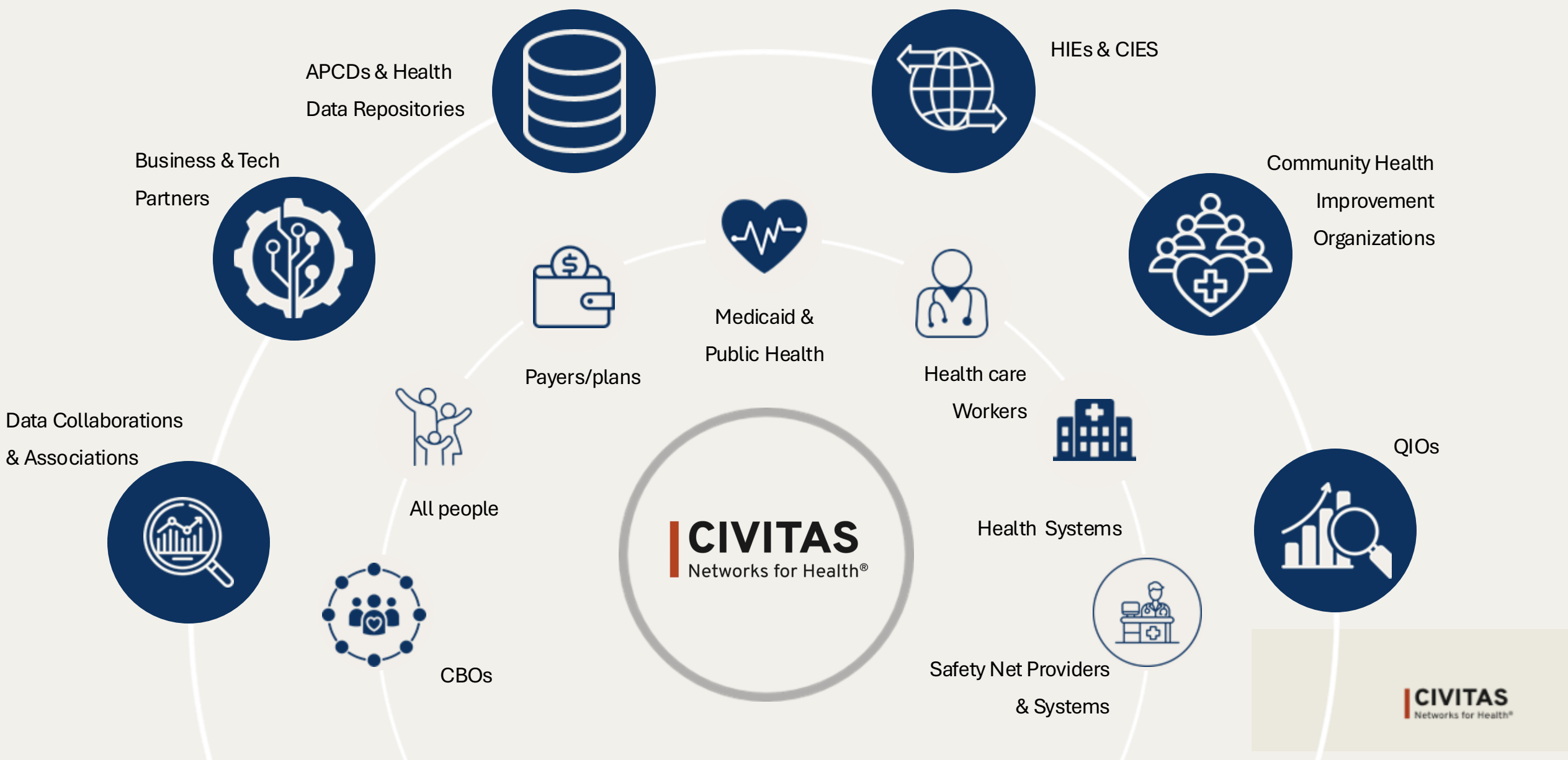
About Civitas Networks for Health®

Who we are, who we serve, and about what we do

Who We Are

- Civitas members include a wide range of organizations:
 - Health Information Exchanges (HIEs)
 - Health Data Utilities (HDUs)
 - Community Information Exchanges (CIEs)
 - Regional Health Improvement Collaboratives (RHICs)
 - All-Payer Claims Databases (APCDs)
 - Quality Improvement Organizations (QIOs)
 - Strategic Business and Technology Partners
 - Affiliated Associations
- We work together at the local, regional, state, and national levels
- Together, we invest in data-driven multistakeholder collaboration to enhance health, addressing cost, equity, quality, and safety

Who We Serve





Expert Convenors

- Civitas provides a unique platform that connects collaborators working on health improvement across the U.S.
- We believe that local communities should lead and influence national progress on health.
- We offer forums for shared learning, education, networking, and advocacy, and have proven our ability to help our members navigate the ever-changing health landscape.
- We create opportunities and pathways for aligned groups to work together on key priorities, overcoming barriers and developing health solutions, so others don't have to start from scratch.

Join Us at the Civitas 2026 Annual Conference!

Join 750+ leaders from across the health data and improvement ecosystem. Hosted in collaboration with our Mid-Atlantic Host Committee, just minutes from Washington, D.C. in Arlington, VA.

- [Registration is open](#) – secure your spot today!
- Plan early and save with [discounted flight options](#).
 - *Please note that our room block is sold out! Visit our [conference hotel & travel page](#) to see other hotel options in the area.*
- [Get your Civitas merchandise](#) before the conference – 100% of proceeds go to Doorways for Women and Families Virginia.
- Interested in sponsoring? We still have a select few opportunities available for you to get in front of a national audience shaping interoperability, data exchange, and health transformation. Review the [Sponsorship Prospectus](#) and email contact@civitasforhealth.org if you're interested in learning more.



Register to Attend the Remaining Virtual Preconference Sessions (Open to the Public!)

Join us for virtual preconference sessions designed to deepen learning and spark meaningful discussion ahead of the Civitas Annual Conference. Register to attend:

- **September 10, 3-4:30 p.m. ET** – [From Data to Impact: Using APCD Analytics to Shape Policy and Improve Population Health](#)
- **September 16, 2-3:30 p.m. ET** – [Co-Designing Trusted CIEs: Privacy, Coordination, and Data Systems for Whole Person Health](#)

Thank you to our returning virtual preconference sponsor, J2 Interactive!



Conference Keynotes: Don't Miss Them!

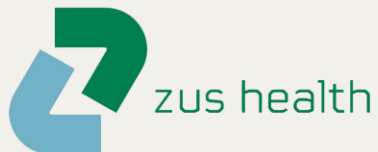
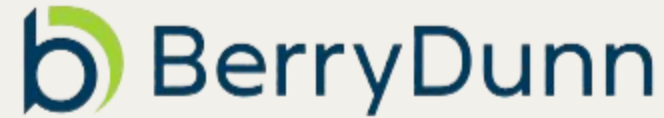
- **Tuesday, September 22 –**
 - *Bridging Federal and State Policy with Local Implementation for Transformation*
 - Dr. Ayanna Bennett (DC Department of Health)
 - Dr. B. Cameron Webb (Virginia Department of Health)
 - Dr. Joseph Kanter (Association for State and Territorial Health Officials; Panel Moderator)
 - *Driving the Next Wave of Value-Based Care Through CMMI*
 - Abe Sutton (CMMI; CMS)
 - Theresa Dreyer (Health Care Transformation Task Force)
- **Wednesday, September 23 –**
 - *Advancing the Future of Rural Health*
 - Carrie Cochran-McClain (National Rural Health Association)
 - *Real World Considerations for Deploying AI in High-Stakes Environments*
 - Dr. S. Craig Watkins (IC² Institute, University of Texas at Austin)
- **Thursday, September 24 –**
 - *Putting Patients at the Heart of Health Care and Health Technology*
 - Anthony Polizzi (CMS)
 - Regina Holliday (Walking Gallery & the Medical Advocacy Mural Project)
 - Sarah DeSilvey (Gravity Project)
 - *Public Policy Briefing* fireside chat
 - Dr. Tom Keane (National Coordinator for Health IT)
 - Craig Behm (CRISP)



Thank You to Our Civitas 2026 Annual Conference Upgrade Sponsors



Thank You to Our Civitas 2026 Annual Conference Silver Sponsors

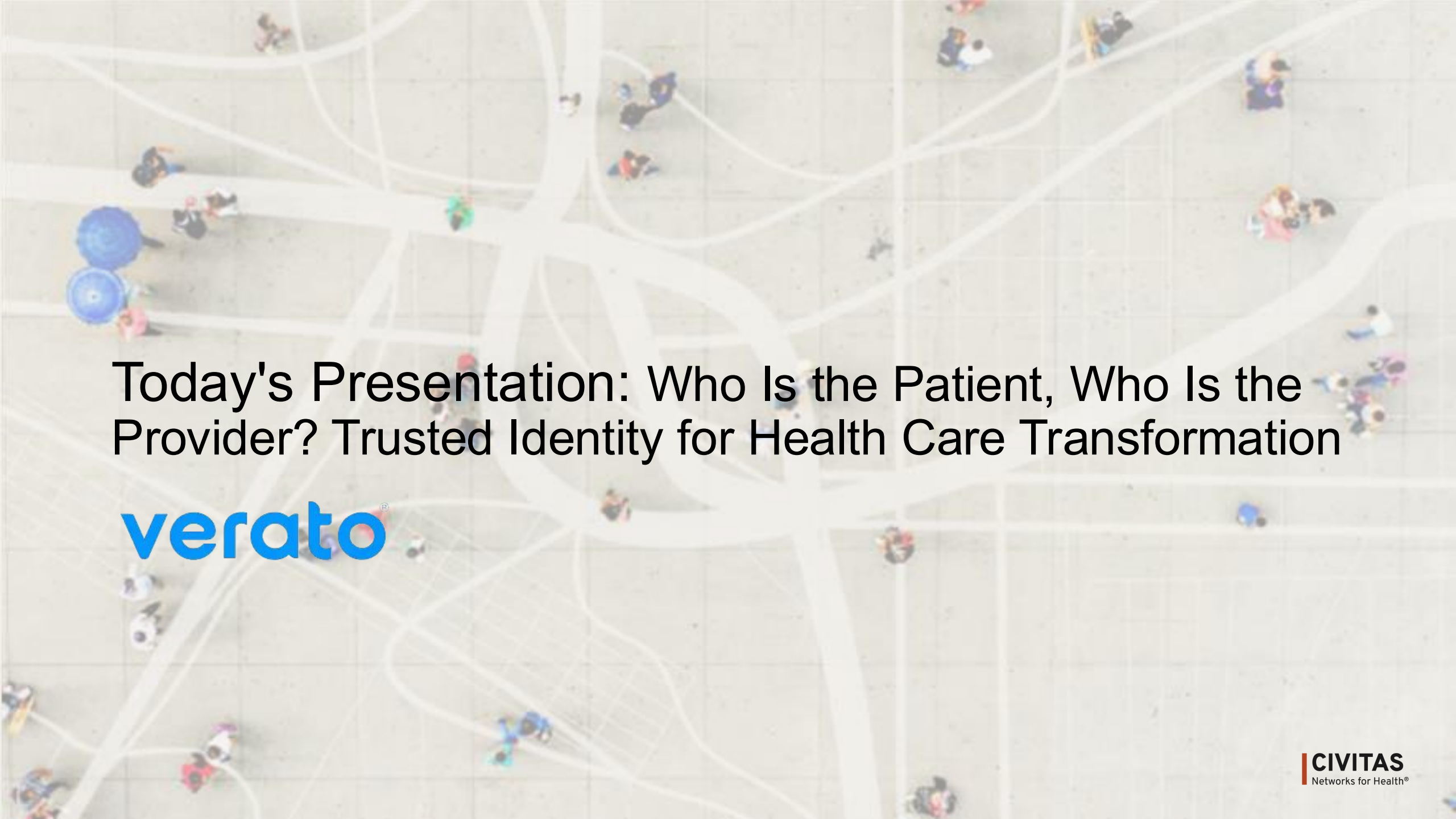


Thank You to Our Civitas 2026 Host Committee



Better healthcare,
realized.



An aerial photograph of a park with a network of winding, light-colored paths on a paved surface. Numerous people of various ages and colors are seen walking along these paths, some in small groups and others alone. The overall scene is bright and open, suggesting a public space designed for movement and community.

Today's Presentation: Who Is the Patient, Who Is the Provider? Trusted Identity for Health Care Transformation

verato



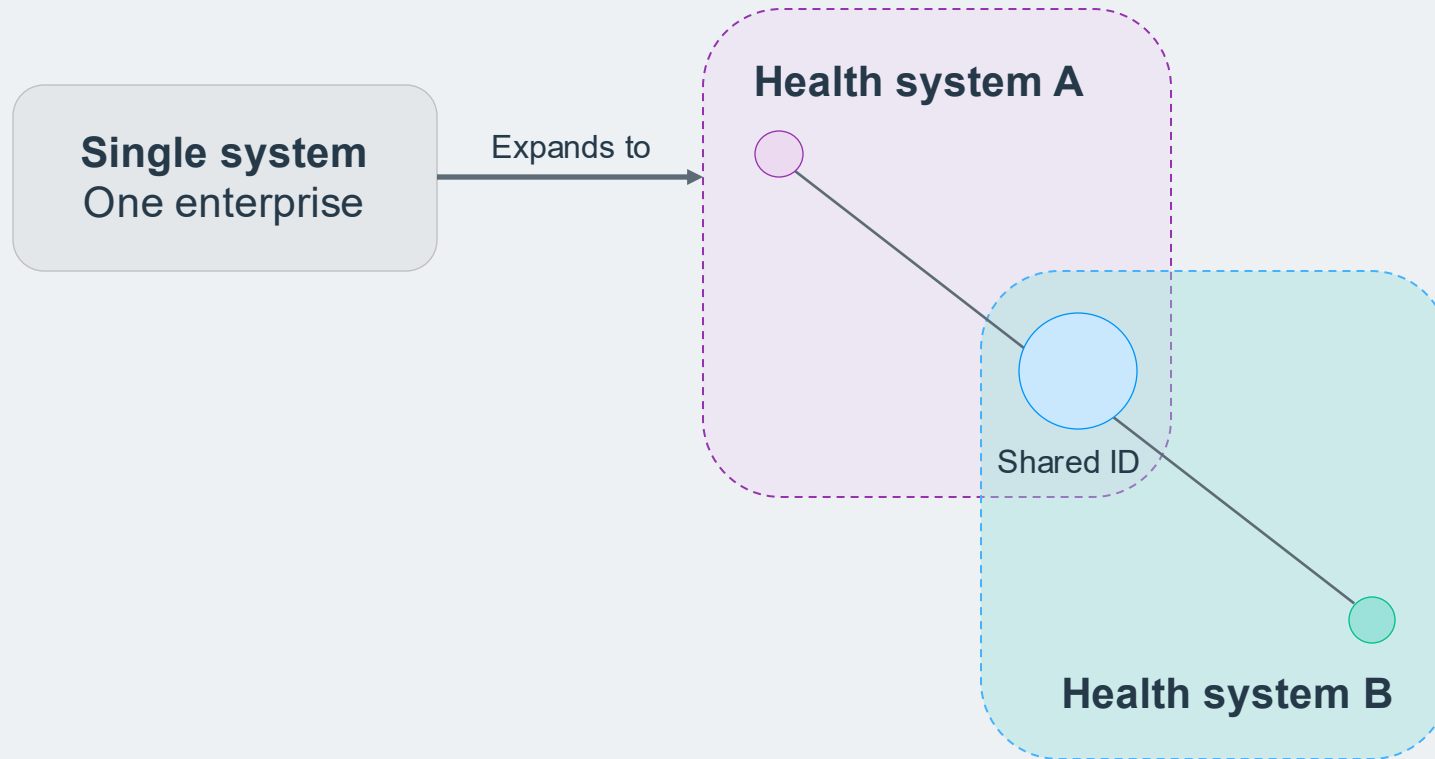
Who is the patient, who is the provider?

Identity as the foundation of Medicaid redetermination and rural health transformation

Martin Hougaard, VP Product Marketing, Verato

Dan Chavez, Executive Director, SCHIO

Identity management now spans the ecosystem



- Identity must connect across systems
- Scope crosses organizations and geographies
- Success means partners confirm identity
- Governance is shared

Identity is critical to community interoperability



You can't reliably determine the condition of
a population you can't reliably identify.

WHY NOW

Four forces, one dependency

Rural health. Medicaid. Frailty. AI.

All four use cases depend on trusted identity

1 Rural health transformation

Connecting partners that
never shared data



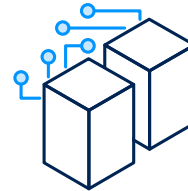
2 Medicaid redetermination

Eligibility evidence spread
across organizations



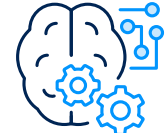
3 Medical frailty

Whole-person evidence
in separate systems



4 AI

Models inherit your
identity errors



Where is identity creating the biggest challenge?

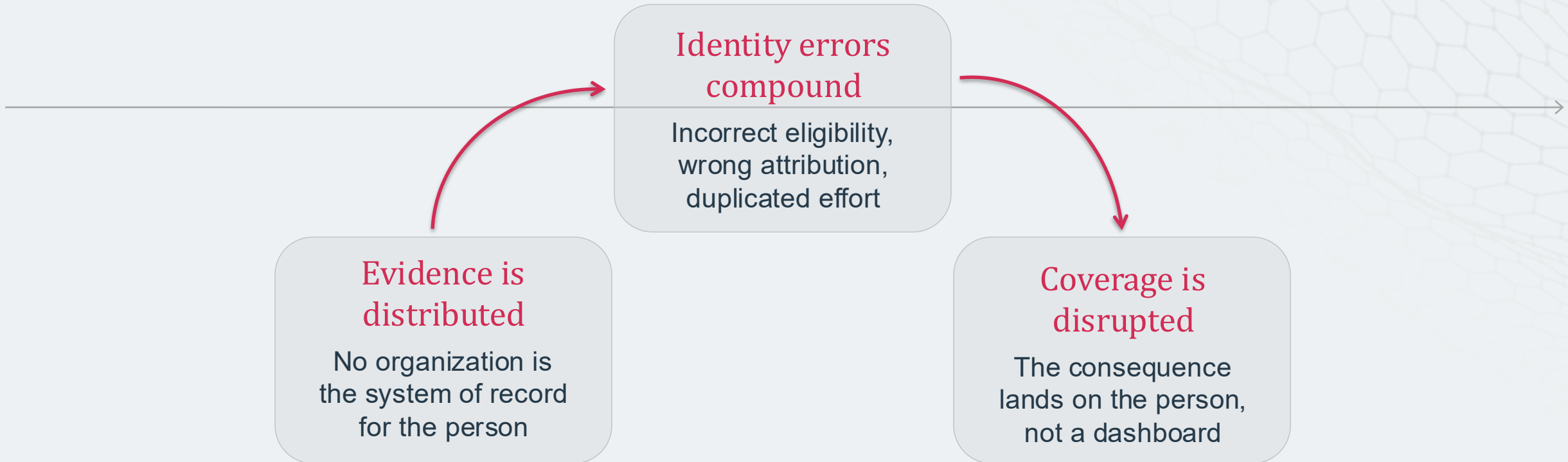
- A. Rural/community data exchange
- B. Medicaid eligibility or redetermination
- C. Patient/provider attribution
- D. AI and automation
- E. Other / not sure

Rural health transformation

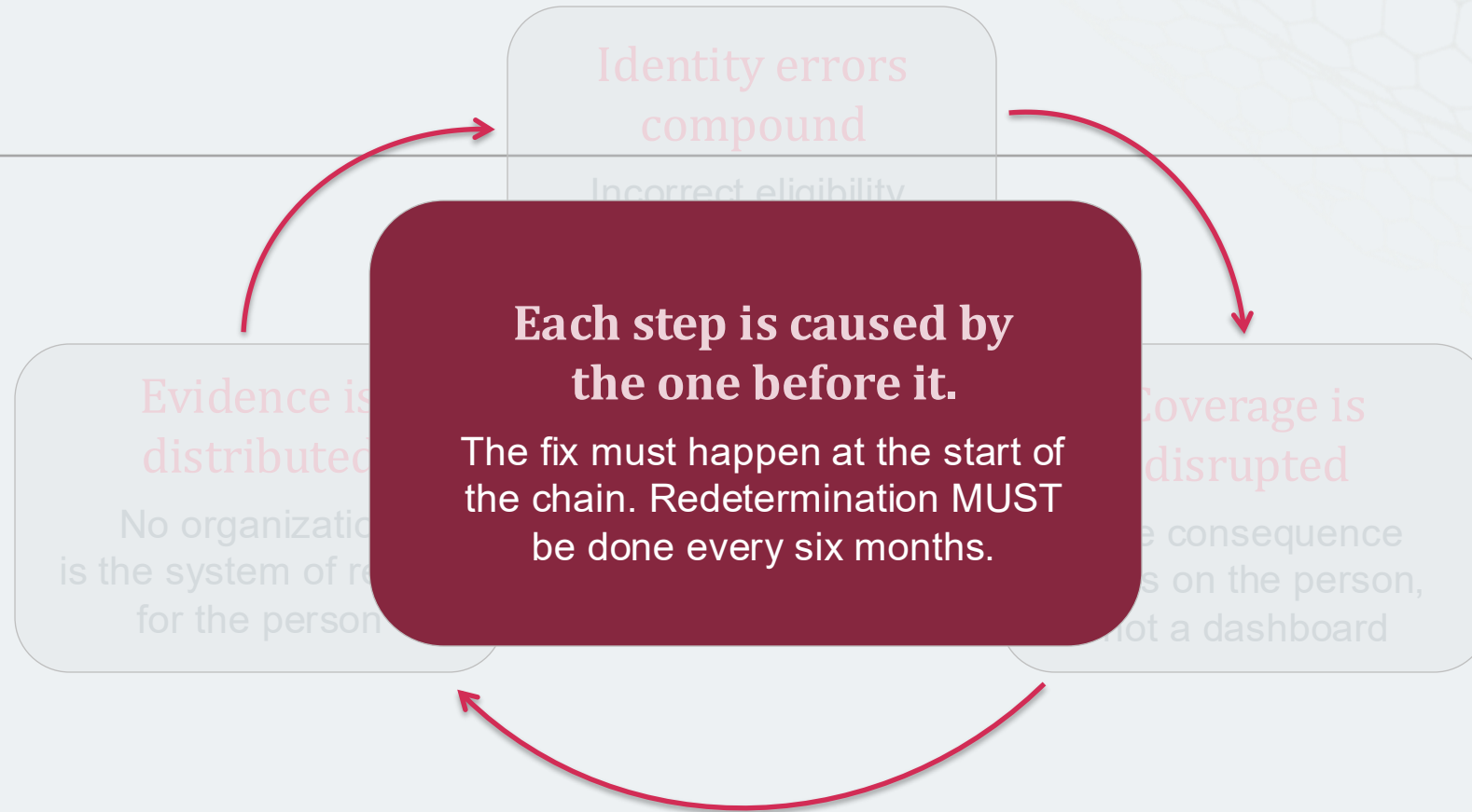
- MCOs, Hospitals, FQHCs, EMS, public health, pharmacies, CBOs, other programs
- Across boundaries that do not normally share data
- Moving data is the easy part. Confirming the **person** is not.



Medicaid redetermination and work requirements



Medicaid redetermination and work requirements



Medical frailty

Evidence required:



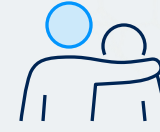
Clinical



Behavioral



Functional



Social



Pharmacy

Why it never worked

- No one system holds all five care settings
- Different organizations, different views, different identifiers
- A singular view may read as not frail

AI does not fix fragmented identity



Great model, wrong patient

- Confidently wrong, at scale
- Errors gain the model's authority
- Provenance impossible to trace



Trusted identity, then AI

- Identity becomes part of AI governance
- Outputs trace back to a person
- Accuracy compounds instead of error

One identity, many roles

Patient-to-care-team attribution

Panels, rosters, and quality measures need the right care team attribution

Referrals and directories

Stale records send patients nowhere

Credentialing and networks

Affiliations and locations change constantly

AI and automation

Agents need to know which care team, which location

The problem is bigger than any one organization



Inside an enterprise

- EMPI and MDM resolve identity for one organization
- One governance model, one rule set
- Necessary, not sufficient



Between enterprises

- Care and coverage span organizations
- HIEs transcend the boundaries
- Match rates can fall as much as 50%

MATCH IT: identity moves onto the policy agenda

What it is

A federal bill on patient matching

Where it stands

House H.R. 2002. Senate companion, August 2026.

What it would set

A match-rate definition and demographic standards

Why it matters

Measurement and accountability arrive with it

THE SHIFT

From enterprise identity to network identity

Solve identity once, not once per care organization.

Enterprise identity to network identity



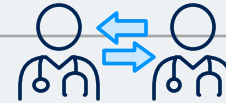
Local MPI

One application



Enterprise MPI

One organization



HIE / HIO identity

Participant by participant



Shared identity network

One layer, all participants

Network effect: solve identity once, and its value improves as participation grows.

How mature is your identity approach today?

- A. Primarily within individual systems
- B. Enterprise-wide across our organization
- C. Across HIE / network participants
- D. Shared identity across multiple organizations
- E. Not sure

Verato Identity Network™

Verato MDM Cloud establishes trusted identity inside your four walls.

VIN enables you to achieve the same level of trust with all of your partners' data.



Point-to-point identity

- A new integration per partner
- Reconciliation repeats every time
- Demographics travel between organizations



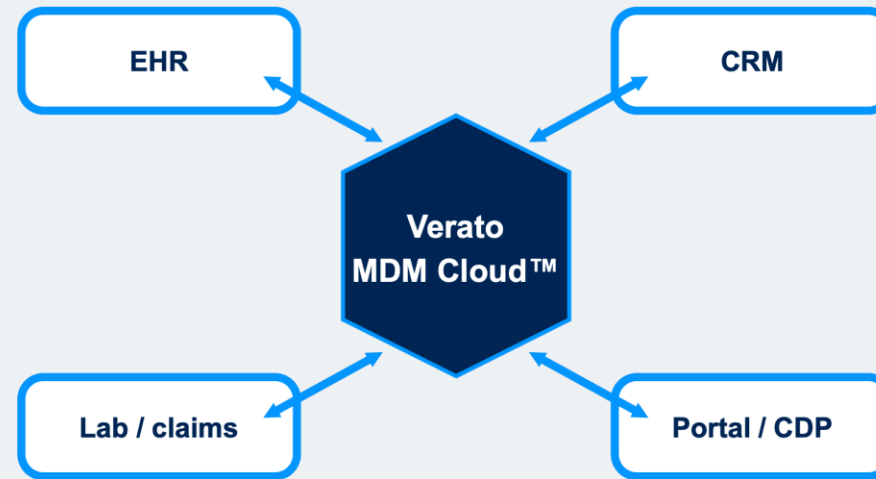
How a shared identity layer works

- One layer, every participant
- Sync full populations or a subset
- Network ID confirms the same person, no demographics sent
- Governance stays local

Let's talk about participation for your community.

Your trusted identity...

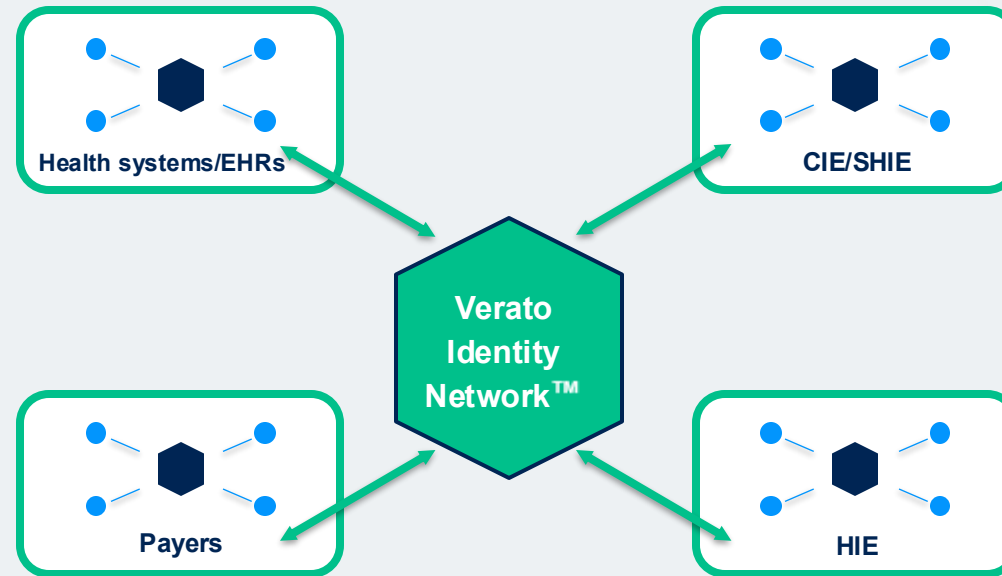
Inside one organization:



Sources flow in. One trusted identity flows back out. Post, search, notify, and steward, all inside your four walls.

...now extends across your partners

Across organizations:



Your environment gets access to other nodes.

Same operations, more value, one level up, with the partners you choose.

Questions for your ecosystem

1. Can you identify the same patient across every organization you serve?
2. Can you identify the same provider across locations, affiliations, and networks?
3. Can you link clinical, behavioral, social, and administrative data to one person?
4. Can you measure and report match quality to participants?
5. Can AI rely on identity your participants trust?
6. What is your plan for patient, provider, and care-team attribution?

Which capability would create the most value?

- A. Identify the same patient across organizations
- B. Identify providers across locations and networks
- C. Measure and report match quality
- D. Build trusted populations across data sources
- E. Support AI with trusted identity

Where this leaves us

Healthcare transformation depends on interoperability.

Interoperability depends on shared identity management.

And identity now must work across the entire ecosystem.

So: who is the patient? Who is the provider?

Let's build the plan together

Meet with us to map where identity breaks in your community
Start with one partner or one shared population

Find us at CIVITAS
Booth 102

Tuesday, 4:15–5:00 pm

Panel session with Verato, DHIN, and VITL

Wednesday, 7:00–8:00 am

Breakfast briefing with Verato and Dan Chavez

DISCUSSION

Questions

How does identity break down most often in your community ecosystem today?

Let's build the plan together

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Stay in Touch with Civitas



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www.civitasforhealth.org