

CalHHS Data Exchange Framework Policy and Procedure

Subject: Technical Requirements for Exchange	
Status:	Policy: OPP-[X]
Publication Date:	Version: 1.0

I. Purpose

California Health and Safety Code § 130290 establishes that the California Health and Human Services Data Exchange Framework (“Data Exchange Framework”) will create a “common set of policies and procedures that will leverage and advance national standards for information exchange and data content, and that will govern and require the exchange of health information” among Participants. The purpose of this policy is to define recommended and required exchanges of Health and Social Services Information among Participants and the technical standards to be used in those exchanges.

II. Policy

This policy shall be effective January 31, 2024.

1. Participants must exchange Health and Social Services Information with other Participants as specified below:

a. In response to an authorized request for Health and Social Services Information from a Participant,

b. When Health and Social Services Information is created and becomes available electronically following an Order or Request for Services and delivery of those services by a Participant, and

c. For Hospitals, to notify Participants of ADT Events if requested by an authorized Participant.

2. Participants must be able to exchange Health and Social Services Information using National and Federally Adopted Standards as specified below.

3. Participants must use a standardized set of person demographics and identifiers as specified below when sending Health and Social Services Information to or requesting Health and Social Services Information from another Participant.

4. The Governance Entity must review new and maturing National and Federally Adopted Standards for data content and exchange regularly, no less than annually, for potential inclusion in amendments to the Data Elements to Be Exchanged Policy and Procedure and to this policy and procedure.

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III. Procedures

1. Information Delivery is the delivery of Health and Social Services Information regarding a specific person (e.g., patient, member, or client) to a specific Participant as a result of an Order or a Request for Services.

a. Participants that Deliver Health and Social Services Information

i. Participants that generate Health and Social Services Information in response to an Order or a Request for Services must deliver the Health and Social Services Information to the ordering or requesting Participant electronically. Other Participants may choose to send electronic Health and Social Services Information to another Participant.

ii. A Participant that delivers electronic Health and Social Services Information must ensure that the recipient Participant is authorized to receive the information sent.

iii. A Participant that delivers electronic Health and Social Services Information using a Nationwide Network or Framework or a point-to-point connection must support delivery using the Integrating the Healthcare Enterprise (IHE) XDR (Cross-Enterprise Document Reliable Interchange) exchange profile or IHE XCDR (Cross-Community Document Reliable Interchange) profile.

iv. A Participant that delivers electronic Health and Social Services Information is encouraged to support delivery using Health Level 7 (HL7) Fast Healthcare Interoperability Resources (FHIR) Release 4 conforming to the US Core implementation guide. This delivery standard may be required in future revisions of this policy and procedure.

b. Qualified Health Information Organizations

i. Qualified Health Information Organizations (QHIOs) must support sending and receiving electronic Health and Social Services Information using IHE XDR or IHE XCDR profiles for QHIO-to-QHIO exchange in support of Information Delivery.

ii. A Participant that uses a QHIO or other intermediary to deliver or receive electronic Health and Social Services Information may use any open technical standard supported by both the Participant and the selected intermediary. For delivery beyond the intermediary's participants, the intermediary must be able to translate the delivery into the IHE XDR or IHE XCDR profiles for Information Delivery.

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c. Participants that Receive Health and Social Services Information

i. All Participants are encouraged to support electronic receipt of Health and Social Services Information.

ii. A Participant that receives electronic Health and Social Services Information must be authorized to retain the information. If not authorized, the Participant, as soon as practicable, must securely destroy the information and notify the sender. The means for notifying the sender is not specified by this policy and procedure.

d. Nothing in this policy and procedure limits the responsibility of a Participant to send electronic Health and Social Services Information in compliance with the Data Elements to Be Exchanged Policy and Procedure.

e. Nothing in this policy and procedure limits the responsibility of a Participant to send electronic Health and Social Services Information in response to an authorized electronic request for information described later in this policy and procedure.

2. Requested Notification is the electronic communication of Admit, Discharge, and Transfer (ADT) Events sent by a sending Participant to a receiving Participant for specified persons (e.g., patients, members, or clients) requested by the receiving Participant.

a. Hospital Participants

i. Participants that are Hospitals must communicate ADT Events electronically unless prohibited by applicable law via one of the following methods:

a. Accept requests for electronic Notification of ADT Events from any other Participant and communicate ADT Events electronically as requested in a format acceptable to the requesting Participant and supported by the Participant Hospital.

b. Send electronic Notifications of ADT Events to at least one QHIO chosen by the Participant Hospital, allowing and requiring the selected QHIO to distribute electronic Notifications of the ADT Events to all other QHIOs and communicate ADT Events electronically to requesting Participants on behalf of the Participant Hospital.

ii. Participants that are Hospitals that send electronic Notifications of ADT Events to a QHIO must use HL7 Version 2.5 Admit, Transfer, Discharge (ADT) messages or a later, compatible version.

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iii. Participants that are Hospitals may communicate ADT Events electronically to other Participants that are not QHIOs as requested by the requesting Participant using any electronic method acceptable to both Participants.

iv. Participants that are skilled nursing facilities are encouraged to communicate admissions, discharges, and transfers using the same methods at Hospitals. Skilled nursing facilities may be required to communicate admissions, discharges, and transfers in future revisions of this policy and procedure.

b. Qualified Health Information Organizations

i. QHIOs must accept requests for electronic Notification of ADT Events from their participants and communicate ADT Events electronically as requested in a format acceptable to the requesting Participant and supported by the QHIO.

ii. QHIOs must accept electronic Notifications of ADT Events from any Participant Hospital, including Hospitals that are not QHIO participants.

iii. QHIOs receiving electronic Notifications of ADT Events must exchange them electronically with all other QHIOs.

iv. QHIOs receiving electronic Notifications of ADT Events may only retain the data contained in the Notification as authorized to do so under applicable law.

v. QHIOs must exchange electronic Notifications of ADT Events with Hospitals that are not their participants and with other QHIOs using HL7 Version 2.5 Admit, Transfer, Discharge (ADT) messages or a later, compatible version.

vi. QHIOs may communicate ADT Events electronically to other Participants as requested by the requesting Participant using any electronic method acceptable to both Participants.

c. Requesting Participants

i. Any Participant may make a request for electronic Notification of ADT Events.

ii. Participants that request electronic Notification of ADT Events must have a relationship with every person (e.g., patient, member, or client) for whom

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Notification is requested or must be acting on behalf of a Participant that has such a relationship.

iii. Participants that request electronic Notifications must be authorized to receive the electronic Notification and must make the request in compliance with the Permitted, Required and Prohibited Purposes Policy and Procedure.

d. Nothing in this policy and procedure limits the responsibility of a Participant to send electronic Health and Social Services Information in response to an electronic request for information described below.

3. Targeted Request for Information is an electronic request by a Participant for electronic Health and Social Services Information regarding a specific person (e.g., patient, member, or client) from one or more specific Participant(s) believed likely to have Health and Social Services Information for that person.

a. Requesting Participants

i. A Participant that makes electronic requests for electronic Health and Social Services Information must be authorized to receive the Health and Social Services Information requested.

ii. A Participant that makes electronic requests for electronic Health and Social Services Information using a Nationwide Network or Framework must make the request using the IHE XCPD (Cross-Community Patient Discovery) exchange profile if the identity of a matching subject of the exchange is not yet known and the IHE XCA (Cross-Community Access) exchange profile to retrieve Health and Social Services Information.

b. Responding Participants

i. Every Participant must accept and respond to an electronic request for electronic Health and Social Services Information from another Participant.

ii. Every Participant that responds to electronic requests for electronic Health and Social Services Information using a Nationwide Network or Framework or a point-to-point connection must support requests and responses using the IHE XCPD profile for Person Matching and the IHE XCA profile to retrieve Health and Social Services Information.

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iii. Participants are encouraged to support electronic requests and electronic responses to requests for electronic Health and Social Services information using HL7 FHIR Release 4 and the US Core implementation guide. This request and response standard may be required in future revisions of this policy and procedure.

iv. A Participant must respond to an electronic request for Health and Social Services Information with an appropriate null response or error message as specified by the technical standard in use and in compliance with this policy and procedure if the Participant receiving the request for Health and Social Services Information cannot fulfill the request for either of the following reasons:

a. The Participant cannot determine a matching subject for the exchange, or

b. The Participant is not authorized to disclose Health and Social Services Information for the requested subject under applicable law.

c. Qualified Health Information Organizations

i. QHIOs must support electronic requests and electronic responses to requests for electronic Health and Social Services Information using the IHE XCPD profile for Person Matching and the IHE XCA profile to retrieve Health and Social Services Information.

ii. A Participant that uses a QHIO or other intermediary to request electronic Health and Social Services Information or to respond to electronic requests for electronic Health and Social Services Information may use any open technical standard supported by both the Participant and the selected intermediary. For requests or responses beyond the intermediary's participants, the intermediary must be able to translate that request into the IHE XCPD profile for Person Matching and the IHE XCA profile to retrieve Health and Social Services Information.

d. Nothing in this policy and procedure limits the responsibility of a Participant to respond to requests for electronic Health and Social Services Information in compliance with the Data Elements to Be Exchanged Policy and Procedure.

4. Broadcast Request for Information is an electronic request by a Participant for electronic Health and Social Services Information regarding a specific person (e.g., patient, member, or client) from many Participants without knowledge of which Participants may

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have information for that person. To the recipient, a Broadcast Request for Information may be indistinguishable from a Targeted Request for Information.

a. All policies and procedures applicable to a Targeted Request for Information apply to a Broadcast Request for Information.

b. Participants are strongly discouraged from making a Broadcast Request for Information except in urgent or emergency use cases when potential sources of Health and Social Services information for the subject are not known.

5. Person Matching is the process by which a Participant ensures that exchanged electronic Health and Social Services Information is appropriately linked to the correct real person.

a. To improve the likelihood of Person Matching across Information Delivery, Requested Notifications, Targeted Requests for Information, and Broadcast Requests for Information, all Participants must use the following person demographics if Maintained by the Participant when specifying a subject to match in a Targeted Request for Information or Broadcast Request for Information, or identifying a subject in Information Delivery or Requested Notifications:

i. Name, including family name, given name(s), and middle name or initial, and including other names previously or currently used by the individual

ii. Date of birth

iii. Home and/or mailing address(es), including previous address(es) if known

iv. Phone number(s)

v. Email address(es)

b. Gender may be included among person demographics if required by the technical standard in use. Otherwise, gender should not be included.

c. Unless noted otherwise in this policy and procedure or in the Data Elements to Be Exchanged Policy and Procedure, person demographics must follow the guidelines and standards established by the United States Core Data for Interoperability (USCDI) Version 2.

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d. Format and content of home and mailing addresses must conform to the Project US@ Technical Workgroup's *Technical Specification for Patient Addresses: Domestic and Military* published by the Office of the National Coordinator for Health Information Technology.

e. Participants must also exchange specific identifiers related to health if Maintained by the Participant when specifying a person to match in a request for information or identifying a person in Information Delivery or Notifications, including but not limited to:

i. State or federal identifiers related to health (e.g., Medi-Cal or Medicare ID).

ii. Local identifiers related to health (e.g., medical record number or plan member identification number).

f. Participants may retain and use specific identifiers related to health and exchange them as an aid in person matching.

g. Nothing in this policy and procedure limits the responsibility of a Participant to exchange Health and Social Services Information in compliance with the Data Elements to Be Exchanged Policy and Procedure.

6. Technology Updates. The Governance Entity must create an open and transparent process to review and consider new and maturing National and Federally Adopted Standards for potential inclusion in the Data Exchange Framework.

a. The process must be put in place no later than July 1, 2024.

b. The process must consider both data content standards and data exchange standards to be adopted as amendments to the Data Elements to Be Exchanged Policy and Procedure and to this policy and procedure, respectively.

c. The process must establish a regular review cadence, no less than annually.

d. The process must align with requirements of the Development of and Modifications to Policies and Procedures Policy and Procedure.

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IV. Definitions

Admit, Discharge, and Transfer (ADT) Event means admission to a Hospital, discharge from a Hospital, or transfer from a Hospital to another healthcare facility, including but not limited to a skilled nursing facility.

Broadcast Request for Information means an electronic request by a Participant for electronic Health and Social Services Information regarding a specific person (e.g., patient, member, or client) from many Participants without knowledge of which Participants may have information for that person. To the recipient, a Targeted Request for Information may be indistinguishable from a Broadcast Request for Information.

Hospital, for the purposes of this policy and procedure only, means any acute care setting, including but not limited to general acute care hospitals and acute psychiatric hospitals.

Information Delivery means the delivery of Health and Social Services Information regarding a specific person (e.g., patient, member, or client) to a specific Participant as a result of an Order or a Request for Services.

Maintains with respect to data means that the entity has access to the data, control over the data, and the authority to make the data available, as defined for payers in the [CMS Interoperability and Patient Access Final Rule](#) but in this P&P applied to entities beyond payers.

National and Federally Adopted Standards means standards published by the US Department of Health and Human Services in the [Standards Version Advancement Process](#).

Nationwide Network or Framework means any vendor-agnostic health information network or health information exchange framework with nationwide scope, including coverage in California, available to some or all Participants for the exchange of Health and Social Services Information. Examples include, but are not limited to, eHealth Exchange, CommonWell Health Alliance, Carequality, DirectTrust, or Trusted Exchange Framework.

Notification means the message sent from a sending Participant to a receiving Participant with details of an ADT Event, including, at a minimum, the identity of the subject of the event, the Hospital associated with the event, the event date and time, and the diagnosis or chief complaint associated with the event.

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Order means any request for diagnostic services placed by a health professional, including but not limited to requests for diagnostic clinical laboratory and radiology services.

Person Matching means the process by which a Participant ensures that exchanged electronic Health and Social Services Information is appropriately linked to the correct real person.

Request for Services means any request for health or social services, including but not limited to clinical consultation or assessment from or referrals to a health professional or referral to social services.

Requested Notification means the electronic communication of Admit, Discharge, and Transfer (ADT) Events sent by a sending Participant to a receiving Participant for specified persons (e.g., patients, members, or clients) requested by the receiving Participant.

Targeted Request for Information means an electronic request by a Participant for electronic Health and Social Services Information regarding a specific person (e.g., patient, member, or client) from one or more specific Participant(s) believed likely to have for that person.

All other capitalized terms not defined in this policy and procedure have the same meaning as defined in the DSA.

V. References

[California Health and Human Services, Data Exchange Framework, Strategy for Digital Identities](#)

Data Elements to Be Exchanged Policy and Procedure

Development of and Modifications to Policies and Procedures Policy and Procedure

[HL7 Fast Health Information Resources \(FHIR\) Release 4 Version 4.0.1](#) or later

[IHE IT Infrastructure \(ITI\) Technical Framework, Volume 2](#)

Permitted, Required, and Prohibited Purposes Policy and Procedure

[Standards Version Advancement Process](#)

[Technical Specification for Patient Addresses: Domestic and Military](#)

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[United States Core Data for Interoperability \(USCDI\) Version 2](#)

[US Core Implementation Guide Version 5.0.1 - STU5 Release US](#) or later

VI. Version History

No.	Date	Author	Comment
	December 9, 2022	CalHHS CDII	Draft for DxF Data Sharing Agreement Subcommittee review

DRAFT