

**CalHHS Data Exchange Framework**  
***Draft Policies and Procedures for Public Comment***  
**(January 2023)**  
*Questions for Public Input*

## Background and Instructions

The CalHHS Center for Data Insights and Innovation (CDII) has [released](#) four new draft Policies and Procedures (P&Ps) and one modified P&P for the Data Exchange Framework's (DxF) Data Sharing Agreement (DSA) for public comment:

- [New] California Information Blocking Prohibitions
- [New] Technical Requirements for Exchange
- [New] Real-Time Exchange
- [New] Early Exchange
- [Amended] Privacy Standards and Security Safeguards

Earlier drafts of these P&Ps were discussed at CalHHS DxF Implementation Advisory Committee (IAC) and DSA P&P Subcommittee meetings, where feedback was received and incorporated from committee members and the public. **CDII is now seeking broader public comment on the draft P&Ps by Tuesday, February 14, 2023.**

CDII is seeking public input on all aspects of the P&Ps as drafted, with particular interest in the topics and areas highlighted in this document.<sup>1</sup>

CDII requests comment submission in the [DxF Comment Template](#) though other formats will also be accepted.<sup>2</sup> To assist us with the processing of your comments, please name your completed comment file as follows: [Your Organization Name]\_[Your Last Name]\_[Date Prepared] and transmit the file attached in an email to [CDII@chhs.ca.gov](mailto:CDII@chhs.ca.gov). Additional details with guidance on how to prepare and transmit comments are available in the Public Comment section of the [CalHHS DxF website](#).

## Questions for Public Input

### 1. California Information Blocking Prohibitions

- a. The California Information Blocking Prohibitions P&P does not permit Participants to use the Licensing or Fees Exception in the Federal Information

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<sup>1</sup> For the amended Privacy Standards and Security Safeguards P&P only, CDII is only soliciting comments on the highlighted sections of the draft document for public comment which indicate changes made to the version released in July 2022.

<sup>2</sup> CDII asks that comments delivered in alternative formats meet Web Content Accessibility Guidelines. Specifically, CDII requests that commenters refrain from submitting comments in tracked-changes format or as a document with in-text comments. The California Department of Rehabilitation has created [Web Accessibility Toolkit](#) to serve as a resource for meeting accessibility guidelines.

Blocking Regulations. Are there any circumstances under which a Participant should be able to charge a fee to:

- i. License technology required for the exchange of Health and Social Services Information (HSSI) that is required under the DSA?
- ii. Another Participant in connection with the exchange of HSSI that is required under the DSA?

## 2. Technical Requirements for Exchange

### Requests for Information

- a. Broadcast queries for HSSI are not prohibited or discouraged in this draft of the P&P, as previous public comments suggested restrictions would be difficult to define and enforce. However, the duty to respond to broadcast queries for persons for which a Participant has no information impose a burden that can overwhelm technical resources.

Should broadcast queries be restricted through a P&P, or can/will the burden on respondents be minimized through voluntary adoption of industry best practices that minimize broadcast queries?

### Information Delivery

- b. In response to DSA P&P Subcommittee and IAC feedback, the P&P requires Participants to be able to receive HSSI sent to them by another Participant (e.g., a radiology report sent by a radiology clinic). It also expands the standards that may be used to include Direct secure messaging in addition to the IHE reliable delivery standard promoted for TEFCA to reduce the burden of health care providers.

Is the requirement to receive electronic HSSI appropriate for Participants?

- c. In order to ensure that every Participant can receive information sent by any other Participant, the sender of HSSI, recipient of HSSI, or both must support both IHE and Direct standards. In the P&P, recipients of delivered HSSI are only required to support one of two standards and senders of HSSI must support both standards.

Should Direct secure messaging be added to the available standards?

Should the burden to support both standards be placed on the Participant that is delivering HSSI or on the Participant receiving the HSSI?

### Requested Notifications

- d. The P&P requires that hospitals send admission, discharge, and transfer (ADT) messages to a Qualified Health Information Organization (QHIO).

Is this a concern? Is there another method of ensuring that Participants wishing to receive notifications do not need to submit rosters to potentially many Participant Hospitals that should be considered?

The P&P requires that QHIOs receive ADTs from Participating Hospitals and distributes them to other QHIOs as a common means of ADT message delivery. Some HIOs have voiced concern that this imposes technical burden. The QHIO criteria may provide an onramp for this capability. CDII is not aware of any current network or framework that provides the ability to allow any hospital to send a notification to any network/framework participant.

Is the use of QHIOs to receive and distribute ADTs, and provide one avenue for notifying any Participant of an ADT event appropriate? Is there a preferred method to distribute ADTs statewide that does not require the state to create and require Participants to use a health information exchange network, health information organization, or technology?

### 3. Real-Time Exchange

*The Real-Time Exchange P&P leverages language and concepts found in national guidance related to the exchange of data. We welcome your input and comments.*

### 4. Early Exchange

- a. The Early Exchange P&P requires Participants that choose to engage in the early exchange of HSSI under the DSA to comply with published P&Ps, regardless of the effective date written in the P&P. Are there any P&Ps or elements of P&Ps that Participants engaging in early exchange should NOT be required to comply with? For example:
  - i. If Participants engaging in early exchange are required to comply with all elements of the published P&Ps, they would be required to exchange information for all of the required purposes set forth in the Permitted, Required and Prohibited Purposes P&P, namely Treatment, Payment, Health Care Operations and Public Health Activities (as those terms are defined in the DSA). Should a Participant that elects to engage in early exchange instead be permitted to share HSSI for just a subset of the required purposes?
  - ii. The Technical Requirements for Exchange P&P defines recommended and required exchanges of HSSI among Participants and the technical standards to be used in those exchanges. Should a Participant that elects to engage in early exchange be permitted to comply with a subset of the requirements? For example, if a Participant can do query but not ADT, should the Participant be permitted just to do query?

## **5. Privacy Standards and Security Safeguards**

*The version of the Privacy Standards and Security Safeguards P&P released for public comment includes updates to the final version released in July 2022, to incorporate new language pertaining to authorizations and responsibility to securely destroy information received about an individual in error. Please note, CDII is only soliciting comments on the highlighted sections of this amended P&P which indicate changes made to the version released in July 2022. We welcome your input and comments.*