California Health & Human Services Agency
Center for Data Insights and Innovation
Data Exchange Framework Stakeholder Advisory Group
Data Sharing Agreement Subcommittee
Meeting 2 (December 22, 2021, 11:00AM – 1:30PM PST)
Q&A Log

The following table shows comments that were entered into the Zoom Q&A by public attendees during the December 22nd virtual meeting:

Count	Name	Comment	Response(s)[1]
1	Michael Marchant (UC Davis Health)	FYI - Dr. Atreja is unable to make today's meeting, I'm online for him as his proxy.	1) live answered 2) Thank you 3) Thank you for attending the public meeting, Dr. Marchant. The Subcommittee does not allow proxies/stand-ins, but we will note that you are listening in for Dr. Atreja in the notes. Thank you again for letting us know.
2	Michael Marchant (UC Davis Health)	present	thank you, Dr. Marchant.
3	John Helvey - SacValley MedShare (Nor CA)	Thank you all for the hard work you are doing!	Thank you for attending!

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[1] Responses may have been provided by various Data Exchange Framework Data Sharing Agreement Subcommittee Members or Center for Data Insights and Innovation staff.

Count	Name	Comment	Response(s)[1]
4	John Helvey - SacValley MedShare (Nor CA)	I think useable data is key...what makes the dataa useable?	1) Great point, John. We will consider being more specific about what "usability" means in the principles. 2) The Sequoia Project has an ongoing robust program focused on addressing data usability from a multi stkeholder perspective, with the development of specific implementation guides. 3) https://sequoiaproject.org/interoperability-matters/data-usability-workgroup/ 4) The Data Quality Workgroup will develop one implementation guide focusing on data quality and addressing each of the following high-level use cases: - Provider-to-provider health information exchange - Provider-to-Public Health Agency information exchange - Healthcare entity-to-consumer information exchange 5) We should point to and contribute to this work rather than try to replicate it.
5	John Helvey - SacValley MedShare (Nor CA)	Healthcare Operations still requires minimum necessary the same as clinical access.	Clinical/treatment access does NOT typically require the exchange of Minimum Necessary information.

Count	Name	Comment	Response(s)[1]
6	Robb Layne	Robb Layne with CBHA - we support any efforts that create a unified system that allowed clients and providers to focus on care and not a fragmented system.	Yup
7	Robb Layne	Robb Layne with CBHA - we support any efforts that create a unified system that allowes* clients and providers to focus on care and not a fragmented system.	Yup
8	Allen Noriega	What is the name of the statewide benefits determining service?	Hi Allen - Louis was referencing CalSAWS. https://www.calsaws.org/
9	Allen Noriega	The transcript keeps interpreting the County benefits determining program as Cal Sauce	Hi Allen - Louis was referencing CalSAWS. https://www.calsaws.org/
10	Allen Noriega	There is CBEST in LA County regarding benefits determination	Thanks
11	Robb Layne	What types of support are planned for CBOs to be brought into compliance. CBOs range from very small non-profits to large statewide Clinics.	What policy levers do we have to compel these organizations to participate in exchange?
12	Robb Layne	We can't assume that all CBOs have the funds or operational bandwidth to be "compliant" with the new regulations. Many CBOs have a process in place that will need to be updated or retrofitted into this new system. We support this new process but need to mindful of everyone who will be affected.	Agree that we must be mindful of this need, but not that we should assume that these groups are incapable of engaging in bidirectional exchange.
13	Robb Layne	'@Steven - Great question. A phased in approach, technical assistance and incentives are all traditional levers.	Agree.
14	David Ford	Just to clarify what was just said - Small and safety net practices are NOT exempted from the requirements of AB 133. They are given two additional years to comply so the	Thanks for that reminder/clarification David.

Count	Name	Comment	Response(s)[1]
		state can undertake a program of technical assistance.	
15	John Helvey - SacValley MedShare (Nor CA)	Cheers to all!	

Total Count of Zoom Q&A comments: 15