



**California Health & Human Services Agency  
Center for Data Insights and Innovation  
Data Exchange Framework Stakeholder Advisory Group  
Data Sharing Agreement Subcommittee  
Meeting 3 (January 18, 2022, 12:00PM – 2:30PM PST)  
Q&A Log**

The following table shows comments that were entered into the Zoom Q&A by public attendees during the January 18<sup>th</sup> virtual meeting:

Count	Name	Comment	Response(s) <sup>1</sup>
1	Michael Marchant	Federated - not centralized is preferred for patient privacy and consent - centralized brings I'm additional risk and concern over privacy.	
2	Claudia Williams	There has been extensive guidance on proxy access from OCR.	
3	Allen Noriega	For the Social Service component of the overall framework, how likely will the finished product include information on where a given patient was provided services at a CBO?	
4	Claudia Williams	On the question of how to share with social services, it seems like there are two good places to start:	

<sup>1</sup> 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) <sup>1</sup>
5	Claudia Williams	1) individual consent for data sharing with social services, as many whole person care pilots have done 2) follow OCR guidance (and hopefully soon regs) allowing for data sharing with social service without BAA for care coordination. Deven can advise, but we cannot just "decide" that an entity is a business associate if they don't meet the HIPAA definition of a business associate	
6	David Ford	To the comment before about common standards - The bill requires the state to be technology agnostic, AND to rely on national standards:	
7	David Ford	1) The California Health and Human Services Data Exchange Framework is not intended to be an information technology system or single repository of data, rather it is technology agnostic and is a collection of organizations that are required to share health information using national standards and a common set of policies in order to improve the health outcomes of the individuals they serve.	
8	Allen Noriega	Funding to assist CBO entities could be aided CalAIM's PATH funding	
9	David Ford	The federal government no longer uses the term "Meaningful Use."	

**Total Count of Zoom Q&A comments: 9**