

December 20, 2021

Secretary Dr. Mark Ghaly, MD, MPH California Health and Human Services Agency 1660 Ninth Street, Room 460 Sacramento, CA 95814

Director Dr. Tomás J. Aragón, MD, DrPH California Department of Public Health 1616 Capitol Avenue Sacramento, CA 95814

Dear Secretary Dr. Ghaly and Director Dr. Aragón:

As California continues its COVID-19 vaccine administration amid new variants, California's health care providers will play an important role as a trusted advisor in ensuring the unvaccinated and those needing boosters receive their immunizations. However, provider organizations often do not have the information or tools they need to do this job effectively; namely, the most up-to-date immunization data for their patients.

<u>Connecting for Better Health</u> is a multi-stakeholder state coalition dedicated to advancing health information exchange policy in California. We write to support and add to requests made earlier this year by the Local Health Plans of California, the California Association of Health Plans, and several California health information exchanges for the California Department of Public Health (CDPH) to share immunization data with health information exchanges to ensure timely and accurate immunization status updates are made to health plans and providers.

California's health information exchanges are well positioned to help route up-to-date immunization to providers and health plans, given their master patient indexes and patient rosters attributable to their network provider participants. Health information exchanges in other states like Maryland and New York are supporting their state departments of public health outreach efforts. With the bulk data files, they can extract the data from regularly provided immunization data files and integrate this data into the longitudinal patient record; share data with local outreach taskforces; and provide summary analytics by age, race/ethnicity, and location to public health departments. Health information exchanges also facilitate patient access to health data and can help fill gaps in patient identification and record completion.

Right now, CDPH allows for health information exchanges to query CAIR and has created a separate system to process patient rosters from health information exchanges based on CDPH's matching system that requires exact matches between name and date of birth. We applaud CDPH for creating methods for health information exchanges in California to receive this

immunization information, which they can then send onto trusted providers, health plans, and outreach teams to ensure the successes of California's vaccination campaign. Providing batch files is preferable to

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the previous approach that required health information exchanges to submit individual queries to CAIR each week.

However, CDPH's current approach to providing batch files using exact matches is producing matches at lower rates than would otherwise be expected. For example, Manifest MedEx has shared that of their file of nearly 27 million patients, CDPH only provided vaccination records for approximately three million patients, 11% of the total. Using state estimates showing that 74% of Californians have received at least one vaccine dose, Manifest MedEx would have expected to receive records for nearly 20 million patients. This is likely due to CDPH's matching approach, which requires an exact match for name and date of birth, as mentioned above. The alternative method—allowing health information exchanges to conduct individual queries in CAIR—is cumbersome and not scalable for exchanges that serve millions of patients or that serve the San Joaquin and San Diego areas not on the state CAIR registry.

We recommend CDPH adopt the following to share data with health information exchanges to support outreach efforts:

- CDPH should share weekly batch immunization records for <u>all</u> Californians from the COVID-19 Vaccination Data Repository with all health information exchanges that are willing and capable of producing and sending patient immunization reports with participating providers and plans on a weekly basis. For example, CDPH can consider sharing the weekly immunization file it shares with CDC.
- CDPH should implement this policy statewide to ensure immunization data is shared with all health information exchanges.
- CDPH should require health information exchanges to report back on how they are supporting providers' and health plans' vaccination outreach efforts with CDPH data.

Thank you for your consideration, and we look forward to further discussion on this matter to ensure our state takes full advantage of all opportunities and meets the urgency to immunize Californians from COVID-19.

Sincerely,

Timi Leslie Connecting for Better Health President, BluePath Health