



California Health & Human Services Agency Center for Data Insights and Innovation Data Exchange Framework Implementation Advisory Committee Data Sharing Agreement Policies and Procedures Subcommittee Meeting 2 Q&A Log (10:00AM – 12:30PM PT, October 25, 2022)

The following table shows comments that were entered into the Zoom Q&A by public attendees during the October 25th meeting:

Count	Name	Comment	Response(s) ¹
1	Kayte Fisher (she/her)	If a patient/client asks for certain information to be contained within the office or provider, would the provider engage in a "practice" of blocking that information?	a) No. The Information Blocking prohibitions include a Privacy Exception that allows a data holder to withhold data at the patient's request.
			b) https://www.healthit.gov/sites/defa ult/files/2022- 07/InformationBlockingExceptions .pdf
			c) Sub-exception #4: Respecting an individual's request not to share information: An actor may choose not to provide access, exchange, or use of an individual's EHI if doing so fulfills the wishes of the individual,

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





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			provided certain conditions are met.
2	Kayte Fisher (she/her)	Thanks, this is good to know. I remain concerned about individuals not giving fully informed consent to their data being shared in the first place. The standard HIPAA release signed at a doctor's office never contemplated this kind of widespread data sharing, and the average person does not realize that their sensitive information could leave their provider's office and be shared far and wide. The lack of a separate informed consent for this data sharing agreement is deeply worrying and will counteract efforts to gain trust from marginalized communities.	If you read the HIPAA Notice of Privacy Practices (which is NOT a "consent") it clearly states the many situations in which data can and will be shared without consent.
3	Kayte Fisher (she/her)	Yes, you and I know this but the vast majoity of people do not, and cannot read the Notice of Privacy Practices, and if they refuse to sign it they will be refused medical care. That is not a freely given consent for data sharing. Just because you can do something does not make it a best practice.	'+1
4	DeeAnne McCallin (CPCA)	Is an API one's "own technology"?	Arguably yes if you can control who has access to it, even if the tech is made available to you by a vendor.
5	Stephanie Renick	For an organization to comply with their own technology without using a QHIO or other established infrastructure, are you saying, let's say hospital system, would contract with all other providers in their local health/social services ecosystem and that this is happening electronically?	I think the vision for the Data Sharing Agreement is for one agreement to be signed by all participants (not separate agreements per participants) and participants would be required to





Count	Name	Comment	Response(s) ¹
		That just seems unrealistic but want to make sure I	publish how (mechanisms) they
		am understanding what is being said.	use for exchange.

Total Count of Zoom Q&A comments: 5