

Data Exchange Framework QHIO Town Hall

California Health & Human Services Agency

Thursday, February 9, 2023

9:00 a.m. – 10:30 a.m.

Meeting Participation Options

Spoken Comments

- *Participants* must “raise their hand” for Zoom facilitators to unmute them to share comments; the Chair will notify participants of appropriate time to volunteer feedback.

Logged into Zoom

If you logged on from offsite via Zoom interface

Press “Raise Hand” in the “Reactions” button on the screen

If selected to share your comment, you will receive a request to “unmute;” please ensure you accept before speaking

Phone Only

If you logged on via phone-only

Press “*9” on your phone to “raise your hand”

Listen for your phone number to be called by moderator

If selected to share your comment, please ensure you are “unmuted” on your phone by pressing “*6”

Meeting Participation Options

Written Comments

- Participants may submit comments and questions through the **Zoom Q&A box**; all comments will be recorded and reviewed by CDII staff.
- Participants may also submit comments and questions – as well as requests to receive Data Exchange Framework updates – to CDII@chhs.ca.gov.

Public Comment Opportunities

- Public comment will be taken during the meeting at designated times.
- Public comment will be limited to the total amount of time allocated for public comment on particular issues.
- The Chair will call on individuals in the order in which their hands were raised.
- Individuals will be recognized for up to two minutes and are asked to state their name and organizational affiliation at the top of their statements.
- Participants are encouraged to use the comment box to ensure all feedback is captured or email their comments to CDII@chhs.ca.gov.

Welcome

Agenda

9:00 AM	Welcome <ul style="list-style-type: none">• <i>DeeAnne McCallin, Deputy Director, The Center for Data Insights and Innovation</i>
9:10 AM	QHIO Program Overview <ul style="list-style-type: none">• <i>Cindy Bero, Senior Advisor, Manatt Health Strategies</i>
9:15AM	Discussion Items: QHIO Application and Criteria <ul style="list-style-type: none">• <i>Rim Cothren, Independent HIE Consultant, CDII</i>• <i>Cindy Bero, Senior Advisor, Manatt Health Strategies</i>
10:15AM	Public Comment
10:25 AM	Informational Item: Closing Remarks and Next Steps <ul style="list-style-type: none">• <i>DeeAnne McCallin</i>

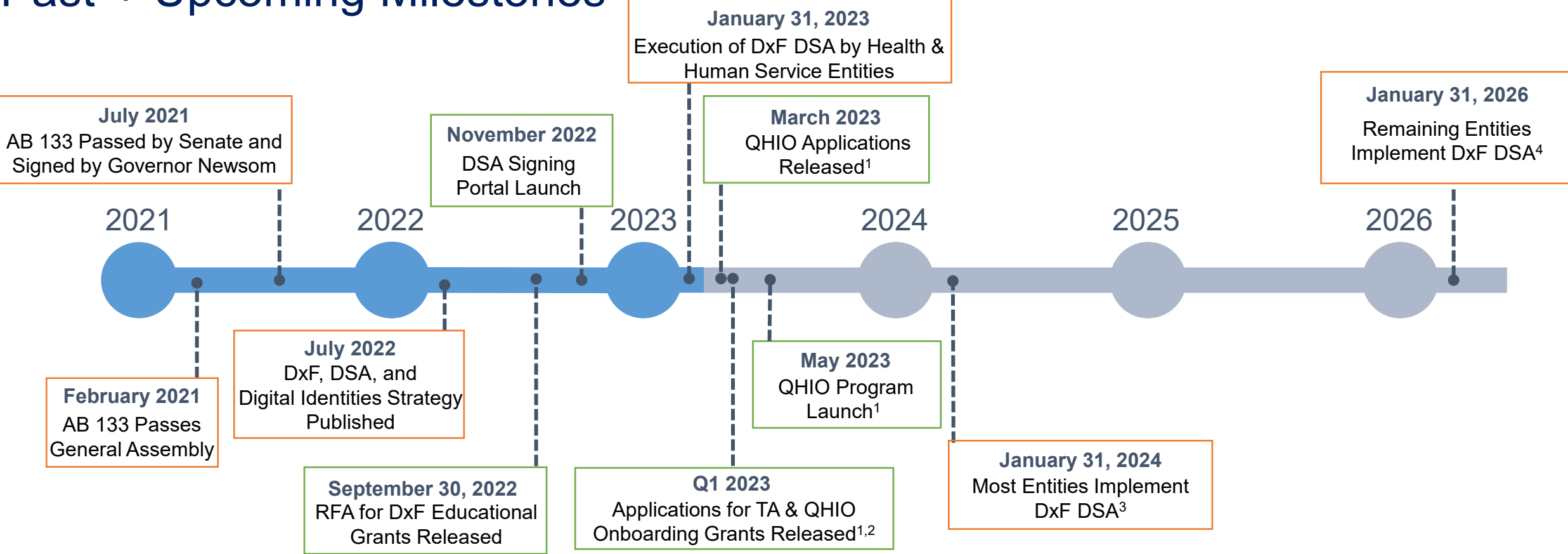
Vision & Meeting Objectives

Vision for Data Exchange in CA

Every Californian, and the health and human service providers and organizations that care for them, will have timely and secure access to usable electronic information that is needed to address their health and social needs and enable the effective and equitable delivery of services to improve their lives and wellbeing.

DxF Implementation Timeline

Past + Upcoming Milestones



Notes

1. DxF Program implementation milestones are estimates and subject to change.
2. TA Grant Applications close on a quarterly basis.
3. General acute care hospitals, physician organizations and medical groups, skilled nursing facilities, health service plans and disability insurers, Medi-Cal managed care plans, clinical laboratories, and acute psychiatric hospitals. County health, public health, and social services providers are encouraged to connect to the DxF.
4. Physician practices of <25 physicians, rehabilitation hospitals, long-term acute care hospitals, acute psychiatric hospitals, critical access hospitals, and rural general acute care hospitals with <100 acute care beds, state-run acute psychiatric hospitals, and nonprofit clinics with <10 providers

Meeting Objective



Discuss and receive feedback on the Data Exchange Framework's Qualified Health Information Organization program, application and criteria

QHIO Application and Criteria

QHIO Program: Guiding Principles



Confidence. The program shall provide signatories with confidence in the quality and level of service offered by QHIOs



Stability. The program shall create sufficient stability so that QHIOs and signatories can make business decisions with minimal concern for change or disruption



Fairness. The program design shall be fair, offering all participants reasonable time to adapt to change and/or remediate issues



Equity. The program shall create opportunities for all signatories to successfully participate in the DxF

QHIO 2023 Application

The QHIO 2023 Application is designed to gather information to assist CDII in determining if an organization has the structure and capabilities to function as a Qualified Health Information Organization (QHIO) to support and enable California's Data Exchange Framework (DxF)

QHIOs will be identified for DSA signatories who are seeking assistance to meet their DSA obligations

Organizations interested in serving as QHIOs are encouraged to complete the application for consideration



QHIO 2023 Application

The QHIO 2023 Application requests responses to questions in four sections:

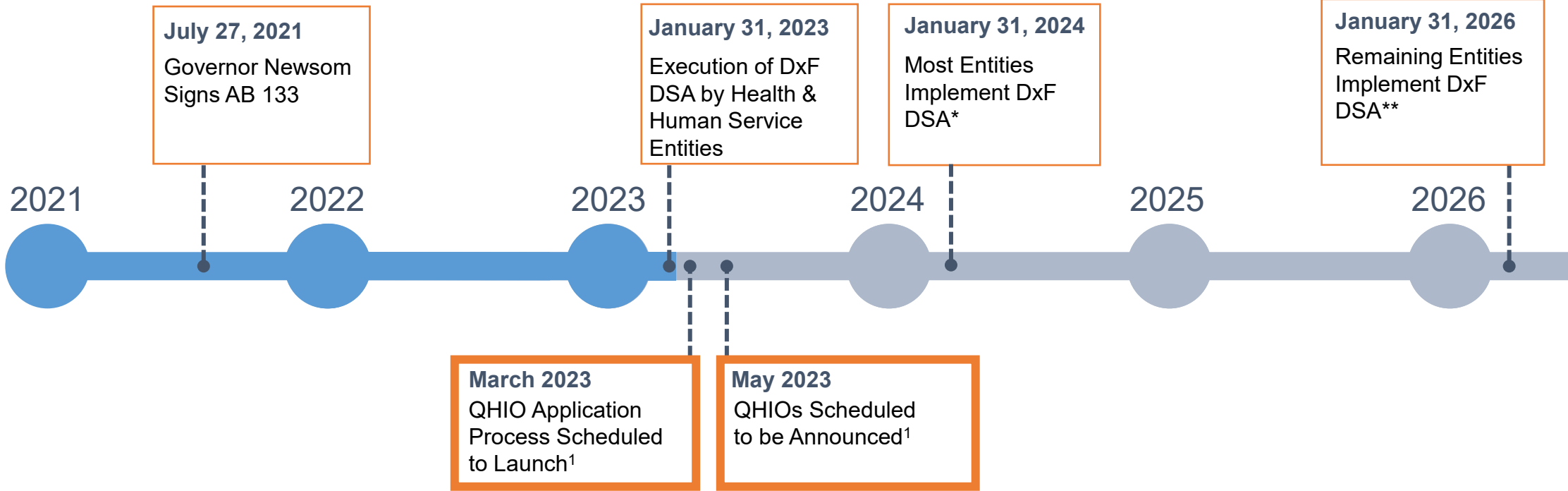
A. Organization Information

B. Privacy and Security

C. Functional Capabilities

D. Operations

QHIO 2023 Application Timeline



¹ Subject to change

Notes

*General acute care hospitals, physician organizations and medical groups, skilled nursing facilities, health service plans and disability insurers, Medi-Cal managed care plans, clinical laboratories, and acute psychiatric hospitals. County health, public health, and social services providers are encouraged to connect to the DxF.

**Physician practices of <25 physicians, rehabilitation hospitals, long-term acute care hospitals, acute psychiatric hospitals, critical access hospitals, and rural general acute care hospitals with <100 acute care beds, state-run acute psychiatric hospitals, and nonprofit clinics with <10 providers

QHIO Discussion

Public Comment Period

Reminder

CDII is inviting public comment on draft P&Ps through February 14, 2023.

The **draft P&Ps** are available in the **Public Comment** section of the [DxF website](#).

CDII has also released a [list of questions](#) for public input to guide comment. Please note that CDII appreciates all comments and recommendations and invites comments on other components of the P&Ps not addressed by the questions listed in this document. For the amended Privacy Standards and Security Safeguards P&P, CDII is only soliciting comments on the highlighted sections which indicate changes made to the version released in July 2022.

The [DxF Comment Template](#) is CDII's preferred method for the creation and submission of your comments.

To assist us with processing of your comments, **please name your completed Excel file as follows:** *[Your Organization Name]_[Your Last Name]_[Date Prepared]* and **transmit the file attached in an email to CDII@chhs.ca.gov.**

Closing Remarks

Appendix

Part A: Organization Information

#	Question	Criteria
1	Organization information (e.g., name, URL)	Functioning and up-to-date website
2	Documentation of incorporation and status	U.S. corporation in good standing
3	Description of current operations and clients	Current California clients and operations
4	Representative and participatory governance	Documented participatory governance
5	Signed DSA; no conflicting client agreements	Signed DSA and attested to no conflicts
6	List of subcontractors; no conflicting agreements	Attested to no conflicts
7	Documents reflecting financial health	Six months cash or cash equivalents on hand
8	Attest to \$2M/incident and \$5M/year insurance	Attested to insurance levels

Part B: Privacy and Security

#	Question	Criteria
1	Summary of information security program	Summary submitted
2	Information security organization chart	CISO reports to CxO
3	Information security policies	Policies reviewed and updated in 2021 or 2022
4	Information security certifications	National certification received by 10/31/2024
5	Attest to all data managed in United States	Attests all data managed in United States
6	HIPAA-reportable breaches in last 3 years	Two or fewer breaches
7	Approach to security risk assessments	Annually; most recent in 2021/2022
8	Approach to penetration testing	Annually; most recent in 2021/2022
9	Privacy policy	Reviewed/updated in 2021/2022
10	Business continuity and disaster recovery plans	Reviewed/updated in 2021/2022

Part C: Functional Capabilities (1)

#	Question	Criteria
1a	Managing identities	Manages 250,000+ identities
1b	Person matching	Clearly defined process to assess and improve patient matching logic
2	Managing participants	Manages participant registry with import/export capability
3	Nationwide network or framework	Participates in eHealthExchange, CareEquality or CommonWell Health Alliance
4a	Request for information: request	Two references confirm the organization's ability to construct a query consistent with DxF standards
4b	Request for information: response	Two references confirm the organization's ability to respond to a query consistent with DxF standards
5	Information delivery	Two references confirm the organization's ability to deliver information consistent with DxF standards

Part C: Functional Capabilities (2)

Requested Notification

#	Question	Criteria
6a	Receive ADT events from acute healthcare facilities	Current capability and ready to receive events by January 31, 2024 without assessing a fee
6b	Manage rosters of at-risk patients	Current capability or will achieve capability by April 30, 2024
6c	Match incoming ADT events to at-risk patients; delete events with no match	Current capability or will achieve capability by July 31, 2024
6d	Notify participants of events associated with their at-risk patients	Committed to achieving by July 31, 2024
6e	Share incoming ADT events with other QHIOs	Committed to achieving by October 31, 2024 without assessing a fee

Part D: Operations (1)

#	Question	Criteria
1	Communications	Agrees to follow promotional guidelines, share DSA updates with participants, and notify CDII of significant organizational changes
2	Cooperate with QHIO Program	Agrees to cooperate with CDII and other QHIOs
3	Non-discrimination	Agrees to offer services to all signatories who are technically compatible and able to pay the established fees
4	Onboarding grant progress reports and receipt of grant payments	Agrees to manage grant progress reports and payments
5	System performance and reliability	<ul style="list-style-type: none">• Offers at least two weeks' notice of scheduled downtime• Offers immediate notification of unscheduled downtime• Less than 10 hours of unscheduled downtime in past year

Part D: Operations (2)

#	Question	Criteria
6	Audit trails and transaction logging	<ul style="list-style-type: none">• Maintains audit logs of individual transactions• Maintains 12 months of transaction activity
7	Transaction volumes	<ul style="list-style-type: none">• Currently manages at least 25,000 transactions daily• Submits statement of growth plans
8	Monthly reports of activity	Agrees to submit monthly activity reports including transactions by type, active participants, unscheduled downtime, etc.
9	Annual attestation	Agrees to submit annual attestation