



## California Health & Human Services Agency Center for Data Insights and Innovation Data Exchange Framework Implementation Advisory Committee Meeting #8 Q&A Log (9:30 AM – 11:00 AM PT, July 20, 2023)

The following table shows comments that were entered into the Zoom Q&A by public attendees during the July 20 meeting:

Count	Name	Comment	Response
1	Chandra Konduru	In the Cal DxF Technical Reqs - Policies and Procedures pdf, it is mentioned in several places that it is encouraged to use FHIR to support Request and Responses as part of Data Exchange. does it mean we don't need to build interfaces using IHE profiles XCDR/XCA/XCPD? can you please provide clarification and confirmation on this?	No. The IHE profiles listed in the P&P as mandatory remain mandatory even if you choose to implement FHIR. IHE profiles may be deprecated in the future through the P&P amendment process as adoption of FHIR improves.
2	Chandra Konduru	is there any email that we can reaach out to send our queries related to Technical Implementation and get the clarification?	You can always send questions regarding DxF to CDII at cdii@chhs.ca.gov.
3	Chandra	If we build the interfaces to support Cal DxF Technical Implementation, how do we make these interfaces available in the data exchange hub for others to request information. can you provide some details on this	The Data Exchange Framework allows providers to use any health information exchange framework, any HIE or HIO, or any technology of their choosing to provide access to or exchange of health and social services information. It does not include any data hub or central repository. Instead, the Framework requires Participants to share health and social services information wth each other. If you have further questions, feel free to write to cdii@chhs.ca.gov.
4	Chandra Konduru	so we need to reach out to the participants listed in DSA agreement	There are options that may include nationwide networks and





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		in email and share our interfaces for them to exchange information?	frameworks, HIOs, and other mechanisms. CDII is also exploring creation of a Participant Directory as a means for organizations to share what mechanism they have chosen. You can follow progress on the Participant Directory at future IAC and other meetings.
5	TLM	Another suggestion is to reach out to the Physician Relations groups and Clinical Networks of large hospitals (like CHLA) that will allow you to jointly reach dozens to hundreds of smaller practices that may be less aware or less able to move on this as a priority	Thanks for your comment.
6	Chandra Konduru	do you have any implemented pilot program that we can take a look to understand Cal DxF Technical Framework using IHE profiles?	The IHE profiles are and have been in use by many organizations - eHealth Exchange, Carequality, and the California Trusted Exchange Network (CTEN) for example - for many years. You might look into the progress of those organizations.
7	INFO Account info@iehio.org	Hello my name is Rudy from the Inland Empire HIO, this is regarding the DSA. I have received from providers questions as to why a suborindate organization is required to be filled out even if there is no subordinate organization to include. Is there a workflow around this? Should they re-enter the information they included in the primary organization? Thank you.	Please forward your question to cdii@chhs.ca.gov so we can get you a detailed answer on how to proceed.
8	TLM	Thank you for the response. At core, there is both a 1) technology and 2)an ethical autonomy vs paternalism CA SB 1419 conflict with 21st Century Cures:  - Some major EHRs may not support release to portal/HIE only after review	Thank you for your comment.





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		and endorsement - Many providers attempting to hold out from the newer patient empowerment era are using 1419 as cover - This is not related to the portion of SB 1419 regarding minor record review by parents, rather to the acceptability of release of diagnostic testing results pending provider review	

**Total Count of Zoom Q&A comments: 8**