



**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 10 Chat Log (9:00AM – 11:00AM PT, October 31, 2023)**

The following comments were made in the Zoom chat log by Members of the Data Sharing Agreement Policies & Procedures Subcommittee and staff during the October 31 meeting:

09:09:40 From Deven McGraw To Everyone:

Congratulations to the QHIOs!

09:17:47 From Deven McGraw To Everyone:

Does the prohibition on selling of de-identified data also apply to QHIOs?

09:18:07 From Morgan Staines To Everyone:

My question, too, Deven.

09:21:25 From Stephanie Jamison, Greenway Health To Everyone:

Are EHR developers subjected to the same prohibitions as well?

09:26:08 From Diana Kaempfer-Tong To Everyone:

I second Morgan's comments.

09:26:15 From Helen Kim To Everyone:

Agree with Morgan S.' comment regarding using deidentified data for research purposes, including getting a fee for it.

09:27:19 From Helen Kim To Everyone:

The purpose of the DxF is to exchange data, not for research purposes even if deidentified and not for a fee.

09:28:07 From Jason Buckner To Everyone:

MX fully supports the CDII position of not selling de-identified data.

09:28:15 From Lee Tien To Everyone:

Agree with Helen Kim above

09:28:46 From Jason Buckner To Everyone:

Annually is reasonable.

09:28:59 From Deven McGraw To Everyone:

Agree with Jason

09:30:31 From Lee Tien To Everyone:

Is there a possibility of a triggered review? E.g. an incident occurs and it would be reasonable for entities to review in response?

09:31:29 From Morgan Staines To Everyone:

DHCS supports Diana K-T's suggestion of biannual review as a minimum.

09:31:55 From Steven Lane To Everyone:

Annual review makes sense.

09:32:44 From Mark Savage To Everyone:

+ 1 Deven--not just a periodic review, but also a review whenever a substantial change occurs warranting review at that time.

09:36:09 From Steven Lane To Everyone:

While we have not had academicians or other researchers specifically represented in these meetings, I agree with other commenters that we should look for opportunities to leverage the DxF, and the greater data access that it promises, to support research activities with all appropriate attention to individual privacy.

09:38:08 From Morgan Staines To Everyone:

Agree that events may require "off-schedule" review, but question whether DxF can or should define a trigger in P&Ps. Consideration of potential policy issues should be a normal part of a major incident response, but I don't know that we should try to dictate that sort of internal work by participants.

09:39:28 From John Helvey To Everyone:

Agree with Morgan

09:40:06 From Steven Lane To Everyone:

Also agree with Morgan

09:51:13 From Steven Lane To Everyone:

Makes sense.

09:51:14 From Courtney Hansen To Everyone:

Definition of Intermediary from Glossary: “Intermediary” means a health information exchange network, health information organization, or technology vendor that assists a Participant in the Exchange of Health and Social Services Information and adheres to the standards and policies established by the DSA and its Policies and Procedures as applicable to the services provided to the Participant. Examples might include nationwide networks or frameworks, vendors that provide applicable services, health information organizations including Qualified HIOs, or community information exchanges.

09:53:47 From Lee Tien To Everyone:

Which intermediaries are not Participants?

09:54:15 From Jonah Frohlich To Everyone:

some technology vendors may not be Participants

09:54:24 From Jonah Frohlich To Everyone:

but may be acting as intermediaries

09:54:34 From Courtney Hansen To Everyone:

Another example is an HIO that is helping Participants but did not sign the DSA.

09:55:17 From Lee Tien To Everyone:

What Mark Savage just said.

09:55:39 From Jonah Frohlich To Everyone:

@Mark Savage: That is indeed the intent here

09:56:37 From Rim Cothren, CDII CalHHS To Everyone:

Lee: Participants have (by definition) signed the DSA. Some intermediaries may serve health systems, plans, etc., but may not have signed the DSA. These are Intermediaries that are not Participants.

09:56:38 From Deven McGraw To Everyone:

QHINs (federal) can't charge one another, correct?

09:57:16 From Deven McGraw To Everyone:

QHINs can charge their "members" for services but can't charge one another, is my understanding.

09:59:01 From Lee Tien To Everyone:

Rim, appreciate that, I'm worried that individuals will be confused about who can do what, or surprised about what happens to their data.

10:00:09 From Rim Cothren, CDII CalHHS To Everyone:

Thanks, Lee. Yes, I agree there is potential for that. We'll try to keep that in mind.

10:09:40 From Jason Buckner To Everyone:

Listing one option is highly preferred.

10:19:41 From Steven Lane To Everyone:

It is anticipated that intermediaries might agree to enter and manage the directory entries of the participants / sub-participants they are supporting in their exchange?

10:33:24 From Sanjay Jain To Everyone:

I thought SNFs were required signatories.

10:33:28 From Louis Cretaro To Everyone:

Is there any way to connect to the NPI directory for an API for the providers?

10:36:29 From Jonah Frohlich To Everyone:

@Sanjay Jain: Only skilled nursing facilities that currently maintain electronic records are required signatories

10:37:19 From Sanjay Jain To Everyone:

Thanks Jonah

10:39:58 From John Helvey To Everyone:

Thank you Jason...Second this question

10:44:02 From Steven Lane To Everyone:

Question: Is there any update regarding potential penalties or disincentives for non-participation by entities that are required by statute to sign the DSA?