

CalHHS Data Exchange Framework Policy and Procedure

Subject: Participant Directory	
Status: Draft	Policy: OPP-14
Publication Date: TBD	Version:

I. Purpose

California Health and Safety Code (HSC) § 130290 was enacted in 2021 and establishes the creation of the California Health & Human Services Data Exchange Framework (“Data Exchange Framework”) to enable and require real-time access to or exchange of Health and Social Services Information among Participants “through any health information exchange network, health information organization, or technology that adheres to specified standards and policies.” The purpose of this Policy and Procedure is to establish obligations of Participants and the Center for Data Insights and Innovation (CDII) for providing, updating, storing, and communicating certain information concerning the network(s), health information organization(s), or technology(ies) Participants choose to use to Exchange Health and Social Services Information.

II. Policy

1. ESTABLISHING THE PARTICIPANT DIRECTORY

a. CDII shall establish a Participant Directory that allows Participants to:

i. Enter information concerning the Intermediary(ies) and/or technology(ies) the Participant chooses to use to provide Access to or Exchange of Health and Social Services Information under the Data Exchange Framework;

ii. Update and correct information on their choice(s) to maintain accuracy of the information in the Participant Directory; and

iii. Discover the Intermediary(ies) and/or technology(ies) other Participants have chosen to use to provide Access to or Exchange of Health and Social Services Information.

b. The Participant Directory shall also make available to Participants the following information:

i. If a signatory is not yet an active Participant because it chooses to exercise its option to delay providing Access to or Exchange of Health and Social Services Information under the Data Exchange Framework until January 31, 2026, as allowed by HSC § 130290 or the Requirement to Exchange Health and Social Services Information Policy and Procedure;

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ii. If a Voluntary Signatory has terminated the Data Sharing Agreement (“DSA”) pursuant to Section 15(b) of the DSA and is no longer an active Participant; and

iii. If a Participant is ceasing or has ceased operations and is no longer an active Participant.

2. ENTERING INFORMATION INTO THE PARTICIPANT DIRECTORY

a. Participants shall enter into the Participant Directory:

i. Information specified by CDII, including as listed in the procedures below concerning the Intermediary(ies) or technology(ies) they have chosen to use as soon as practicable, but not more than ten (10) business days after provision of Access to or Exchange of Health and Social Services Information under the Data Exchange Framework; and

ii. Updates or corrections to information entered by Participants into the Participant Directory on their choice(s) as soon as practicable, but not more than ten (10) business days following a change in information or discovery of inaccurate information.

b. Some Participants may delay providing Access to or Exchange of Health and Social Services Information under the Data Exchange Framework until January 31, 2026, under HSC § 130290 or the Requirement to Exchange Health and Social Services Information Policy and Procedure. These Participants shall exercise this choice by entering their choice into the Participant Directory.

c. A Participant that is a Voluntary Signatory that wishes to terminate the DSA shall notify CDII as specified in Section 15(b) of the DSA.

d. A Participant that is ceasing operations shall notify CDII in writing as soon as practicable, but not less than ten (10) business days prior to ceasing operations.

e. Participants shall update the list of subordinate organization(s) included in a signed DSA upon any change in the authority of a signatory to bind the subordinate organization(s) to the DSA, such as a change in subordinate organization ownership.

This policy shall be effective January 31, 2024.

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III. Procedures

1. ESTABLISHING THE PARTICIPANT DIRECTORY

a. CDII shall establish the Participant Directory which comprises:

i. A listing of Participants and Participants' choices for providing Access to and Exchange of Health and Social Services Information under the Data Exchange Framework; and

ii. A technology solution or application that CDII and Participants may use to enter information into and communicate information contained in the listing.

b. The Participant Directory listing shall contain an entry for each Participant that, to the extent available, includes:

i. The name of the Participant as identified by the Participant and included on the Participant's signed DSA;

ii. A unique identifier assigned to the Participant by the Participant Directory;

iii. The Intermediary(ies) or technology(ies) the Participant has chosen to use to provide Access to or Exchange of Health and Social Information under the Data Exchange Framework for the following Exchange types as established in the Technical Requirements for Exchange Policy and Procedure:

a. Submitting a Request for Information,

b. Receiving Information Delivery, and

c. Submitting a request for Notification of ADT Events;

iv. Technical contact information if the Participant has chosen to use Point-to-Point Interfaces to its own technology(ies) for any Exchange type;

v. An indication of whether the Participant has:

a. Chosen to exercise its option to delay provision of Access to or Exchange of Health and Social Services Information under the Data Exchange Framework until January 31, 2026, as allowed by HSC § 130290 or the Requirement to Exchange Health and Social Services Information Policy and Procedure,

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b. Terminated the DSA pursuant to section 15(b) of the DSA, if a Voluntary Signatory, along with the effective date of termination, and

c. Ceased operations, along with the effective date operations will cease or have ceased.

c. The Participant Directory listing and documentation on its format shall be available for download from the CDII website and from the Provider Directory application.

d. An updated Participant Directory listing shall be made available at least weekly.

e. The Participant Directory application shall be available to all Participants.

f. The Participant Directory application shall enable a Participant to enter information concerning their choices for providing Access to or Exchange of Health and Social Services Information under the Data Exchange Framework indicated in paragraphs III.1.b.iii, III.1.b.iv, and III.1.b.v above.

g. The Participant Directory application shall enable a Participant to update information previously entered concerning their choices for providing Access to or Exchange of Health and Social Services Information under the Data Exchange Framework indicated in paragraphs III.1.b.iii, III.1.b.iv, and III.1.b.v above.

2. ENTERING INFORMATION INTO THE PARTICIPANT DIRECTORY

a. Participants shall enter into the Participant Directory application their choice(s) of Intermediary(ies) or technology(ies) for all types of Exchange required by the Technical Requirements for Exchange Policy and Procedure as follows:

i. Participants shall enter a choice for receiving a Request for Information that will also be used by the Participant to provide a response to the Request for Information.

ii. Participants that wish to receive delivery of Health and Social Services Information, for example in response to an Order or Referral, shall enter a choice for receiving Information Delivery.

iii. Participants that are Hospitals or Emergency Departments shall enter a choice for receiving requests for Notification of ADT Events that will also be used by the Participant to provide Notifications of ADT Events.

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iv. Participants that are skilled nursing facilities may enter a choice for receiving requests for Notification of ADT Events that will also be used by the Participant to provide Notifications of ADT Events.

b. For each choice in paragraph III.2.a, the Participant shall enter into the Participant Directory application the name of the Intermediary or technology they use to provide Access to or Exchange of Health and Social Services Information as follows:

i. A Participant may indicate that the Participant has chosen to use Point-to-Point Interfaces to its own technology;

ii. A Participant may identify a Nationwide Network or Framework, a Qualified Health Information Organization, or any Participant acting as an Intermediary; or

iii. A Participant may identify an Intermediary that is not a Participant.

c. A Participant that chooses to use Point-to-Point Interfaces to its own technology shall enter into the Participant Directory application information for a technical point of contact that may be used by other Participants for establishing Access to or Exchange of Health and Social Services Information.

d. A Participant that identifies an Intermediary that is not a Participant or a Nationwide Network or Framework shall cooperate with CDII and make best effort to obtain and provide to CDII such additional information about the Intermediary as may be requested by CDII to facilitate including the Intermediary in the Participant Directory.

e. Participants are solely responsible for the accuracy and completeness of choices and associated information they enter into the Participant Directory. Participants shall update information as soon as practicable, but not more than ten (10) business days following a change in information or discovery of inaccurate information.

3. ADDITIONAL INFORMATION FOR CERTAIN PARTICIPANTS

a. A Participant that chooses to exercise its option to delay providing Access to or Exchange of Health and Social Services Information under the Data Exchange Framework until January 31, 2026, as allowed by HSC § 130290 or the Requirement to Exchange Health and Social Services Information Policy and Procedure:

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i. Shall enter this choice in the Participant Directory application as soon as practicable, but in no case more than ten (10) calendar days, after the effective date of this policy or after signing the DSA, whichever is later;

ii. May delay entering into the Participant Directory application the information listed in paragraphs III.2.a, III.2.b, III.2.c, and III.2.d until January 31, 2026; and

iii. Shall enter into the Participant Directory application information listed in paragraphs III.2.a, III.2.b, III.2.c, and III.2.d, as well as paragraph III.3, if applicable, no later than upon beginning to provide Access to or Exchange of Health and Social Services Information under the Data Exchange Framework.

IV. Definitions

All capitalized terms shall have the meaning set forth in the Data Exchange Framework Glossary of Defined Terms.

The following capitalized terms are new to this Policy and Procedure and included here to facilitate public comment. Once this Policy and Procedure and these definitions are finalized, these definitions will be moved to the Data Exchange Framework Glossary of Defined Terms.

“Participant Directory” means a listing of Participants, Participants’ choices for providing Access to and Exchange of Health and Social Services Information under the Data Exchange Framework, and whether the Participants are actively exchanging Health and Social Services Information under the Data Exchange Framework, as well as the technology solution or application used by CDII and Participants to enter and communicate information contained in the listing.

“Point-to-Point Interface” means a technical interface between two Participants using their own technologies, usually for the exclusive use of the Participants, which allows electronic Access to or Exchange of Health and Social Services Information using standards specified and agreed to by the Participants and in compliance with applicable Policies and Procedures, including the technical measures required to ensure secure Exchange.

V. References

[California Health and Safety Code § 130290](#)

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Requirement to Exchange Health and Social Services Information Policy and Procedure

Technical Requirements for Exchange Policy and Procedure

VI. Version History

No.	Date	Author	Comment
	November 15, 2023	CalHHS CDII	Version released for public comment

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