

Data Exchange Framework (DxF) Feedback offers organizations and individuals the opportunity to provide feedback related to the DxF. The feedback is collected via an online form which asks a series of questions to collect the feedback and assist CDII in its review.

If you are interested in offering feedback on the DxF, complete the form found in the DxF Feedback section of CDII's DxF webpage. CDII will send an email acknowledgement of receipt of your feedback within three (3) business days of your submission. This acknowledgement will inform you as to CDII's initial assessment of your feedback and will include the next steps if applicable. If you do not receive an acknowledgement email from CDII within three (3) business days, please reach out to CDII at dxf@chhs.ca.gov and/or resubmit the form.

You will not receive an automated confirmation upon submission of the form, however COII will send an email and achonic dependent within three (1) business days of your submission. This email will inform you as to COII's indian searcher of your debtack at out information three (1) business days, of your submission. This email will inform you as to COII's indian searcher of your debtack at out information three (1) business days, of your submission. This email will inform you as to COII's indian searcher of your business days, places as and out to COII as a data of the data at out information three (1) business days, places are naith out to COII a single data. Type and or resubmit the top to the search holf factors place to the SOI to report to Factor (1) as require by the Banch holf factor holy and Proceedure, places area at an email to <u>data data data data</u> and the solitest to the SOII as require the banch holf factors of SOII to report to Factor (2) and one search for one search to form one located by to COII and ending the ending and proceedure, places area at a ward to <u>data data data</u> and the solitest data (2) COII and the factor factor form any be public records subject to the California Public Records Act. Places do not submit confidential information, including personal and/or medical information. The information collected by COII on this feedback and collected by COII and the records at the solite to the California Public Records Act. Places do not submit and confidential information, including personal and/or medical information. The information and/or medical information and/or medical information and/or medical information. The information and/or medical information and/or medical information and/or medical information. The information and/or medical information and/or medical information a
by the Brach Notification Policy and Proceedure, please sand an email to <u>difficients caper</u> with the subject line SREACH NOTIFICATION" CDIT recommends that you Ring that email as urgent or highly pleating. NOTIE The information collected by CDII on this feedback from may be public records subject to the California Publi Records Act. Please do not submit confidential information, including personal and/or medical information. * Srequired 1. First Name Enter your answer 2. Last Name Enter your answer 4. Email Address
Records Act. Please do not submit confidential information, including personal and/or medical information. * Required 1. First Name Enter your answer 2. Last Name Enter your answer 4. Email Address
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5. Do you represent an organization or are you submitting this feedback as an individual? st
O Organization
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This form should not be used to report a Breach of HSSI. In the event you have a Breach of HSSI to report to CDII, as required by the Breach Notification Policy and Procedure, please send an email to dxf@chhs.ca.gov with the subject line "BREACH NOTIFICATION." CDII recommends that you flag that email as urgent or high priority.

NOTE: The information collected by CDII on this feedback form may be public records subject to the California Public Records Act. Please do not submit confidential information, including personal and/or medical information.

