

Data Exchange Framework

Technical Advisory Subcommittee (TASC) Meeting #1C: Social Data Exchange Focus Group

Thursday, April 24, 2025

12:00 PM – 1:00 PM PT



Members are strongly encouraged to **enable their video** to foster increased interaction and discussion.



The Vision for Data Exchange in California

Once implemented across California, the Data Exchange Framework (DxF) will create new connections and efficiencies between health and social services providers, improving whole-person care.

The DxF is California's first-ever statewide Data Sharing Agreement (DSA) that requires the secure and appropriate exchange of health and human services information to enable providers to work together and improve an individual's health and wellbeing.



Agenda



- 12:00 PM
Welcome & Roll Call
- 12:05 PM
What We Heard Last Meeting
- 12:20 PM
Capabilities in the Social Data Exchange Reference Architecture
- 12:50 PM
Public Comment
- 12:55 PM
Next Steps and Closing Remarks

Social Data Exchange

TASC Members



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Name	Organization
Rim Cothren (Chair)	Center for Data Insights and Innovation
Cindy Bero	Manatt Health Strategies
Sophia Chang, MD	Center for Data Insights and Innovation
Mary-Sara Gordon Jones	Independent Consultant
Irene Lintag Alvarez	Aliados Health
Harman Basra	Sonoma Community Action Network
Hans J Buitendijk	Electronic Health Record Association (EHRA)
Gabriel Cate	WellSky
Lawrence Chan	CA Dept of Public Health
Michael Deering	LANES
Alexis Fernández Garcia	CA Dept of Social Services
Eric Jahn	Bitfocus, Inc.
Alana G Kalinowski	211 San Diego
Michael Marchant	Sutter Health

Name	Organization
Benjamin R. Martin, JD	Project Angel Food
Eric Nielson	California Welfare Director's Association – CWDA
Aparna Ramesh	CA Dept of Social Services
Ken Riomales	CalMHSA
James Shalaby	Elimu Informatics, Inc
Ambrish Sharma	Interface Children & Family Services
Julie Silas	Homebase
Corey Smith	Gravity Project
Joe Sullivan	Emergency Service Medical Authority
Dr. Brian Thomas	The County of Alameda
Chris Ticknor	Orange County United Way
Lee Tien	Electronic Frontier Foundation
Anwar Zoueihid	Partners in Care Foundation

Public Comment Opportunities

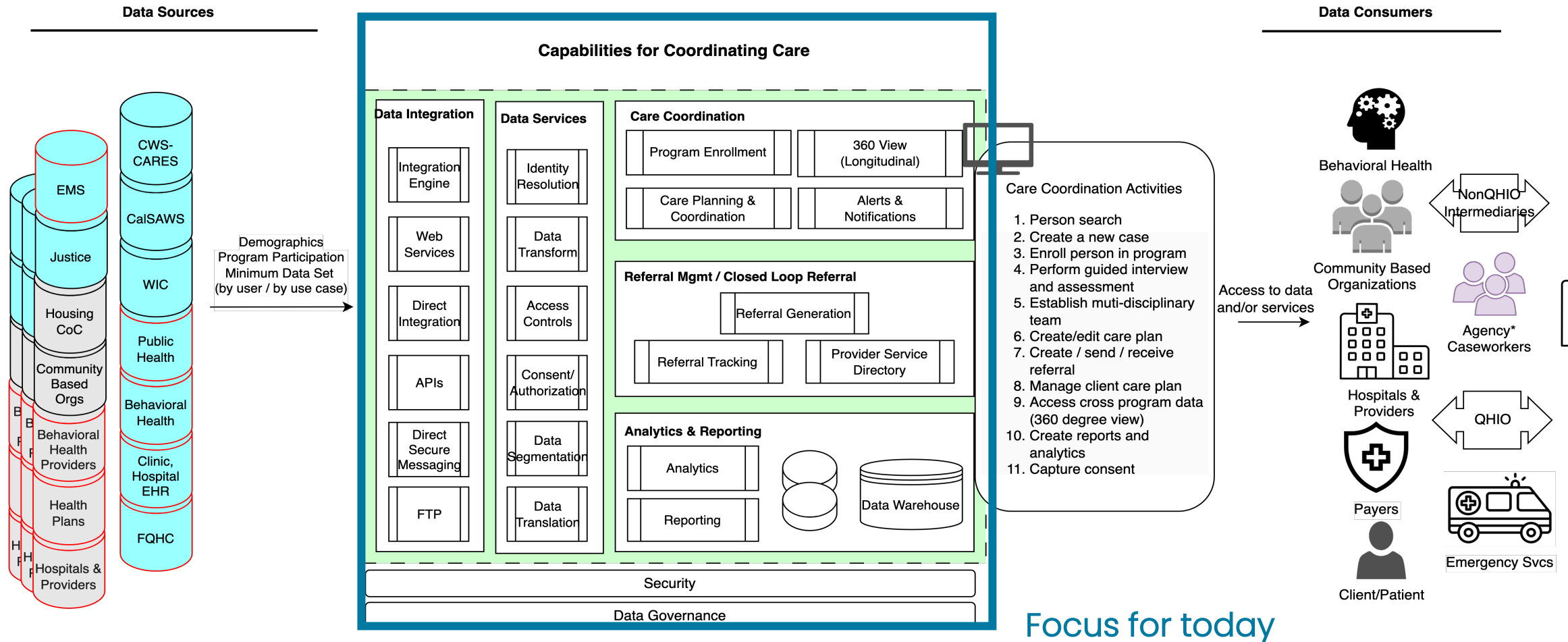
Public comment will be taken during the meeting at the approximate time listed on the agenda and limited to the total amount of time allocated for public comment.

Members of the public may also use the Zoom's Q&A feature to ask questions or make comments during the meeting, or can email their questions or comments to DxF@chhs.ca.gov.

What We Heard Last Meeting

- There is a need for **governance structures** and mechanisms to manage and regulate the sharing of social data.
- Privacy and consent management are complex, and there is a need to **balance convenience and privacy**.
- **Standardized code sets and definitions of attributes** should be included in the architecture to ensure consistency.
- **FQHCs, FQHC lookalikes, and rural health centers** should be listed and included under community health centers.
- **School-based healthcare systems** should be included as part of the data sources to capture a broader range of social and health data. Regulatory requirements need to be expanded beyond HIPAA to include FERPA and other regulations.
- **The question of whether to use an opt-in or opt-out consent model** for data sharing in the context of social and health data exchange needs to be addressed.
- There is a need for **policy guidance on sharing public eligibility data** to ensure that data exchange is conducted within a clear regulatory framework.

Health and Social Data Exchange Reference Architecture



Legend

Blue - County
Gray - Community-based Organization
Red Outline - HIPAA Organization
Agency* Caseworkers - live models include child welfare; human services; supplemental nutritional assistance for women, infants and children; and housing.

Description of Figure on Prior Slide

The model depicts the data sources, data consumers and capabilities required for care coordination across health and social care. Data sources include; CHW-CARES, CalSAWS, WIC, Public Health, Behavioral Health, Clinic HER, Justice systems, EMS, Housing CoCs, Community Based Organizations, Behavioral Health providers, Health Plans, and Hospitals and providers.

Capabilities include; Data Integration services; Integration Engine, Web Services, Direct integration, APIs, Direct Secure Messaging, and FTPs. Data Services such as Identity Resolution, Data Transformation, Access Controls, Consent/ Authorization, Data Segmentation and Data Translation. Care Coordination capabilities include; Program Enrollment, Care Planning & Coordination, 360 View, and Alerts & Notification. Data Analytics and Reporting services including data warehouse. Referral Management services include; Referral Generation, Referral Tracking, and Provider Directory. Underlying the capabilities is Security and Data Governance.

Care Coordination Activities supported by the capabilities include: person search, create a new case, enroll person in program, perform guided interview and assessment, establish multi-disciplinary team, create/edit care plan, create / send / receive referral, manage client care plan, access cross program data (360 degree view), create reports and analytics, capture consent.

Data Consumers include; Community Based Organizations, Behavioral Health Providers, Healthcare Providers, Agency case workers, Payers, Emergency Services, QHIO, and Non-QHIO Intermediaries.

The Legend identifies county data sources as blue databases, community data sources as gray databases, red outlines indicate HIPAA organizations and agencies caseworkers in live models include child welfare, human services, housing and supplemental nutritional assistance for women, infants and children.

Questions for Today

- What capabilities are missing?
- Are there any capabilities we don't need?
- Are there other attributes (e.g., regulatory requirements, industry standard code sets) of these capabilities that we should recognize?

Public Comment

Next Steps

CDII will:

- Post meeting materials and recording to the DxF webpage.
- Revise the Social Data Exchange Architecture based on today's discussion.
- Distribute the Social Data Exchange Architecture and supporting materials for your review.

Members will:

- Review and familiarize themselves with the Social Data Exchange Reference Architecture.
- Be prepared to discuss specific recommendations to the Social Data Exchange Reference Architecture.

Upcoming Meetings

Social Data Exchange TASC Focus Group	Date
Meeting #4	Thursday, May 8, 2025, 12:00 PM – 1:00 PM PT