

# CalHHS Data Exchange Framework Policy and Procedure

Subject: Participant Directory	
Status: <del>Final</del> Draft	Policy: OPP-14
Publication Date: April 12, 2024 TBD	Version: 1.0.12

## I. Purpose

California Health and Safety Code § 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)~~ California Department of Health Care Access and Information (“HCAI”) 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~~ MAINTAINING THE PARTICIPANT DIRECTORY

a. ~~CDII-HCAI~~ shall ~~establish~~ maintain 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 Health and Safety Code § 130290(b)(2) 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 on or after January 31, 2024, 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 ~~CDH~~ HCAI, including as listed in the procedures below the Intermediary(ies) or technology(ies) they have chosen to use, as soon as practicable, but not more than ten (10) business days after Access to or Exchange of Health and Social Services Information under the Data Exchange Framework has been made available to other Participants; and

ii. Updates or corrections to information entered by the Participant 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 Health and Safety Code § 130290(b)(2) or the Requirement to Exchange Health and Social Services Information Policy and Procedure. If a Participant is both permitted to and elects to delay Access to and Exchange of Health and Social Services Information until January 31, 2026, the Participant shall enter this election into the Participant Directory.

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

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

e. Participants that are signatories to the DSA 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.

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f. Participants that are signatories to the DSA shall identify and maintain within the Participant Directory the names of subordinate organization(s) that are also Participants, including as listed in the procedures below the Intermediary(ies) or technology(ies) they have chosen to use.

This policy shall be effective upon publication.

## III. Procedures

### 1. ~~ESTABLISHING-MAINTAINING~~ THE PARTICIPANT DIRECTORY

a. ~~CDH-HCAI~~ shall ~~establish-maintain~~ 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 web-based application that Participants shall 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;

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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, if permitted by Health and Safety Code § 130290(b)(2) or the Requirement to Exchange Health and Social Services Information Policy and Procedure,

b. Terminated the DSA pursuant to section 15(b) of the DSA on or after January 31, 2024, if a Voluntary Signatory, along with the effective date of termination, and

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

c. The Participant Directory listing and documentation on its format shall be publicly available for download from ~~the CDH website~~ a publicly-accessible location maintained by HCAI.

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

e. The Participant Directory application shall be available to all Participants as a web-based application over the Internet. The application shall use high confidence authentication and secure encrypted channels for web-based access.

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.

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### 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 and Participants that are Intermediaries that serve Participants that wish to receive delivery of Health and Social Services Information shall enter a choice for receiving Information Delivery.

iii. Participants that are Hospitals or Emergency Departments and Participants that are Intermediaries that serve Participants that are Hospitals or Emergency Departments shall enter a choice for receiving requests for Notification of ADT Events.

iv. Participants that are skilled nursing facilities may enter a choice for receiving requests for Notification of ADT Events. Participants that are Intermediaries that serve one or more skilled nursing facility(ies) that support Notifications of ADT Events shall enter a choice for receiving requests for Notification 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;

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

iv. A Participant may indicate that a type of Exchange does not apply to the Participant if:

a. The type of Exchange is not required of the Participant by the Technical Requirements for Exchange Policy and Procedure; or

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b. The Participant does not Maintain Health and Social Services Information.

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 ~~CDH-HCAI~~ and make best effort to obtain and provide to ~~CDH-HCAI~~ such additional information about the Intermediary as may be requested by ~~CDH-HCAI~~ to allow ~~CDH-HCAI~~ to determine whether the Intermediary can be included in Participant Directory choice(s) for the designated Exchange type(s). It is the responsibility of Participants that use Intermediaries that are not Participants to ensure the Intermediary provides Access to or Exchange of Health and Social Services Information on behalf of the Participant in compliance with the DSA and its Policies and Procedures.

e. A Participant that is a signatory to the DSA shall identify and maintain within the Participant Directory application:

i. The names of subordinate organization(s) that are also Participants;  
and

ii. The information listed in paragraphs III.2.a, III.2.b, III.2.c, and III.2.d for all subordinate organization(s).

f. Subordinate organization(s) to a signatory to the DSA may have choices different than the signatory and other subordinate organizations of the signatory for any or all types of Exchange listed in paragraph III.2.a.

g. Participants may use methods other than those listed in the Participant Directory listing to Exchange Health and Social Services Information if both Participants agree to an alternative method and the agreed-to method complies with all Policies and Procedures, including the Technical Requirements for Exchange Policy and Procedure.

h. 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.

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## 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 Health and Safety Code § 130290(b)(2) or the Requirement to Exchange Health and Social Services Information Policy and Procedure:

i. Shall enter this choice in the Participant Directory application as soon as practicable, but in no case more than ten (10) business 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.

## V. References

California Health and Safety Code § 130290

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
1.0	January 18, 2024	CalHHS <u>Center for Data Insights and Innovation (CDII)</u>	Final

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1.0.1	April 12, 2024	CalHHS CDII	Adjusted III.3.a.i to align with policy statement in II.2.a.i and updated effective date statement.
<u>1.0.2</u>	<u>TBD</u>	<u>CalHHS CDII</u>	<u>Draft. Amended to change “CDII” to “HCAI” throughout the document to reflect the transfer of administration and management of the DxP from CDII to HCAI.</u>