

Data Exchange Framework

Technical Advisory Subcommittee (TASC)
Meeting #2D



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

Tuesday, June 4, 2024

2:00 PM - 3:00 PM PT





The Vision for Data Exchange in California

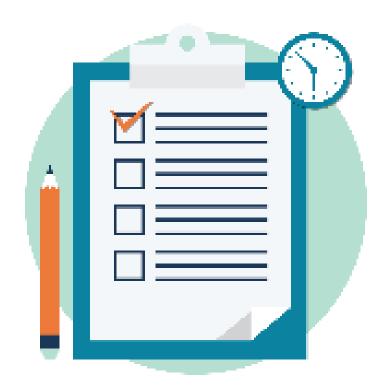
The Data Exchange Framework (DxF) creates new connections and efficiencies between health and social services providers, improving whole-person care.

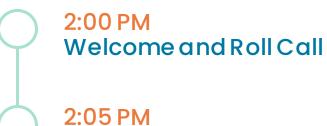
The DxF is California's first-ever statewide Data Sharing Agreement (DSA) that requires the secure and appropriate exchange of health and human services information to enable providers to work together and improve an individual's health and wellbeing.





Agenda





ADT Event Notification Strategy Recommendations

2:50 PM Public Comment

2:55 PM
Next Steps and Closing Remarks



TASC Members



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Name	Organization
Rim Cothren (Chair)	Center for Data Insights and Innovation
Cindy Bero	Manatt Health Strategies
Hans Buitendijk	Oracle (EHRA)
Cassie-Ann Bush	Adventist Health
Sarah DeSilvey	Gravity Project
Mohit Ghose	Anthem Blue Cross
Prashant Gupta	LabCorp
John Helvey	SacValley Medshare

Name	Organization
Kimberly Krause	Providence Administrative Consulting Services
Michael Marchant	UC Davis
Kameron Mims- Jones	Nourish California
Chris Muir	Office of the National Coordinator for Health IT
Ken Riomales	CalMHSA
Jess Sanford	California Department of Public Health
Hanan Scrapper	People Assisting the Homeless (PATH)
Joe Sullivan	California EMS Authority
Brian Thomas	Alameda County



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 on May 21, 2024

- There are challenges with managing content of rosters.
- Many entities participating in the DxF, especially social service organizations, may have limited resources to implement the strategies the TASC is considering and may benefit from ongoing resource support.
- The DxF should consider establishing a certification process to build trust among DxF Participants
 and ensure that all Participants have the appropriate privacy and security capabilities in place.
- The ADT notification approach under the DxF should be flexible enough to allow different providers using different technologies to incorporate it into their operational workflows.
- QHIOs might be one way to support ADT event notification delivery.
- The strategy for ADT event notifications should be informed by privacy considerations related to sharing of sensitive data across platforms that may not be compliant.
- The DxF strategy should consider the need for individuals to consent to notifications
- If there is flexibility, DxF could direct ADTs using four methods: rosters, patient's expressed preferences (conditions for participation in CMS rule), where the individual has previously been seen, or geography.



Reminder: Today's Objective

Make recommendations to CDII to improve the event notification strategy under the DxF that might include:

- new requirements for technical infrastructure,
- technical delivery and content standards, and
- the roles of various DxF Participants

considering the current California landscape, DxF requirements, and nationwide initiatives.



ADT Event Notification Strategy Recommendations

ADT Event Notification Strategy Survey

On Friday, May 24, 2024, CDII administered an 11-question survey to TASC members.
The survey asked TASC Members to weigh-in on the following topics for discussion at today's meeting:

- Architecture: Currently, DxF allows hospitals, EDs, and SNFs to use any intermediary or technology to send notifications of admissions and discharges. Should DxF utilize a single, centralized service, a small number of collaborating and cooperating intermediaries (such as QHIOs), or any intermediary or technology to collect admission and discharge events, collect requests for notifications of those events, and send notifications to DxF Participants?
- Requests for Notifications: Currently, DxF requires participants to submit a roster of patients if they wish to receive admission and discharge notifications for these individuals. Should DxF send notifications for patients found on rosters submitted by DxF participants, to participants identified by the patient, to participants have care or payer relationship with the patient as determined by some means other than a roster or patient request?
- Transport Methods: Currently, DxF does not specify a standard for sending an admission or discharge event to a QHIO or other intermediary. DxF also does not specify a standard for the notification sent to a DxF participant. Should DxF specify technical standards for how events are sent to a notification service or intermediary (e.g, HL7 v2.5.1 message) or specify technical standards for how notifications are sent to DxF participants (e.g. DIRECT secure message)?
- Content Standards: Currently, DxF provides high-level guidance on what must be contained in an event message or notification. Should DxF specify content standards for events sent to a notification service or intermediary (e.g., the elements in an HL7 v2.5.1 message that must contain data), or specify content standards for notifications sent to a DxF Participant (e.g., data that must be included in a DIRECT secure message)?



Survey Results: Requests for Notifications

Respondents recommend that multiple methods of identifying individuals should be available.

Question: Currently, DxF requires participants to submit a roster of patients if they wish to receive admission and discharge notifications for these individuals. Rate your recommendation for how these notifications should be sent.

Patients Identified	Use Exclusively	As One Option	Do Not Use
DxF should send notifications for patients found on rosters submitted by DxF Participants.	2	5	0
DxF Should send notifications to participants identified by the patient.	0	6	1
DxF should send notifications to participants/intermediaries near the address identified with the patient.	1	4	2
DxF should send notifications to participants that have care or payer relationship with the patient as determined by some means other than a roster or patient request.	0	6	1





Survey Results: Transport Methods

Survey respondents recommend specifying a standard but allowing for other options.

Question: Currently, DxF does not specify a standard for sending an admission or discharge event to a QHIO or other intermediary. DxF also does not specify a standard for the notification sent to a DxF participant. Rate your recommendation on standards for sending and receiving events and notifications.

Technical Standards	Specify a Single Standard	Specify at Least One Standard But Keep Options	Do Not Specify
DxF should specify technical standards for how events are sent to a notification service or intermediary (e.g. HL7 v2.5.1 message)	1	6	0
DxF should specify technical standards for how notifications are sent to DxF Participants (e.g., DIRECT secure message).	2	5	0



Survey Results: Content Standards

Survey respondents recommend a single content standard for events and notifications.

Question: Currently, DxF provides high-level guidance on what must be contained in an event message or notification. Rate your recommendations on standardizing the content of event messages and notifications.

Content Standards	Require A Spec	High Level Guidance	Do Not Specify
DxF should specify content standards for events sent to a notification service or intermediary (e.g., the elements in an HL7 v2.5.1 message that must contain data)	5	2	0
DxF should specify content standards for events sent to a DxF participant (e.g., data that must be included in a DIRECT secure message)	4	3	0



Survey Results: Architecture

There was no consensus recommendation.

Question: Currently, DxF allows hospitals, EDs, and SNFs to use any intermediary or technology to send notifications of admissions and discharges. Rank your preference among differing architectural choices.

Approaches	Ranking by Respondent	Avg
DxF should utilize a single, centralized service to collect admission and discharge events, collect requests for notifications of those events, and send notifications to DxF participants.	1, 1 2, 2 3, 3, 3	2.1
DxF should utilize a small number of collaborating and cooperating intermediaries , such as QHIOs, to collect admission and discharge events, collect requests for notifications of those events, and send notifications to DxF participants.	1, 1, 1, 2, 3, 3, 3	2.0
DxF should allow hospitals, EDs, and SNFs to use any intermediary or technology they choose to collect admission and discharge events, collect requests for notifications of those events, and send notifications to DxF participants.	1, 1, 2, 2, 2, 2 3	1.9





Public Comment

Members of the public must "raise their hand" and Zoom facilitators will unmute each member of the public for them to share comments.

The Chair will call on individuals in the order in which their hands were raised.

Individuals will be recognized for up to two minutes and are asked to state their name and organizational affiliation at the start of their remarks.

If you logged on via **Zoom interface**

Press "Raise Hand" in the "Reactions" button on the screen

If selected to share your comment, you will receive a request to "unmute;" please ensure you accept before speaking

If you logged on via phone-only

Press "*9" on your phone to "raise your hand".

Listen for your <u>phone number</u> to be called by the moderator.

If selected to share your comment, please ensure you are "unmuted' on your phone by pressing "*6".



Next Steps

CDII to:

 Document the discussions and recommendations of the TASC and consider next actions.

Upcoming Meetings

- CDII is scheduling TASC Series 3, which will be focused on technical strategies for Social Services data exchange.
- Meeting information will be posted to the CDII DxF webpage once confirmed.

