California's Data Exchange Framework: Data Sharing Agreement and Policies & Procedures

Updated January 2024

Overview

California's Data Exchange Framework (DxF) is the **first-ever statewide data sharing agreement** that will accelerate and expand the exchange of **health and social services information** among health care entities, government agencies, and social service organizations beginning **January 31, 2024.**

Signing the Data Sharing Agreement (DSA) is the **first step** in implementing the DxF. By signing the DSA, organizations agree to follow a common set of terms, conditions, and obligations as set forth in the DxF Policies & Procedures (P&Ps).

The DxF requires certain entities to **exchange or provide access to information** in real-time beginning January 31, 2024. **These entities include general acute care and psychiatric hospitals, physician organizations and medical groups, skilled nursing facilities (SNFs), clinical labs, and health care service plans and Medi-Cal managed care plans.** Other mandatory entities, such as physician practices with fewer than 25 physicians, have until January 31, 2026 to fully implement the DxF. **Reference this DxF FAQ for more information.**

Designated intermediaries, **Qualified Health Information Organizations (QHIOs)**, are available to help DxF participants meet some or all of their DSA requirements for secure data exchange.

Key provisions of the Data Sharing Agreement and Policies & Procedures

The DSA is a signed agreement and shared commitment between organizations, including both mandatory and voluntary signatories, to securely and appropriately share information. Voluntary entities, such as county agencies and community-based organizations, are encouraged to sign the DSA and begin implementation of the DxF by January 31, 2026.

The **P&Ps define "the rules of the road"** to govern and establish standards on how information is to be exchanged under the DxF. They have been under development since early 2022 and **continue to be refined in 2024** through a collaborative public process. Visit our website for more information about the policies and resources listed in this fact sheet.









Connecting for Better Health Advancing data sharing to improve the health of all Californians

The DxF Policies & Procedures include the topics listed below, as of January 31, 2024. For the full list of P&Ps, visit the DxF homepage.

Breach notification (<u>P&P</u> <u>OPP-3</u>) Permitted, required, and	Participants must notify CalHHS Center for Data Insights and Innovation and any affected participants of any breach, in addition to complying with all other applicable breach notification laws. Participants are required to share data for purposes related to
prohibited purposes(<u>P&P</u> <u>OPP-4</u>)	Treatment, Payment, some of the Health Care Operations activities as defined under HIPAA, and Public Health Activities without patient authorization and are permitted to share data where allowed by law and subject to patient authorization. Participants cannot access information through the DxF with the intention of selling that data.
Requirement to exchange health and social services information (<u>P&P OPP-5</u>)	Participants have an obligation to share certain data with all other participants, unless they do not have the data requested or cannot share it under law.
Individual access services (<u>P&P OPP-7</u>)	Individuals have the right of access to inspect and obtain a copy of their data maintained by any Participant, except where the Participant has sufficient grounds to deny access under applicable law.
Data elements to be exchanged (<u>P&P OPP-8</u>)	Defines the health and social services information that each type of entity is required to share, such as claims, encounter, and clinical data.
California information blocking prohibitions (<u>P&P</u> <u>OPP-10</u>)	Participants are prohibited from interfering with access, exchange, or use of health and social services information for required purposes. No participant shall engage in information blocking, as defined in the Federal Information Blocking Regulations.
Participant directory (<u>P&P</u> <u>OPP-14</u>)	Establishes a Participant Directory that allows Participants to share their primary intermediary and/or technology preferences for each type of exchange.
Fees (<u>P&P OPP-15</u>)	Participants may not charge fees to exchange health and social services information for Required Purposes and for electronic Individual Access Services, but they may charge fees for Permitted Purposes to the extent permissible under Applicable Law.





