



Manifest
MEDEX

California Providers Are Required to Share Health Information in Real-Time by 2024. Are You Ready?

Join Manifest MedEx to help meet your data sharing requirements under AB 133 and the CalHHS Data Exchange Framework.

What is AB 133?

AB 133 is a California state law that requires most California health care organizations to exchange or provide access to health information with each other in real-time for treatment, payment, or health care operations (TPO) by 2024 through the CalHHS Data Exchange Framework (DxF).

What is the Data Exchange Framework (DxF)?

The DxF comprises a single Data Sharing Agreement (DSA) and common set of Policies and Procedures (P&Ps) that will govern this exchange of health and social services information among healthcare entities and government agencies beginning January 31, 2024.

The DxF and DSA were developed with input from a broad set of stakeholders, including California Medical Association, California Primary Care Association, and America's Physician Groups, as well as nonprofit health information organizations like Manifest MedEx (MX), California's largest health data network.

More than 1,400 organizations have signed the DSA!

Data Elements To Be Exchanged Under the DxF*

Participants shall make available or exchange, at a minimum, data as defined in the subparagraphs below.

i. Health Care Providers, including but not limited to physician practices, organizations, and medical groups, general acute care hospitals, critical access hospitals, long term acute care hospitals, acute psychiatric hospitals, rehabilitation hospitals, skilled nursing facilities, and clinical laboratories, shall provide access to or exchange at a minimum:

a. Until October 6, 2022, data elements in the United States Core Data for Interoperability (USCDI) Version 1 if maintained by the entity.

b. After October 6, 2022, all Electronic Health Information (EHI) as defined under federal regulation in Section 171.102 of Title 45 of the Code of Federal Regulations, including data elements in the United States Core Data for Interoperability (USCDI) Version 2, if maintained by the entity.

*Excerpt from DxF Policy and Procedures finalized in July 2022

Do ambulatory providers need to sign the DSA?

Physician organizations (e.g., Independent Practice Associations that exchange health information) and medical groups are required to sign the DSA by January 31, 2023. This includes solo practices.

Some of these organizations, such as smaller physician practices and clinics, rehabilitation, long-term acute care, psychiatric, and critical access hospitals, and smaller rural acute care hospitals, will have until January 31, 2026 to fully implement the Data Exchange Framework even though they signed the agreement in January 2023.

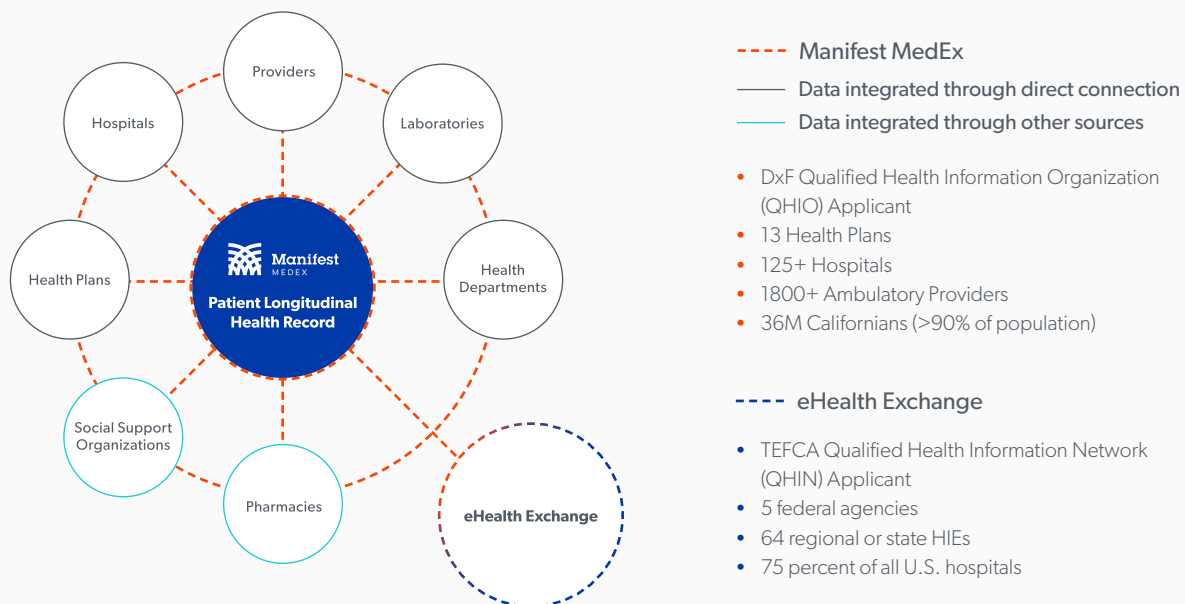
What are the health data sharing requirements for ambulatory providers under AB133?

After signing, DxF DSA signatories will be required to exchange health and social services information or provide access to health information to and from every other signatory in real-time as specified in the DSA and its Policies and Procedures (P&Ps). Most entities required to sign the DSA will be required to begin exchanging clinical data on or before January 31, 2024. Some organizations will have until January 31, 2026 to begin exchanging this information. These organizations include:

- Physician practices of fewer than 25
- Any nonprofit clinic with fewer than 10 health care providers

Manifest MedEx: A California Health Data Network with National Connectivity

Manifest MedEx is California's only statewide nonprofit health information organization that exchanges health data with national and other regional networks, ensuring participants can share data as needed across a broad health data ecosystem.



How can Manifest MedEx help ambulatory providers meet their DxF data sharing requirements?

As the largest nonprofit health data network in California, Manifest MedEx is an integral part of the state’s health data infrastructure, combining and delivering crucial health information for more than 36 million Californians across every county throughout the state.

By joining Manifest MedEx, ambulatory providers can participate in this exchange and meet most of their requirements under AB 133. MX can help ambulatory providers:



Securely exchange DxF required data,

Manifest MedEx is one of the only nonprofit health information organizations (HIOs) in California that regularly aggregates, normalizes, matches, and shares clinical data, including lab, social drivers of health (SDOH), and demographic data, as well as encounter and claims data. Manifest MedEx also connects with national networks to help participants share and receive data more broadly as needed.

We are the only health data network in California that has earned the gold standard in security certification — the HITRUST CSF® Certification.



In the right data format,

Clinical, encounter, and claims information is exchanged in a wide variety of nationally adopted technical standards that comply with the DxF requirements.



With other DSA Signatories,

This health data is easily accessible to other participants of the DxF through a range of data services and our web-based longitudinal health record application, MX Access. In addition, MX makes this information available through required DxF transaction pattern standards via eHealth Exchange, a “network of networks” that makes it easy for health systems and health data networks to request and retrieve records from each other on behalf of their participating health care organizations.



For required and permitted uses only.

The data shared through MX on an individual is accessible to permitted HIPAA-covered entities, their business associates, and compliant DSA signatories for treatment, payment, and healthcare operations (TPO) or because of a public health relationship with that individual.

Manifest MedEx is a local partner in every county throughout California, working on the ground with communities across the state. Health care is local, and ambulatory providers can depend on MX's expertise in community health needs, regional care delivery systems, and local market factors throughout the country's most populous and diverse state.

Manifest MedEx intends to apply to become a DxF Qualified Health Information Organization (QHIO), a designation from the state for organizations that have met strict criteria and can help DSA signatories meet their obligations under the DxF.

In addition to meeting DxF requirements, ambulatory providers who participate in Manifest MedEx:

- Receive real-time hospital event notifications so they can follow-up right away without spending time on faxes and calls
- Access patient history drawn from claims and clinical data into longitudinal health records to optimize care
- Streamline HCC/RAF follow-up with a complete list of diagnoses and accurate data
- Identify and close gaps in care

Are there programs or incentives to offset the costs of onboarding to MX?

To provide direct support to DSA Signatories to meet their data sharing requirements, CalHHS is administering up to \$47M in funding through DSA Signatory Grants to subsidize their implementation efforts. The CalHHS grant program offers two different types of grants (QHIO Onboarding Grants and Technical Assistance Grants) that can be used to onboard to Manifest MedEx, and currently there are three rounds of funding. To learn more, visit our DxF Resources page at manifestmedex.org.

Meet your DxF data sharing requirements and get started today with clinical data from more than 90 percent of Californians! Join us at manifestmedex.org or contact us at info@manifestmedex.org.