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## **Informational Hearing Assembly Health Committee Health Information Exchange Priorities in California**

**Tuesday, March 2, 2021 - 1:30 p.m.  
State Capitol, Assembly Chambers**

### **BACKGROUND**

The Assembly Health Committee’s November 10, 2020 informational hearing titled, “The Health Information Exchange Landscape in California” provided an overview of the current health information exchange (HIE) landscape in California, including existing HIE arrangements in California, forthcoming federal requirements, efforts in other states, and policy options to increase the use of HIE. This second hearing will focus on California’s HIE priorities as we continue to consider how state HIE policies advance the triple aim of healthcare. As of 2019, regional health information organizations (HIOs) touch an estimated 22 million lives in the state, but only about half of California’s hospitals participate, and 23 of California’s 58 counties still lack a regional HIO presence<sup>i</sup>. There are still areas of the state with no HIE entity and limited participation by major types of providers which limits the ability of patients, health care providers, and public health departments to use data to improve health care quality and care coordination, reduce duplicative imaging and laboratory tests, and monitor population health.

While HIE allows health care providers and patients to appropriately access and securely share a patient’s vital medical information electronically, improving the speed, quality, safety, and cost of patient care<sup>ii</sup>, the COVID pandemic proves that HIEs could also be used by public health departments to monitor outbreaks and, more importantly, support state and local public health agencies in their efforts to respond to current and future public health emergencies. The importance of HIE is further highlighted in a California Health Care Foundation draft report<sup>iii</sup> which notes that overcoming shortcomings in how information is currently shared in California would reduce health care disparities, improve patient safety and public health, and reduce wasteful spending, poor coordination, and reactive care.

**State Proposals.** Further recognizing the need to utilize HIE, the Governor’s 2021-22 Budget<sup>iv</sup> declares that “the state must expand the use of clinical and administrative data to better understand the health and social needs of individual patients in order to achieve high-quality, efficient, safe, and timely service delivery while improving outcomes. These goals can be accomplished by building and supporting the infrastructure and information systems to facilitate secure and appropriate exchange of electronic health information among health care providers.” To further build on the promise of a HIE, the Administration is interested in accelerating the utilization and integration of HIE as part of a network that receives and integrates health data for all Californians.

Additionally, the Department of Health Care Services' 2021 CalAIM: California Advancing and Innovating Medi-Cal proposal<sup>v</sup> includes a description of health information technology to support integrated care and care coordination. In part, the proposal declares that Medi-Cal managed care plans will work to implement health information technology to support population health principles, integrated care, and care coordination across the delivery system. Examples of health information technology include, but are not limited to, electronic health records (EHRs), emergency department information exchange, clinical data repositories, registries, decision support and reporting tools that support clinical decision making, and case management. A goal is to expand interoperable health information technology and HIE infrastructure, so that relevant data can be captured, analyzed, and shared to support provider integration of behavioral health and medical services, case management oversight and transitional planning, value-based payment models, and care delivery redesign.

AB 1131 (Wood), introduced on February 18, 2021, echoes the Governor's proposal in recognizing the right access to health information at the right time could result in improved health and outcomes for all Californians; to assist in identifying and overcoming the barriers to exchanging health information between public programs and with California providers and consumers; and, to engage consumers and their providers in managing medical, behavioral, and social services through appropriate, streamlined access to electronic health information. AB 1131 also requires, by January 1, 2023, health plans and health care providers, to contribute to, access, exchange, and make available data through the network of HIEs for every person, as a condition of participating in state health programs, including Medi-Cal, Covered California, and CalPERS.

### **Purpose of this hearing**

This hearing will continue to address the fundamental issue of determining the state's role in HIE and how best to assist public health entities in its emergency response; to establish data exchange across providers that enables population health management and patient care coordination; to identify and eliminate health disparities; and, to serve all Californians. To determine the appropriate role of the state, it is necessary to understand the policy goals of expanded HIE. Despite progress in the adoption and use of EHRs and the existence of regional HIOs, there are gaps in California's HIE landscape that prevents the state from expanding the use of health data to better understand the health and social needs of patients in order to achieve high-quality, efficient, safe, and timely service delivery while improving outcomes and costs. A statewide HIE policy can be aimed at multiple goals and central to all these issues is how state HIE policy can improve the quality, delivery and cost of health care.

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<sup>i</sup> <https://www.chcf.org/publication/promise-pitfalls-californias-regional-health-information-organizations/>

<sup>ii</sup> <https://www.healthit.gov/topic/health-it-and-health-information-exchange-basics/what-hie>

<sup>iii</sup> <https://www.chcf.org/publication/designing-statewide-health-data-network-california-learn-other-states/>

<sup>iv</sup> <http://www.ebudget.ca.gov/>

<sup>v</sup> <https://www.dhcs.ca.gov/provgovpart/Documents/CalAIM-Proposal-Updated-02172021.pdf>