



July 8, 2025

The Honorable Rebecca Bauer-Kahan
Chair, Assembly Privacy and Consumer Protection Committee
1020 N Street, Room 162
Sacramento, CA 95814

SUBJECT: SB 660 (Menjivar) — OPPOSE UNLESS AMENDED

Dear Assembly Member Bauer-Kahan:

Hospitals and health systems have been at the forefront of data exchange, investing significant resources in health information exchange (HIE) and participating in state, federal, and national initiatives toward its advancement. To that end, the California Hospital Association (CHA), on behalf of 400 hospitals and health systems, supports an HIE governance framework that will maintain patient privacy, advance seamless care transitions, and reduce disparities in care.

While CHA appreciates the ongoing dialogue with Senator Menjivar, sponsors, and committee staff, it is crucial that a balanced approach to HIE governance be taken so that Data Exchange Framework (DxF) participants work collaboratively toward data exchange in California. CHA continues to believe that SB 660 should include two important amendments, detailed below.

1. The Data Exchange Framework (DxF) Governing Board should be composed of data exchange experts and Data Sharing Agreement (DSA) signatories.

California is home to many of the nation's leading data exchange experts, including two members of the federal Health Information Technology Advisory Committee who have been working on data exchange for more than two decades. Due to the provisions in SB 660, however, they would be disqualified from the DxF Governing Board — as would many others with real world experience in health information exchange. Not only is this expertise essential on this board but so is balancing them with practitioners responsible for implementing the DxF — especially those who work in under-resourced safety-net organizations. Practitioners bring on-the-ground perspective about how a change in state policy will affect health care delivery and maintain patient confidentiality.

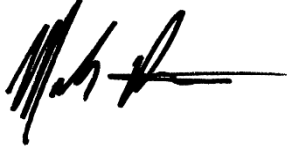
2. Enforcement mechanisms should be deferred until additional policies, procedures, and technical specifications are developed.

Hospital and other provider leaders have been working to inform DxF policy and procedure development for nearly four years — but these legally binding documents still need a significant amount of work. For example, a procedure does not exist for resolving conflict among DxF participants, nor do technical specifications for exchange. Until these are developed, hospitals and other entities lack a clear understanding of what is required to comply with DxF. Before requiring

that any enforcement mechanisms and new activities are completed, the California Health and Human Services Agency's Center for Data Insights and Innovation should focus on completing the work set forth in Assembly Bill 133.

For these reasons, CHA is opposed unless SB 660 is amended to address these remaining concerns.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark Farouk', with a long horizontal stroke extending to the right.

Mark Farouk
Vice President, State Advocacy

cc: The Honorable Caroline Menjivar
The Honorable Members of the Assembly Privacy and Consumer Protection Committee
Julie Salley, Principal Consultant, Assembly Privacy and Consumer Protection Committee
Liz Enea, Consultant, Assembly Republican Caucus