



DSA Signatory Grants

Guidance Document

Updated October 2025

This DSA Signatory Grants Guidance Document provides a comprehensive overview of the DSA Signatory Grants, a component of the Data Exchange Framework (DxF) Grant Program launched in May 2023.

The DxF was administered by the California Health & Human Services Agency (CalHHS) Center for Data Insights and Innovation (CDII) from July 2021 to July 2025. There are references to CDII throughout regarding historical activities completed by CDII. As of August 2025, administration of the DxF Program has transitioned to the California Department of Health Care Access and Information (HCAI).

The DSA Signatory Grants program supports Signatories of the DxF Data Sharing Agreement (DSA) and its associated Policies and Procedures by subsidizing their investments to meet DSA requirements. In this document, readers will find:

- A guide to understanding and choosing between the two types of grants in the program, which are:
 - Technical Assistance Grants; and
 - QHIO Onboarding Grants;
- Details on eligibility and permissible uses of grant funding;
- An overview of the application process; and
- Information on how awarded grantees will receive funding upon completion of standard milestones.

This document captures information about program design and implementation as of October 2025. Some aspects of the program design described here may evolve during implementation. Updated guidance for this initiative may be disseminated in webinars, guidance document updates, FAQs, or the [application template](#) for this program. Any future guidance related to this initiative will supersede guidance described in this document and will be posted in the DSA Signatory Grantee Center section of the Data Exchange Framework website:

<https://dxf.chhs.ca.gov/dsa-signatory-grants/>

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Background

California Data Exchange Framework

The DxF is the first-ever, statewide data sharing agreement that will accelerate and expand the exchange of health and social services information among health and social service organizations. It includes a single [Data Sharing Agreement \(DSA\)](#) and a common set of [Policies and Procedures \(P&Ps\)](#) that will govern the exchange of health and social services information among health care and social services organizations and government agencies beginning in January 2024.

The Governor and Legislature established several phases for implementing these new data exchange rules, starting with CalHHS developing the DSA and P&Ps by July 2022. Under [Health and Safety Code section 130290](#), DSA required Signatories include:

- General acute care hospitals;
- Physician organizations and medical groups;
- Skilled nursing facilities;
- Health care service plans and disability insurers;
- Clinical laboratories; and
- Acute psychiatric hospitals.

These health care entities were required to execute the DSA by January 2023. Additional health care and social services providers may choose to voluntarily sign the DSA, including counties, community-based organizations, emergency medical services, and mental health providers. See the [DxF Frequently Asked Questions](#) (FAQ) on the DxF website for additional information about who is required to sign the DSA.

DxF Implementation

The [DxF DSA Signing Portal](#) is now open for organizations to take the first step toward better health information exchange (HIE) and sign the DSA.

Once they have signed the DSA, organizations should determine how they will achieve the DSA and P&P requirements. It is important to note that the DSA is a signed contract between Signatories to share information safely. The DSA is not a technology solution and Signatories can meet DxF DSA requirements using the platforms or solutions of their choice.

Many required Signatories of the DSA have to begin exchanging data in accordance with the DSA's P&Ps by January 31, 2024. [Some entities](#) – including physician practices with fewer than 25 physicians, acute psychiatric hospitals, and rural general acute care hospitals – will have until January 31, 2026, to fully implement the DxF.

QHIO Program *(Updated October 2023)*

The DxF Program has established a Qualified Health Information Organization (QHIO) program to help Signatories identify a technology solution that will assist in meeting the DSA requirements.

A Health Information Organization (HIO) is an organization that offers services and functions to support the exchange of health information. It serves as an intermediary, assisting health and social services organizations as they initiate, receive, and reply to requests for information. An HIO can qualify as a QHIO if the DxF Program determines that the HIO has attested to having certain capabilities that meet DxF criteria and data exchange requirements.

In 2023, CDII established QHIO criteria and a process to qualify HIOs. The first cohort of QHIOs were announced in October 2023. Visit the [QHIO Program Resources](#) for the latest information about the QHIO program.

DxF Grant Program

To support data exchange adoption, the California Governor and State Legislature allotted \$50 million to support market implementation of DxF requirements through a DxF Grant Program, to be administered by CDII.

In October 2022, CDII held [two DxF Grant Listening Sessions](#) to better understand the barriers to implementing the DxF and how to address those barriers. Over 300 individuals attended those sessions, and a summary of that feedback was shared in the [November 2022 meeting](#) of the DxF Implementation Advisory Committee (IAC). Materials from the sessions are available on the CDII DxF webpage.

Based on this stakeholder feedback and in consultation with the IAC, the DxF Grant Program will support statewide implementation of the DxF by:

- Providing Signatories with resources to address critical operational, technical, and technological barriers to DxF implementation.
- Prioritizing investments for DxF Signatories operating in under-resourced geographies and/or serving historically marginalized populations and underserved communities.
- Ensuring alignment across other grant programs and promoting activities ineligible for funding by other grant programs (past or present).

To achieve these goals, CDII launched two grant programs: the **DxF Educational Initiative Grant Program** and the **DSA Signatory Grant Program**.

- **DxF Educational Initiative Grant Program:** Designed to address stakeholder feedback that many required Signatories were not aware of or did not understand their DxF requirements. The DxF Educational Initiative Grants provided \$3 million in funding to

nonprofit associations representing Signatories to provide education and training about the DxF across the state. In October 2022, CDII put out a [Request for Applications](#) for these grants. In December of 2022, CDII awarded eight grants to health and social services associations to provide outreach and education about the DxF throughout 2023. As of January 2024, the DxF Educational Initiative Grant Program has concluded. See the [Appendix](#) for a list of past Educational Initiative Grantees and their websites.

- **DSA Signatory Grant Program:** Designed to provide direct support to Signatories to subsidize their implementation efforts, the DxF Program has allocated up to \$47 million for DSA Signatory Grants to fund activities for individual Signatories to meet their DSA requirements. The subsequent sections of this guidance document provide detailed information about these grants. **Please note that no additional rounds of DSA Signatory Grant opportunities will be held in 2024.**

DSA Signatory Grant Program

Overview *(Updated October 2023)*

The DSA Signatory Grant Program is designed to subsidize DSA Signatories' investments to achieve the DSA requirements.

Acknowledging the range of activities that may be needed for Signatories to achieve the DSA requirements and varying capacity for grant application and management, the DxF Program has created the following two types of DSA Signatory Grants:

Technical Assistance (TA) Grant	Qualified Health Information Organization (QHIO) Onboarding Grant
This is a flexible, “build-your-own-solution” pathway where Signatories identify a range of technical and operational activities and manage the entire process of applying for and managing funds directly.	This a pre-set, “assisted” pathway in which Signatories receive support to identify a technology solution that could fulfill their DSA requirements (i.e., a QHIO) and support securing and managing funding for that solution.
<i>What are the eligible uses of funding?</i> TA Grants must be used to achieve one (or more) of the following Outcomes: 1. Identifying and contracting with a technical solution that will help achieve Signatories' DSA requirements. 2. Implementing a technology solution that supports real-time data exchange. 3. Adjusting, upgrading, or adopting an Electronic Record System. 4. Creating and completing training for new operational and clinical workflows.	<i>What are the eligible uses of funding?</i> QHIO Onboarding Grants must be used to achieve the following Outcome: 1. Onboarded to a QHIO and completed a real-time data transaction. <i>Organizations must have an existing Electronic Record System in place to apply for a QHIO Onboarding Grant.</i>
<i>Who identifies the Resources needed to achieve that Outcome?</i> Signatories.	<i>Who identifies the Resources needed to achieve that Outcome?</i> Signatories and their selected QHIO.
<i>Who completes the Grant Application?</i> Signatories.	<i>Who completes the Grant Application?</i> The California Association of Health Information Exchanges (CAHIE), a CDII contractor.
<i>Who receives and manages grant funds?</i> Signatories.	<i>Who receives and manages grant funds?</i> QHIOs.

Applicants must select whether to apply for a TA Grant or a QHIO Onboarding Grant. While the two grants offer the same level of funding, each grant opportunity offers different levels of

flexibility and support. Applicants should consider the infrastructure necessary for their organization to conduct data exchange in accordance with the DxF, as well as whether onboarding to a QHIO or other technical assistance is the best approach for them.

The following table provides a high-level overview of each type of DSA Signatory Grant.

DSA Signatory Grant Application Process	
TA Grant	QHIO Onboarding Grant
1. Applicant determines whether they meet the Eligibility Criteria for a DSA Signatory Grant.	
A qualifying Application must be submitted on behalf of one or more organizations that have signed the DSA and meet Eligibility Criteria . The Applicant (i.e., the organization submitting the grant application) may be a Signatory applying on their own behalf or an organization applying on behalf of one or multiple Signatories.	
2. Applicant determines how they would use grant funding and selects which grant to pursue.	
Applicants identify specific technical activities that would help Signatories achieve DSA requirements and need TA Grant funding. See list of permissible funding uses.	Applicants decide that they will onboard to a QHIO and that they will use QHIO Onboarding Grant funding to onboard to a QHIO. See list of permissible funding uses.
3. Applicant determines the amount of funding to request, adhering to maximum allowances.	
Funding maximums are based on the number of Electronic Record System Instances and the characteristics of the Signatories serviced by those Instances.	
4. Applicant submits their Application during an open round on the DxF Grants Portal.	
TA Grant Applicants are responsible for completing their Applications. Applicants that need help can request support from Public Consulting Group (PCG).	CAHIE provides end-to-end Application support and submission for all QHIO Onboarding Grant Applications.
5. All Applications in a given round are scored, and awards are announced.	
6. Grantees will receive grants payments upon completion of grant milestones.	
Milestone One: Grantee procures resources that account for at least 50% of grant budget by Milestone 1 deadline.	Milestone One: Grantee and QHIO sign a contract or contract amendment for DxF onboarding as early as January 1, 2023, and as late as Milestone 1 deadline.
Grantee receives first half of award to begin procuring TA specified in the Application.	Grantee and QHIO agree on use of awarded funds via a grant-specific contract between the grantee and QHIO. The QHIO chosen by Grantee receives first half of award.
Milestone Two: Grantee achieves the stated outcome(s) of their TA Grant (varies by Grantee) by Milestone 2 deadline.	Milestone Two: QHIO successfully onboards Grantee and completes a real-time data transaction by Milestone 2 deadline.
Grantee receives second half of award.	QHIO chosen by Grantee receives second half of award.

There were three rounds of DSA Signatory Grants in 2023, in which any given Signatory could be awarded only one grant. To expedite funding to organizations that are subject to AB-133, CDII held one short application round for the six types of Signatory organizations that were identified as required to execute the DSA under [Health and Safety Code section 130290](#).

(Updated February 2024) CDII accepted Applications for each round per the following schedule:

- Round 1 (expedited round; for required signatories only): May 16, 2023 – June 16, 2023, at 11:59pm PT
- Round 2: June 30, 2023 – September 1, 2023, at 11:59pm PT
- Round 3: October 16, 2023, to December 20, 2023, at 11:59pm PT

Please note that CDII adjusted the timeline and eligibility criteria for Rounds 2 and 3 based on stakeholder feedback during Round 1.

To enable the implementation of the overall DSA Signatory Grant program, the DxF Program has contracted with **Public Consulting Group (PCG)** to serve as the third-party administrator (TPA) for this program. PCG is a public sector management consulting and operations improvement firm that supports primarily public sector health, education, and human services organizations. Working closely with the DxF Program, PCG developed and manages the DxF Grants Portal, which supports application submission, award notification, fund disbursement, and progress reporting. PCG also works with the DxF Program to review applications and funding requests, and manage milestone attestations and funding disbursements.

In addition, CDII contracted with the **California Association of Health Information Exchanges (CAHIE)**, to provide grant writing support for Applicants to the QHIO Onboarding Grant. Working closely with CDII, CAHIE assisted organizations to complete and submit QHIO Onboarding Grant applications. To learn more about how to access their help, please refer to the [QHIO Onboarding Grant Application Process](#) section of this document.

0. Key Definitions (Updated October 2025)

Several types of organizations and organizational units may be involved in the Application for a DSA Signatory Grant. The following terms will be used as defined below throughout this Application Guidance Document.

- **Signatory:** A “Signatory” means an organization that has signed the DSA. Organizations may sign the DSA directly, or a “parent organization” may sign the DSA on their behalf as a “subordinate organization.”

In a parent-subordinate situation and for the purpose of this grant program, the Signatory is the subordinate organization because they are the entity bound by the DSA. Each subordinate entity is independently eligible for its own DSA Signatory Grant. However, the individual who signed the DSA on behalf of the parent organization is required to sign the Grant Application attestation form for a subordinate¹. The parent organization must attest that the Application does not contain a Signatory or associated electronic record system Instance that has already received a DSA Signatory Grant. Parent organizations are strongly encouraged to coordinate Grant Application efforts for their subordinate organizations and submit one DSA Signatory Grant Application for all subordinates where possible.

- **Applicant:** The organization that submits an Application for a DSA Signatory Grant will be referred to throughout this document as the “Applicant.” An Applicant may be a Signatory applying on its own behalf, or it may be an organization applying on behalf of one or more Signatories. An Umbrella Applicant is an entity that applies for a grant on behalf of one or more organizations.

Subject to the Eligibility Criteria in this document, Umbrella Applicants may include but are not limited to:

- A parent organization that signed the DSA on behalf of multiple subordinate organizations;
- A corporate parent applying on behalf of subsidiary organizations (such as a health system applying on behalf of hospitals and physician practices that are part of its organization);
- A foundation or other organization applying on behalf of organizations;
- An Independent Physician Association; and

¹ For situations where this is not possible, such as situations where the individual who signed the DSA has since left the organization, Applicant can provide an explanation (not to exceed 100 words) for why the Application cannot be signed by the same individual who signed the DSA.

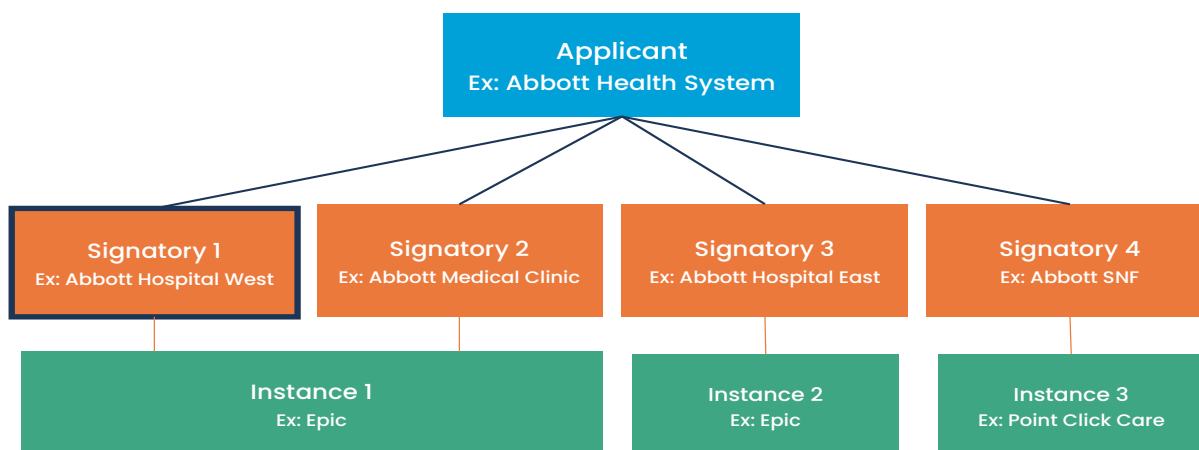
- A Management Services Organization.

The eligible representative of each Signatory included in an Application is required to co-sign the Grant Application prior to submission. See the [Eligibility Criteria section](#) for additional information on who can sign a DSA Signatory Grant Application.

- **Instance:** An Instance represents a *single and unique configuration* for an Electronic Record System product -- electronic health record (EHR) or otherwise -- that may exist within and/or across multiple DSA Signatories included in the Application. For example, one EHR Instance may be used by five hospitals that signed the DSA; any individual logging into the EHR at one hospital can access records created and maintained across all five hospitals.² The number of Instances in an Application will be a key factor in determining the amount of funding that an Applicant may request and in grant award decisions.
- **Primary Signatory** (*Updated July 2023*): In a situation where multiple Signatories included in the Application are using the same Instance, the Applicant will select a Primary Signatory for that Instance. The Primary Signatory must be the organization serving the largest number of individuals on that Instance over a 12-month period, as measured by unique individuals served or the volume of interactions (i.e., visits, admissions, etc.) on that Instance. The Primary Signatory's features (e.g., its Signatory type, the population it serves, and past funding) will determine funding for the Instance.

An Application for a DSA Signatory Grant must be submitted for one or more Signatories. In the example depicted below, **one Applicant** submitted an Application on behalf of **four Signatories**. Signatories 1 and 2 are on the same **Instance** of an EHR, and Signatory 1 is the **Primary Signatory** for that instance because it is the largest Signatory on that Instance.

² Organizations that do not have an EHR should consider their current Electronic Record System to be an "Instance" for the purpose of the DSA Signatory Grants. For health care organizations that do not have an EHR and require one to meet their DxP requirements, DSA Signatory Funding can be used to subsidize certain EHR costs through the TA Grant; see the Uses of Funding Section.



Additional terms used throughout this guidance document are defined below, in alphabetical order:

- **Application** means the template that Applicants must complete and submit to request a DSA Signatory Grant.
- **Electronic Record System** means the platform in which a Signatory documents person-level information about the individuals that it has provided services to and the services that were provided. For health care organizations, this would generally be an electronic health record (EHR). For social services organizations, this may be another type of electronic documentation system.
- **DxF Grants Portal** means the electronic portal managed by PCG through which Applicants will submit an Application for a DSA Signatory Grant and through which Grantees will sign their Grant Program Acknowledgement, submit Progress Reports and complete other grant management tasks.
- **Grantee** means an Applicant that has been awarded a grant; collectively, they are referred to as "Grantees" throughout this document.
- **Health Information Technology (HIT) vendor** (*New October 2025*) means an organization that supports the implementation of a technology solution (e.g., EHR, QHIO, HIO, technology consultants).
- **Milestones** means specific events that a Grantee must achieve in order to receive funding.
- **Outcome** means the required end-result of a Grant. Grantees must achieve the required Outcomes listed in [the Outcomes section](#) in order to receive their full grant award.

- **Resource** means resources that a Grantee would use grant funding to procure and may include a HIT vendor, external personnel, internal personnel; or other. The Resources procured with grant funding must adhere to the Permissible Uses of Funding listed in this document.

1. Eligibility Criteria *(Updated July 2023)*

To be eligible for either of the two types of DSA Signatory Grants, Applicants must meet the following eligibility criteria:

A. All Signatories included in the Application must have signed the CalHHS Data Sharing Agreement (DSA) prior to submitting the Grant Application.

In the DxF Grants Portal, Signatories will be required to provide the information in the following fields from their signed DSA:

- Name of Individual Signing;
- Name of Organization; and
- Date of Signature.

Signatories can access a copy of their signed DSA by logging into their account in the [DSA Signing Portal](#). The three requested fields can be found on page 9. Applicants must submit the information as it appears on page 9; PCG may determine that an Application cannot be considered if it is unable to match a Signatory to a signed DSA because of inaccurate Application submissions.

The individual signing the Grant Application on behalf of a Signatory must be the same as the individual who signed the DSA on behalf of the organization.³

- In a situation where a parent organization signed the DSA on behalf of subordinate organizations, each subordinate organization may be eligible for a DSA Signatory Grant. However, the individual who signed the DSA as the parent organization must sign the Grant Application attestation form. Parent organizations are strongly encouraged to coordinate Grant Application efforts for their subordinate organizations and submit one DSA Signatory Grant Application where possible.
- Umbrella Applications must be co-signed by the individuals who signed the DSA on behalf of each of the Signatories included in the Application.

Technology vendors, such as HIOs, are not eligible for a DSA Signatory Grant.

³ For situations where this is not possible, such as situations where the individual who signed the DSA has since left the organization, Applicant can provide an explanation (not to exceed 100 words) for why the Application cannot be signed by the same individual who signed the DSA.

B. All Signatories included in the Application must demonstrate that additional technical or technological capabilities are needed to meet their DSA requirements.

An organization that already conducts the real-time data exchange in accordance with the DSA and its P&Ps is not eligible for a DSA Signatory Grant.

Applicants need to complete one of the following to demonstrate their ability to achieve their [DSA requirements](#):

- a. Connect to a QHIO that can conduct the real-time data exchange in accordance with the DSA and its P&Ps; or
- b. Implement another technology solution or service that achieves real-time data exchange in accordance with the DSA and its P&Ps.

In the DxF Grants Portal, Applicants will be asked to provide information about each Signatory's existing Electronic Record System and to attest to the types of health and social services information exchange that each Signatory currently conducts.

(Updated July 2023) In order to expedite funding supporting organizations with a mandatory deadline for implementing the DxF, Round 1 Applications were limited to organizations who identified as one of the six mandatory Signatory types included in [Health and Safety Code section 130290](#). **All organizations that meet criteria A and B above are eligible to apply for a DSA Signatory Grant starting in Round 2.**

2. Uses of Funding and Required Grant Outcomes *(Updated October 2025)*

This section explains how Grantees may use DSA Signatory Grant funds and outlines the details about the intended use and purpose of funds that Applicants must provide in their Applications. Two key concepts in this section are:

- **Resources** means resources that a Grantee would use grant funding to procure and may include a HIT vendor, external personnel, internal personnel, or other. The Resources procured with grant funding must adhere to the Permissible Uses of Funding listed in this section.
- **Outcomes** means the required end-result of the grant. Grantees must achieve the required, specific Outcomes listed in this section in order to receive their full grant award.

Uses of funding and required Outcomes vary substantially by the type of DSA Signatory Grant. At a high level:

- TA Grantees can use funding to subsidize a range of Resources needed to meet DSA requirements. Applicants for this grant need to specify the Resources they would procure with grant funding in their Application and the Outcome(s) these Resources would achieve. Grantees must select at least one of the four Outcomes below in their Application, and they must achieve those Outcomes in order to receive the full grant award.
- QHIO Onboarding Grantees and their selected QHIO can use funding to subsidize a range of Resources required to onboard the Grantee to the QHIO. As long as those Resources adhere to the Permissible Uses of Funding, Applicants do not need to provide details about intended Resources in their Application for this grant. QHIO Onboarding Grantees and their selected QHIO must complete the QHIO Onboarding Grant Outcome outlined below to receive the full grant payment. In order to apply for a QHIO Onboarding Grant, Applicants must have an existing Electronic Record System (i.e., if an organization has a paper-based record system, it is recommended that they apply for a TA grant for support in adopting and implementing an Electronic Record System that could support data exchange in accordance with the DxF).

TA Grant Required Outcomes and Uses of Funding *(Updated October 2025)*

All activities proposed in a TA Grant must contribute towards the Signatories' efforts to meet DSA requirements. However, CDII acknowledges that the activities funded by the Grant may not be sufficient for Signatories to meet their DSA requirements. As such, Applicants will not be required to prove that they will meet DSA requirements upon completion of the Grant-funded activities. In order to receive the full Grant award, TA Grantees will be required to select and show that they have achieved at least one of the following Outcomes:

1. Identified and contracted with a technical solution that will help them achieve real-time data exchange in accordance with the DxF;
2. Implemented a technology solution capable of supporting real-time data exchange in accordance with the DxF;
3. Adjusted, upgraded, or adopted a certified EHR or other Electronic Record System required to enable real-time data exchange in accordance with the DxF; or
4. Created and completed training for new operational and clinical workflows required to complete real-time data exchange in accordance with the DxF.

To achieve one or more of these Outcomes, TA Grant Applicants may request funding for Resources in accordance with the table below:

Permissible Uses for TA Grants (Updated October 2025)

1. **Identifying and Contracting with a Technology Solution that Will Help Them Achieve Real-Time Data Exchange in Accordance with the DxF:** TA Grantees may use funds to pay for a Resource that will help them with any of the following:

- ✓ Conducting a gap analysis to identify the steps needed to meet DSA requirements;
- ✓ Assessing and selecting technology solutions that could address those gaps (which may include a QHIO or another HIE solution; it may also include an Electronic Record System if the Signatory does not already have a system that can be configured for real-time data exchange);
- ✓ Contracting with technology vendor(s) that would achieve some or all of a Signatory's DSA requirements; or
- ✓ Other activities associated with procuring a technology solution that would achieve some or all DSA requirements.

2. **Implementing a Technology Solution Capable of Supporting Real-Time Data Exchange in Accordance with the DxF:** TA Grantees may use funding to pay for Resources to implement a technology solution that establishes real-time data exchange needed by the DSA. Solutions may include but are not limited to QHIOs or HIOs that have not been qualified by CDII but will support the Grantee in achieving DSA requirements. Costs may include the following:

- ✓ Costs for the Signatory to retain a technology consultant or IT staff to onboard the technology;
- ✓ Costs paid to a technology vendor to fund implementation of a technology solution that enables real-time data exchange as required by the DSA; or
- ✓ Costs paid to the Signatory's existing Electronic Record System (i.e., an EHR for a health care organization) to interface with another technology solution.

Funding may not be used to pay for ongoing fees or subscriptions to previously acquired systems; except as noted in the Impermissible Uses for TA Grants section below.

Permissible Uses for TA Grants (Updated October 2025)

- 3. Adjusting, Upgrading, or Adopting a Certified EHR or Other Electronic Record System Required to Enable Real-Time Data Exchange in Accordance with the DxF:** Some organizations will not have certified EHR technology or other Electronic Record Systems that can be configured for real-time data exchange needed by the DSA. For such Signatories, TA grant funding may be used to fund Resources that support the following activities:
- ✓ Updating the configuration of an Electronic Record System if doing so is required in order to establish real-time data exchange;
 - ✓ Paying for the initial costs of adding new modules or functionality to an Electronic Record System if doing so is needed to establish real-time data exchange; or
 - ✓ Adopting a new Electronic Record System if doing so is needed to support real-time data exchange.

Funding may not be used to pay for ongoing fees or subscriptions to previously acquired systems; except as noted in the Impermissible Uses for TA Grants section below.

- 4. Creating and Providing Training for New Operational and Clinical Workflows Required to Complete Real-Time Data Exchange in Accordance with the DxF:** Signatories may use TA funding for Resources that support workflow redesign and training activities to enable implementation and use of technologies for data exchange, including the following:
- ✓ Costs for a consultant or expert to develop and help implement workflows that support electronic health information exchange as needed by the DxF; or
 - ✓ Other costs associated with creating such workflows and trainings.

Impermissible Uses for TA Grants (Updated October 2025)

Grantees may not use TA Grant funding in the following ways:

- ✗ For activities that do not support Signatories in achieving their DSA requirements or that do not establish data exchange with other health and social services organizations
- ✗ Activities completed under other grant programs (e.g., CalHOP)
- ✗ For activities other than those specified in their Application
- ✗ For ongoing subscription or recurring costs associated with a previously acquired electronic documentation system, a QHIO, or other health information technology (IT) systems.
 - However, the DxF Program will accept QHIO participation fees in association with an upgraded service and subscription fees indicating adoption of an EHR or other electronic records systems.

This list provides examples of Impermissible Uses of funds; the DxF Program may identify other uses of funds not permitted for TA Grants. As a reminder, Signatories that already meet DSA requirements are not eligible for DSA Signatory Grants.

In the [Application for a TA Grant](#), the Applicant must identify the Outcomes that will be achieved with the grant funding and specify the cost of each Resource needed to achieve that funding. Each individual Resource that the Grant will be used to procure must be listed, using the following categories:

- Health Information Technology (HIT) vendor;
- External personnel;
- Internal personnel; or
- Other.

Applicants can identify up to 10 Resources that would be procured using a TA Grant.

What Happens if a TA Grantee Changes Its Plans?

The DxF Program understands that Grantees in the TA Grant Domain may discover mid-implementation that they need to re-prioritize their investments in order to achieve their DSA requirements.

If the Grantee will still achieve the same, or comparable, anticipated Outcome(s) as those identified in their TA Grant Application, they may adjust how funding is spent on Resources without submitting a Change Request to the DxF Program and PCG. Payment for Milestone 2 will be issued once the Signatory can demonstrate the successful completion of the anticipated Outcome(s), as detailed in the [Milestones and Funds Disbursement section](#) of this guidance document.

If the Applicant will no longer achieve the anticipated Outcome(s) identified in the Application, they can submit a **Change Request** for their grant to request an alternate Outcome. A significant change in Outcome(s) may impact the total award amount for the grant. See the [Milestones and Funds Disbursement section](#) of this guidance document for details about how to submit this request.

QHIO Onboarding Grant Required Outcomes and Uses of Funding *(Updated October 2025)*

The QHIO Onboarding Grant is for the purpose of onboarding one or more Signatories to a QHIO. If awarded, funding would go directly to the QHIO selected by the Grantee. In order to receive the full Grant award, QHIO Onboarding Grantees and the selected QHIO will be required to show that they have achieved the following Outcome: Successful completion of QHIO Onboarding and completion of a real-time data transaction through the QHIO.

The Applicant and their selected QHIO must agree on the specific Resources that will be funded by the Grant to achieve the required Outcome for this grant domain. Applicants and

their selected QHIO should reach an arrangement that is most likely to result in successful onboarding. Applicants should consider how each QHIO would use Grant funding prior to selecting and contracting with a QHIO. Grantees may consider including an agreement on how Grant funds will be used in the contracting process with the QHIO.

- **When to Select a QHIO:** Grantees can select a QHIO at any point between application submission (wherein an Applicant could name an HIO that they anticipate may become Qualified) and their Milestone 1 deadline. CDII announced QHIOs in October 2023.
 - For organizations awarded a QHIO Onboarding grant prior to the announcement of QHIOs, QHIO Onboarding awardees will have the choice to convert from the QHIO Onboarding Grant to a TA Grant before attesting to Milestone 1. The DxF Program acknowledges that organizations who initially select the QHIO route may prefer the alternate TA route so as to not delay their readiness for DxF exchange while the qualification process of HIOs continues or their preferred HIO partner is not qualified. In this case, a QHIO Onboarding Grant can become a TA Grant that must achieve TA Outcome #2 (i.e., Implementing a Technology Solution Capable of Supporting Real-Time Data Exchange in Accordance with the DxF, see above) by procuring health IT vendor Resources.
 - Organizations that contract with HIOs prior to the announcement of QHIOs understand that they will not be able to use a QHIO Onboarding Grant to onboard to that HIO if that HIO is not qualified by CDII. In this situation, QHIO Onboarding Grantees will have the opportunity to select a different QHIO or to convert their Grant to a TA Grant as described above.
 - Organizations that have already contracted with an HIO prior to January 1, 2023, may be eligible for a QHIO Onboarding Grant for additional onboarding work with that HIO if that legacy (i.e., pre-2023) contract did not provide the capability to conduct data exchange in accordance with the DxF. In this case, Applicants will need to explain the required capability not achieved via their existing contract in their Application. This may be explained in their description of grant-funded activities in the [application](#). Once the HIO is named as a QHIO, the grantee will need to either (a) enter into a new contract with the QHIO to achieve those capabilities or (b) amend their legacy contract to achieve those capabilities in order to achieve Milestone 1. If the HIO is not qualified, the grantee can switch to a TA grant to work with an HIO, as described above.
- **Reporting a QHIO Choice to the DxF Program:** For all Applications submitted prior to the announcement of QHIOs, Applicants are not required to select a QHIO in their Application. Applicants in these rounds should plan to indicate their chosen QHIO in their attestation to Milestone 1 (see [Milestones and Funds Disbursement](#) for details).

Applications submitted after the announcement of QHIOs will be required to identify the QHIO with which they intend to contract upon submission of their Application, although no QHIO selection is final until a Grantee has attested to Milestone 1.

- **Selecting a QHIO for Umbrella Applications:** All Signatories included in an Umbrella Application must use the same QHIO. Organizations interested in submitting Applications for Signatories that will use different QHIOs must submit one Application for each QHIO that they are proposing to use. The above information on selecting a grantee's QHIO applies to Umbrella applications as well.

The selected QHIO can use the grant funding to fund Resources that offset their own costs, in addition to offsetting certain Grantee costs. Grantees may consider including an agreement on how Grant funds will be used in the contracting process with the QHIO to ensure funds are optimally used to address their needs. All Resources and costs funded with QHIO Onboarding funds must adhere to the following Permissible Uses of Funds:

Permissible Uses for QHIO Onboarding Grants

QHIOs and Grantees must mutually agree on how funds will be spent to ensure successful onboarding to the QHIO. QHIO Onboarding Grants may be used for one or more of the following:

- **Offset QHIO Costs:** Grant funding can be used to help cover QHIO fees and other QHIO costs associated with onboarding, which may include:
 - ✓ The QHIO's costs to connect to a DSA Signatory's EHR or other Electronic Record System (i.e., initial QHIO fees); or
 - ✓ The QHIO's costs to develop capabilities to perform the health information exchange (HIE) capabilities outlined in the DSA and its P&Ps.
- **Offset Signatory Costs:** Grant funding can be used to cover Signatory costs associated with onboarding, which may include:
 - ✓ Configuration costs for the DSA Signatory's EHR or other electronic documentation system to enable their connection to the QHIO (i.e., fees paid to the EHR vendor); or
 - ✓ The DSA Signatory's cost to retain an IT personnel resource for onboarding.

Impermissible Uses for QHIO Onboarding Grants

Grantees may not use QHIO Onboarding Grant funding in the following ways:

- × For ongoing HIE operations
- × For purchasing a new EHR technology.
- × For onboarding to a non-qualified HIO.

- × For **changing from one QHIO to another**.
 - × Signatories already onboarded to a QHIO may not receive a QHIO Onboarding Grant.
 - × Once a Grantee achieves Milestone 1 with a QHIO, it must continue to work with that QHIO in order to achieve Milestone 2 and may not switch to a different QHIO using Grant funding.
- × For **connecting to multiple QHIOs** (Signatories can opt to connect to multiple QHIOs but grant funding may only be used for one QHIO).

This list provides examples of Impermissible Uses of funds; the DxF Program may identify other uses of funds not permitted for QHIO Onboarding Grants. As a reminder, Signatories that already meet DSA requirements are not eligible for DSA Signatory Grants.

In the Application for a QHIO Onboarding Grant, the Applicant is not required to specify the Resources that the QHIO Onboarding Grant would fund because it will go directly to their selected QHIO in all cases. The DxF Program expects that all funding will be used to achieve the QHIO Onboarding Outcome and details of how the funding will be used to achieve that Outcome are decided between the QHIO and the Grantee.

The DxF Program and its Contractors will not moderate disagreements between QHIOs and Grantees regarding funding use as long as the use adheres to the Permissible Uses listed in this section. However, in the event that an awarded grant representing multiple signatories has one or more signatories drop out or fail to complete milestones, the DxF Program reserves the right to reduce the overall TA or QHIO Onboarding funding to the Grantee accordingly.

3. Funding Maximums (Updated October 2023)

To give Applicants a clear understanding of the budget they may request in their Application, CDII has set funding maximums for both grants in the DSA Signatory Grant Program. This section details how these funding maximums are determined for each Application. CDII notes that funding maximums indicate only the maximum amount that the Applicant may request in their Application. CDII reserves the right to award less than what was requested in an Application; see the [Scoring Criteria & Award Decisions Section](#) for additional details.

Funding maximums are the same for the TA Grant and the QHIO Onboarding Grant. Each Applicant will be eligible for different funding maximums based on the following factors:

- The number of Electronic Record System “Instances” included in the Application;
- The types of the Signatories covered by each of those Instances; and
- The characteristics of the Signatories covered by each of those Instances.

An Application may include one or more Signatories served by one or more Instances. The maximums for an Instance were informed through stakeholder engagement, consultation with the DxF Implementation Advisory Committee (IAC), with previous funding maximums identified through the [Cal-HOP](#) program. Proposed funding maximums were presented at multiple IAC meetings and public webinars, and members of the public had an opportunity to provide input on these funding maximums. The funding maximums consider the complexity of data exchange that organizations in each Signatory group will need to conduct under the DxF, previous funding opportunities made available to organizations in each Signatory group, and the current level of health IT infrastructure.⁴ Funding is intended to subsidize investments in achieving DSA requirements and may not cover total investment costs.

Baseline Funding Maximum Per Instance

The following table indicates the Baseline Funding Maximum amount that an Applicant may request for each Instance included in the Application based on the Primary Signatory using that Instance.

Baseline Funding Maximums Per Instance

Type of Primary Signatory Using the Instance	Baseline Funding Maximum
General Acute Care Hospitals	\$50,000
Acute Psychiatric Hospitals	\$50,000
Skilled Nursing Facilities	\$50,000

⁴ See [Health Information Exchange in California Gaps and Opportunities report](#) published in 2022 for information about the current level of health information exchange readiness for different Signatory groups.

Type of Primary Signatory Using the Instance	Baseline Funding Maximum
Physician Organizations and Medical Groups	\$35,000
Health Insurance Plans	\$25,000
Clinical Laboratories	\$15,000
Encouraged and Voluntary Signatories (including Counties)	\$25,000

Enhanced Funding Maximum Per Instance

CDII acknowledges that Signatories meeting certain criteria may need additional resources to achieve DSA requirements. Instances that serve certain Signatories may be eligible for Enhanced Funding if they meet both the **Serving Underserved Communities** and **No Cal-HOP Funding** criteria.⁵ If the Primary Signatory in an Instance meets these criteria, as defined in the subsequent sections, the Instance may be eligible for the following Enhanced Funding Maximums:

Enhanced Funding Maximums Per Instance

Primary Signatory must meet both Serving Underserved Communities and No Cal-HOP Funding criteria

Type of Primary Signatory Using the Instance	Enhanced Funding Maximum
General Acute Care Hospitals, Acute Psychiatric Hospitals, and Skilled Nursing Facilities	\$100,000
Physician Organizations and Medical Groups	\$50,000
Health Insurance Plans and Clinical Laboratories	Not eligible for enhanced funding
Encouraged and Voluntary Signatories (including Counties)	\$50,000

Enhanced Funding Maximums listed here represent the total amount that an Instance would be eligible to receive if it meets the criteria outlined in this section; it is not in addition to the Baseline Funding Maximums.

1. Serving Underserved Communities Criteria for Enhanced Funding

The Serving Underserved Communities criteria was developed with the understanding that Signatories serving underserved and/or historically marginalized communities, as well as organizations operating in underserved geographies, may have limited access to resources to achieve the DxF vision. Moreover, the DxF Program considers establishing a statewide data exchange for social drivers of health (SDOH) to be a critical tool in advancing whole person

⁵ Primary Signatories are only eligible for either the Enhanced Funding Maximum or the Base Funding Maximum, not both. The Enhanced Funding Maximum replaces the Base Funding Maximum for Primary Signatories that qualify.

care and health equity, and – as noted in the program goals for the DxF Grant Program – it has prioritized organizations that serve populations most impacted by SDOH for grant funding in order to promote their successful participation in the DxF. As such, CDII has created a Serving Underserved Communities criteria that may qualify an organization for an Enhanced Funding Maximum.

In order to meet the Serving Underserved Communities criteria for an Instance in the Application, the Applicant must attest to one of the following:

Serving Underserved Communities Criteria

Signatory Operates in Underserved Geographies The largest facility of the <u>Primary Signatory</u> in the Instance is located in a zip code with bottom quartile of the California Healthy Places Index (HPI). The largest facility is considered the facility serving the largest number of individuals at the site, either by number of unique individuals served or by volume of interactions (i.e., visits, admissions, etc.).	OR	Signatory Serves Underserved and/or Historically Marginalized Communities For the <u>Primary Signatory</u> in the instance over a 12-month period starting no later than January 2021: • 30% of patient volume as measured by unique individuals served is Medi-Cal, uninsured, or dual-eligible patients
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The California Healthy Places Index (HPI) is developed by the Public Health Alliance of Southern California and combines 25 community characteristics, such as access to health care, housing, education, and more, into a single indexed HPI score. To demonstrate that a Primary Signatory in an Instance meets the Organization Operating in Underserved Geographies criteria, the Applicant must provide the largest physical location where services are provided for the Primary Signatory in the instance (i.e., it cannot be a corporate office) and the HPI score for that physical location. To determine your HPI, go to the Public Health Alliance’s HPI Map and enter your location in the top right-hand corner.

2. No Cal-HOP Funding Criteria for Enhanced Funding

The **No Cal-HOP Funding Criteria** builds on the Serving Underserved Communities criteria by ensuring that Enhanced Funding Maximums go to entities that did not receive funding from the California Health Information Exchange Onboarding Program (Cal-HOP).

From 2020 to 2021, Cal-HOP provided up to \$50 million in state and federal funding to HIOs to support Medi-Cal providers' access and use of health information exchange technology to improve the quality and effectiveness of care for Medi-Cal beneficiaries. HIOs in the program worked with nearly 400 hospitals and physician practices to provide technical assistance and

HIO onboarding services. Those organizations do not meet the No Cal-HOP Funding criteria and are thus not eligible for the Enhanced Funding Maximum in the DSA Signatory Grant Program.

No other funding programs would disqualify an Applicant from the Enhanced Funding Maximum, although CDII and PCG will consider other types of funding in Application scoring and award determinations.⁶

What Is the Funding Maximum for an Instance Serving Multiple Signatories?

For each Instance that covers multiple Signatories, a Primary Signatory should be chosen amongst the Signatories. The Primary Signatory must be the physical facility serving the largest number of individuals on that Instance over a 12-month period in the Instance, either by number of unique individuals served or number of interactions (i.e., visits, admissions, etc.)

When determining the funding maximum for that Instance, Applicants should use the characteristics of the Primary Signatory in that Instance.

What If an Instance Serves a Large Number of Signatories?

CDII recognizes that some Applications may include one or more Instances that serve a large number of Signatories and the funding maximums identified in this Guidance Document may not be sufficient in those cases.

For an Instance serving more than 20 Signatories, Applicants may submit a request that exceeds the Funding Maximums outlined in this document, although the overall Application maximum listed below applies. In making this request, Applicants should provide additional information about the number of individuals (i.e. individual records) included in this Instance in their response to [Question 8 in the Application](#). CDII and PCG will consider the request and notify the Applicant of its determination.

⁶ *(Added October 2023)* Organizations who receive funding through the California Department of Health Care Services (DHCS)'s Equity and Practice Transformation (EPT) Provider Directed Payment Program funding are eligible to also receive funding from DSA Signatory Grant Program and may be eligible for the DSA Signatory Grant Enhanced Funding. DSA Signatory Grantees who receive a QHIO Onboarding Grant can use dollars to supplement EPT Program dollars that go towards connecting to a QHIO.

Calculating Total Funding Maximum For An Application

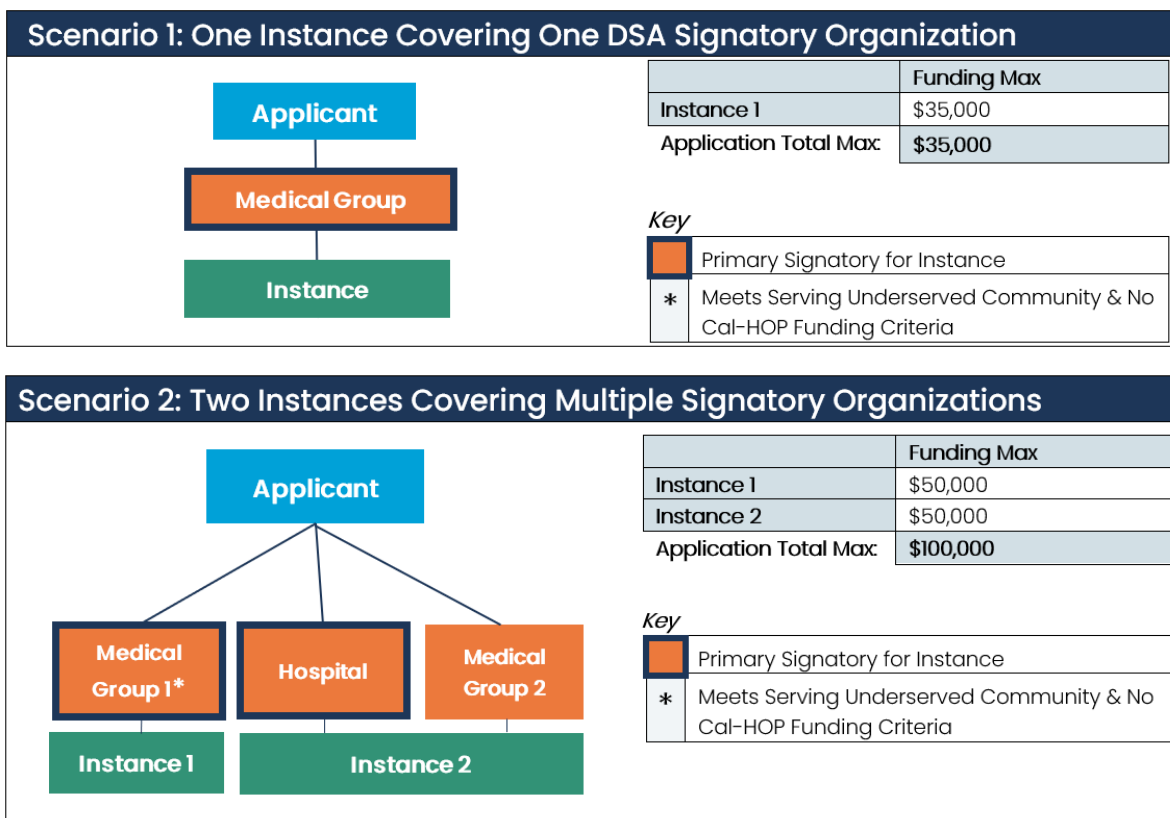
The total funding maximum for an Application is obtained by adding the funding maximum for each Instance included in the Application.

$$\text{Application Maximum} = \text{Maximum for Instance 1} + \text{Maximum for Instance 2} + \dots \text{Maximum for Instance X}$$

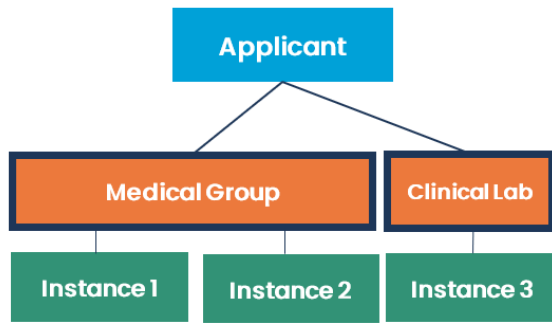
The equation above indicates how to calculate the total allowable funding maximum for an Application. Umbrella Applicants that demonstrate that they can use scale to help Signatories more efficiently utilize funds than multiple individual Applications will receive additional consideration during scoring. Applicants which can show they will achieve one of the required Outcome(s) for less than the maximum funding amount may also receive higher scores.

CDII has set the total cap for an Application, regardless of the number of Signatories and Instances covered by the Application, at \$500,000. However, CDII reserves the right to consider funding requests that exceed funding maximums outlined in this section on a case-by-case basis.

The examples below illustrate potential Application scenarios and implications for funding maximums. These scenarios are illustrative and do not encompass the diversity of possible scenarios.



Scenario 3: Multiple Instances that Cover Multiple Signatory Organizations



	Funding Max
Instance 1	\$35,000
Instance 2	\$35,000
Instance 3	\$15,000
Application Total Max	\$85,000

Key

	Primary Signatory for Instance
*	Meets Serving Underserved Community & No Cal-HOP Funding Criteria

4. Application Process *(Updated February 2024)*



UPDATE: Round 3 was the final round of DSA Signatory Grants. No additional rounds will be held in 2024.

This section explains how organizations apply for a DSA Signatory Grant, including details about Application rounds and the Application support available to Applicants.

Rounds

CDII will hold a minimum of three rounds of DSA Signatory Grant Applications starting in 2023. The exact funding amount awarded per grant round will be finalized based on the total funding requested by Applicants in that round. CDII will reserve funding to guarantee at least three rounds are available to Applicants, ensuring that organizations with limited resources have sufficient time to complete and submit a grant Application while still ensuring that grants are awarded as early as possible.

To expedite funding to organizations that must implement the DxF by January 31, 2024, the first round of the program was conducted on an expedited timeline, with the Application portal accepting Applications for one month before CDII and PCG close the round and make award decisions. **All Signatories meeting the eligibility criteria can apply for a DSA Signatory Grant starting with Round 2.** Beginning with Round 2, Application rounds are open for approximately two months.

Application Rounds, Windows, and Estimated Dates of Award Announcements

Application Rounds	Application Window	Est. Dates of Award Announcements*
Round 1	5/16/23 – 6/15/23	8/1/23
Round 2	6/30/23 – 9/1/23	9/30/23
Round 3	10/16/23 – 12/20/23	2/29/24

Once awarded, grant funding will be disbursed through payments contingent on the completion of milestones; see the [Milestones and Payments](#) Section for details.

Submitting An Application

In the DSA Signatory Grant [Application Template](#), Applicants will provide:

- Information about the Signatories included in the Application, including:
 - Documentation of organizational characteristics for each Signatory included in the Application; and

- Details about the EHR/Electronic Record System Instances used by Signatories in the Application.
- Details about how the grant will be used including:
 - The intended Outcome(s) of the Grant;
 - The Resources that would be procured using the Grant; and
 - Information about other sources of health IT grant and incentive funding and how the DSA Signatory Grant would complement – and not duplicate – that funding.⁷
- A budget request.
- A description of how the Signatories will meet their DSA requirements and incorporate DxF-exchanged data in their operational and clinical workflows.
- An approach to sustaining grant-funded activities after the grant ends and to meeting the requirements of the DSA on an ongoing basis.

Although the [Application Template](#) is similar for each grant type, some elements of the template differ to account for differences in the two grants. Moreover, the Application process for each grant is significantly different.

- QHIO Onboarding Grant Applications are completed by CAHIE, which will work closely with Applicants to complete Applications and submit required documentation.
- TA Grant Applications must be completed by the Applicant themselves, although a subset of Applicants may request support from PCG.

All Applications must be submitted through the [DxF Grants Portal](#), which is hosted on PCG's GrantsConnect portal. The DxP Program and PCG will host a series of webinars, office hours, and provide instructional materials to support Applicants in navigating the DxP Grants Portal. Organizations applying on behalf of multiple Signatories can submit more than one Application, as long as there is no duplication of Signatories across applications. All Signatories represented on the Application must co-sign the Application. The Applicant is responsible for collecting signatures using the form provided and uploading the correct documentation onto the DxP Grants Portal. All Applications will be treated as public records

⁷ *(Added October 2023)* The one exception applies to organizations who are applying for, or have received, EPT Provider Directed Payment Program funding. DSA Signatory Grantees who receive a QHIO Onboarding Grant can use their grant dollars to supplement EPT Program dollars that go towards connecting to the same QHIO, and vice versa. Please see DHCS' EPT Program FAQ for more information.

under the California Public Records Act (Government Code Section 6250 et seq.) and subject to review by the public upon request at the conclusion of the evaluation process.

QHIO Onboarding Grant Application Process

CDII has partnered with [CAHIE](#) to assist Applicants in completing and submitting [QHIO Onboarding Grant Applications](#). This is intended to facilitate Application review through consistent Application completion and to help organizations with limited resources. All Applicants in the QHIO Onboarding Grant program will work with CAHIE to complete and submit their Application.

Applicants interested in applying for QHIO Onboarding Grants must request a one-on-one consultation with CAHIE to begin the grant Application process; they can do so by emailing grantsupport@cahie.org.

CAHIE will work with the Applicant to complete all components of the Application and will submit the Application on the DxF Grants Portal on behalf of the Applicant. All entities included in the Application will be required to co-sign the Application prior to submission.

Interested Applicants in the QHIO Onboarding Grant program are encouraged to reach out to CAHIE as soon as possible in order to ensure sufficient time to complete Applications prior to the deadline for each round.

TA Grant Application Process

The DxF Program expects that most Applicants that choose the TA Grant will do so because they have identified a set of Resources that they wish to fund through the grant that either does not include or is not limited to QHIO onboarding, and because they have the capacity to manage the process of applying for and managing grant funds. However, the DxF Program acknowledges that some Applicants in this program may need support in completing the Application.

Upon request, PCG may assist TA Grant Applicants in completing their TA Grant [Application](#). Support provided may include a consultation on the funding types and amounts requested in the Application, support determining the maximum amount of funding the Applicant may request, and bespoke guidance on how to fill out the Application. Applicants interested in applying for TA Grants and that need assistance can request a one-on-one consultation with PCG to begin the Application process; they can do so by emailing DSAGrants@pcgus.com.

In addition to individual TA Grant Application support, TA Grant Applicants will be able to access off-the-shelf Application tutorials to support their completion of the Grant Application.

Ultimately, Applicants in the TA Grant program will need to complete their Application and submit it on the [DxF Grants Portal](#) directly. As the TPA for the DSA Signatory Grant Program, PCG may answer specific questions before the grant Application is submitted but cannot be responsible for writing any portion of any Application. Assistance may only be requested prior

to grant Application submission. Submitted Applications will be considered final in all circumstances.

5. Scoring Criteria & Award Decisions *(Updated July 2023)*

PCG and CDII will review and score all Applications using a standardized rubric after the close of each round. Applications meeting the scoring criteria in each round will receive a grant award in that round, contingent on the availability of funds in that round. Decisions on some Applications may be deferred to future rounds if they meet the minimum score to be considered for future funding based on the number of Applications submitted and the Application score distribution.

Scoring Criteria

The table outlines how different sections of the Application will be considered in scoring. The exact weight of each Application component may be subject to change.

Scoring Criteria Table *(Updated July 2023)*

DSA Signatory Application Components	% of Score
Signatory characteristics	45%
Current health IT infrastructure and capacity for HIE	15%
Proposed activities and Funding Request	15%
Plan for meeting DSA requirements	20%
Plan for maintaining DSA requirements	5%

Applications may receive higher scores if they demonstrate the following:

- ☐ Signatories included in the Application have a significant gap in IT infrastructure that must be addressed to achieve their DSA obligations.
- ☐ Signatories included in the Application served underserved and/or historically marginalized communities.
- ☐ Signatories included in the Application have not received funding from past or current HIT and HIE funding programs.
- ☐ Signatories will be able to meet their DSA requirements at the end of the grant-funded activities.
- ☐ Signatories have a clear plan for meeting and maintaining DSA requirements.
- ☐ The Applicant will effectively use funds to help Signatories meet their DSA requirements. Umbrella Applicants that request less funding than the maximum amount that they

are permitted to request may receive preferential scoring because they demonstrate that they can more efficiently support Signatories as a group than if they applied independently.

In addition, Applicants that apply in earlier rounds may receive preferential scoring for future rounds if their Application was deferred to a future round.

Issues with Applications

To be considered by CDII and PCG, all Applications must be complete and accurate. To facilitate scoring, Applicants should provide straightforward and concise responses to questions in the Applications.

Applications that are determined to not meet the minimum eligibility criteria outlined above may not be reviewed. In this event, PCG will notify Applicants of the determination that the Application is ineligible, and Applicants will have nine days from the date of that notification to request a reconsideration if they believe the determination was made in error. Applicants may resubmit their application if the issue is corrected before the round closes round if they meet the minimum eligibility criteria for that round.

Incomplete Applications may not be reviewed. When possible, PCG will notify Applicants of missing information, and Applicants will have nine days from the date of that notification to resubmit the Application with all required information.

Applications that meet the following criteria may be rejected by PCG:

- Applications where the Applicant omitted information needed to accurately score the Application, such as by not including a Signatory that would meet the criteria for Primary Signatory in an Instance that serves multiple Instances.
- Applications that include inaccuracies that contradict attestation forms or publicly available information, such as inaccurately indicating that a Signatory did not receive Cal-HOP funding or providing an incorrect address for a Primary Signatory.

In the situations above, PCG will notify Applicants of the reason for the rejection, and Applicants will have five days from the date of that notification to request a reconsideration and provide an appropriate explanation for the issue(s).

Award Decisions

All Applications eligible for consideration in a given round will receive one of the following determinations for that round:

- Grant award: CDII will issue awards in a given round for Applications that meet eligibility criteria and scoring thresholds.
- Deferral to future round: CDII may defer some Applications to future rounds based on scoring if it receives a high volume of eligible grant Applications in a given round.

- No grant award for this Application: CDII may notify some Applications that they do not meet the eligibility criteria or scoring threshold to receive a DSA Signatory Grant.

Applications that receive a deferral determination will automatically be considered in subsequent funding rounds. Deferred Applicants that would like to change their Application may withdraw their deferred Application from consideration and submit a new Application for consideration in future rounds, as long as those rounds are open for Applications.

CDII and PCG expect to announce award determinations within approximately two months of the close of each round. However, that timeline is subject to change based on the volume of Applications submitted.

6. Progress Reports, Milestones & Payments *(Updated October 2025)*

Once awarded, Grantees will receive grant funds upon the completion of two Milestones. This section outlines the process for creating grant agreements with CDII, defines the Milestones, and explains the process for attesting to the Milestone completion and receiving funds.

As with the [Use of Funds and Required Grant Outcomes section](#), this section is based on two key concepts:

- **Resources** means resources that a Grantee would use grant funding to procure and may include a HIT vendor, external personnel, internal personnel; or other. The Resources procured with grant funding must adhere to the Permissible Uses of Funding listed in the [Uses of Funding and Required Grant Outcomes](#) section.
- **Outcomes** means the required end-result of a Grant. Grantees must achieve the required, specific Outcomes listed in the [Uses of Funding and Required Grant Outcomes](#) section to receive their full grant award.

Grant Agreements

Each Grantee will sign a Grant Program Acknowledgement (GPA) with the DxF Program that will specify the Milestones they must reach to receive grant funds. Each GPA will have two Milestones, and the total grant award will be disbursed evenly across the two Milestones. Grantees will attest to Milestone completion through the submission of Progress Reports, and funds will be disbursed by PCG following the review of a Progress Report demonstrating that a Grantee has achieved a Milestone; see below for details.

Grantees will have at least 12 months from the time of their award before the Milestone 1 deadline, and at least 24 months from the time of their award before the Milestone 2 deadline. For Round 1 and 2 QHIO Onboarding Grantees, the 12- and 24- month period starts from the QHIO Announcement date (October 23, 2023). Grantees that do not achieve Milestones in those timeframes may forfeit their grant award. See the [Recoupment section](#) for additional information.

TA Grant Milestones *(Updated October 2025)*

The Milestones for the TA Grant will depend on the anticipated Outcome of the grant and the Resources that the Grantee identified in their Application.

As detailed in the [Use of Funds section](#) of this document, Applicants must identify in their Application at least one of the following Outcomes of their TA Grant:

1. Identified and contracted with a technical solution that will help them achieve real-time data exchange in accordance with the DxF;
2. Implemented a technology solution capable of supporting real-time data exchange in accordance with the DxF;

3. Adjusted, upgraded, or adopted a certified EHR or other Electronic Record System required to enable real-time data exchange in accordance with the DxF; or
4. Created and completed training for new operational and clinical workflows required to complete real-time data exchange in accordance with the DxF.

To achieve this Outcome, Applicants may identify up to 10 Resources for grant funding. The TA Grant Milestones are based on the Outcomes and Resources identified in the Application.

TA Grants Milestones (Updated October 2025)

Milestone 1 definition: Grantee demonstrates that they have procured Resources that will account for at least 50% of the grant budget.

How to demonstrate this Milestone: Through the Progress Report section of the DxF Grants Portal, Grantee will submit the following document, showing for Resources that account for at least 50% of the grant budget:

- ☐ An attestation co-signed by the Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee) confirming that a contract for HIT vendors, external personnel, and/or other external/internal Resources have been procured.

Milestone 2 definition: Grantee demonstrates that they have achieved the Outcome(s) listed in the TA Grant Application.

How to demonstrate this Milestone: Through the Progress Report section of the DxF Grants Portal, the Grantee will submit the following documents:

- ☐ An attestation co-signed by the Grantee and the DSA Signatory(s) on the Grant (if different from the Grantee), stating that the TA Milestone 2 Outcome(s) have been completed. The Grantee and DSA Signatory(s) signing the attestation must be the same individual(s) who signed the DSA or Grant Application. If the same individual(s) cannot sign the attestation, the DxF Program may consider an alternate representative acceptable, the Grantee can provide an explanation (not to exceed 100 words) for why the attestation cannot be signed by the same individual who signed the DSA. In addition, the explanation must provide confirmation that the alternate representative has authority to attest to the work completed on the form; **AND**

- The relevant supporting documentation as it relates to the Grantees' chosen Outcome(s). **See next section on TA Milestone 2 Outcomes 1–4.** Supporting documentation must be provided for all DSA Signatories included in the grant.

If the DxF Program or PCG is unable to clearly determine that a submitted document meets an Outcome, they may contact the Grantee for a revision request. To respond to a revision request, a Grantee must resubmit a revised Progress Report with either new documentation or a narrative in the comment box explaining how the original documentation demonstrated evidence of the outcome's completion. Failure to respond to a revision request within the timeframe provided by the DxF Program or PCG may result in the termination of a Grantee's award.

If a revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone and the revised Progress report was submitted within 15 calendar days after the Progress Report's due date, the DxF Program intends to disburse that Milestone's funding by the Progress Report's original payment date in the [Progress Report Due Dates table](#). If the revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone, but the revised Progress Report was submitted after 15 calendar dates after the Progress Report's due date, then the DxF Program intends to disburse that Milestone's funding no later than the following quarterly Progress Report's payment date in the [Progress Report Due Dates table](#).

TA Grant Milestone 2 Outcome 1 (Updated October 2025)

Outcome 1 definition: Identifying and Contracting with a Technology Solution that Will Help Them Achieve Real-Time Data Exchange in Accordance with the DxF.

Permissible Uses: TA Grantees may use funds to pay for a Resource that will help them with any of the following:

- ✓ Conducting a gap analysis to identify the steps needed to meet DSA requirements;
- ✓ Assessing and selecting technology solutions that could address those gaps (which may include a QHIO or another HIE solution; it may also include an Electronic Record System if the Signatory does not already have a system that can be configured for real-time data exchange);
- ✓ Contracting with technology vendor(s) that would achieve some or all of a Signatory's DSA requirements; or
- ✓ Other activities associated with procuring a technology solution that would achieve some or all DSA requirements.

Proof of Outcome 1 Documents: Grantees shall submit **ONE** of the following supporting documents to demonstrate completion of Outcome 1:

- ☐ Copy of a signed contract with a HIT vendor and a narrative describing how this contract has helped the Grantee achieve real-time data exchange in accordance with the DxF; or
- ☐ Copy of completed technology solutions assessment.

TA Grant Milestone 2 Outcome 2 (Updated October 2025)

Outcome 2 definition: Implementing a Technology Solution Capable of Supporting Real-Time Data Exchange in Accordance with the DxF.

Permissible Uses: TA Grantees may use funding to pay for Resources to implement a technology solution that establishes real-time data exchange needed by the DSA. Solutions may include, but are not limited to, QHIOs or HIOs that have not been qualified by the DxF Program but will support the Grantee in achieving DSA requirements. Costs may include the following:

- ✓ Costs for the Signatory to retain a technology consultant or IT staff to onboard the technology;
- ✓ Costs paid to a technology vendor to fund implementation of a technology solution that enables real-time data exchange as required by the DSA; or
- ✓ Costs paid to the Signatory's existing Electronic Record System (i.e., an EHR for a health care organization) to interface with another technology solution.

Funding may not be used to pay for ongoing fees or subscriptions to previously acquired systems; except as noted in the Impermissible Uses for TA Grants section above.

Proof of Outcome 2 Documents: Grantees shall submit **ONE** of the following supporting documents to demonstrate completion of Outcome 2:

- ☐ DSA Signatory Grants Outcome 2 attestation form signed by the Grantee and HIT vendor. The Grantee and DSA Signatory(s) signing the attestation must be the same individual(s) who signed the DSA or Grant Application. If the same individual(s) cannot sign the attestation, the DxF Program may consider an alternate representative acceptable, the Grantee can provide an explanation (not to exceed 100 words) for why the attestation cannot be signed by the same individual who signed the DSA. In addition, the explanation must provide confirmation that the alternate representative has authority to attest to the work completed on the form;
- ☐ Attestation from a HIT vendor confirming completion of integration with EHR;
- ☐ An invoice with line-item description of subscription fee or maintenance and support, if the fee is associated with the first year of onboarding to a technology for real-time data exchange;

- ❑ Invoice, work or sales order, or order form demonstrating technology implementation. This document must include a line-item description demonstrating implementation of a solution (e.g., HIE Set Up Fee, Integration Fee, and ADT Fee) or procurement of new hardware and equipment (e.g., servers, desktops, and laptops) that supports exchange in accordance with the DxF;
 - ❑ Employment offer letter for DxF implementation (e.g., EHR Project Manager);
 - ❑ Audit log demonstrating data exchange transactions from the newly implemented technology solution including date and event type⁸, or
 - ❑ Written documentation⁹ – such as a screenshot or excerpt from a data file or database – demonstrating that the completion of a real-time data exchange transaction for each Instance included in the Grant, in a production (i.e., non-test) environment and a narrative of the screenshot or excerpt explaining which transaction it demonstrates and how it demonstrates a real-time data exchange transaction. Screenshots and excerpts must redact or remove ALL patient information (e.g., name, patient ID, date of birth, address, diagnosis, prescriptions or lab results). Screenshots may include, but are not limited to:
 - i. EHR or web-based portal demonstrating the result of the data being exchanged; and/or
 - ii. An audit log from your QHIO, HIO, EHR, or other record of the successful exchange.
- a. If your screenshot demonstrates that you are **sending data** to an entity, you must provide a narrative explaining the following in the comment box:
 - i. Who are you sending the data to?
 - ii. How are you sending the data?
 - iii. What data is being sent? (e.g., patient health record, continuity of care document or summarization of episode note. Exclude all patient information.)
 - iv. Date the data was sent.
 - b. If your screenshot demonstrates that you are **retrieving the data** from an entity, you must provide a narrative explaining the following in the comment box:
 - i. Who are you retrieving the data from?
 - ii. How are you retrieving the data?
 - iii. What data is being retrieved? (e.g., patient health record, continuity of care document or summarization of episode note. Exclude all patient information.)

⁸ Do not include any health information, personally identifiable information, other otherwise confidential information.

⁹ Do not include any health information, personally identifiable information, other otherwise confidential information.

iv. Date the data was received.

The following are examples of supporting documents that may result in a revision request from the DxF Program or PCG:

- ☐ Incomplete DSA Signatory Grants Outcome 2 attestation form without required signatures;
- ☐ Attestation letter from the Grantee without the HIT vendor's signature;
- ☐ Invoice with line-item description for previously acquired systems' subscription fee or maintenance and support;
- ☐ Email from a HIT vendor describing the status of the implementation;
- ☐ Screenshot of a portal with patient information; or
- ☐ Screenshot which demonstrates access to the portal but does not show evidence of data exchange.

TA Grant Milestone 2 Outcome 3 (Updated October 2025)

Outcome 3 definition: Adjusting, Upgrading, or Adopting a Certified EHR or Other Electronic Record System Required to Enable Real-Time Data Exchange in Accordance with the DxF.

Permissible Uses: Some organizations will not have certified EHR technology or other Electronic Record Systems that can be configured for real-time data exchange needed by the DSA. For such Signatories, TA grant funding may be used to fund Resources that support the following activities:

- ✓ Updating the configuration of an Electronic Record System if doing so is required in order to establish real-time data exchange;
- ✓ Paying for the initial costs of adding new modules or functionality to an Electronic Record System if doing so is needed to establish real-time data exchange; or
- ✓ Adopting a new Electronic Record System if doing so is needed to support real-time data exchange.

Funding may not be used to pay for ongoing fees or subscriptions to previously acquired systems; except as noted in the Impermissible Uses for TA Grants section above.

Proof of Outcome 3 Documents: Grantees shall submit **ONE** of the following supporting documents to demonstrate completion of Outcome 3:

- ☐ DSA Signatory Grants Outcome 3 attestation form signed by the Grantee and a HIT vendor. The Grantee and DSA Signatory(s) signing the attestation must be the same individual(s) who signed the DSA or Grant Application. If the same individual(s) cannot sign the attestation, the DxF Program may consider an alternate representative acceptable, the Grantee can provide an explanation (not to exceed 100 words) for why the attestation cannot be signed by the same individual who signed the DSA. In addition, the explanation must provide confirmation that the alternate representative has authority to attest to the work completed on the form;
- ☐ Attestation from a HIT vendor confirming that the EHR was upgraded to a new version and established real-time data exchange;
- ☐ An invoice with line-item description of subscription fee or maintenance and support, if the fee is associated with the first year of onboarding to a technology for real-time data exchange;
- ☐ An invoice, work or sales order, or order form. This document must include a line-item description demonstrating adjustment, upgrade, or adoption of the EHR (e.g., HL7 FHIR API License, new ADT and CCDA outbound feature, or QHIO integration); or
- ☐ Contract with a HIT vendor demonstrating adoption of an EHR.

The following are examples of supporting documents that may result in a revision request from the DxF Program or PCG:

- ☐ Incomplete DSA Signatory Grants Outcome 3 attestation form without required signatures;
- ☐ An invoice with line-item description for previously acquired systems' subscription fee or maintenance and support;
- ☐ Order form with subscription fees as proof of adoption of a new EHR or other electronic records system unless Grantee demonstrates the subscription fee indicates adoption of EHR or other electronic records system; or
- ☐ Email from a HIT vendor describing the status of the implementation.

TA Grant Milestone 2 Outcome 4 (Updated October 2025)

Outcome 4 definition: Creating and Providing Training for New Operational and Clinical Workflows Required to Complete Real-Time Data Exchange in Accordance with the DxF.

Permissible Uses: Signatories may use TA funding for Resources that support workflow redesign and training activities to enable implementation and use of technologies for data exchange, including the following:

- ✓ Costs for a consultant or expert to develop and help implement workflows that support electronic health information exchange as needed by the DxF; or
- ✓ Other costs associated with creating such workflows and trainings.

Proof of Outcome 4 Documents: Grantees shall submit **ONE** of the following supporting documents to demonstrate completion of Outcome 4:

- ☐ Copy of final training and/or technical assistance materials. This material may be created by the Grantee or a HIT vendor (e.g., HIT vendor's User Guide, training manual, training video or workflows). Procedural workflow with screenshots of a portal should not include patient information. Please redact or remove ALL patient information before submitting;
- ☐ Agenda or outline of a training session required to complete real-time data exchange in accordance with the DxF;
- ☐ Attestation from a HIT vendor attesting that the Grantee has completed training to implement the technology;
- ☐ Invoices demonstrating a Grantee's staff have completed training for real-time data exchange; or
- ☐ Email confirmation from a HIT vendor that training has been completed.

The following are examples of supporting documents that may result in a revision request from the DxF Program or PCG:

- ☐ Email confirmation from a HIT vendor that training has been scheduled.

QHIO Onboarding Grant Milestones (Updated October 2025)

The Milestones for the QHIO Onboarding Grant are as follows.

QHIO Onboarding Grants Milestones

Milestone 1 definition: Grantee has signed a contract with a QHIO for all the Signatories included in the Grant. Grantee may develop multiple contracts for Signatories in the Grant, but they must all be with the same QHIO, and they must cover all Signatories in the Application in order to reach Milestones 1.

How to demonstrate this Milestone: Through the Progress Report section of the DxF Grants Portal, the selected QHIO for a Grant will submit:

- ❑ An attestation co-signed by the QHIO, Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee), confirming that a contract or contract amendment* has been signed. †‡

Milestone 2 definition: The QHIO has successfully onboarded all Signatories in the Grant and completed a real-time data exchange transaction.

How to demonstrate this Milestone: Through the Progress Report section of the DxF Grants Portal, the QHIO will submit the following documents:

- ❑ An attestation co-signed by the QHIO, the Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee), stating that onboarding has been completed. The Grantee and DSA Signatory(s) signing the attestation must be the same individual(s) who signed the DSA or Grant Application. If the same individual(s) cannot sign the attestation, the DxF Program may consider an alternate representative acceptable, the Grantee can provide an explanation (not to exceed 100 words) for why the attestation cannot be signed by the same individual who signed the DSA. In addition, the explanation must provide confirmation that the alternate representative has authority to attest to the work completed on the form; AND
- ❑ Written documentation demonstrating the completion of a real-time data exchange transaction for each Instance included in the Grant, in a production (i.e., non-test) environment. **See next section on QHIO Onboarding Grant Milestone 2 Outcome.**

* A contract amendment may be, but is not limited to, a revision to a contract, a new agreement that supplements a legacy contract, or an addendum to a contract.

† An attestation form will be made available for use on the DxF Grants Portal.

‡ In most circumstances, the Grantee is the DSA Signatory themselves. But in the case of Umbrella Grants, the Milestone 1 Attestation must be co-signed by all DSA Signatories included under the Grant, as well as the Grantee. An attestation form will be available on the DxF Grants Portal for use

If the DxF Program or PCG is unable to clearly determine that a submitted document meets the outcome, they may contact the Grantee for a revision request. To respond to a revision request, a Grantee must resubmit the Progress Report with new documentation or a narrative in the comment box explaining how the original documentation demonstrated evidence of the outcome's completion. Failure to respond to a revision request within the timeframe provided by the DxF Program or PCG may result in the termination of a Grantee's award.

If a revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone and the revised Progress report was submitted within 15 calendar days after the Progress Report's due date, the DxF Program intends to disburse that Milestone's funding by the Progress Report's original payment date in the [Progress Report Due Dates table](#). If the revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone, but the revised Progress Report was submitted after 15 calendar dates after the Progress Report's due date, then the DxF Program intends to disburse that Milestone's funding no later than the following quarterly Progress Report's payment date in the [Progress Report Due Dates table](#).

QHIO Onboarding Grant Milestone 2 Outcome (Updated October 2025)

Outcome definition: The QHIO has successfully onboarded all Signatories in the Grant and completed a real-time data exchange transaction.

Permissible Uses: QHIOs and Grantees must mutually agree on how funds will be spent to ensure successful onboarding to the QHIO. QHIO Onboarding Grants may be used for one or more of the following:

- Offset QHIO Costs: Grant funding can be used to help cover QHIO fees and other QHIO costs associated with onboarding, which may include:
 - ✓ The QHIO's costs to connect to a DSA Signatory's EHR or other Electronic Record System (i.e., initial QHIO fees); or
 - ✓ The QHIO's costs to develop capabilities to perform the health information exchange (HIE) capabilities outlined in the DSA and its P&Ps.
- Offset Signatory Costs: Grant funding can be used to cover Signatory costs associated with onboarding, which may include:
 - ✓ Configuration costs for the DSA Signatory's EHR or other electronic documentation system to enable their connection to the QHIO (i.e., fees paid to the EHR vendor); or
 - ✓ The DSA Signatory's cost to retain an IT personnel resource for onboarding.

Proof of Outcome Documents:

- Written documentation— such as a screenshot or excerpt from a data file or database¹⁰ – demonstrating the completion of a real-time data exchange transaction for each Instance included in the Grant, in a production (i.e., non-test) environment¹¹ and a narrative of the screenshot or excerpt explaining which transaction it demonstrates and how it demonstrates the real-time data exchange transaction. Screenshots and excerpts must redact or remove ALL patient information (e.g., name, patient ID, date of birth, address, diagnosis, prescriptions or lab results). Screenshots may include, but are not limited to:
 - i. Portal interface demonstrating the result of the data being exchanged; and/or

¹⁰ The submission of proof for real-time output must not include ANY patient information.

¹¹ The DxP Program understands that there may be situations in which it is impossible to onboard a Signatory included in the original Application. For example, a Signatory may shut down operations during the grant period. The DxP Program and PCG will provide an opportunity for QHIOs to explain situations in which they were unable to onboard all Signatories originally included in the grant.

- ii. An audit log or other record of the successful exchange.
- a. If your screenshot demonstrates that you are **sending data** to an entity, you must provide a narrative explaining the following in the comment box:
 - i. Who are you sending the data to?
 - ii. How are you sending the data?
 - iii. What data is being sent? (e.g., patient health record, continuity of care document or summarization of episode note. Exclude all patient information.)
 - iv. Date the data was sent.
- b. If your screenshot demonstrates that you are **retrieving the data** from an entity, you must provide a narrative explaining the following in the comment box:
 - i. Who are you retrieving the data from?
 - ii. How are you retrieving the data?
 - iii. What data is being retrieved? (e.g., patient health record, continuity of care document or summarization of episode note. Exclude all patient information.)
 - iv. Date the data was received.

Grantees who were awarded a QHIO Onboarding Grant prior to the announcement of QHIOs on October 23, 2023 can select a QHIO at any point between their application submission and their Milestone 1 deadline. The Grantee must designate and work with a single QHIO using grant funds. After attesting to Milestone 1, the Grantee cannot (a) switch to a different QHIO for the purposes of achieving the second QHIO Onboarding Grant Milestone or (b) change their grant to the TA Grant.

NOTE: Grantees must not send ANY health information or personally identifiable information about patients or clients to PCG or the DxP Program.

What If I've Already Signed a Contract With An HIO? *(Updated July 2023)*

- For organizations that have already signed an agreement with an HIO, the DxF Program will accept agreements between an HIO and Participant executed on or after January 1, 2023, as long as that HIO is qualified as part of the DxF Program's qualification program.
- Organizations that have already contracted with an HIO prior to January 1, 2023, may be eligible for a QHIO Onboarding Grant for additional onboarding work with that HIO if that legacy (i.e., pre-2023) contract did not provide the capability to conduct data exchange in accordance with the DxF. In this case, Applicants will need to explain the required capability not achieved via their existing contract in their Application. Once the HIO is named as a QHIO, they will need to either (a) enter into a new contract with the QHIO to achieve those capabilities or (b) amend their legacy contract to achieve those capabilities in order to achieve Milestone 1.¹² If the HIO is not qualified, they can switch to a TA grant to work with an HIO.
- The DxF Program cannot guarantee that any given HIO will become qualified. By onboarding with an HIO before the release of the list of QHIOs, participants assume the risk that their HIO may not be designated a QHIO.

Progress Reports *(Updated October 2025)*

Starting June 30th of 2024 and until they achieve Milestone 2, Grantees (or their selected QHIO) will submit Progress Reports to PCG each quarter. Each Progress Report will be brief, and collect one or more of the following pieces of information:

- Demonstration of a Milestone completion;
- Brief update on ongoing work to achieve Milestone completion;
- Reason for reaching the Milestone 1 deadline without achieving Milestone 1;
- Reason for reaching the Milestone 2 deadline without achieving Milestone 2;
- A change request for the TA Grant (only needed if Grantee will not achieve the Outcome(s) listed in their Application); and/or
- A change request for the QHIO Grant (only needed if converting from a QHIO Grant to a TA Grant or to switch selected QHIO).

Progress Reports are accepted and reviewed by PCG on a quarterly basis starting the second calendar quarter of 2024; see the February 2024 updated [Progress Report Schedule](#) in Appendix C for explicit Progress Report dates. Grantees are responsible for submitting

¹² A contract amendment may be, but is not limited to, a revision to a contract, a new agreement that supplements a legacy contract, or an addendum to a contract.

Progress Reports under the TA Grant, while QHIOs are responsible for submitting Progress Reports on behalf of Grantees under the QHIO Onboarding Grant.¹³ (For QHIO Onboarding Grant Progress Reports attesting to a complete Milestone, the Grantee will be required to co-sign the attestation.)

Upon receipt of a Progress Report demonstrating the achievement of a Milestone, the DxF Program intends to disburse that Milestone's funding to Grantees within 30 or 31 days of that specific Progress Report's due date.

If a revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone and the revised Progress report was submitted within 15 calendar days after the Progress Report's due date, the DxF Program intends to disburse that Milestone's funding by the Progress Report's original payment date in the [Progress Report Due Dates table](#). If the revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone, but the revised Progress Report was submitted after 15 calendar dates after the Progress Report's due date, then the DxF Program intends to disburse that Milestone's funding no later than the following quarterly Progress Report's payment date in the [Progress Report Due Dates table](#).

All grantees must submit a Progress Report if they have reached the Milestone 1 deadline without reaching Milestone 1. In this Report, they will provide a plan for achieving both Milestones 1 and 2 over the subsequent 12 months. PCG will review the plan and determine if the Grantee can receive an extension to complete Milestone 1.

TA Grantees that would like to request an Outcome change may submit a Change Request through the Progress Report. Grantees will need to explain the reason for the change and demonstrate that they will still achieve one of the required Outcomes of a TA Grant. PCG and the DxF Program will review all requests and provide a response to the Grantee within 30 days of the Progress Report submission. The DxF Program and PCG reserve the right to adjust grant awards based on significant changes in Outcomes.

In the event that an awarded grant representing multiple signatories has one or more signatories drop out or fail to complete milestones, the DxF Program reserves the right to reduce the overall award to the Grantee accordingly.

The DxF Program and PCG reserve the right to request additional information from Grantees outside of the Progress Reports.

¹³ For an Application submitted before the QHIO announcement, Grantees who have not yet chosen their QHIO of choice, will be responsible for submitting all required Progress Reports themselves until they have chosen their QHIO who can their Milestone 1 attestation. Once the QHIO and Grantee have attested to Milestone 1, the selected QHIO will assume responsibility for all Progress Reports.

Who Signs the Progress Reports? *(New as of February 2024)*

Type of Progress Report	QHIO Grantee	TA Grantee
Progress Report for Non-Milestones	• QHIO Only	• TA Grantee
Progress Report for ANY Milestone	• QHIO • Grantee*	• TA Grantee*

* If the Grantee represents multiple DSA signatories, ALL milestone attestations must be co-signed by every single DSA Signatory included under the grant.

For a table of who is required to sign the Progress Reports, and what kinds of attestation and documentation are required for both Grant domains, check out the [Grant Progress Report & Milestone Matrix](#) in Appendix D.

(Updated February 2024) QHIO Onboarding Grant Progress Reports Submission

Once a QHIO Onboarding Grantee selects their chosen QHIO, that QHIO will be required to take on all grant-related administrative tasks, including the provision of ongoing Progress Reports, for the duration of the grant. To do this, one or more "reporters" from the selected QHIO – i.e., the individual(s) designated by the QHIO to support DSA Signatory Grants management – will need to be added as a contributor to the grantee's DxF Grants application. These QHIO reporters will have the ability to provide Progress Reports and information to the DxF Program and PCG through the DxF Grants portal, on behalf of the grantee.

Grantees should notify PCG once they have selected and reached an agreement with their QHIO. PCG staff will then add the designated QHIO's reporters to the application on the DxF Grants portal. This will allow the QHIO reporters to upload Progress Reports and allow grantee staff the option to review and confirm uploaded information should they choose.

QHIOs will complete progress reports and receive payments according to the updated [Progress Report Schedule](#) located in Appendix C. QHIOs will work with the PCG to provide relevant banking and payment information, as is required of QHIOs, under the QHIO Onboarding Grant domain

(Updated February 2024) 2023-2024 Progress Reports For Expedited Funding

Grantees have the opportunity to submit a Progress Report attesting to a Milestone completion on an ongoing basis from the time of their award until May 31, 2024. During this time, PCG will review these submissions and issue funding on a monthly basis for Grantees that have demonstrated that they have achieved a Milestone.

While a Grantee can submit a Progress Report attesting to a Milestone completion at any time during the first two quarters of 2024, all Grantees are required to submit at least one

Progress Report between April 1 to June 30, 2024, regardless of whether or not they have achieved a milestone.

Ongoing, Progress Reports will be due on a quarterly basis and payments will be issued by the end of the subsequent month following each quarter (April, July, October, January).

Please refer to the updated [Progress Report Schedule](#) located in Appendix C for specific dates.

Recoupment

HCAI reserves the right to recoup funding already disbursed to grantees in the following cases:

- The Grantee or their selected QHIO is found to have committed fraud or misused the funds; and
- Milestone Two is not achieved within two years of the receipt of the grant award.

Appendix

A. DxF Education Grantees *(Updated February 2024)*

CalHHS and the DxF Program are working with stakeholders across the state to ensure the successful implementation of the DxF. While the DxF Educational Initiative Grantee program has concluded, many of these organizations may have resources on their websites that you may find valuable as you work to implement the DxF. You can find links to their DxF microsites and websites, as well as the kinds of signatory types they represent, in the table below.

Grantees	Website	Signatory Type
Multi-Association Initiative led by America's Physician Groups (APG)	Multi-Association DxF Microsite	Physicians (Group Practices/Family Physicians/etc.), Aging Providers, Long-Term Care Facilities, HIEs
California Medical Association (CMA)	CMA DxF Microsite	Physician Organizations, Medical Groups
California Primary Care Association (CPCA)	CPCA DxF Microsite	FQHCs
The County Health Executives Association of California (CHEAC)	CHEAC DxF Microsite	Local health departments
California Association of Health Plans (CAHP)	CAHP Website	44 health insurance plans licensed/regulated by DHCS, DMHC, and/or CDI
Leading Age California Foundation	Leading Age DxF Microsite	Skilled Nursing Facilities, Health Plans, Community-Based Organizations
American Academy of Pediatrics, California Chapter 1 (AAPCA1)	AAPCA1 Website	Any Signatory serving pediatric populations
California Council of Community Behavioral Health Agencies (CBHA)	CBHA Website	Community-Based Organizations Behavioral Health Providers

B. Timeline for DSA Signatory Grant Rounds 1–3 *(Updated October 2023)*

CDII held three rounds of funding for the DSA Signatory Grants. The following timeline reflects the established timeline for each of these three rounds. Please refer to the relevant sections in the Guidance Document for details on each of the activities in the grid and for eligibility information about the rounds.

	2023									2024			
Activity	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr
Grant Materials Released													
DxF Grant Portal Opens													
Round 1 <i>(Expedited)</i>													
Application Open													
Awards Announced													
First Opportunity for Funding						*	**						
Round 2													
Application Open													
Awards Announced													
First Opportunity for Funding								*	**				
Round 3													
Application Open													
Awards Announced													
First Opportunity for Funding												*	**

* Indicates first opportunity to submit a Progress Report attesting to Milestone 1 completion

** Indicates first opportunity to receive payment for Milestone 1 completion

C. Progress Report Due Dates *(Updated February 2024)*

Year	Progress Report Due Date	Estimated Payment Date for Reports Attesting to a Milestone ¹⁴
2023	<i>Optional reports attesting to Milestone completion will be accepted anytime during 2023.</i>	<i>Funds will be disbursed on an ongoing basis.</i>
2024	<i>Grantees who have achieved Milestone 1 have the option to submit their first Progress Report at any time between January 1, 2024, to May 31, 2024.</i> <i>January 31, 2024</i> <i>February 29, 2024</i> <i>March 31, 2024</i> <i>April 30, 2024</i> <i>May 31, 2024</i>	<i>Funds will be disbursed by the end of the subsequent month that a Progress Report was submitted</i> <i>February 29, 2024</i> <i>March 31, 2024</i> <i>April 30, 2024</i> <i>May 31, 2024</i> <i>June 30, 2024</i>
	June 30, 2024	July 31, 2024

All grantees, regardless of whether they have achieved a milestone, must submit a Progress Report by June 30, 2024. Progress reports submitted in April and May of 2024 will be accepted for the required June 2024 Progress Report due to recently informing CDII of their progress and do need to submit another Progress Report.

¹⁴ Upon receipt of a Progress Report successfully demonstrating the achievement of a milestone, the DxF Program intends to disburse that milestone's funding to Grantees within 30 days of that specific Progress Report's due date. If a revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone and the revised Progress report was submitted within 15 calendar days after the Progress Report's due date, the DxF Program intends to disburse that Milestone's funding by the Progress Report's original payment date in the [Progress Report Due Dates table](#). If the revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone, but the revised Progress Report was submitted after 15 calendar dates after the Progress Report's due date, then the DxF Program intends to disburse that Milestone's funding no later than the following quarterly Progress Report's payment date in the [Progress Report Due Dates table](#).

Year	Progress Report Due Date	Estimated Payment Date for Reports Attesting to a Milestone ¹⁵
2024	<i>Starting July 2024, Progress Reports will be due on a quarterly basis.</i>	<i>Funds will be disbursed by the end of the subsequent month on a quarterly basis.</i>
	September 30, 2024	October 31, 2024
	December 31, 2024	January 31, 2025
2025	March 31, 2025	April 30, 2025
	June 30, 2025	July 31, 2025
	September 30, 2025	October 31, 2025
	December 31, 2025	January 31, 2026
2026	March 31, 2026	April 30, 2026

¹⁵ Upon receipt of a Progress Report successfully demonstrating the achievement of a milestone, the DxF Program intends to disburse that milestone's funding to Grantees within 30 days of that specific Progress Report's due date. If a revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone and the revised Progress report was submitted within 15 calendar days after the Progress Report's due date, the DxF Program intends to disburse that Milestone's funding by the Progress Report's original payment date in the [Progress Report Due Dates table](#). If the revised Progress Report successfully demonstrates that a Grantee has achieved a Milestone, but the revised Progress Report was submitted after 15 calendar dates after the Progress Report's due date, then the DxF Program intends to disburse that Milestone's funding no later than the following quarterly Progress Report's payment date in the [Progress Report Due Dates table](#).

D. Grant Progress Report & Milestone Matrix *(New as of February 2024)*

	QHIO Grantee	TA Grantee
Who signs the Progress Reports?		
Progress Report for Non-Milestones	QHIO <i>Only</i>	TA Grantee
Progress Report for ANY Milestone	- QHIO - Grantee	TA Grantee
What documents demonstrate a Milestone? <i>(New as of February 2024)</i>		
Milestone 1 Supporting Documentation*	An attestation co-signed by the QHIO, Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee*), confirming that a contract or contract amendment† between the QHIO and a DSA Signatory was signed, revised, or amended.	An attestation co-signed by the Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee*), confirming that a contract for HIT vendors, external personnel, and/or other external/internal Resources have been procured.
Milestone 2 Supporting Documentation	- An attestation co-signed by the QHIO, the Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee), stating that onboarding has been completed for all Signatories in the Grant; AND Documentation proving that real-time data exchange transaction has occurred for each Instance on the grant.	- An attestation co-signed by the Grantee, and the DSA Signatory(s) on the Grant (if different from the Grantee), stating that the TA Milestone 2 outcome(s) have been completed; AND - The relevant supporting documentation as it relates to the Grantee's chosen Outcome(s). Supporting documentation (e.g., training materials, screen shot or data output) must be provided for all DSA Signatories included in the grant.‡

* In most circumstances, the Grantee is the DSA Signatory themselves. But in the case of Umbrella Grants, the Milestone 1 attestation must be co-signed by all DSA Signatories included under the Grant, as well as the Grantee. An attestation form will be available on the DxF Grants Portal for use.

† A contract amendment may be, but is not limited to, a revision to a contract, a new agreement that supplements a legacy contract, or an addendum to a contract.

‡ Supporting documentation for the TA Grant will depend on the anticipated Outcome(s) of the grant and the Resources that the Grantee identified in their Application. Please refer back to the [TA Grant Milestones section](#) for further details.