



# About DxF Feedback Process

March 2024

Data Exchange Framework (DxF) Feedback offers organizations and individuals the opportunity to provide feedback related to the DxF. The feedback is collected via an online form which asks a series of questions to collect the feedback and assist CDII in its review.

If you are interested in offering feedback on the DxF, complete the form found in the DxF Feedback section of CDII's DxF webpage. CDII will send an email acknowledgement of receipt of your feedback within three (3) business days of your submission. This acknowledgement will inform you as to CDII's initial assessment of your feedback and will include the next steps if applicable. If you do not receive an acknowledgement email from CDII within three (3) business days, please reach out to CDII at [dxfc@chhs.ca.gov](mailto:dxfc@chhs.ca.gov) and/or resubmit the form.

**Data Exchange Framework (DxF) Feedback**

This form will collect feedback related to the DxF including the exchange of health and social services information (HSSI). The form will collect your feedback and ask additional questions to help CDII review and process this feedback.

You will not receive an automated confirmation upon submission of the form, however CDII will send an email acknowledgement within three (3) business days of your submission. This email will inform you as to CDII's initial assessment of your feedback and will include the next steps if applicable. If you do not receive an acknowledgement email from CDII within three (3) business days, please reach out to CDII at [dxfc@chhs.ca.gov](mailto:dxfc@chhs.ca.gov) and/or resubmit the form.

Do not use this form to report a Breach of HSSI. In the event you have a Breach of HSSI to report to CDII, as required by the Breach Notification Policy and Procedure, please send an email to [dxfc@chhs.ca.gov](mailto:dxfc@chhs.ca.gov) with the subject line "BREACH NOTIFICATION". CDII recommends that you flag that email as urgent or high priority.

NOTE: The information collected by CDII on this feedback form may be public records subject to the California Public Records Act. Please do not submit confidential information, including personal and/or medical information.

\* Required

- 1. First Name**  
Enter your answer
- 2. Last Name**  
Enter your answer
- 3. Telephone Number**  
Enter your answer
- 4. Email Address**  
Enter your answer
- 5. Do you represent an organization or are you submitting this feedback as an individual? \***  
 Organization  
 Individual

Submit

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