## **RCE Public Webinar:**

Qualified Health Information Network (QHIN)

Technical Framework (QTF)

March 18, 2020



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## Agenda

- Welcome
- What is the QHIN Technical Framework?
- QHIN Technical Framework: Background
- QHIN Technical Framework: Elements
- Questions and Feedback



#### Meet the RCE Team



Mariann Yeager CEO The Sequoia Project



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#### What is the QHIN Technical Framework?

The QHIN Technical Framework (QTF) describes the technical and functional requirements for EHI exchange between QHINs

Developed by the RCE for public comment.





## QHIN Technical Framework: Background

- The QTF describes the technical and functional requirements to implement the Common Agreement and enable health information networks to connect to each other
  - Focus on QHIN to QHIN exchange
- The QTF will be incorporated by reference in the Common Agreement
- ONC issued for public comment Draft 2 of the TEFCA that will support the full network-tonetwork exchange of health information nationally. Specifically, the documents released for public comment were a second draft of the TEF, a second draft of the MRTCs, and a first draft of QHIN Technical Framework.
- The RCE is working to flesh out a proposed QTF Draft 2.
- Public Stakeholder Feedback Sessions:
  - Sequoia Project Annual Meeting December 4, 2019
  - Public Listening Session December 11, 2019
  - ONC Annual Meeting Breakout Session January 27, 2020
  - Public stakeholder feedback session to review QTF Draft 2 March 18, 2020



#### Elements of the QHIN Technical Framework

- Supported Information Flows:
  - Patient Discovery
  - Document Query
  - Message Delivery
- Functions and Technology to Support Exchange
  - Certificate Policy
  - Secure Channel
  - Mutual QHIN Server Authentication
  - User Authentication
  - Authorization and Exchange Purpose
  - Patient Identity Resolution
  - Individual Privacy Preferences
  - Directory Services
  - Auditing
  - Error Handling
  - Onboarding and Testing

#### **Approach:**

- Build from current capabilities
- Deploy known standards
- Keep an eye toward future approaches



## Currently Contemplated QHIN Query Approach

Figure 1. Sequence Diagram for Query

#### **Document Content**

- We expect the first version of the QTF for production use to focus on document (e.g. C-CDA) exchange
- We anticipate that a C-CDA, Plain Text and PDF will be permitted, as long as participating organizations are able to support a minimum of required document types
  - Other types can be permitted with prior arrangement with the receiver
  - Specialty formats for public health, payer coverage, etc. can also be used
- USCDI will be required after January 1, 2022



#### **Document Content**

- We propose to rely on the **Joint CommonWell/Carequality Document Content Recommendations** document, key elements of which are:
  - Encounter summary documents must be supported where applicable, in addition to patient summary documents
  - Encounter summaries must adhere to the Progress Note or Discharge Summary C-CDA templates
  - Clinical notes must be included, when available, for both types of encounter summaries
- We are seeking feedback on this approach



### Message Delivery Background

- Use case examples:
  - Sending messages when Direct address is unknown
    - Provider requests QHIN to deliver a message to neurology department of ABC Health Care containing information relevant to a referral
    - Individual sharing her records with a physician to secure a second opinion
  - Public health purposes
    - Reporting
    - Alerts
  - Notifications sent between systems
- Technical approach:
  - XCDR for message delivery between QHINs
  - QHIN and Participants can implement own approaches internally



## **Currently Contemplated QHIN Message Delivery Approach**

**Initiating QHIN Responding QHIN Participant Participant** Message Delivery Solicitation QHIN Message Delivery Message Delivery **XCDR** Acknowledgement Acknowledgement. QHINs/ Acknowledgement .-**Participants** determine approach

Figure 2. Sequence Diagram for Message Delivery

#### **Technical Considerations**

- TEFCA ecosystem will be high-volume and high-performing
  - Scope and speed of transactions
- Efficient patient discovery is expected to require Record Locator Service (RLS) or a Master Patient Index (MPI)
  - QHINs serving small number of large, sophisticated Participants may be a notable exception and use a federated system



#### Demographics Fields for Patient Matching

- Both Query and Message Delivery require the transaction to be matched to a patient record.
- Both will rely on demographics-based matching algorithms.
  - We are eager for other mechanisms to become available with wide adoption, but for now acknowledge this reality.
- For QHIN Query, we propose that any supported (in XCPD) demographics field must be sent if it is populated/available.
  - With the likely exception of SSN
- Recipients may ignore data not used by their matching algorithms.



#### Demographics Fields for Patient Matching

- We propose a subset of required fields that must always be populated.
  - Name, sex, DOB, address components (street, city, state, zip), phone number.
- Other fields that may be supported are: multiple birth indicator and/or birth order, mother's maiden name, other legal names a patient used, previous address, patient Identifier, birth time, birthplace name and/or email address.
- We are seeking feedback on this approach.

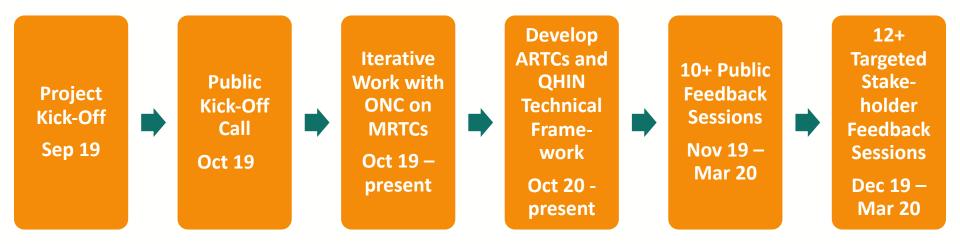


## **Next Steps**



#### **RCE** Timeline

#### **Activities to Date**



#### **Next Steps**







# Questions & Discussion

## Thank You!

