September 17, 2021

Ms. Marianne Yeager, CEO
The Sequoia Project
8300 Boone Blvd.
Suite 500
Vienna, Virginia 22182
https://rce.sequoiaproject.org/qtf-feedback/

SUBJECT:
Response to Request for Comment - QHIN to QHIN Technical Framework

Dear Ms. Yeager:

The Electronic Healthcare Network Accreditation Commission (EHNAC) applauds the Sequoia Project for its ongoing leadership to drive the implementation of Interoperability in an open, transparent and communicative manner as has been shown with the recent release of the latest QHIN to QHIN Technical Framework (QTF). Our industry needs leaders such as yourself who are familiar with healthcare data exchange, understand the importance of making this data available to patients and clinicians when they need it, yet recognize the importance of maintaining the privacy and security integrity of that data.

Founded in 1995, EHNAC is an independent, federally recognized, standards development organization and tax-exempt 501 (c) (6) non-profit accrediting body designed to improve transactional quality, operational efficiency and data security in healthcare. EHNAC's accreditation programs also support industry-adopted standards, thus allowing for a more seamless information exchange between participants in health information networks.

EHNAC has 20+ healthcare stakeholder-specific programs available across the industry. These programs include ones that accredit Health Information Exchanges (HIEs), Health Information Service Providers (HISPs), and Electronic Healthcare Networks (EHNs). EHNAC also certifies Electronic Prescription of Controlled Substances (EPCS) programs for vendors. Newer EHNAC programs specifically address the interoperable exchange of data including a jointly administered program with HITRUST known as the Trusted Network Accreditation Program (TNAP). TNAP aligns with the draft ONC Trusted Exchange Framework and Common Agreement (TEFCA) requirements as well as the Trusted Dynamic Registration and Authentication Accreditation Program (TDRAAP), offered by EHNAC and UDAP.org. These programs are designed to facilitate the endpoint trust for industry interoperability and include non-HIPAA covered entities as well.

EHNAC serves in numerous ways to promote the industry's adoption of interoperable health care data exchange as defined under the 21st Century Cures regulations. This includes participating on the Office of the National Coordinator's FAST Executive Committee and co-leading the respective Testing and Certification Tiger Team; serving on the Board of the Sequoia Project/Recognized Coordinating Entity, co-chairing the Interoperability Matters Leadership Council and participating

on the HHS 405(d) Cybersecurity Information Sharing Act (CISA) and the Health Care Sector Coordinating Council (HSCC).

The HSCC effort involves a public/private partnership and collaboration to align industry awareness and preparedness facilitation in response to the exponential ransomware and cyber security attacks impacting our world today. Further alignment and participation via ongoing feedback during policy making processes and other avenues occur with NIST, CMS, ONC, OCR and others regarding implementation of best practices, standards and other industry guidance.

In order for the nation to achieve true "interoperability" of health data, EHNAC believes that healthcare organizations must be able to "trust" each other to appropriately share patient/individual data. ***The encouragement and/or requirement for each participant within the healthcare ecosystem to gain an independent third party privacy/security/cybersecurity accreditation and/or certification is one proven method and framework to "raise the bar" with respect to the level of stakeholder-trust across the industry.*** Through participation in a rigorous accreditation program, our candidates receive multiple and specific reports to "share" their status and demonstrate to their partners that they can be "trusted" from a privacy/security and cyber-security perspective in addition to demonstrating they can provide operational/business stakeholder specific criteria in accordance with their program. By completing this independent review process, organizations also improve their cyber-readiness to avoid or better handle cybersecurity incidents and/or breach issues when they occur.

While EHNAC is appreciative of the "go-forward speed" with which the QHIN to QHIN TF has been processed along with other more broadly based interoperability related initiatives (ONC FAST, HL7 work; FHIR; DaVinci; Connect-a-thons, the promotion of Unified Data Access Profiles (UDAP), the Industry Glide Path for Dynamic Registration and Authentication and others), there is a concern that overall coordination could be improved upon.

In summary, there are currently many public and private stakeholders operating in somewhat of a silo state (as there is not one entity convening all of the stakeholders to create a unified, integrated and agreed upon common roadmap for overall implementation). The various initiatives noted above have shown that FHIR Use Cases and standards have been prepared and will allow for the secure, efficient and scalable adoption to reach interoperability. This work can be leveraged today. At present the need is for a coordinated implementation effort in order to take advantage of this work as standards will continue to evolve.

EHNAC urges the RCE to move forward in its planning, but also to promote a coordinated approach to roll out voluntary requirements and assure a successful implementation, rather than to accelerate the timeline. The infrastructure, policies, and agreed upon standards need to be in place to capture and transmit the data. Lastly, and most importantly, it has to work for all stakeholders, from the individual patient to the clinician, the payers and the business associates along the way.

Recent recommendations to NCVHS are repeated below as core to the success of the implementation of Interoperability:

A. Continued development and promotion of standards especially in the area of the use of new technology, with emphasis on the emerging FHIR standards.
B. Promoting trust through the encouragement and/or requirement of accreditation/certification will build a greater belief in the reliability of all actors across the healthcare spectrum that basic privacy, security and cyber security can be met.
C. Continued work to assure regulations and authoritative requirements are integrated and consistent further promotes ease of adoption of such standards.

Specifically regarding whether the QTF should include QHIN Message Delivery, EHNAC believes that Option 2: Defer "QHIN Message Delivery" from QTF until a FHIR based solution is readily available and is the most prudent.

EHNAC appreciates the opportunity to provide comment on this important initiative. We stand ready to continue the public/private promotion of Interoperability across our healthcare industry.

Most respectfully submitted,

Lee Barrett
Executive Director and CEO

Cc:
EHNAC Commission