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Agenda

• How will exchange work under TEFCA?
• Questions from previous webinars
• Upcoming Educational Events
• Closing
How will exchange work under TEFCA?
Each QHIN connects Participants, which connect Subparticipants. Qualified Health Information Networks (QHINs) connect directly to each other to facilitate nationwide interoperability. RCE provides oversight and governing approach for QHINs. ONC defines overall policy and certain governance requirements.
Questions from previous webinars
Questions on Exchange Purposes

- Which Exchange Purposes do QHINs have to support?
- For which Exchanges Purposes will QHINs, Participants and Subparticipants have to Respond to a Query?
- Will the RCE provide more information regarding the procedures for responding to the different Exchange Purposes?
- For which Exchange Purposes can Message Delivery be used?
The Exchange Purpose identifies the reason for which information could be requested or shared through QHIN-to-QHIN exchange.

Only these six Exchange Purposes are authorized under the Common Agreement.

A forthcoming SOP will specify that Treatment and Individual Access Services (IAS) require Responses.

Eventually, the other four Exchange Purposes will require Responses in conformance with forthcoming implementation guides. These will be rolled out with adequate time for stakeholders to prepare.

Additional Exchange Purposes may be added over time, including whether they require Responses.
Exchange Purposes

• “Treatment,” “Payment,” and “Health Care Operations” generally have the same meaning as they have under the HIPAA Privacy Rule and apply to all TEFCA Information, regardless of whether the parties to exchange are HIPAA Covered Entities or Business Associates.

• The Public Health Exchange Purpose includes Requests for Uses and Disclosures of information by Public Health Authorities that are consistent with the HIPAA Privacy Rule and other Applicable Law.

• The Government Benefits Determination Exchange Purpose supports governmental agencies that need information to determine whether a person qualifies for non-health government benefits in a manner that is consistent with the HIPAA Privacy Rule and other Applicable Law.

• The Common Agreement anticipates the use of consumer-facing applications that would assist Individuals in obtaining access to their health information. This Exchange Purpose is called Individual Access Services.
Use Case: Referral using Message Delivery.

1. Primary care provider (PCP) is an end user of Health System A’s EHR (Health System A is a Participant). PCP creates and sends a referral to a dermatologist for Treatment. Health System A sends care summary to its QHIN A.

2. QHIN A initiates QHIN Message Delivery to send the care summary to QHIN B.

3. QHIN B sends care summary to the appropriate Participant, in this case Health System B.

4. Dermatologist (end user of Health System B’s EHR) can access the referral within Health System B’s EHR.
Questions on Individual Access Services

Q: How will Individuals be able to access their information via TEFCA?

Q: Is it optional to be an Individual Access Services (IAS) provider?

Q: Will QHINs, Participants, and Subparticipants be required to respond to a Query for IAS?
Individual Access Services (IAS)

What is IAS?
IAS is, with respect to the Exchange Purposes definition, the services provided utilizing the Connectivity Services, to the extent consistent with Applicable Law, to an Individual with whom the QHIN, Participant, or Subparticipant has a Direct Relationship to satisfy that Individual’s ability to access, inspect, or obtain a copy of that Individual’s Required Information that is then maintained by or for any QHIN, Participant, or Subparticipant.

In general, entities are required to Respond to Requests for information for the purpose of Individual Access Services.

What is an IAS Provider?
Each QHIN, Participant, and Subparticipant that offers Individual Access Services.

It is optional to be an IAS Provider.
Use Case: Individual seeks her records from all her providers.

1. Individual verifies her identity with a Consumer App (Participant that is an IAS Provider) then uses it to make an Individual Access Services Request via QHIN A for Individual Access Services.

2. QHIN A initiates QHIN Query to all QHINs.

3. QHINs B, C, D execute their query methodology to request medical records from their Participants.

4. Hospital B queries its Subparticipants, and a standalone PCP Practice (Subparticipant) finds matching medical records. Public Health Authority finds matching records. Hospital D finds no records.

5. The standalone PCP responds with the matched medical records to Hospital B, which sends them to QHIN B. The Public Health Authority sends matched records to QHIN C. QHINs B and C send medical records to QHIN A.

6. QHIN A sends medical records to Consumer App, who shares them with the Individual.
Questions on Consent

• How does the Common Agreement address consent?
• Does the QHIN Technical Framework support sharing of consent?
Individual Access Services (IAS) Providers are required to obtain express consent from Individuals.

TEFCA places no consent requirements on other Participants beyond what is required by applicable law, such as HIPAA.

- The HIPAA Privacy Rule permits, but does not require, a Covered Entity to obtain patient consent for Uses and Disclosures of Protected Health Information for Treatment, Payment, and Health Care Operations activities.

- Where HIPAA or other applicable laws require patient authorization or consent, it is also required for TEFCA exchange.

The QTF includes a mechanism for QHINs, Participants, and Subparticipants to share such electronic consent documents with each other.
• TEFCA will function within the constraints of Applicable Law, including state, local, tribal, and federal law.
• If there is a conflict between Applicable Law and provisions of the Common Agreement, the order of precedence is as follows:
  i. Applicable Law;
  ii. The Common Agreement including the Required Flow-Down provisions to be included in the agreements between TEFCA Entities;
  iii. The QHIN Technical Framework (QTF);
  iv. The Dispute Resolution Process, as set forth in the Common Agreement and an SOP;
  v. All other SOPs; and
  vi. All other attachments, exhibits, and artifacts incorporated into the Common Agreement by reference; and
  vii. Other RCE plans, documents, or materials made available regarding activities conducted under the Framework Agreements.
• An entity **Disclosing** data must follow the Applicable Law that applies to it for disclosing data.
• An entity **Requesting** data must follow the Applicable Law that applies to it for the actions it takes in making Requests.
Questions on Flow-Down Provisions

• What are the requirements for Participants and Subparticipants in TEFCA?

• What is a Framework Agreement?

• Does the QHIN Technical Framework have any implications for Participants and Subparticipants?
Common Agreement
Each QHIN shall voluntarily enter into a contractual agreement with the RCE by signing the Common Agreement, making all QHINs parties to the Common Agreement. The Common Agreement includes flow-down clauses for the QHIN’s agreements with its Participants and each Participant’s agreements with its Subparticipants.

Required Flow-Downs Will Address:
• Cooperation and Nondiscrimination
• Confidentiality
• Utilization of the RCE Directory Service
• Uses, Disclosures, and Responses
• Individual Access Services

• Privacy
• Security
• Special Legal Requirements
• TEFCA Information Outside the U.S.
• Other General Obligations

Entities may connect into exchange at any level, but must abide by the flow-down provisions, which create common “rules of the road.”
Questions on QHIN Cybersecurity Requirements

• How will QHINs demonstrate that they are keeping TEFCA Information secure?
• When will the RCE provide information on how to meet the requirement for 3rd-party accreditation for cybersecurity?
Purpose: This SOP identifies specific requirements that QHINs must follow to protect the security of TI. It also provides specific information about the Cybersecurity Council.

Procedure:
1. Third-Party Cybersecurity Certification
2. Annual Technical Audits
3. Security Documentation Requirements
4. Confidentiality of Security Documentation
5. Cybersecurity Council

The Cybersecurity & Infrastructure Security Agency (CISA) has identified the healthcare and public health sector as part of the nation’s critical infrastructure, stating: The Healthcare and Public Health Sector protects all sectors of the economy from hazards such as terrorism, infectious disease outbreaks, and natural disasters. Because the vast majority of the sector's assets are privately owned and operated, collaboration and information sharing between the public and private sectors is essential to increasing resilience of the nation's Healthcare and Public Health critical infrastructure.
Questions on the FHIR Roadmap

• Why isn’t FHIR included in the QHIN Technical Framework Version 1 for QHIN-to-QHIN Exchange?

• When will TEFCA support FHIR-based exchange?
Three-Year FHIR Roadmap for TEFCA

Planned Stages of FHIR Availability in TEFCA:

Stage 1: FHIR Content Support
- FHIR exchange possible within QHINs’ own networks
- IHE exchange of FHIR payloads between QHINs is possible with "out-of-band" coordination.

Stage 2: Network-Facilitated FHIR Exchange
- QHIN-facilitated FHIR-based exchange available as an option under TEFCA.

Stage 3: Network-Brokered FHIR Exchange
- QHIN-facilitated FHIR-based exchange required under TEFCA
- QHIN-brokered FHIR API exchange optionally available.

- ONC and the RCE have published the “FHIR® Roadmap for TEFCA Exchange – Version 1.”

- Evolving health IT landscape requires TEFCA to rapidly include approaches that support FHIR.
  » Approach leverages current state of FHIR today and allows TEFCA policy and technical infrastructure to accelerate FHIR adoption into the future.
  » In 2022, the RCE will launch working groups to initiate development of the use of FHIR for both QHIN-brokered and facilitated FHIR exchange.

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Timeline to Operationalize TEFCA

2021
- Public engagement
- Common Agreement Work Group sessions
- RCE and ONC use feedback to finalize TEFCA

Q2 of 2022
- QHINs begin signing Common Agreement and applying for designation

2023
- Establish Governing Council
- Follow change management process to iterate Common Agreement, SOPs, and QTF, including to support FHIR-based exchange

Q1 of 2022
- Publish Common Agreement Version 1
- Publish QHIN Technical Framework (QTF) Version 1 and FHIR Roadmap
- Initiate work to enable FHIR-based exchange
- Public education and engagement

Q3 and Q4 of 2022
- Onboarding of initial QHINs
- Additional QHIN applications processed
- RCE establishes Transitional Council
- RCE begins designating QHINs to share data
- Prepare for TEFCA FHIR exchange pilots
Educational Resources

RCE Resources

- Common Agreement v. 1
- QHIN Technical Framework
- FHIR® Roadmap for TEFCA
- Standard Operating Procedures
- User’s Guide
- Benefits of TEFCA by Stakeholder Factsheets
- FAQs

https://rce.sequoiaproject.org/tefca-and-rce-resources/

ONC Resources

- Trusted Exchange Framework
- HealthIT Buzz Blog
- Historical Documents

https://www.healthit.gov/tefca
Events

- 2/16: Impact of TEFCA Virtual Roundtable Panel on HITECH Answers
- 2/22: Common Agreement Q&A
- 3/1: QHIN Technical Framework (QTF) & FHIR® Roadmap Q&A
- 3/3: Interoperability Panel at Healthcare Payments Innovations
- 3/10: Common Agreement Version 1 Workshop for Prospective QHINs
- 3/8: TEFCA Panel at ViVE
- 3/14: Morning Keynote at HIMSS Pre-Conference Symposium
- 3/15: TEFCA Education Session at HIMSS
- 3/15: RCE Monthly Info Call - Cancelled due to HIMSS
- 3/24: QTF Version 1 Workshop for Prospective QHINs

https://rce.sequoiaproject.org/community-engagement/
Thank you!

www.RCE.SequoiaProject.org