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October 18, 2022

RCE Monthly Informational Call

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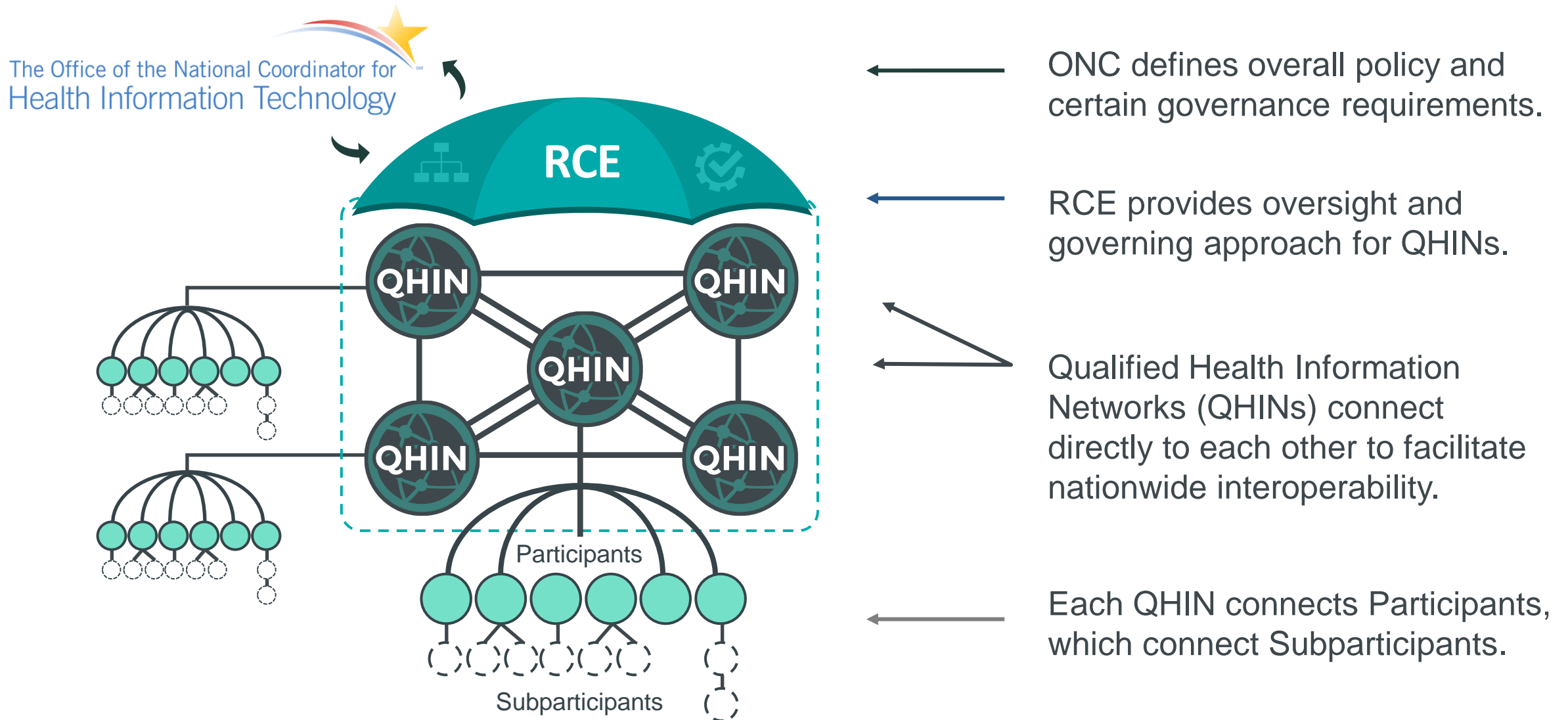
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- How will Exchange Work under TEFCA?
- What are TEFCA Components?
- Timeline to Operationalize TEFCA
- Questions & Answers: Part 1
 - » Questions received during or after September monthly call
- SOP Status & Release Schedule
- TEFCA Facilitated FHIR Implementation Guide and Pilot
- Future Use Cases
 - » Payment and Health Care Operations
 - » Public Health
- Questions & Answers: Part 2
 - » Questions received during October monthly call

How will exchange work under TEFCA?



TEFCA Components



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Trusted
Exchange
Framework



Common
Agreement



Standard
Operating
Procedures



QHIN
Technical
Framework



QHIN
Onboarding



Metrics



Governing
Approach

Timeline to Operationalize TEFCA



2021

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

Summer/Fall 2022*

- Finalize initial SOPs
- 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

Applications Can Now be Submitted!



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SequoiaProject.org

Welcome to your QHIN Application Web Forms!

Before you begin, please read the following instructions carefully.

General Overview Instructions

1. Before beginning either of the below forms, be sure that you have:
 - a. Thoroughly reviewed the QHIN Onboarding & Designation SOP;
 - b. Submitted your intent to apply and received a response from the RCE confirming receipt; AND
 - c. Met with an RCE representative, during which time the RCE has provided an overview of how to complete these forms.

Applications Can Now be Submitted



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Part I – Basic Applicant Information

Part I – Basic Applicant
Information

+

Part II – Organizational
Requirements

+

Part III – Exchange of
Required Information and
Ability to Perform
Functions of a QHIN

+

Part IV – Organizational
Infrastructure and Legal
Authority

+

Part V – QHIN Privacy and
Security Requirements

+

Part VI – Project Plan

+

Part VII – Background
References

+

Part VIII – Attestation

+

Question 1.

Please complete the following fields.

SUBMISSION ID *

APPLICANT'S LEGAL NAME *

List all other names under which the applicant does business (Doing Business As, Alias, Trademarks, etc.)



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SOP Status & Release Schedule

TEFCA SOP Release Schedule



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SOP Name	Expected Publication of Version 1 Final
<u>QHIN Security Requirements for the Protection of TI (Update)</u>	Version 1.1 released 5/16
<u>Exchange Purposes</u>	June 2022 (V1 released 6/21)
<u>QHIN Fee Schedule (Schedule 1)</u>	June 2022 (V1 released 6/21)
<u>Types of Entities That Can Be a Participant or Subparticipant in TEFCA</u>	July 2022 (V1 released 7/19)
<u>QHIN Onboarding & Designation</u>	August 2022 (V1.2 released 9/30)
<u>QHIN Application</u>	August 2022 (V 1.1 released 9/30)
<u>Means to Demonstrate U.S. Ownership and Control of a QHIN</u>	August 2022 (V1 released 8/31)
<u>Individual Access Services (IAS) Exchange Purpose Implementation</u>	September 2022 (V1 released 9/16)
<u>Individual Access Service (IAS) Provider Privacy and Security Notice and Practices</u>	September 2022 (Draft released 6/21)
<u>TEFCA Facilitated FHIR Implementation Guide</u>	October 2022 (Draft released 10/7)
Participant and Subparticipant Security	October 2022
Other Security Incidents and Reportable Events	End of 2022
Payment and Health Care Operations Exchange Purpose Implementation	Early 2023
Public Health Exchange Purpose Implementation	Early 2023
Government Benefits Determination Exchange Purpose Implementation	Mid 2023
Suspensions Process	2023
Successor RCE & Transition	2023



TEFCA Facilitated FHIR Implementation Guide



Draft TEFCA Facilitated FHIR Implementation Guide

The RCE is seeking feedback on the **draft TEFCA Facilitated FHIR Implementation Guide** released October 7, 2022. Organizations and individuals may submit written feedback until **Monday, November 7, 2022**.

Comments will be published below.

Draft TEFCA Facilitated FHIR Implementation Guide Feedback Form

<https://rce.sequoiaproject.org/tefca-facilitated-fhir-implementation-guide-feedback/>



- Feedback form includes a specific question on the handling of certificates
- Due to the scale of the Network, automation of the authorization and authentication process is an absolute necessity
- The FHIR IG requires use of the UDAP protocol as specified in the [HL7/UDAP Security for Scalable Registration, Authentication, and Authorization FHIR IG](#)
 - » Allows for automation of client_id issuance and works well with SMART on FHIR as well as has its own authentication framework



- All data exchange **MUST** follow the US Core V4.0.0 FHIR IG requirements. In addition, the following FHIR Implementation Guides **SHOULD** be supported:
 - » Bulk Data Access IG v2.0.0
 - » Mobile access to Health Documents (MHD) v4.1.0
 - » Da Vinci Payer Data Exchange v2.0.0 (when released)
- All requesters using a valid TEFCA certificate and Purpose of Use must be given access according to the Common Agreement
- Where data is transformed from other formats, a Provenance resource must be included to show where and how the transformation is done.



- All Responding Actors must support the FHIR \$match operation.
 - » Responding Actors should have the capability to return more than one potential patient match when a patient search yields more than one match
 - » When FHIR Query Initiators request only "certain" matches Responding Actors shall honor that request by returning only a unique match.
 - » Responding Actors shall not return more than 100 potential matches
 - » IAS responses shall only return a single certain unique match
 - » Addresses must conform to the Project US@ Technical Specification
- All Patient Discovery Queries must be sent to the parent QHIN, via Participants and Subparticipants as needed.

Objective:

- To demonstrate readiness of FHIR exchange for operational deployment at scale

Approach

- Publish draft guide for stakeholder input
- Engage pilot participants
- Define use cases and work flows to test, end to end
 - » Treatment (e.g. maternal child health, cancer)
 - » Individual access services
 - » Payment / Healthcare Operations
- Facilitate connectathon style testing event(s), involving test systems and dummy patient data
- Refine guide based upon pilot feedback
- Publish proposed final guide based upon pilots



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Future Use Cases: Payment and Health Care Operations



Charge

- Collect stakeholder input to inform the first version of the Trusted Exchange Framework and Common Agreement Payment & Health Care Operations Exchange Purpose Implementation SOP.

Deliverable

- Draft Payment & Health Care Operations Exchange Purpose Implementation SOP, version 1

Approach

- Targeted stakeholder input meetings
- Begin by defining an initial sub use-case

Priorities for Use Case Selection

- High benefit to participants
- Strong likelihood of voluntary adoption
- Increase patient access and interoperability
- Reduce provider/payer burden

Guiding Principles — What does good look like?



- Improve **transparency** of why the data is being requested
- Enable **reciprocity** between participant types- shared value
- Provide the **right information** and nothing more
- Provide **consistent** information
- Be **transport agnostic**
- Support **integration into existing workflows**
- Account for both **EHR and non-EHR technologies**
- Get to **win-win-wins** (patient, provider, payer)
 - » Patient at the center
 - » Reducing payer and provider burden
 - » Value proposition- define beyond cost/efficiency.
- **Contain costs**



- Need for exchange of the whole medical record for the full scope of payment and healthcare operations in order to best support whole-patient care
- Need to limit the exchange to specific sub-use cases and specific data elements due to patient privacy, compliance, and liability concerns

Use Case Definition: Risk Management



- *Disclose risk-based information to support health plans with the cost associated with their members*
- *Disclose health information to appropriate parties to use to identify risk*

Risk Management may include activities related to both payment and healthcare operations, as defined by the Common Agreement. Such activities include, but are not limited to:

- Adequately compensating health plans for the costs associated with members with higher-than-average needs
- Making equitable quality and cost comparisons among health plans and providers
- Set and update spending benchmarks in value-based payment arrangements
- Identifying and targeting future high-cost or high-utilizing individuals
- Directing high-risk individuals towards appropriate treatment options, allocating resources for that treatment, and evaluating outcomes



- Use Case Definition
- Query Request
 - Guidelines around specifying sub purpose of use?
 - What are the parameters for the date range/timeframe of the request?
 - What identifying information about the requestor and patient should be included?
- Query Response
 - What formats do payers/providers need in a response?
 - What types of information (content) do providers/payers need?
 - Whose responsibility is it to determine what data should be sent?
 - Optionality



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Future Use Cases: Public Health



Push:

- » Data Source to STLT
 - Electronic Case Reporting (eCR)
 - Electronic Test Ordering and Results (ETOR)
 - Vital Records
 - Cancer Registry
- » Data Source to CDC:
 - National Health Care Surveys (NHCS) (tentative)
- » STLT to CDC:
 - Vital Records

Query:

- STLT to STLT
 - Case Reporting (TBD more info from CDC needed)
- Provider to STLT
- STLT to Provider:
 - Case Investigation (future)
 - Vital Records



- ONC-RCE narrow down priority sub-use case(s)
- Socialize priority use cases with stakeholders to foster buy in and inform draft SOP
 - Monthly public informational and feedback calls
 - Dedicated public stakeholder feedback session
 - Multistakeholder engagement to share information and collect feedback
- RCE publishes draft implementation SOP for stakeholder feedback
- RCE works with ONC to disposition feedback and finalize implementation SOP
- RCE publishes public health implementation SOP v1 for adoption in TEFCA



Resources

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

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

Additional Resources:

<https://www.healthit.gov/tefca>

All Events Registration and Recordings: <https://rce.sequoiaproject.org/community-engagement/>

Upcoming Monthly Informational Call:

Tuesday, October 18 | 12:00 – 1:00 p.m. ET

Upcoming Office Hours for Potential QHINS (*must have submitted Intent to Apply*):

Tuesday, October 18, 2022 | 2:00p.m.- 3:00p.m. ET

Tuesday, October 25, 2022 | 12:00p.m.-1:00p.m. ET



Questions & Answers

For more information:
rce.sequoiaproject.org