April 2024

TEFCA Explainer

*Trusted Exchange Framework and Common Agreement Version 2.0*

This informational resource describes select aspects of TEFCA but is not an official statement of any policy. Please refer to the official versions of referenced documents.

Visit [RCE.SequoiaProject.org](http://RCE.SequoiaProject.org) to view the Common Agreement Version 2.0.
1. Goals and Benefits
2. Exchange Under TEFCA
3. TEFCA Components
4. Technical Aspects
5. Exchange Purposes
6. Example Use Cases
7. Privacy and Security Requirements
This Trusted Exchange Framework and Common Agreement℠ (TEFCA℠) educational resource is being provided for informational purposes only by the Office of the National Coordinator for Health IT (ONC) and the Recognized Coordinating Entity® (RCE™). It does not modify, amend, supersede, or interpret any Framework Agreement, Standard Operating Procedures (SOPs), or the Qualified Health Information Network™ (QHIN™) Technical Framework (QTF).

Please note that while we strive to maintain accuracy in this resource, it is provided for educational purposes only. This resource should not be solely relied upon by QHINs, Participants, or Subparticipants. It is ultimately a QHIN’s, Participant’s, or Subparticipant’s contractual responsibility to ensure it is compliant with any applicable Framework Agreement, SOP, or QTF.

Examples are merely illustrative and may be simplified for ease of presentation.

Readers should consult the latest versions of the Common Agreement, the QHIN Technical Framework, and Standard Operating Procedures for the definitive requirements. This resource is based on documents finalized as of April 2024.

Capitalized terms are specifically defined and included in the TEFCA Glossary.*

Recognized Coordinating Entity (RCE) is a registered trademark of the U.S. Department of Health and Human Services (HHS). Use of the mark does not imply endorsement by HHS or ONC.

*TEFCA Glossary in draft form as of April 2024.
I. Goals and Benefits
TEFCA Goals

1. Establish a universal governance, policy, and technical floor for nationwide interoperability
2. Simplify connectivity for organizations to securely exchange information to improve patient care, enhance the welfare of populations, and generate health care value
3. Enable individuals to gather their health care information

Statutory Authority

21st Century Cures Act - Section 4003(b)

“[T]he National Coordinator shall convene appropriate public and private stakeholders to develop or support a trusted exchange framework for trust policies and practices and for a common agreement for exchange between health information networks.”

[emphasis added]
Benefits by Stakeholder Group

Relevant, trusted information from nationwide sources for:

**Individuals**
Use an app of your choice to access their own records from TEFCA-connected sources located across the nation.

**Providers and Health Systems**
Improve care, coordination and population health by obtaining a more informed picture of care across settings through fewer connection points.

**Public Health**
Improve quality, reduce costs, and expand public health interoperability.

**Payers**
Get and share data needed for care management, value-based care, payer-to-payer exchange, etc.

**Health Information Networks**
Enhance the value of network participation and lower the cost of connecting with other networks.

**Technology Developers**
Provide a scalable policy and technical ecosystem for innovation.

**Researchers (Future)**
Improve quality, reduce costs, and expand participation in clinical research.

For more detail on the benefits of TEFCA for stakeholders, see factsheets at: [https://rce.sequoiaproject.org/rce-resources-new/](https://rce.sequoiaproject.org/rce-resources-new/)
2. Exchange Under TEFCA
ONC defines overall policy and certain governance requirements.

RCE provides oversight and governing approach for QHINs.

QHINs connect directly to each other to facilitate nationwide interoperability.

Each QHIN connects Participants, which connect Subparticipants.

Participants and Subparticipants connect to each other through TEFCA Exchange:

- Participants contract directly with a QHIN and may choose to also provide connectivity to others (Subparticipants), creating an expanded network of networks.
- Participants and Subparticipants agree to the same Terms of Participation and can generally participate in TEFCA Exchange in the same manner.
In this example, the QHIN supports a broad range of different Participants, including a provider, a health information exchange (HIE), an electronic health record (EHR) system, a pharmacy health information technology (IT) system, and a consumer application that is an Individual Access Services (IAS) Provider.

The members of the HIE and the pharmacy health IT system are Subparticipants.

Individuals can connect to QHINs, Participants, and Subparticipants that choose to be IAS Providers, but such Individuals are not considered Subparticipants. In this example, one consumer app is a Participant of the QHIN and another consumer app is a Subparticipant of the HIE.
The Role of a Qualified Health Information Network

A QHIN is an entity with the technical capabilities and organizational attributes to connect health information networks on a nationwide scale.

- High volume
- High reliability
- Abides by the Common Agreement
- Adheres to the QHIN Technical Framework

Participants and Subparticipants will be able to choose their QHIN based on the services provided and fees charged.

Participants and Subparticipants will be able to share information with all other connected entities regardless of which QHIN they choose.

QHINs may not charge fees to other QHINs for any exchange of information under the Common Agreement.

The ability for Participants and Subparticipants to charge fees for responding to a Query will be determined through SOP(s).
The Role of the Recognized Coordinating Entity (RCE)

- Collaborate with ONC to develop baseline policy and technical requirements
- Evaluate Applicant QHINs and Designate QHINs
- Maintain the RCE Directory Services
- Establish and oversee representative governance process
- Engage with and solicit feedback from stakeholders

In 2023, The Sequoia Project was awarded a contract to continue to serve as the RCE, demonstrating ongoing commitment to nationwide health data sharing.
3. TEFCA Components
TEFCA Components

- Framework Agreements
- Standard Operating Procedures
- Technical Requirements
- RCE Directory
- Oversight & Compliance
- Governance
Framework Agreements

Trusted Exchange Framework

- A common set of foundational principles for policies and practices to facilitate data sharing among health information networks.

- Broad industry alignment with these principles can help entities enter into more uniform contractual relationships that are required for improved electronic flow of health information where and when it is needed.

The seven principles:

- Standardization
- Openness and Transparency
- Cooperation and Non-Discrimination
- Privacy, Security, and Safety
- Access
- Equity
- Public Health
Framework Agreements and TEFCA connections

**Common Agreement**
Each QHIN voluntarily enters into the same contractual agreement with the RCE by signing the Common Agreement.

**Participant/Subparticipant Terms of Participation**
All Participants and Subparticipants voluntarily agree to the Terms of Participation without modification as part of their agreements with their TEFCA connector.

**TEFCA connector**
A QHIN, Participant, or Subparticipant that offers services to connect into TEFCA exchange.

**TEFCA connected entity**
A QHIN, Participant, or Subparticipant that is bound to a Framework Agreement.

*Entities may connect into exchange at any level*
Elements of the Participant/Subparticipant Terms of Participation

• Definitions and Relevant Terminology
• Cooperation and Non-Discrimination
• Confidentiality and Accountability
• RCE Directory Service and Directory Entries
• TEFCA Exchange Activities
• Individual Access Services
• Privacy
• Security
• General Obligations
• Term, Termination, and Suspension
• Contract Administration

The Terms of Participation bind all entities to the same "Rules of the Road"

The Terms of Participation can be found in the Common Agreement on page 48
Framework Agreements

Principal/Delegate Relationship

A TEFCA connected entity may authorize a Delegate to share information on their behalf through a Principal/Delegate relationship

What is a Principal?
- A QHIN, Participant, or Subparticipant that is acting as a Covered Entity, Government Health Care Entity, Non-HIPAA Entity (NHE) Health Care Provider, a Public Health Authority, a government agency that makes a Government Benefits Determination, or an IAS Provider (as authorized by an Individual) when engaging in TEFCA Exchange

What is a Delegate?
- A QHIN, Participant, or Subparticipant that is not acting as a Principal and has a written agreement, directly or indirectly, with a Principal authorizing the Delegate to conduct TEFCA Exchange activities for or on behalf of the Principal. For purposes of this definition, a “written agreement” shall be deemed to include a documented grant of authority from a government agency.

Example: An Accountable Care Organization (ACO) has a written agreement with a Health Care Provider authorizing the ACO to conduct TEFCA Exchange for the Health Care Provider. The Health Care Provider acts as the Principal and the ACO acts as the Delegate. They are both connected to TEFCA.

The definitions of Principal and Delegate are not yet final. They will be finalized in a forthcoming SOP.
Standard Operating Procedures (SOP)

What is an SOP?

• An SOP is a written procedure or other provision that is incorporated by reference into the Framework Agreements to provide detailed information or requirements related to TEFCA Exchange
• SOPs address, among other things, governance, privacy and security requirements, RCE directory services, and QHIN application and designation
• Each SOP identifies the parties to which it applies (QHINs, Participants, Subparticipants)

What is the Exchange Purposes (XPs) SOP?

The XPs SOP details specifications relevant to when and how information can be requested or shared through TEFCA Exchange

What is an Exchange Purpose (XP) Implementation SOP?

XP Implementation SOPs provide additional details for specific use cases, as needed

Why SOPs?

• SOPs create the flexibility for TEFCA to evolve and expand over time
• SOPs will be created and modified as needed and finalized through a defined change management process
• Access the SOPs on the RCE website
Technical Requirements

QHIN Technical Framework

- The QHIN Technical Framework (QTF) outlines the technical, functional, privacy, and security requirements necessary for exchange of data via TEFCA.

- The QTF primarily addresses TEFCA Exchange requirements that apply to QHINs.

- Some requirements in the QTF must be enforced at the Participant and Subparticipant levels.

Access the QTF on the RCE website.
RCE Directory Service

- The RCE maintains the RCE Directory Service to support exchange of information between and among TEFCA connected entities.
- This key component of TEFCA Exchange enables access to the electronic endpoints and other necessary information about all entities that participate.
- RCE Directory information is kept up to date to ensure that all information flows to the right destination.
- TEFCA connected entities can share information without having to know electronic addresses in advance.
- QHINs are responsible for maintaining entries in the RCE Directory Service.
RCE Oversight Activities

- **QHIN Designation**: Reviews applications from Health Information Networks (HINs) seeking QHIN status and administers a rigorous testing and onboarding process before Designation as a QHIN

- **Collaboration**: Collaborates with ONC and the TEFCA community to update policies and expand use cases over time

- **Address Noncompliance**: Addresses instances of noncompliance, ensuring adherence to established standards, policies, and the Common Agreement

- **Monitoring of Network Performance**: Collects, reviews, and analyzes metrics reported by QHINs regarding exchange activities, volumes, and related outcomes

- **Development and Oversight of Governance**: Establishes, supports, and oversees TEFCA Governing Council and other governing bodies
Governance

Governing Approach

• The Common Agreement establishes a Governing Council that:
  » Reviews amendments to the Common Agreement, QTF, and SOPs
  » Serves as a resource to the RCE and a forum for discussion
  » Provides oversight for resolution of disputes

• A Transitional Council serves during TEFCA’s first year

• ONC oversees the work of the RCE, which has specific obligations to follow the governance procedures set forth in the Common Agreement

• Advisory groups will be formed to provide targeted input from stakeholders
Governance

Obligations and Enforcement

• By signing a Framework Agreement, all parties to TEFCA Exchange are obligated to comply with the same rules of the road

• The QHINs are responsible for ensuring that exchange within their networks happens in accordance with the Framework Agreements

• Violations may result in corrective action plans, suspension, or termination
Dispute Resolution

The Common Agreement provides a mechanism for Disputes to be resolved via a collaborative process described in the Common Agreement and Dispute Resolution Process SOP:

• QHIN, Participant, and/or Subparticipant begins by pursuing informal resolution through good faith discussions among involved parties

• If needed, a QHIN can escalate a Dispute to the formal Dispute Resolution Process on its own behalf or on behalf of a Participant/Subparticipant
  » If a resolution is agreed upon during the process, involved parties and the RCE commit to implementing the terms within an agreed-upon timeframe
  » If any involved party finds the Dispute Resolution Process inadequate, it is free to pursue further remedies as described in the SOP
Status of TEFCA Policy and Technical Documents

Applicable Law
(federal, state, local, territorial, etc.)

Framework Agreements
Common Agreement (QHINs)
Terms of Participation (Participants/Subparticipants)

QHIN Technical Framework

Standard Operating Procedures (SOPs)
4. Technical Aspects
QHIN Technical Framework (QTF)

• The QTF describes the technical requirements for TEFCA Exchange that must be followed by the QHINs and, in some instances, by Participants and Subparticipants.

• Exchange Modalities that are supported include:
  » QHIN Message Delivery
  » QHIN Query
  » Facilitated FHIR*

• Data will be shared across Nodes that represent distinct data systems maintained by QHINs, Participants, and Subparticipants.

*Health Level 7 Fast Healthcare Interoperability Resources (HL7 FHIR®)
Components of the QHIN Technical Framework

Functions and Technology to Support Exchange:

- Certificate Policy
- Secure Channel
- Mutual Authentication
- User Authentication
- Authorization & Exchange Purpose
- Patient Discovery Query
- Document Query Retrieve
- Patient Identity Resolution
- Record Location
- Directory Services
- Auditing
- Constraints for QHIN Query for Initiating Node(s) and Responding Node(s)
TEFCA XP Codes

All TEFCA Exchange transactions must have the appropriate Exchange Purpose (XP) Code to identify the reason for a transaction.

<table>
<thead>
<tr>
<th>Display Value</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment</td>
<td>T-TRTMNT</td>
</tr>
<tr>
<td>Payment</td>
<td>T-PYMNT</td>
</tr>
<tr>
<td>Health Care Operations</td>
<td>T-HCO</td>
</tr>
<tr>
<td>Public Health</td>
<td>T-PH</td>
</tr>
<tr>
<td>Individual Access Services</td>
<td>T-IAS</td>
</tr>
<tr>
<td>Government Benefits Determination</td>
<td>T-GOVDTRM</td>
</tr>
</tbody>
</table>
Connecting to Multiple QHINs

- Participants and Subparticipants may want to connect different information systems (e.g., electronic health record) through different QHINs
  - Example: a multi-hospital health system may have more than one electronic health record or other information system(s) that they want to connect through different QHINs

- The Participant or Subparticipant may have a distinct Directory Entry for each system ("Node") that includes identifying information about the system
  - Example: Each electronic health record in the hospital system would be listed as its own Node

- To ensure reciprocity, each TEFCA connected entity that initiates Queries generally must respond to Queries from others

- The RCE Directory Service Requirements Policy SOP and the RCE Directory Service Implementation Guide describe how QHINs will maintain Directory Entries

Node: a technical system controlled directly or indirectly by a QHIN, Participant, or Subparticipant that is listed in the RCE Directory Service
How TEFCA Information is Exchanged

TEFCA Exchange enables TEFCA connected entities to:

Use RCE Directory Service
- To find Exchange partners with data for a given Exchange Purpose
- To determine FHIR endpoints when available

Use QHIN Query
- To find which TEFCA connected entities have information on a person
- To discover what information is available
- To request the needed information

Use Message Delivery
- To send information in various formats (e.g., C-CDA, FHIR bundle, PDF, etc.)

Use Facilitated FHIR Query to support point-to-point FHIR Exchange
- To find which TEFCA connected entities have information on a person
- To request the needed information via FHIR

Note: Entities connected to TEFCA must be able to respond to Queries but do not have to be able to receive data sent to them using Message Delivery.
Ready to send a message:
1. Who do I want to send data to?
2. What is their electronic address?
3. What information (payload) do I want to send?

Technical Notes
- The standard only applies to Exchange among QHINs
- The standard supports many document types in the payload such as C-CDA, FHIR bundle, PDF, etc.
- Each piece of the transaction may involve multiple hops across connected organizations
- Either acknowledgement of receipt or an error message will be returned

*IHEn Integrating the Healthcare Enterprise*
Query Data Flow

Ready to Query for data:
1. Who has records for my patient?
2. What documents are available?
3. Retrieve only needed documents.

Technical notes
- The standards only apply to Exchange among QHINs
- Responses to Query may include available electronic health information in C-CDA 2.1, including but not limited to the United States Core Data for Interoperability (USCDI) V1
- The RCE intends to advance to later versions of the USCDI consistent with ONC regulations
Support of FHIR and Updated Roadmap

TEFCA will expand support of FHIR over time, in four stages:

1. FHIR Content Support
   • Included as part of the initial launch of TEFCA
   • QHIN-brokered IHE exchange of FHIR payloads between QHINs available

2. QHIN-Facilitated FHIR Exchange
   • QHIN support for facilitated FHIR API exchange required
   • Participant and Subparticipant exchange via FHIR application programming interfaces (APIs) available

3. QHIN-to-QHIN FHIR Exchange
   • Support for exchange between QHINs via FHIR APIs

4. End-to-End FHIR Exchange
   • Support for QHIN-brokered FHIR Exchange between Participants and Subparticipants

Access the FHIR® Roadmap for TEFCA Exchange Version 2 on the RCE website.
Facilitated FHIR Exchange

- In the QHIN-Facilitated Exchange model, QHINs will make available network services to enhance the use of FHIR APIs among TEFCA connected entities to share individual-level data.

- Services could include: FHIR Endpoint directory, patient matching, Record Locator Services, identification verification services, issuing certificates, dynamic client registration, and other potential services.

**Diagram:**

- Requester: Requester submits request directly to Responder’s API using FHIR standards and protocols to retrieve available FHIR Resources, including those aligned with USCDI.

- Responder: Responder returns requested information, or a notification that no records were found through its API.

- QHIN: Requester uses services of its TEFCA connector to support FHIR Exchange.
Patient Matching

- QHINs must be capable of accurately resolving requests to match patient demographic information with patient identities.

- QHINs, Participants, and Subparticipants can choose patient matching techniques that meet their business needs, if they satisfy the functional requirement to accurately match patients and locate their records. Examples include Enterprise Master Patient Index (eMPI), a Record Locator Service, or other means.

- FHIR-based exchange will have additional requirements as the FHIR Query initiator will need to conduct a patient query to ensure that the patient match is made correctly, and patient context can be established.

- To help support accurate patient matching, the Query or Message Delivery source is required by the QTF to include all available demographic information to facilitate a positive match.

- Patient matching can be centralized (a QHIN function) or distributed (a Participant and/or Subparticipant function).

- The RCE is actively participating in the national dialogue to improve patient matching work and will work with QHINs to develop matching recommendations and/or requirements in the future.
5. Exchange Purposes
Exchange Purposes (XPs)

- The Exchange Purposes are the reasons for which information can be shared through TEFCA Exchange.
- Six Exchange Purposes are authorized under the Common Agreement.
- The Exchange Purpose SOP (XP SOP) defines the authorized Exchange Purpose, identifies which require a response, who must respond, and the exceptions to a response.
- Additional implementation guidance is provided in Exchange Purpose Implementation SOPs as needed.

Permitted Exchange Purposes

- Treatment
- Payment
- Health Care Operations
- Public Health
- Government Benefits Determination
- Individual Access Services

Additional Exchange Purposes may be added over time.
Exchange Purposes (XPs)

• “Treatment,” “Payment,” and “Health Care Operations” generally have the same meanings 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 of, 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.
For some Exchange Purposes, the RCE will work with the community to identify implementation specifications to enable specific use cases underneath a broad Exchange Purpose.

The initial use cases with specific implementation guidance are part of:

- Health Care Operations
- Public Health

All Exchange Purposes can be used to support exchange of information consistent with the broad Exchange Purpose definition.
• **TEFCA Queries** will be transmitted via TEFCA Exchange, consistent with the requirements of the Framework Agreements
  
  » Only TEFCA connected entities can make Queries for an Exchange Purpose.

• **Uses and Disclosures** must adhere to the privacy and security requirements in the Framework Agreements, any privacy and security notices, and any requirements of Applicable Law
As specified in the Exchange Purposes SOP, Queries for Treatment and Individual Access Services require a Response.

Responses are not required if providing the information is prohibited by Applicable Law.

The Framework Agreements permit but do not require a Response from the following entities:

- Public Health Authorities
- Users of Government Benefits Determination Exchange Purpose
- Federal agencies, to the extent that the requested Disclosure of Required Information is permitted under Applicable Law.
Who Can Conduct Exchange Pursuant to an Exchange Purpose?

A QHIN, Participant, or Subparticipant may only Query for information under TEFCA for a specific Exchange Purpose if it is permissible pursuant to Applicable Law, the Framework Agreements, and an applicable SOP.

Example

Only a Health Care Provider as defined in the HIPAA Rules or the information blocking regulations (or a Business Associate, agent, or contractor acting on that Health Care Provider’s behalf) may Query for Treatment.
Individual Access Services (IAS)

What is IAS?
IAS means the services provided to an Individual by a QHIN, Participant, or Subparticipant through a direct contractual relationship. The IAS Provider supports an Individual’s ability to use TEFCA Exchange to access, inspect, obtain, or transmit a copy of the Individual’s own information.

In general, entities are required to Respond to Queries for information for IAS.

What is an IAS Provider?
Any QHIN, Participant, and Subparticipant that chooses to offer Individual Access Services is an IAS Provider.

Individuals will be able to access their own information from TEFCA connected entities using an IAS Provider, such as an app.
6. Example Use Cases
The following slides are examples of potential current and future use cases that leverage the TEFCA Exchange Purposes.

The examples show simplified versions of the steps involved in exchange.

Some of the detailed steps are not depicted or are abstracted.

Several of the examples leverage Exchange Purposes that are authorized under TEFCA, but do not require Responses to Queries.
Use Case: Sending clinical data using Message Delivery

Dr. Hogan is a Primary Care Provider who wants to send relevant clinical information about a patient, Mrs. Stewart, to her dermatologist, Dr. Chen, in advance of a visit. Both doctors work for entities connected to TEFCA.

Initiating Action: Dr. Hogan uses the services of his TEFCA connector to locate the electronic address for Dr. Chen in the RCE Directory

Message Delivery: Dr. Hogan’s information system creates a care summary that is sent through TEFCA Exchange

Message Receipt: Dr. Chen receives the care summary in her information system through TEFCA Exchange
Use Case: Sending clinical data using Message Delivery

Dr. Hogan is an end user of Health System A's EHR (Health System A is a Participant). He creates and sends a referral to Dr. Chen for Treatment. Health System A sends care summary to its QHIN A.

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

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

3. Dr. Chen (end user of Health System B’s EHR) can access the referral within Health System B’s EHR.
Use Case: Sharing documentation for reimbursement using Message Delivery

Drew, a Quality Improvement Analyst at an Accountable Care Organization (ACO), is required to send quarterly metrics to a Health Plan for reimbursement, as part of their contract. Leveraging TEFCA, Drew utilizes QHIN Message Delivery to send the quarterly metrics.

**Initiating Action:** Drew compiles the needed documentation and specifies the electronic address for the Health Plan, which he uses frequently.

**Message Delivery:** Drew’s information system sends the documentation as an attachment to a message through TEFCA Exchange.

**Message Receipt:** The Health Plan receives the documentation through TEFCA Exchange and incorporates it into the Health Plan’s information system.

*Payment is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.*
An Accountable Care Organization (a Participant of QHIN A) needs to send documentation of quality metrics to a Health Plan, consistent with its contract, to satisfy a reimbursement requirement. ACO sends documentation of quality metrics to QHIN A.

QHIN A executes QHIN Message Delivery to QHIN B.

QHIN B delivers the documentation of quality metrics to the Health Plan (Participant of QHIN B).

*Payment is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.
Use Case: Quality improvement activity using Query

General Hospital is missing information about a patient, Amy, that it needs to complete quality reporting, which falls under the Health Care Operations Exchange Purpose. The hospital requests information about Amy through QHIN Query.

Initiating Action: General Hospital sends a request for Amy’s medical records through the hospital's TEFCA connector

QHIN Query:
- The QHIN associated with General Hospital’s TEFCA connector initiates a Query to other QHINs for Amy’s records
- The other QHINs request Amy’s records from their TEFCA connected entities (other hospitals, Public Health Authorities, etc.)
- Connected entities respond whether they do or do not have Amy’s records
- The QHINs with information about Amy’s records send it to the initiating QHIN

Delivery: The initiating QHIN informs General Hospital about records that are available so that General Hospital staff can access them and find the information needed for quality reporting

*Health Care Operations is an authorized Exchange Purpose under the Common Agreement but response to a Query for this Exchange Purpose is not required as of April 2024.
Use Case: Quality improvement activity using QHIN Query

General Hospital

1. General Hospital (Participant) sends a request for medical records to QHIN A for quality improvement, which falls under the Health Care Operations Exchange Purpose.

2. QHIN A initiates QHIN Query, and sends request to other QHINs.

3. QHIN B, C, and D execute queries to request Amy’s medical records from their Participants, which includes Hospital B, Hospital C, and a Public Health Authority.

4. Hospital B finds no records. Hospital C and the Public Health Authority have a relationship with Amy and find matching medical records.

5. In Response, Hospital C and the Public Health Authority send Amy’s records to QHIN C and D, respectively, and those QHINs send those records back to QHIN A.

6. QHIN A sends Amy’s records to Hospital A.

*Health Care Operations is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.*
**Use Case: Requesting information using Facilitated FHIR**

*Drew, a Quality Improvement Analyst at an Accountable Care Organization, wants to request claims information from a Health Plan to inform their quarterly metrics, as part of their contract. Leveraging TEFCA, Drew uses FHIR Query to request the information.*

**Initiating Action:** Drew Queries the ACO’s QHIN to find FHIR Endpoints with available information for the patient

**FHIR Query:** Drew requests the claims information from the Health Plan’s FHIR Endpoint

**FHIR Query Receipt:** The Health Plan sends the requested information back to Drew

*Payment is an authorized Exchange Purpose under the Common Agreement but response to a Query for this Exchange Purpose is not required as of April 2024*
Use Case: Public Health Authority queries TEFCA for a case investigation

**Dr. Singh, an Epidemiologist at a State Health Department, needs to investigate a medical case in which a patient, Robert, was diagnosed with an infectious disease. Dr. Singh has the authority to learn more about Robert’s care and uses TEFCA Exchange to request information (Public Health Exchange Purpose).**

**Initiating Action:** Dr. Singh requests Robert's medical records through the health department's TEFCA connector

**QHIN Query:**
- The QHIN associated with the State Health Department's TEFCA connector initiates a Query to the other QHINs for the purposes of public health
- The other QHINs Query their TEFCA connected entities for information on Robert
- Using automation, connected entities may respond with information about Robert's medical records, or return a message that they do not have any relevant records
- The QHINs with information about Robert send it to the initiating QHIN

**Delivery:** The initiating QHIN notifies the State Health Department about available records so that Dr. Singh can access the information needed for a case investigation

*Public Health is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024*
Example: Public Health Exchange Purpose*

Use Case: Public Health Authority queries TEFCA for a case investigation

1. Dr. Singh (Participant) is performing a case investigation. She has a public health need and the appropriate authority to understand all previous care provided to a particular patient, Robert. Dr. Singh sends a request for medical records to QHIN A for the Exchange Purpose of Public Health.

2. QHIN A initiates QHIN Query to all QHINs.

3. QHIN B, C, D execute their query methodology to request Robert’s records from their Participants.

4. Hospital B finds no records. Hospital C and a Public Health Authority’s Immunization Information System (both Participants) respond to their respective QHINs with Robert’s records.

5. In Response, QHIN C, D send Robert’s records to QHIN A.

6. QHIN A sends Robert’s records to Dr. Singh.

*Public Health is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.
Use Case: Government agency requests records to confirm eligibility

Jaime, a Disability Claims Examiner at a Government agency, needs to determine Michael’s eligibility for disability benefits. Leveraging TEFCA, Jaime requests relevant records from the agency’s QHIN to make an informed decision.

Initiating Action: Jaime requests relevant medical records about his client through his TEFCA connector

QHIN Query:

• The QHIN associated with the agency’s TEFCA connector initiates a Query to the other QHINs for the purpose of Government Benefits Determination

• The other QHINs Query their TEFCA connected entities for information on Michael

• TEFCA connected entities with relevant records respond back to the agency that they need proof of Michael’s authorization (not depicted)
  » Jaime shares a signed authorization with record holders
  » Once the authorization is verified, TEFCA connected entities share information about Michael

• The QHINs with information about Michael send it to the initiating QHIN which shares it with the agency’s TEFCA connector

Delivery: The agency’s TEFCA connector informs Jaime about available records so that he can select those he needs to make a benefits determination

*Government Benefits Determination is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.*
Example: Government Benefits Determination Exchange Purpose *

Use Case: Government agency requests records to confirm disability

1. Jaime (Government agency) (Participant) sends a request for Michael's records to QHIN A for the purpose of Government Benefits Determination.

2. QHIN A initiates QHIN Query to all QHINs.

3. QHIN B, C, D execute their query methodology to request Michael’s records from its Participants.

3.5 NOT DEPICTED: Participants holding the requested records query back to Jaime across the network for an authorization to release the records. Jaime responds with a copy of the signed authorization.

4. Hospital B finds no records. Hospital C and D (Participants) respond to their respective QHINs with records for Michael.

5. In Response, QHIN C and D send Michael's records to QHIN A.

6. QHIN A sends Michael's records to Jaime.

*Government Benefits Determination is an authorized Exchange Purpose under the Common Agreement but response to a query for this Exchange Purpose is not required as of April 2024.
Mona is using a health app to manage her personal health information. Mona verifies her identity in the app and requests all her health records. The consumer app leverages TEFCA to find and retrieve Mona’s records from TEFCA connected entities.

**Initiating Action:** Mona requests her health information through her health app which passes along the request to its TEFCA connector

**QHIN Query:**
- The QHIN associated with the app’s TEFCA connector queries other QHINs
- The other QHINs Query their TEFCA connected entities for Mona’s records
- TEFCA connected entities with relevant records respond to the app’s QHIN
- The QHINs with Mona’s matched records pass it to the initiating QHIN, which shares them with the app’s TEFCA connector

**Delivery:** The initiating QHIN sends the information to Mona’s digital consumer app, allowing Mona to access her medical history.
Example: Individual Access Services Exchange Purpose

Use Case: Individual seeks her records from all her providers

1. Mona verifies her identity with a Consumer App (Participant that is an IAS Provider) and 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, and D execute query methodologies 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. In Response, 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 Mona.
7. Privacy and Security Requirements
TEFCA provides strong privacy protections

• Most connected entities will likely be HIPAA Covered Entities or Business Associates of Covered Entities, and thus already be required to comply with HIPAA privacy and security requirements
  » As a matter of general policy, once TEFCA Information (TI) is received by a QHIN, Participant, or Subparticipant that is a Covered Entity or Business Associate, or a Non-HIPAA Entity (NHE) that is exempt from compliance with the Privacy section of the applicable Framework Agreement and is incorporated into such recipient's system of records, the information is no longer TI and is governed by the HIPAA Rules and other Applicable Law

• In the case of entities that are neither a Covered Entity nor a Business Associate otherwise subject to HIPAA, “Non-HIPAA Entities” (NHE), the Common Agreement requires the NHE to protect Individually Identifiable Information as if it were protected health information and they were a Covered Entity or Business Associate subject to HIPAA
  » This includes, for example, Health Care Providers and IAS Providers that are not Covered Entities nor a Business Associate otherwise subject to HIPAA
  » IAS Providers have additional requirements (see later slides)
TEFCA will provide strong security protections

- QHINs are required to meet a high bar for security, including:
  - Third-party certification to industry-recognized cybersecurity standards, in addition to complying with the HIPAA Security Rule
  - Annual security assessments
  - Have a Chief Information Security Officer
  - Have cyber risk coverage

- Terms of Participation contract provisions for all Participants and Subparticipants:
  - Non-HIPAA Entities (NHEs) must comply with the HIPAA Security Rule with respect to all Individually Identifiable Information as if such information were protected health information and they were a Covered Entity or Business Associate subject to HIPAA

- Notice of TEFCA Security Incidents involving or affecting TEFCA Exchange:
  - Are required of QHINs, Participants, and Subparticipants
  - Are generally designed to avoid conflict with Applicable Law and duplicative notification requirements

- All TEFCA entities shall evaluate the risks of any Uses and/or Disclosures of TEFCA Information outside the U.S to evaluate whether they satisfy the HIPAA Security Rule

- The RCE actively facilitates security activities, with the support of the Cybersecurity Council
TEFCA IAS Providers must, among other requirements:

- Have a publicly accessible and up-to-date written privacy and security notice
- Obtain express consent from Individuals regarding the way their information will be accessed, exchanged, Used, or Disclosed
- Provide Individuals with the right to delete their information, with certain exceptions
- Provide Individuals with the right to obtain an export of their data in a computable format
- Take the following steps with respect to all Individually Identifiable Information they hold:
  - Protect such information in accordance with all TEFCA security requirements
  - Encrypt all individually identifiable information, both in transit and at rest
IAS Providers will need to implement security requirements, including encryption and certain security incident notifications.

If an IAS Provider intends to sell, or otherwise receive remuneration in exchange for Individually Identifiable Information, the IAS Provider must obtain the Individual’s prior, express, documented consent.

These requirements are in addition to the requirement of abiding by the HIPAA Security Rule.
Consent

• TEFCA requires QHINs, Participants, and Subparticipants to follow consent requirements in 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 and applicable SOPs contain mechanisms for sharing access consent policies electronically
Applicable Law and Order of Precedence

- 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:
  1. Applicable Law
  2. The Framework Agreements (Common Agreement and Terms of Participation)
  3. The QHIN Technical Framework (QTF)
  4. The Dispute Resolution Process, as set forth in the Common Agreement and an SOP
  5. All other SOPs
  6. All other attachments, exhibits, and artifacts incorporated into the Common Agreement by reference
  7. 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.
Visit RCE.SequoiaProject.org to view the Common Agreement Version 2.0
Are you interested in connecting with a QHIN?

Visit

Designated QHINs - ONC TEFCA RCE
(sequoiaproject.org)

to meet the Designated QHINs