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September 15, 2026

RCE™ Monthly Information Call

Speakers:

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Today's Agenda



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- Welcome & Agenda Review
- TEFCA by the Numbers
- TEFCA Exchange Basics
- Partner Based Exchange Examples
- FAQs for Individual Access Services (IAS) and Treatment
- Q&A



TEFCA Trusted Exchange Framework
and Common Agreement™



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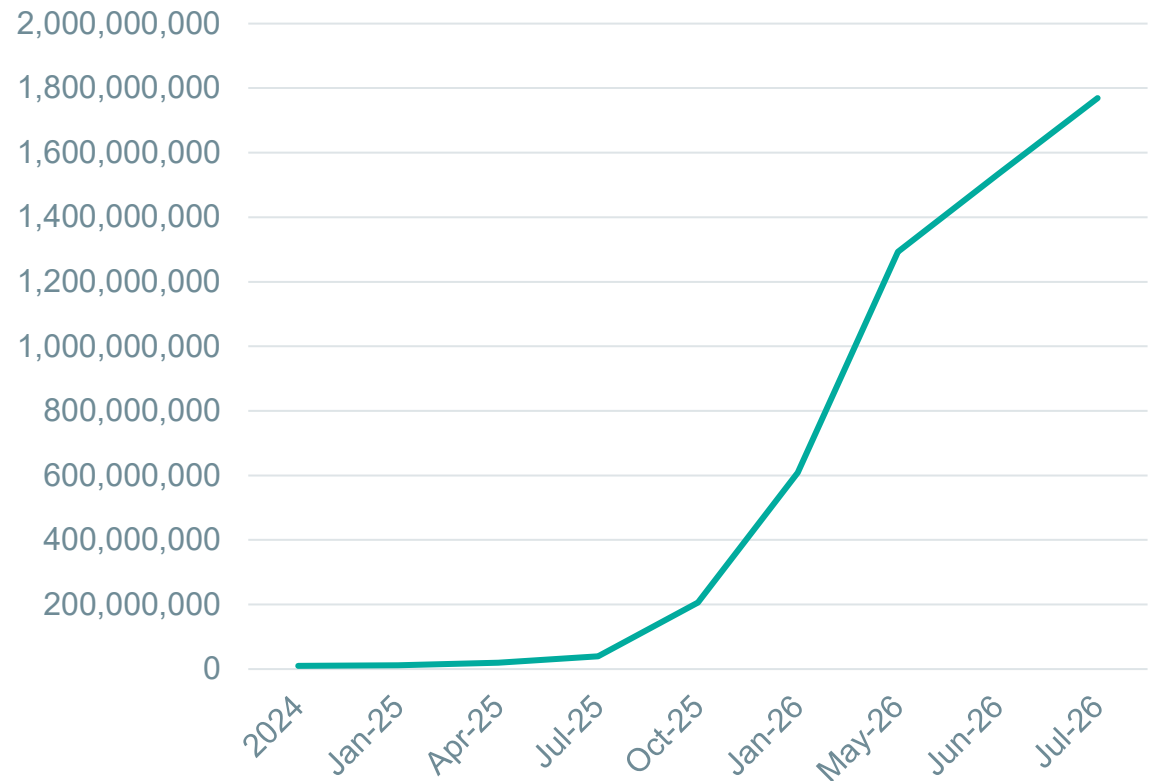
TEFCA by the Numbers



TEFCA NUMBERS

- Over **1.7 Billion** Documents Shared since Dec 2023
- **23,000** Organizations live on TEFCA
- **104,000** Unique connections

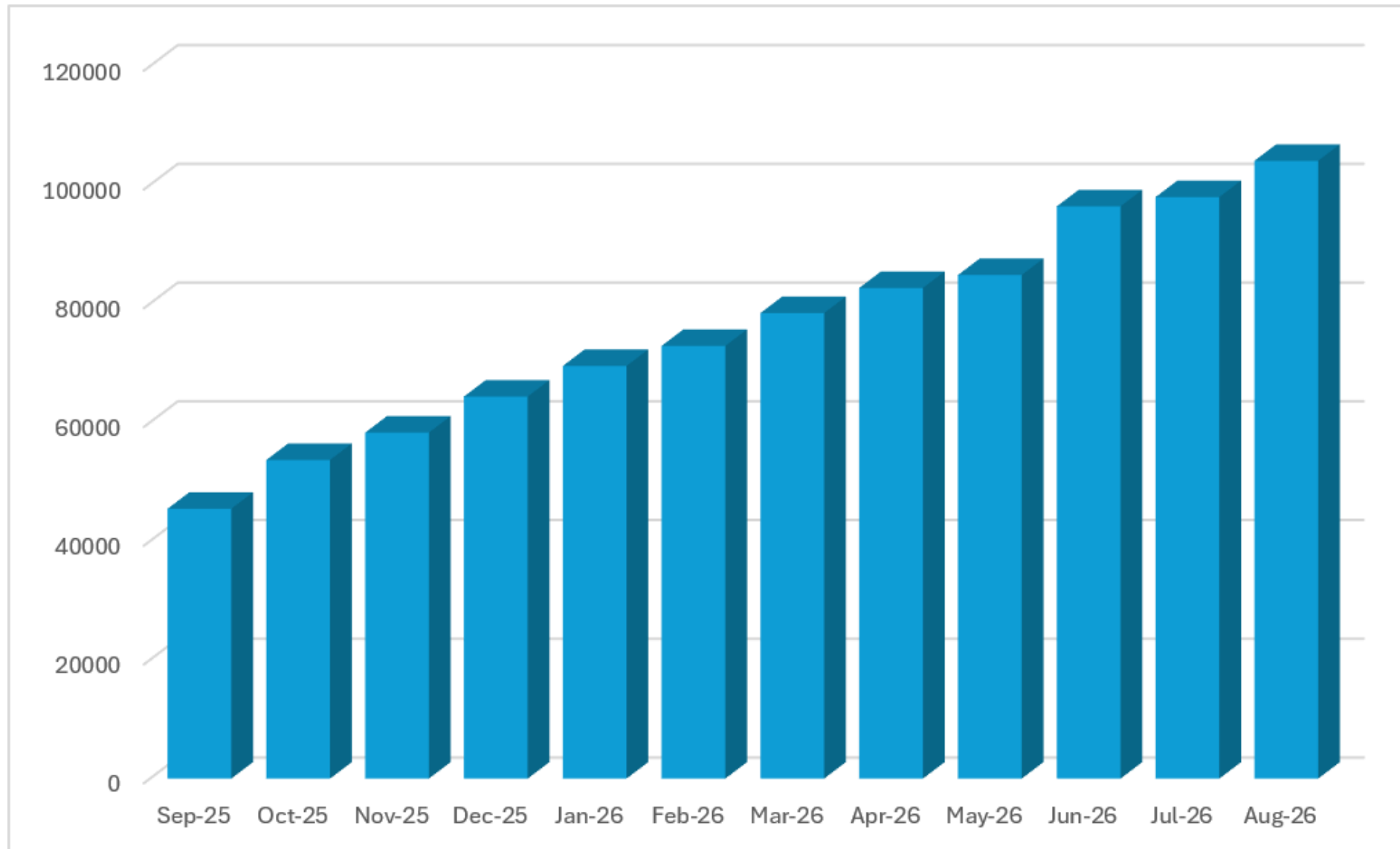
TOTAL DOCUMENTS SHARED VIA TEFCA
EXCHANGE 2024 – July 2026



Organization Growth in TEFCA



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Meet the QHINS



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eClinicalWorks

eHealth Exchange™



Learn more: <https://rce.sequoiaproject.org/designated-qhins/>

Meet the Candidate QHINs

Below are organizations that have completed the Qualified Health Information Network® (QHIN™) application and have been accepted into the project planning and testing phase of the onboarding and designation process. Inclusion on this page is not an endorsement and does not guarantee that an organization will be Designated as a QHIN.



[Meet the Candidate QHINs!](#)



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TEFCA Exchange Basics



**Framework
Agreements**



**Standard
Operating
Procedures**



**Technical
Requirements**



**RCE
Directory**



**Oversight &
Compliance**



Governance

Need the basics? Check out the TEFCA Guide:

https://rce.sequoiaproject.org/wp-content/uploads/2024/10/TEFCA-Guide-September-2024_508.pdf



ONC defines overall policy and certain governance requirements

RCE provides oversight and governing approach for the Qualified Health Information Networks (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 sign the same Terms of Participation and can generally participate in TEFCA Exchange in the same manner



- The RCE, together with ONC and the TEFCA governance bodies, will use this webpage to provide transparency into amendments to the Framework Agreements, technical requirements, and SOPs throughout the change management process.
- **When you subscribe to updates, you will receive an email notification when an amendment to an SOP is added to the webpage.**
- We always welcome your thoughts and feedback on amendments under review.



Stay Informed by Subscribing to Updates!

<https://rce.sequoiaproject.org/tefca-topics-in-change-management/>



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Partner-Based Exchange Examples

Available Now!



EDUCATION BRIEF

Partner-Based Exchange in TEFCA

This brief explains:

- What partner-based exchange means for TEFCA
- Why TEFCA includes this approach to exchange
- Which Exchange Purposes qualify for partner-based exchange
- Examples of relationships that can leverage partner-based exchange
- Considerations for QHINs, Participants and Subparticipants interested in leveraging this approach

Resources



- [Common Agreement](#)
- [Exchange Purposes SOP](#)
- [RCE Resource Library](#)

What is Partner-Based Exchange in TEFCA?



- Allows **QHINs, Participants, and Subparticipants** to use TEFCA's network-of-networks for data exchange with **trusted partners for shared business needs**.
- TEFCA sets standard operating policies for exchange based on **Exchange Purposes (XPs)**, such as **Treatment, Payment, and Health Care Operations** and each XP is accompanied by one or more **XP Codes**, which are included in a transaction so the recipient knows the purpose of the Query or Message Delivery.
- When an XP Code **does not require a response**, organizations can use that XP Code to exchange information as part of a **new or existing business relationship** with another participating organization.
- In these cases, organizations **coordinate directly with their exchange partner(s)** to send and receive information for that specific XP Code.
- **All parties must have signed the Common Agreement or Terms of Participation and be participating in TEFCA Exchange.**
- For XPs where a response is not required, the **non-discrimination provision does not apply**, allowing organizations to determine their exchange partners based on their specific business relationships.

Which XPs Allow for Partner-Based Exchange?



TABLE 1. XP CODES AND RESPONSE REQUIREMENTS

- Those interested in partner-based exchange should reference the XPs SOP to verify that their use case falls within an authorized XP that does not require response.
- Table 1 is adapted from XPs SOP version 5.1 and lists the XP codes available as of August 3, 2026.
- In the case of the Treatment XP, there are two codes.
 - For T-TRTMNT response is required and this could not be used for partner-based exchange.
 - However, the higher level T-TREAT code could be used as it does not require response.

Authorized XP	XP Code	Response Requirements
Treatment	T-TREAT T-TRTMNT	Not required <i>Required</i>
Payment	T-PYMNT	Not required
Health Care Operations Care Coordination/Case Management HEDIS Reporting Quality Assessment and Improvement Population-Based Activities Patient Safety Performance Review	T-HCO T-HCO-CC T-HCO-HED T-HCO-QAI T-HCO-POP T-HCO-PTSAFETY T-HCO-PERF	Not required Not required Not required Not required Not required Not required Not required
Public Health Electronic Case Reporting Electronic Lab Reporting	T-PH T-PH-ECR T-PH-ELR	Not required Not required Not required
Individual Access Services	T-IAS	<i>Required</i>
Government Benefits Determination Social Security Determination Access Consent Policy	T-GOVDTRM T-GOVDTRM-SSD T-GOVDTRM-ACP	Not required Not required Not required



1 Health Care Operations, HEDIS Reporting (T-HCO-HEDIS)

A health plan wants to use TEFCA Exchange to support an existing relationship with their provider network to request encounter data about their enrollees to supplement their claims data for the purpose of calculating quality measures that apply to the health plan, such as HEDIS measures. This scenario could fall under the Health Care Operations HEDIS Reporting XP Code (T-HCO-HEDIS), which does not require a response.

To begin this exchange, both the health plan and health care provider would need to onboard to TEFCA as a Participant or Subparticipant, if they have not already done so. After reviewing and agreeing to the applicable requirements in the Terms of Participation, SOPs and other relevant policies, the health plan and provider organization can determine their own exchange requirements, which may include:

- what encounter data the health plan needs returned in the provider's Response;
- what patient population should be included in the exchange for reporting purposes;
- any service level agreements on the frequency, volume and timing of Queries and Responses expected in the exchange;
- any reciprocal data that should be shared back to the provider by the health plan; and
- what fees (if any) the health plan agrees to pay to the provider for queried information.

Once the agreement is in place, the health plan can use TEFCA to direct Queries for encounter data to the providers and receive data for calculating quality measures.



2 Health Care Operations, Quality Assessment and Improvement (T-HCO-QAI)

An Emergency Medical Services (EMS) Provider seeks to establish a TEFCA data exchange relationship with the hospitals it services, Querying for data regarding outcomes for patients that are transported by EMS in order to calculate their own quality metrics.



3 Health Care Operations, Population-Based Activities (T-HCO-POP)

A pharmacy and a health plan have a partnership in which the pharmacy is reimbursed for helping close care gaps for a shared cohort of diabetic patients.

The relationship would include the health plan Querying the pharmacy for any in-house A1c checks conducted on this panel, with the pharmacy Responding with these results to support the health plan's value-based care arrangements.



4 Treatment (T-TREAT)

A free clinic provides primary care and chronic disease management to low-income patients.

As the clinic does not bill insurance, they are a non-HIPAA Covered Entity and therefore do not qualify to use the T TRTMNT XP Code, which requires a response from other health care providers.

To better support patient care, the free clinic seeks to establish a partner-based TEFCA exchange with the local health system to support sending referral information and Querying the health system for any health information to support continuity of care.



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FAQs for Individual Access Services (IAS) and Treatment



IAS Exchange Purposes Implementation SOP Version 3.0

Purpose: The SOP identifies specific requirements that IAS Providers are required to follow for Individual identity verification when sending an IAS Query. The SOP also identifies when a QHIN, Participant, or Subparticipant is required to Respond to an IAS Query. The SOP includes context-specific privacy and security transaction requirements for IAS Providers.

Last Update: July 1, 2026 (Version 3.0)

- Updates clarify requirements for IAS providers and Credential Service Providers, including demographic verification, valid query demographics, breach mitigation, and production versus non-production environments.

Treatment Exchange Purpose Implementation SOP Version 2.0

Purpose: The SOP identifies implementation specifications QHINs, Participants, and Subparticipants must follow when asserting the Treatment Exchange Purpose, including use of the T-TRTMNT XP Code.

Last Update: July 8, 2026 (Version 2.0)

- The updates further clarify the appropriate use of the T-TRTMNT Exchange Purpose, including who is eligible to use it, when it may be used, and what constitutes a patient relationship with a Health Care Provider. It also provides more detailed permitted and prohibited examples and clarifies expectations for scenarios involving multiple queries sent in succession.
 - Corresponding updates were made to the **XP Vetting Process SOP v2.0** and **Exchange Purposes SOP v5.1**, including a transition period for updated evidence requirements, and minor clarifications to streamline Exchange Purpose requirements.

How Does Individual Access Services Work?



SECTION 4:

How Does Individual Access Services Work?

Why was the Individual Access Services (IAS) Exchange Purpose (XP) Implementation SOP updated? ▼

What steps were taken to update the Individual Access Services (IAS) Exchange Purpose (XP) Implementation SOP? ▼

How will the updated IAS policies advance TEFCA toward allowing patients to access their information from multiple providers without having their electronic health record portal credentials for each health care provider? ▼

How do the updated Individual Access Services (IAS) policies improve patient identification? ▼

What steps will ONC/RCE take to advance demographic matching to support future Individual Access Services (IAS) policy? ▼

Who is required to respond to a Query for Individual Access Services (IAS)? ▼

What obligations are on Individual Access Services (IAS) Providers to keep patient information private and secure? ▼

Where can I find a list of the Individual Access Services (IAS) Providers? ▼

When will TEFCA require the use of FHIR® for Individual Access Services (IAS)? ▼

When will the updated Individual Access Services (IAS) policies go into effect? ▼

Why was the IAS Exchange Purposes (XP) Implementation SOP updated?

The IAS XP Implementation SOP was updated to improve the patient record matching rate and increase the response rate to Queries so that patients can, through their IAS Provider, have more access to their health information from across all TEFCA-connected entities.



How will the updated IAS policies advance TEFCA toward allowing patients to access their information from multiple providers without having their electronic health record portal credentials for each health care provider?

- The Individual Access Services (IAS) Exchange Purpose (XP) allows the use of consumer-facing applications to assist individuals in obtaining access to their health information from all entities connected to the TEFCA Network.
- The IAS XP Implementation SOP version 3.0 includes two ways for an IAS Provider to receive records: one is through use of patient portal credentials, the other is through demographics-based matching using data that has been verified by a [Credential Service Provider](#), or identity verification vendor, working directly with the individual to verify their identity.
- The updated policy is intended to increase the responsiveness of connections to consumer-facing applications.



How do the updated Individual Access Services (IAS) policies improve patient identification?

- The Individual Access Services (IAS) Exchange Purpose (XP) Implementation SOP version 3.0 leverages modern approaches to identity verification and patient matching by requiring that IAS Providers leverage one of the [approved identity verification vendors](#) to collect and verify individuals' identity, including the collection and validation of data commonly used to accomplish patient matching.
- In addition, the updated IAS XP Implementation SOP version 3.0 requires IAS Providers to participate in breach mitigation responsibilities by conducting a “demographics double-check” when they use demographic data to query for patient data.
- This means that the IAS Provider will compare information that a responder used to identify a patient match with its own information. If the IAS Provider believes that the match was made in error, it is required to both notify the responder that the match was not correct and delete any data received.



What obligations are on Individual Access Services (IAS) Providers to keep patient information private and secure?

- The [IAS Provider Requirements SOP](#) details the specific provisions that an IAS Provider must follow and must include in their Notice of Privacy Practices in order to inform individuals about how their information may be accessed, used, and shared by the IAS Provider. 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.
 - 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 receives 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.

How does TEFCA support exchange for Treatment?



SECTION 5:

How does TEFCA support exchange for Treatment?

What steps were taken to develop the updated Treatment policies? ▼

Will the updated Treatment policies allow all HIPAA Covered Entity Health Care Providers to require a response for a Treatment Query (T-TRTMNT)? ▼

Will the updated Treatment and Vetting policies include collection of the information that was proposed as the Know Your Participant list? ▼

Do all entities connected to TEFCA have to respond to a Query for Treatment (T-TRTMNT) under the Treatment Exchange Purpose (XP)? ▼

How do I know that I can trust the entity that is querying for Treatment that requires a response? ▼

Will the updated Treatment policies support organizations involved in value-based care arrangements? ▼

Why was the Treatment Exchange Purpose (XP) Implementation SOP updated? ▼

When will the updated Treatment policies go into effect? ▼

Why was the Treatment Exchange Purposes (XP) Implementation SOP updated?

The Treatment XP Implementation SOP was updated to allow all HIPAA Covered Entity Health Care Providers to Query for Treatment using the T-TRTMNT XP Code, which requires that medical records be shared by other providers participating in TEFCA Exchange, in accordance with the Common Agreement and applicable law.



Do all entities connected to TEFCA have to respond to a Query for Treatment (T-TRTMNT) under the Treatment Exchange Purpose (XP)?

- Table 1 in the [Exchange Purposes SOP Version 5.1](#) identifies which XP Codes require a response. For T-TRTMNT, two groups must respond to a Query (with some exceptions):
 - All Responding Nodes that are operated by or associated with a Health Care Provider or its Delegate; and
 - All Responding Nodes that are operated by an IAS Provider when the IAS Provider supports Response and the Individual has chosen for the IAS Provider to Respond.
- Note that Section 4.5 of the [Exchange Purposes SOP version 5.1](#) lists Exceptions to required responses. For example, an exception applies if the Response is prohibited by applicable law or is not in accordance with the Common Agreement.



How do I know that I can trust the entity that is querying for Treatment that requires a response?

- Together, the Treatment Exchange Purpose (XP) Implementation SOP and the Vetting SOP provide guidelines for entities that can query using the T-TRTMNT XP Code.
- QHINs must provide evidence that a provider organization meets the vetting requirements and the organization must be approved through the vetting process before being entered into the RCE Directory and begin to Query using the T-TRTMNT XP Code.



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Educational Resources

RCE Resource Library

TEFCA is a multifaceted, living framework that enables seamless and secure nationwide exchange of health information.

GETTING STARTED



Below is a guide to the Common Agreement, Standard Operating Procedures (SOPs), technical documents, and other resources that make up TEFCA's rules of the road. Start your journey to next generation interoperability here.

<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/>

**Next RCE Monthly
Information Call**

October 20, 2026 | 12:00-1:00pm ET



Questions & Answers

For more information:
rce.sequoiaproject.org



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Thank You

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