



The Trusted Exchange Framework and Common Agreement Draft 2

April 25, 2019

This informational resource describes select proposals in the TEFCA but is not an official statement of any policy. Please refer to the official version of the TEFCA .



VISIT www.healthIT.gov/TEFCA TO VIEW the TEFCA Draft 2.

Cures Act Language

21st Century Cures Act - Section 4003(b)

“Not later than 6 months after the date of enactment of the 21st Century Cures Act, the 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. The common agreement may include—

“(I) a common method for authenticating trusted health information network participants;

“(II) a common set of rules for trusted exchange;

“(III) organizational and operational policies to enable the exchange of health information among networks, including minimum conditions for such exchange to occur; and

“(IV) a process for filing and adjudicating noncompliance with the terms of the common agreement.”

21st Century Cures Act - Section 4003(c)

“Not later than 1 year after convening stakeholders...the National Coordinator shall publish on its public Internet website, and in the Federal register, the trusted exchange framework and common agreement developed or supported under paragraph B...”

Goals



GOAL 1

Provide a single
“on-ramp” to
nationwide
connectivity



GOAL 2

Electronic Health
Information (EHI)
securely follows
you when and
where it is needed



GOAL 3

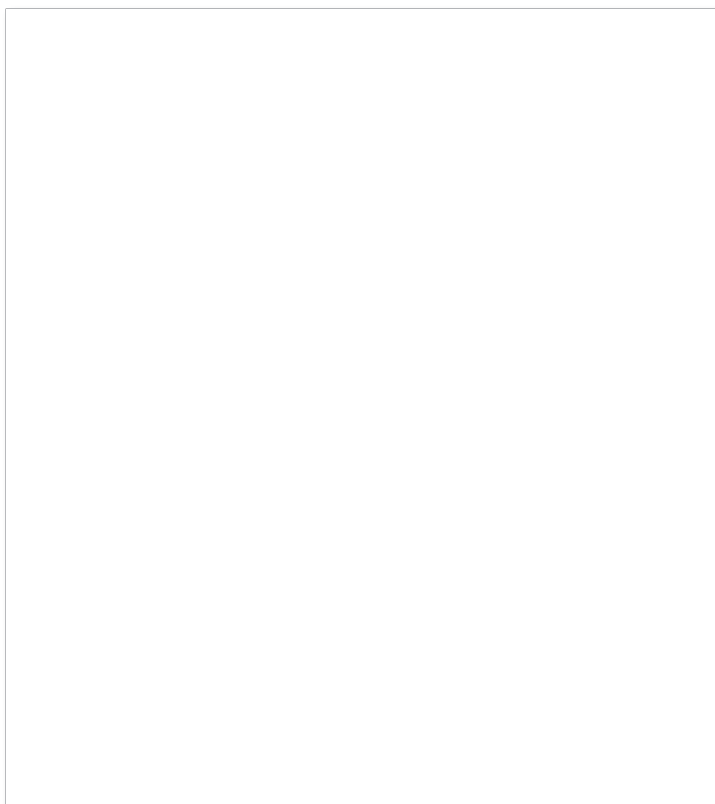
Support
nationwide
scalability



What are the Trusted Exchange Framework and the Common Agreement?

What is the Trusted Exchange Framework?

The **Trusted Exchange Framework** is a set of common principles that are designed to facilitate trust among Health Information Networks (HINs).



Principle 1 – Standardization: Adhere to industry and federally recognized standards, policies, best practices, and procedures.

Principle 2 – Transparency: Conduct all exchange and operations openly and transparently.

Principle 3 – Cooperation and Non-Discrimination: Collaborate with stakeholders across the continuum of care to exchange EHI, even when a stakeholder may be a business competitor.

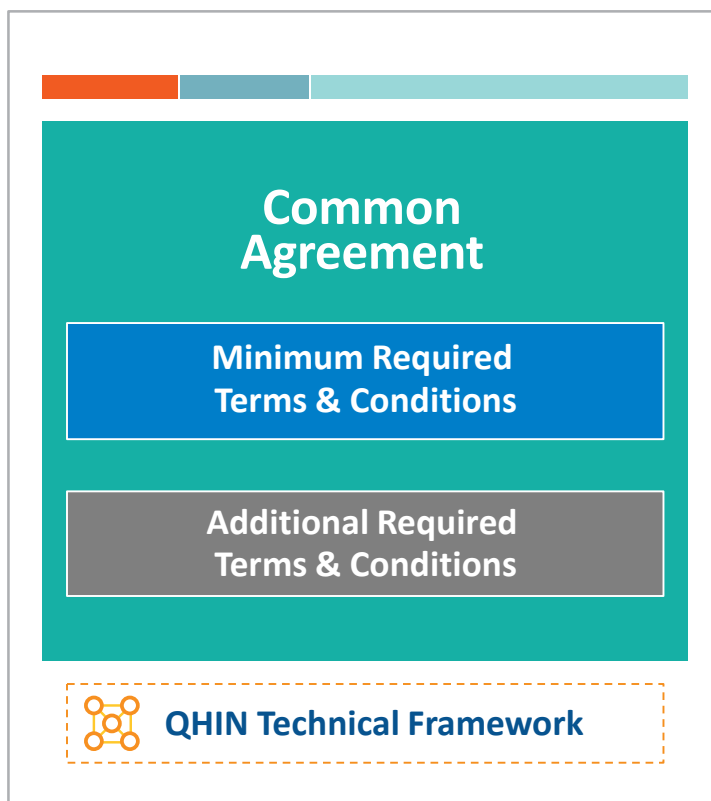
Principle 4 – Privacy, Security, and Safety: Exchange EHI securely and in a manner that promotes patient safety, ensures data integrity, and adheres to privacy policies.

Principle 5 – Access: Ensure that individuals and their authorized caregivers have easy access to their EHI.

Principle 6 – Population-Level Data: Exchange multiple records for a cohort of individuals at one time in accordance with applicable law to enable identification and trending of data to lower the cost of care and improve the health of the population.

What is the Common Agreement?

The **Common Agreement** will provide the governance necessary to scale a functioning system of connected HINs that will grow over time to meet the demands of patients, clinicians, and payers.



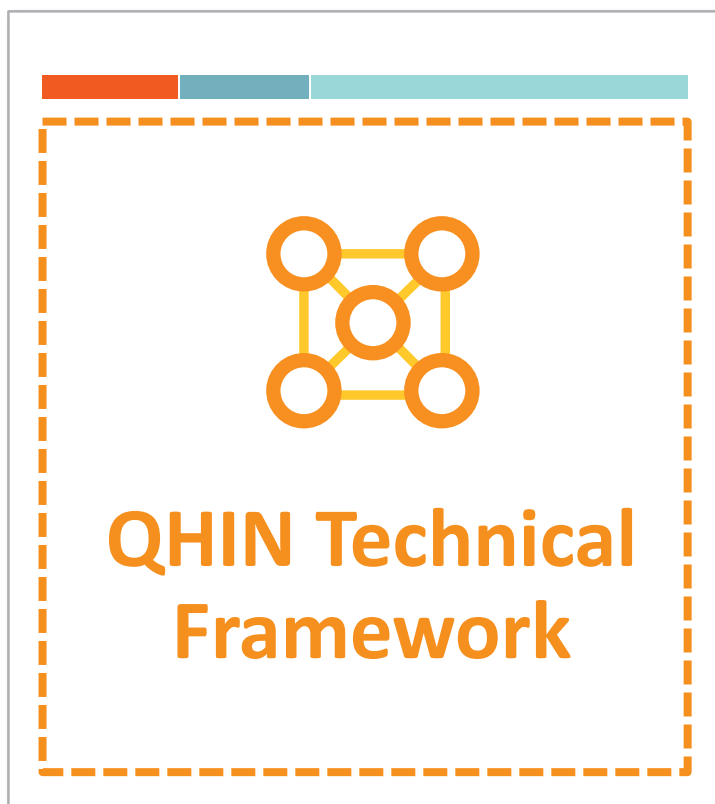
Minimum Required Terms & Conditions (MRTCs): ONC will develop mandatory minimum required terms and conditions that Qualified Health Information Networks (QHINs) who agree to the Common Agreement would abide by.

Additional Required Terms & Conditions (ARTCs): In addition to the MRTCs, the Common Agreement will include additional required terms and conditions that are necessary for the day-to-day operation of an effective data sharing agreement. The Recognized Coordinating Entity (RCE) will develop the ARTCs and ONC will have final approval.

QHIN Technical Framework (QTF): Signatories to the Common Agreement must abide by the QHIN Technical Framework, which specifies functional and technical requirements for exchange among QHINS. The RCE will work with ONC and stakeholders to modify and update the QTF.

What is the QHIN Technical Framework?

The **QHIN Technical Framework (QTF)** describes the technical and functional requirements for EHI exchange among QHINs



Functions included: Certificate Policy, Secure Channel, Mutual QHIN Server Authentication, User Authentication, Authorization & Exchange Purpose, Query, Message Delivery, Patient Identity Resolution, Record Location, Directory Service, Individual Privacy Preferences, Auditing, and Error Handling.

Technical detail: Focuses directly on information exchange between QHINs; for most interactions within a QHIN's network, the QHIN may determine how best to implement its responsibilities.

Functions enable: QHIN Broadcast Query, QHIN Targeted Query, and QHIN Message Delivery.



Major updates to Draft 2 of the TEF and MRTCs



Summary of Key Changes



Exchange
Purposes

Exchange Purposes Updated

Adopted a subset of payment and health care operations purposes, as defined in HIPAA.



QHIN Message Delivery (Push) Added

Included sending a patient's electronic health information (EHI) to a specific Qualified Health Information Network (QHIN) for delivery.



QHIN Technical Framework Added

Addressed the technical requirements for exchange among QHINs through development of the QHIN Technical Framework – Draft 1.



QHIN Definition Broadened

Application process added that allows a broader set of HINs to apply to be a QHIN.



Timelines Extended

When a new version of the Common Agreement is published, entities that have signed a Framework Agreement would have 18 months to implement updates instead of 12.



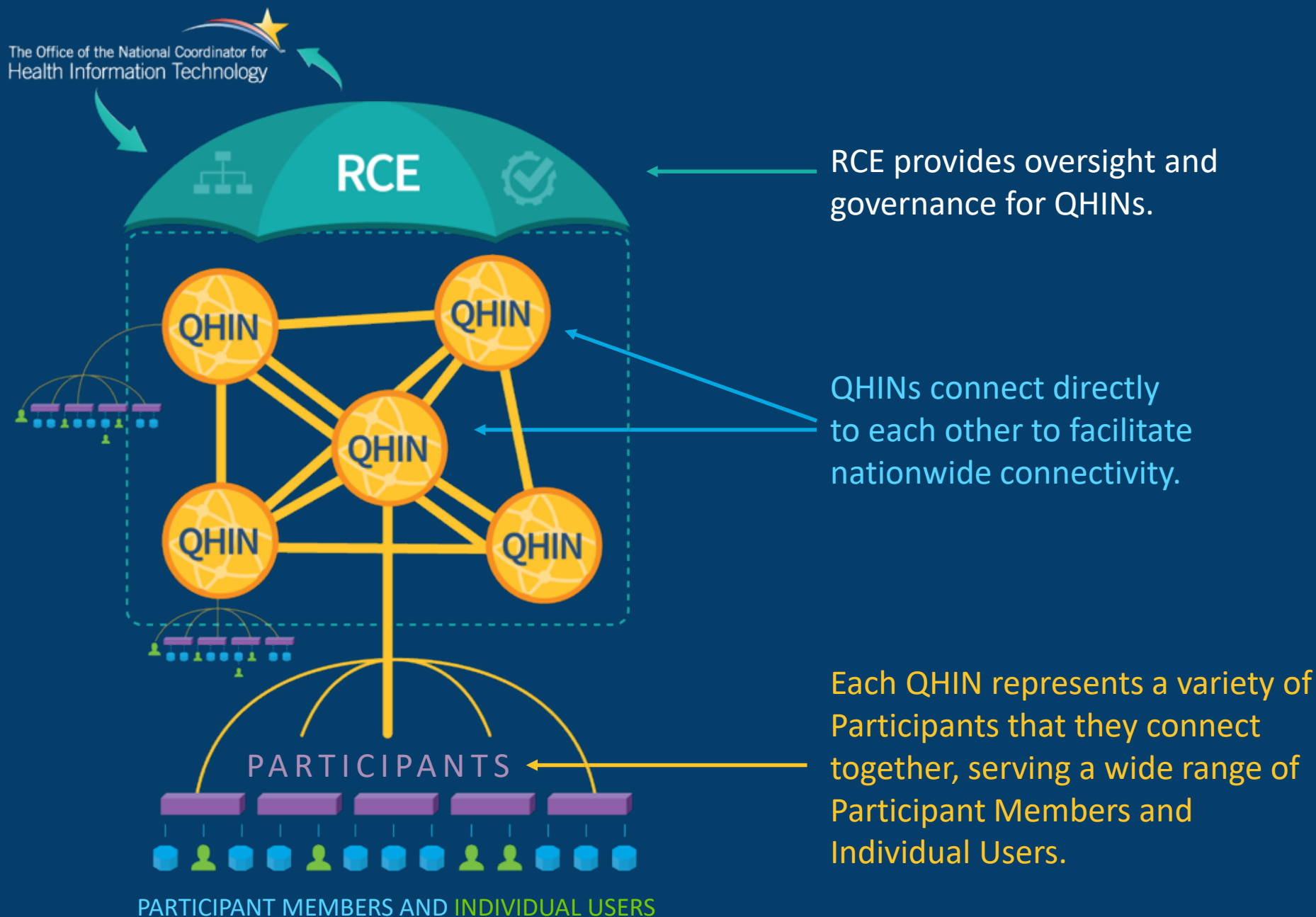
What is the structure of the Common Agreement?

Stakeholders

HEALTH INFORMATION NETWORKS



How Will the Common Agreement Work?



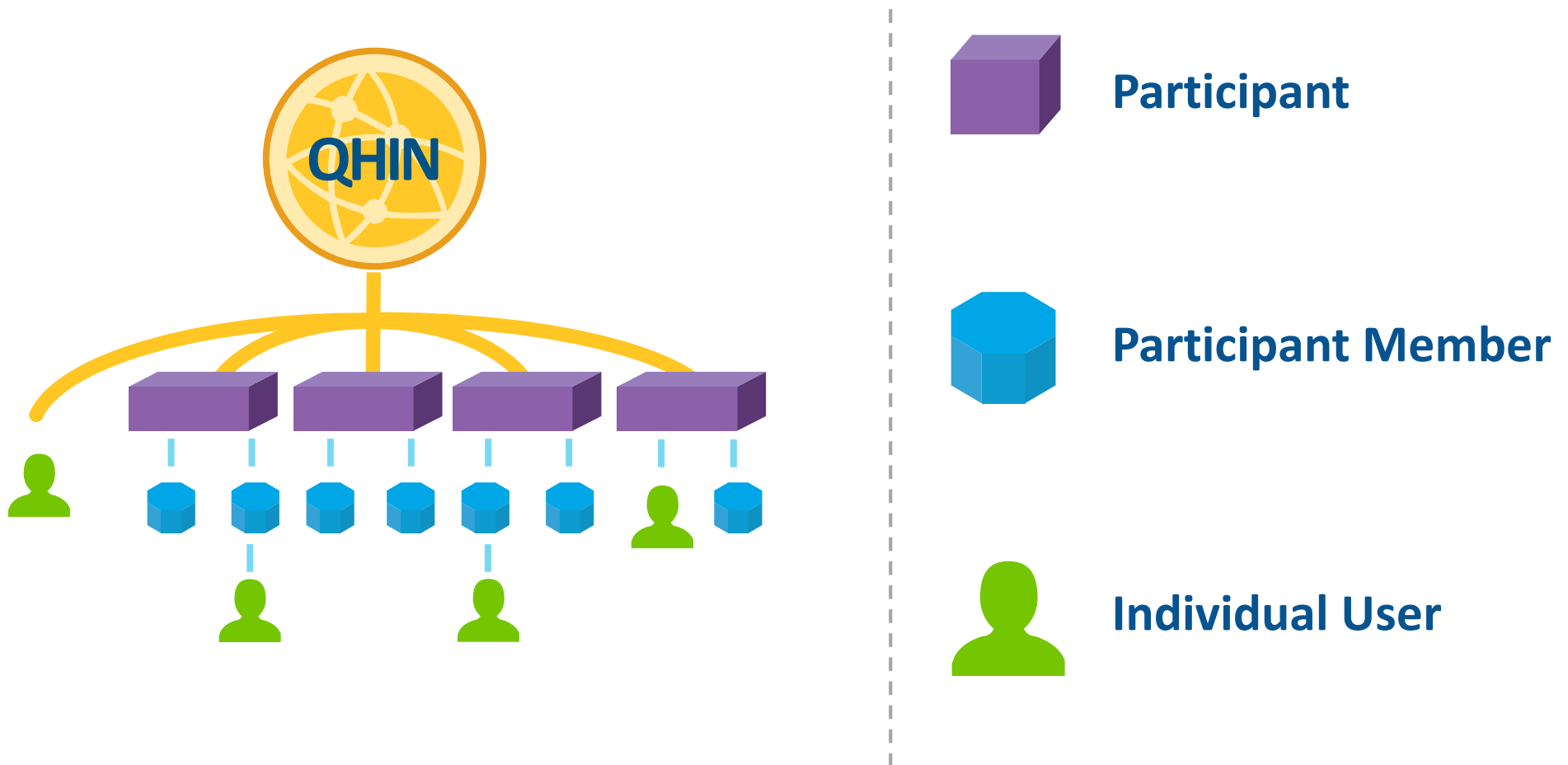
Recognized Coordinating Entity (RCE)



- Develop, update, implement, and maintain the Common Agreement.
- Identify, designate, and monitor QHINs.
- Modify and update the QHIN Technical Framework.
- Virtually convene public listening sessions.
- Develop and maintain a process for adjudicating QHIN noncompliance.
- Propose strategies to sustain the Common Agreement at a national level after the initial cooperative agreement period.

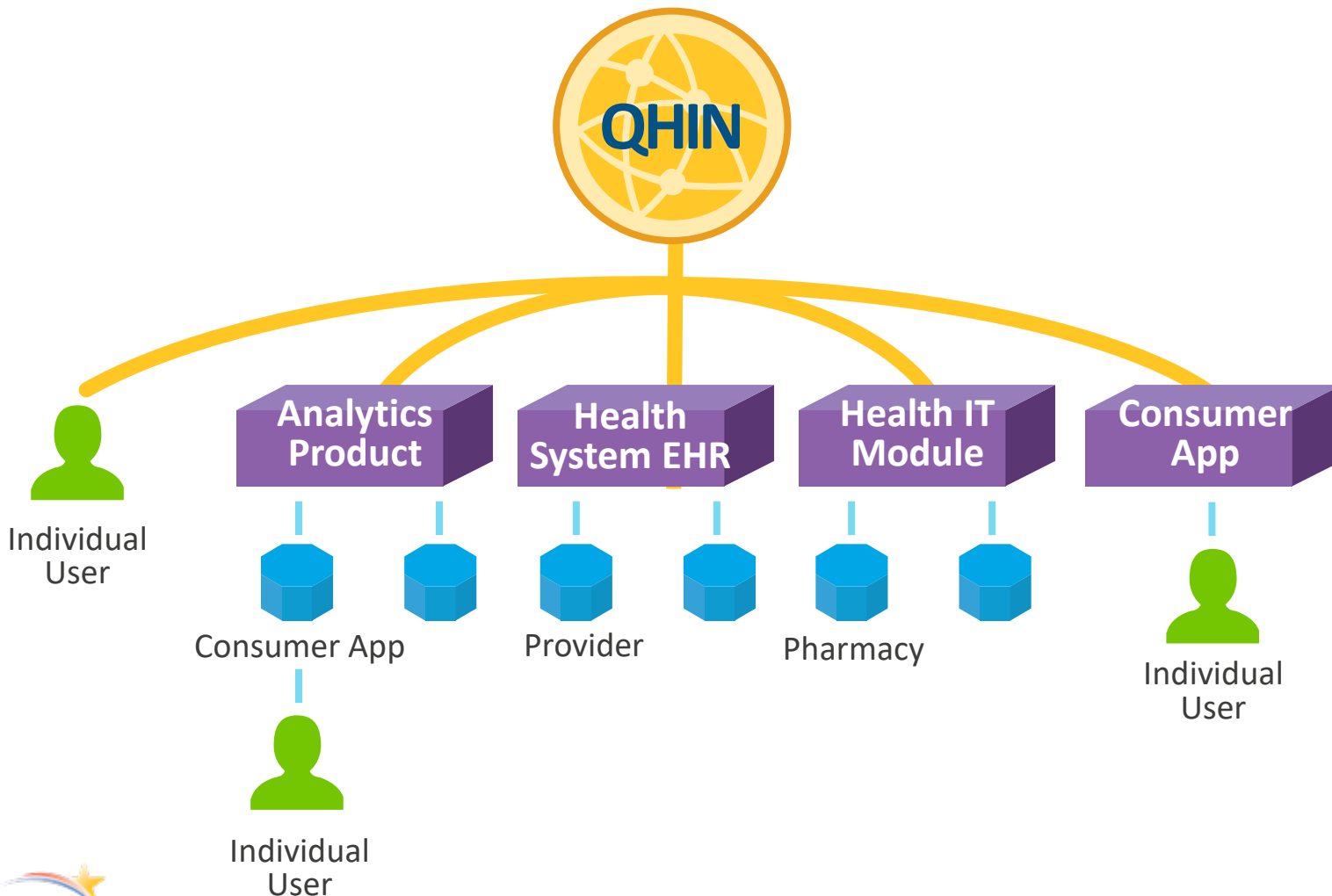
Structure of a Qualified Health Information Network

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



QHIN Example: Network of Health IT Developers

In this example, the QHIN supports a broad range of different health IT developer Participants. The users of the health IT developers' products are Participant Members. Individual Users connect directly to the QHIN, Participants, and Participant Members.





How do you
become a QHIN?



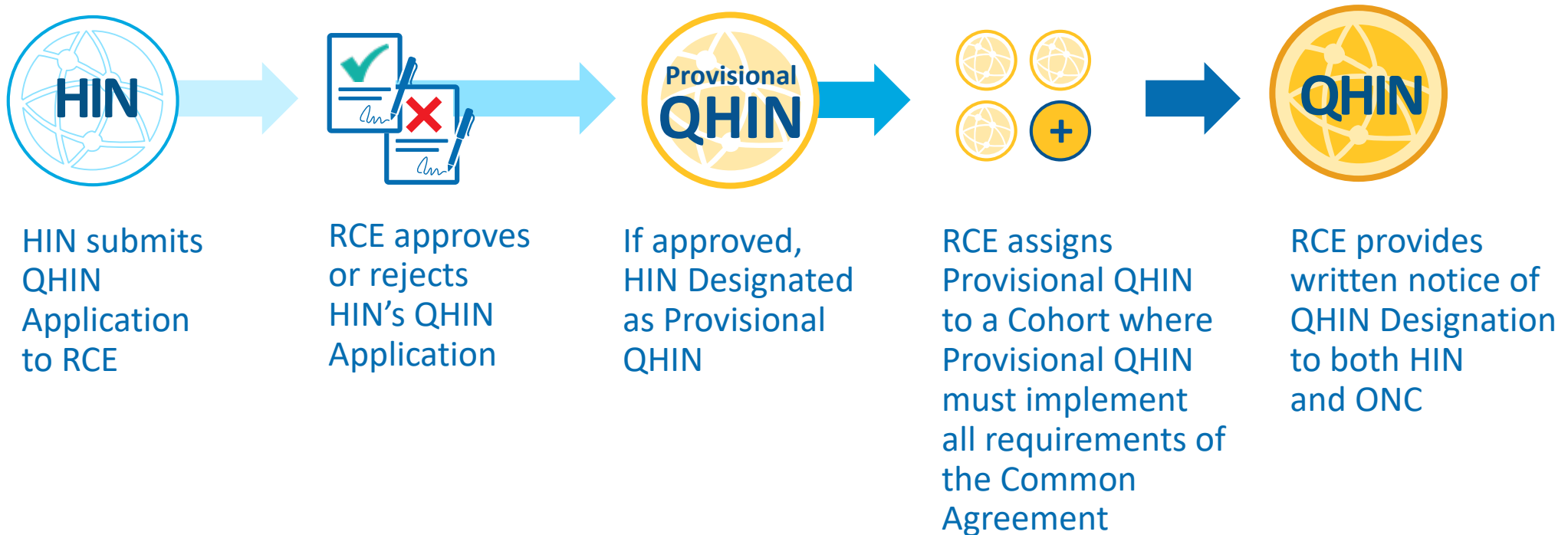
QHIN Applicant Checklist

A HIN applying to be a QHIN must:

- ✔ Operate an existing network with participants exchanging data in a live clinical environment
- ✔ Meet applicable federal/state law
- ✔ Submit a plan to meet all QHIN requirements



QHIN Application Process





What can the Common
Agreement be used for?



Exchange Purposes



Exchange Modalities



QHIN Broadcast Query

A QHIN's electronic request for a patient's EHI from all QHINs.



QHIN Targeted Query

A QHIN's electronic request for a patient's EHI from specific QHINs.



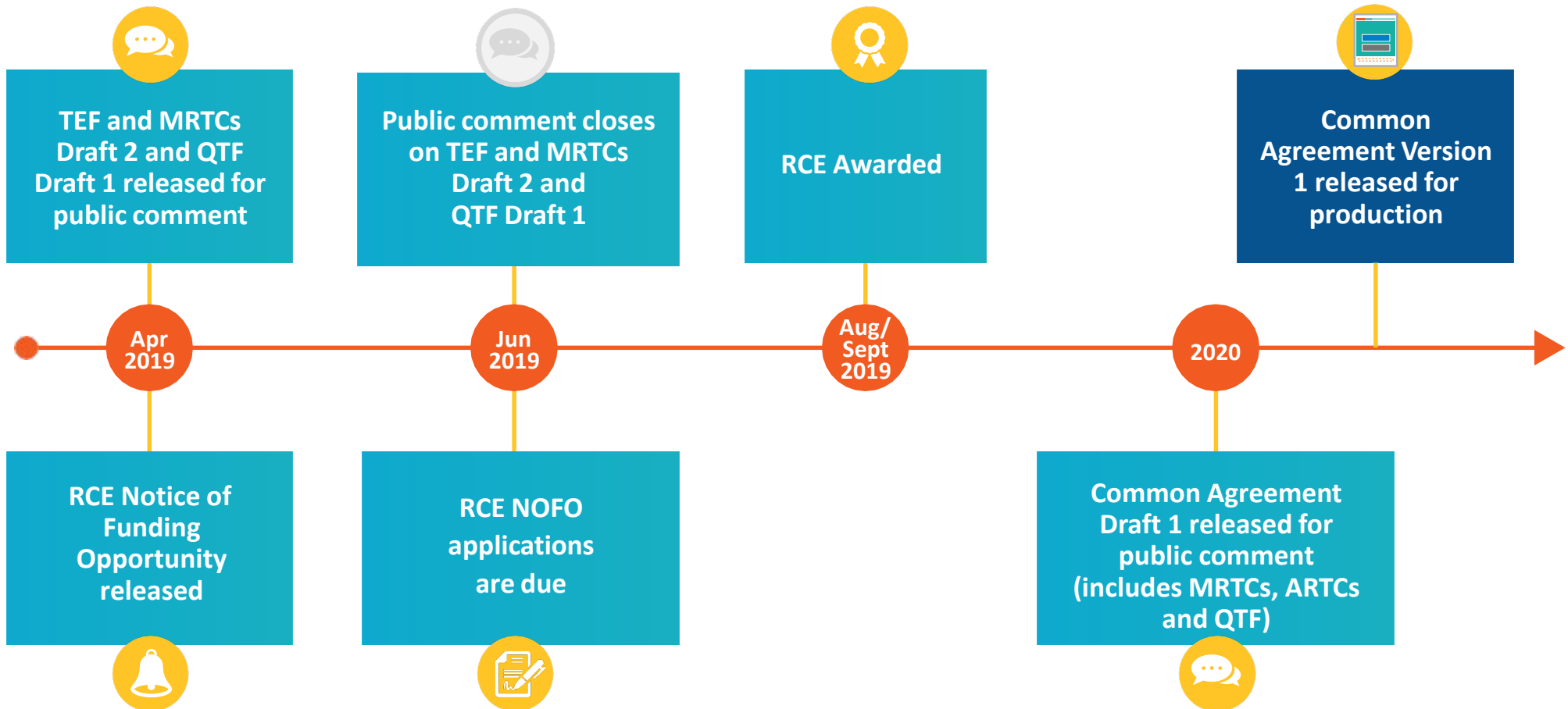
QHIN Message Delivery (Push)

The electronic action of a QHIN to deliver a patient's EHI to one or more specific QHINs.



What are
the next steps?

Timeline



HITAC TEFCA Task Force Charge

- **Overarching charge:** The Trusted Exchange Framework and Common Agreement (TEFCA) Task Force will develop and advance recommendations on the TEFCA Draft 2 to inform development of the final Common Agreement.
- **Detailed charge:** Make specific recommendations on the Minimum Required Terms and Conditions and the Qualified Health Information Network (QHIN) Technical Framework (QTF) —
 - » **Definition, Structure, and Application Process for Qualified HINs:** Recommendations for further clarifying the eligibility requirements and application process for becoming a QHIN.
 - » **Exchange Purposes and Modalities:** Recommendations on enhancing or clarifying the seven (7) exchange purposes and three (3) exchange modalities proposed in the MRTCs.
 - » **Privacy/ Security:** Recommendations on privacy and security requirements that ONC should consider including in the MRTCs, especially for non-HIPAA entities.
 - » **QHIN Technical Framework (QTF):** Recommendations on the technical and functional specifications for exchange among QHINs.



The Office of the National Coordinator for
Health Information Technology

Questions?

Zoe Barber, Senior Policy
Advisor, ONC
zoe.barber@hhs.gov

