



The Trusted Exchange Framework and Common Agreement

Highlights for the Payer Community

What is the Trusted Exchange Framework and Common Agreement?

The Trusted Exchange Framework and Common Agreement (TEFCA) will outline a policy and technical approach to enable nationwide exchange of electronic health information across disparate health information networks (HINs). The development of the TEFCA is mandated by the [21st Century Cures Act](#).

For a variety of stakeholders — including payers, patients, providers, developers, and HINs — the TEFCA is designed to provide a single on-ramp to nationwide connectivity that can support secure electronic health information exchange.

Once finalized, the TEFCA will give patients, health care providers, payers, HINs, health IT developers, and other stakeholders access to data when and where it's needed to better support patient care.



How does the TEFCA work?

- The Trusted Exchange Framework describes high-level principles that networks should adhere to for trusted exchange. The Common Agreement is a legal agreement that will enable network-to-network data sharing.
- The Common Agreement will set minimum requirements to enable the appropriate sharing of electronic health information between networks.
- Health care providers, patients, payers, state agencies, public health professionals, and other stakeholders will be able to use the policies, technical specifications, and network connectivity requirements of the Common Agreement to send and receive electronic health information seamlessly.
- Stakeholders will only need to join one HIN that participates in the Common Agreement to be able to exchange electronic health information with another entity participating in the Common Agreement.
- Participants in the network can exchange electronic health information for specific health care purposes, including for treatment, quality improvement, public health, and patient access.
- Payers will have a variety of options for participating, such as joining a HIN that meets the requirements of the Common Agreement.
- Payers will also need to agree to certain obligations around how they will use and exchange the data they access.



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Things to know



Data that travels across the network created by the Common Agreement can **improve care for plan members** by:

- Increasing providers' ability to coordinate care by allowing them to communicate more effectively with other providers in the network.
- Allowing health plans to give providers better tools for care management.
- Enhancing health care quality monitoring and measurement.

To better support care, payers will be able to **gain access to more timely data on plan members** by joining a qualified health information network (QHIN). This will enable sharing of a core set of clinical data, which will allow payers to improve their support of individual members. This means:

- Better population health monitoring.
- More streamlined precertification and preauthorization of services.
- Improved value-based payment models.

Allowing payers to more **easily obtain and share member data with providers** will give providers more opportunities to succeed under value-based payment models.

As a payer, how can I be involved in the TEFCA?



In the future, you will be able to leverage the the Common Agreement by:

- Requiring the providers you contract with to be connected to the network created by the Common Agreement.
- Joining an existing QHIN or forming your own QHIN.

To comment on the Trusted Exchange Framework Draft 2, the Minimum Required Terms and Conditions Draft 2 for the future Common Agreement, and the QHIN Technical Framework Draft 1, please visit www.healthit.gov/TEFCA.