

Draft Trusted Exchange Framework

Highlights for the Provider Community

What is the Draft Trusted Exchange Framework?

The [21st Century Cures Act](#), signed into law in December 2016, required the Office of the National Coordinator for Health Information Technology to “convene public-private and public-public partnerships to build consensus and develop or support a trusted exchange framework, including a common agreement to share clinical data among health information networks nationally.”

On January 5, 2018, ONC released the [Draft Trusted Exchange Framework](#), which outlines a set of principles for trusted exchange and minimum required terms and conditions for trusted exchange. This is designed to bridge the gap between providers’ and patients’ information systems and enable all types of health care stakeholders and health information networks (HINs) to share patient data.

What are the most important things for providers to know about the Trusted Exchange Framework?

- The Trusted Exchange Framework provides a **single “on-ramp” to allow all types of health care providers to participate in nationwide exchange**— including ambulatory, long-term and post-acute care (LTPAC), behavioral health, community and social services, and others— to join any health information network (HIN) they choose, regardless of which technology vendor they use or where their patients are located.
 - **Decreases financial burden and improves workflow efficiency** by eliminating the need to create one off and point-to-point interfaces.
 - Facilitates provider **access to complete and accurate data on the patients they serve**, regardless of where the patient went for care, enabling safer, more effective care.
 - **A core set of data** will be available among connected networks for permitted purposes, including treatment, payment, health care operations, individual access, and public health.
 - Will facilitate the ability for providers to **retrieve data on multiple patients at once**, based on a patient panel, improving their ability to perform population health management, data analytics, and quality measurement, thereby enhancing participation in value-based payment models.
 - **Improves communication and care coordination across multiple care settings** by connecting disparate networks and allowing providers and health systems to more easily work with third parties, such as analytics products, care coordination services, HINs, Qualified Clinical Data Registries (QCDRs), and other registries.
 - **Gives providers assurance they can trust the data they receive** by setting minimum requirements for identity proofing and authentication.
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How can providers be involved in Trusted Exchange Framework?

- Providers and health systems could require the technology vendors or HINs they contract with be connected to the network created by the Trusted Exchange Framework.
- Providers could either join a Qualified Health Information Network (Qualified HIN), or could join with other entities and form their own Qualified HIN.
- [Please comment on the Draft Trusted Exchange Framework](#). ONC is engaged in an open process to ensure that the network best serves the interest of patients and their caregivers and is eager to hear from providers on the best path forward.