

# Draft Trusted Exchange Framework

## Highlights for State Governments & Public Health

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### What is the Draft Trusted Exchange Framework?

The [21<sup>st</sup> 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 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.

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### What does the Trusted Exchange Framework mean for state government and public health?

- Participation in the Trusted Exchange Framework will be voluntary.
  - The Trusted Exchange Framework sets the minimum requirements to enable the appropriate sharing of health information between networks.
  - The Trusted Exchange Framework takes a non-regulatory approach to allow flexibility to ensure that data can be efficiently exchanged while protecting privacy and security.
  - State Medicaid Agencies could benefit from the Trusted Exchange Framework in multiple ways:
    - Improved ability for providers to coordinate care across multiple settings.
    - More accurate and more easily produced state-level measurement of the quality of healthcare. This can allow states to expand value-based healthcare purchasing.
    - Improved state-level dashboards of healthcare services utilization. Such dashboards can better enable public and private decision making on high cost healthcare expenditures impacting state budgets.
    - Better fraud detection based on enhanced data availability.
    - Reduction in the cost to the state of interfaces between health information technology systems and health information networks.
  - The additional data made accessible by the Trusted Exchange Framework allows state public health agencies to improve electronic case reporting, cross jurisdictional immunization exchange, patient tracking and family reunification during emergencies, identification of at-risk populations, and disease surveillance and outbreak investigation.
  - States may see improved availability of data for conducting analyses of non-clinical services, including child welfare and other social services.
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### How can state governments leverage the Trusted Exchange Framework?

- Include connectivity to the network created by the Trusted Exchange Framework as a requirement in contracts with entities that facilitate health information exchange on behalf of the state.
- Require all health data sharing activities to leverage the Trusted Exchange Framework (e.g. require Medicaid managed care contracts to require providers to be connected to the network).
- [Please comment on the Draft Trusted Exchange Framework](#) if it does not meet your state needs.