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**UPMC Health Plan**

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*Submitted electronically via [www.healthit.gov](http://www.healthit.gov)*

**Re: Trusted Exchange Framework and Common Agreement (TEFCA) Draft 2**

UPMC Health Plan and the integrated companies of the UPMC Insurance Services Division (collectively, "UPMC") are pleased to submit the following comments in response to the Office of the National Coordinator for Health Information Technology (ONC) Request for Comments (the "RFC" or "Request") regarding the second draft of the Trusted Exchange Framework and Common Agreement (TEFCA) published on April 19, 2019.

UPMC offers a wide range of commercial group and individual, Medicare, Medicaid, CHIP, and ancillary coverage products to consumers in Pennsylvania, West Virginia, and Ohio. Since beginning operations in 1996, UPMC has been recognized for its dedication to quality and the provision of outstanding customer service across its product lines. Our Medicare Advantage (MA) Plans, UPMC *for Life*, serve approximately 175,000 members combined through the MA Part C/D and Special Needs Plan (D-SNP) programs; more than 26,000 of these members are enrolled in UPMC *for Life* Dual, one of the largest stand-alone 4-star D-SNPs in the nation. Through our Medicaid managed care organization, UPMC *for You*, we provide coverage to more than 425,000 enrollees across 40 Pennsylvania counties, and our behavioral health managed care organization, Community Care Behavioral Health Organization, manages mental health and substance abuse services for almost one million Medicaid beneficiaries in Pennsylvania. UPMC has offered individual market consumers a variety of coverage options as a Qualified Health Plan (QHP) issuer since the launch of the Marketplace in 2014, and currently provides coverage to approximately 140,000 Marketplace enrollees. In several Pennsylvania counties, UPMC is the only QHP

issuer currently offering a product through the Marketplace. Today our collective commercial and government programs membership exceeds 3 million.

We thank ONC for affording issuers and other stakeholders an opportunity to provide comments in response to the proposed national framework and technical standards for the exchange of electronic health information. UPMC supports ONC's goal of advancing the reliable, efficient, and secure exchange of health information through the development and application of nationally recognized network and data standards. ONC's ongoing work in this regard is vital to achieving the ultimate vision of a seamless exchange of clinical information unconstrained by geography or provider affiliation, and we believe that the TEFCA "network of networks" model represents a structurally balanced and flexible approach that should garner support from a wide range of stakeholders. It is with our own support in mind that we respectfully offer the following comments in response to the RFC.

#### **Implementation Timing**

We agree with the ONC's view that national accessibility of interoperable health information is something that holds great promise to improve efficiency and useful transparency across our entire healthcare system. We appreciate the ambitious scale of the challenges that ONC has confronted in moving to the second draft of both TEFCA and the companion Minimum Required Terms and Conditions (MRTCs), as well as exposing a first draft of the Qualified Health Information Network (QHINs) Technical Framework and the Notice of Funding Opportunity for a Recognized Coordinating Entity (RCE). That said, we do have some concerns about the extent to which the TEFCA Draft 2 standards are both incorporated in and reliant upon the recently issued Centers for Medicare & Medicaid Services (CMS) and ONC rules on Interoperability and Information Blocking, for which stakeholder comments were only recently submitted. Some aspects of stakeholder feedback (e.g., recommendations on patient matching solutions) will have a direct impact on TEFCA implementation, but in the absence of settled standards may not yet be ripe for truly thoughtful evaluation in context. Because the related CMS and ONC information blocking rules are still being developed, it is difficult to fully assess the merits and any associated concerns with TEFCA's integration in the broader "road map" toward national health data interoperability. This problem is further compounded by the disparity in implementation timelines that CMS and ONC have proposed for the closely related Interoperability and Information Blocking standards. We believe that uniform, coordinated adoption of a 2022 implementation date (as proposed by

ONC for application of its proposed Information Blocking rule) would provide a much-needed opportunity for all stakeholders to share additional, meaningful feedback and begin comprehensive implementation in the context of finalized regulatory guidance and mature technical standards. **We respectfully recommend that ONC work with CMS to integrate the Interoperability, Information Blocking, and TEFCA documents into a single, coordinated regulatory package with a shared implementation date in 2022.**

We again thank ONC for affording issuers and other stakeholders the opportunity to provide input on the newest TEFCA draft and its proposed national standards for the exchange of electronic health information by and among our industry. We appreciate your consideration of our comments and look forward to continued collaboration with ONC in the future.

Respectfully Submitted,

A handwritten signature in blue ink, appearing to read 'C. Wallace', is positioned above the typed name.

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UPMC Health Plan