

## 1 BACKGROUND

In response to growing industry pain points surrounding content data quality, the eHealth Exchange launched its Enhanced Content Testing Program on February 5, 2018, supported by the Sequoia "Interoperability Testing Platform" (ITP) that enables Participants to submit representative samples of the clinical content documents such as C-CDAs or C32s that they share over the eHealth Exchange Network. The ITP provides feedback and reports to Participants regarding conformance to structure, vocabulary and content specifications, drawing on respective HL7 C-CDA specifications referenced by Meaningful Use 2011, 2014 and 2015 editions of Meaningful Use requirements.

These program requirements were announced in 2017 and the ITP content testing solution was made available to Participants on February 5, 2018 so Participants could submit testing results over the subsequent 12 months, by the February 5, 2019 deadline. New Applicants joining the eHealth Exchange, as well as Product vendors wishing to validate their products were required to test as part of the ongoing process. In February 2019, the Coordinating Committee approved extension of the February 5, 2019 content validation results submission deadline to May 6, 2019. Participants who do not pass content validation have 18 months from the date they submit content validation results to remediate content validation errors (e.g. required fields missing, wrong terminology/codes used). See the table below for additional background timeline details:

Key Dates		
CC Requested Staff to assist with Content Data Quality Improvement (Workgroup Launched)	June 2016	✓ Completed
Proposed Enhanced Content Testing Pilot Presented to CC for Review/Approval & Participant Input Public Comment	11/15/2016	✓ Completed
30 day notice to Participants – Review Call	12/02/2016	✓ Completed
30+ day Objection Period Ends	01/10/2017	✓ Completed
Enhanced Content Testing Effective Date – Began concurrent work with HL7 to process 2 years of outstanding errata and publish value sets for all specifications in the Value Set Authority Center (VSAC)	01/11/2017 – 02/01/2018	✓ Completed
eHealth Exchange Enhanced Content Testing Program Launch with Sequoia ITP Tooling Availability	02/05/2018	✓ Completed

Approved xx-xx-2019



# Coordinating Committee Guidance Content Validation

Key Dates		
Original Deadline for Participants to Complete Testing & Submit Test Results	2/5/2019	
Extended Deadline for Participants to Complete Testing & Submit Test Results	5/6/2019	
Digital Certificates Suspended if Validation Results Not Submitted	10/31/2019	
Deadline for Participants to Remediate Test Errors & Conformance Issues	Participants who do not pass content testing but remediate all errors and conformance issues must retest to confirm they remediated identified errors and conformance issues.  Participants unable to remediate all errors and conformance issues should submit a remediation plan and/or a conformance waiver request within two months of the 18-month deadline to the eHealth Exchange for Coordinating Committee consideration.	

### 2 Purpose

Because eHealth Exchange Participants rely upon data exchanged to improve patient care, the eHealth Exchange Coordinating Committee requested content validation to assess data quality and to ensure that data exchanged provides its full value potential. The Coordinating Committee has determined that official guidance is needed on this matter. This document provides guidance relating to the process and procedures around the content validation program.

Approved xx-xx-2019



#### 3 DESCRIPTION

Noting that some of these provisions may need to be added to the eHealth Exchange Validation Plan<sup>1</sup>, the eHealth Exchange Content Testing Program should adhere to the following provisions:

- Participants who have not submitted content validation results to the eHealth Exchange by October 1, 2019 will have their digital certificates suspended until validation results are submitted.
- Participants who do not pass content testing but remediate all errors and conformance issues must retest within 18 months of the date of initial test result submission to confirm they remediated identified errors and conformance issues.
- Participants who do not remediate conformance issues within 18 months of submitting their content validation results must submit a remediation plan and/or a conformance waiver request within two months of the 18-month deadline to the eHealth Exchange for Coordinating Committee consideration.

### 4 BEST PRACTICE RECOMMENDATIONS

Production Participants should perform testing of the content samples each time the tooling is updated and when additional content requirements are added from the US Core Data for Interoperability (USCDI) planned at various intervals. In addition, Participants should communicate testing requirements to new data exchange sources and hold them accountable to remediate errors/issues found with Content Testing. eHealth Exchange testing staff should continue to work directly with vendors and provide assistance with this communication and support.

#### 5 Additional Considerations

The Coordinating Committee should consider any Trusted Exchange Framework timelines and requirements to meet Qualified Health Information Network (QHIN) requirements. eHealth Exchange staff should propose any corresponding suggestions for Coordinating Committee consideration.

Approved xx-xx-2019

<sup>&</sup>lt;sup>1</sup>https://s3.amazonaws.com/seqprojectehex/wp-content/uploads/2018/10/16175507/eHealth-Exchange-Validation-Plan 2018Mar16-final.pdf

# Coordinating Committee Guidance Content Validation

#### 6 DEFINITIONS

**Health Information Networks** - an individual or an entity that satisfies one or both of the following:

- Determines, oversees, administers, controls, or substantially influences policies or agreements that define business, operational, technical, or other conditions or requirements for enabling or facilitating access, exchange, or use of electronic health information between or among two or more unaffiliated individuals or entities;
- Provides, manages, controls, or substantially influences any technology or service that enables or facilitates the access, exchange, or use of electronic health information between or among two or more unaffiliated individuals or entities

**Qualified Health Information Network** – QHINs are **Health Information Networks** that agree to abide by the Common Agreement established by the RCE and agree to adhere to the "Minimum Required Terms and Conditions for Trusted **Exchange**" established by **TEFCA** in "Part B."

**Trusted Exchange Framework and Common Agreement (TEFCA),** is a set of common principles that are designed to facilitate trust among Health Information Networks (HINs)

**Sequoia Interoperability Testing Platform (ITP)** – a collection of open source industry tools configured and integrated to support the testing programs administered by The Sequoia Project.