

eHealth ExchangeTM

All Participant Call

Kati Odom-Bell

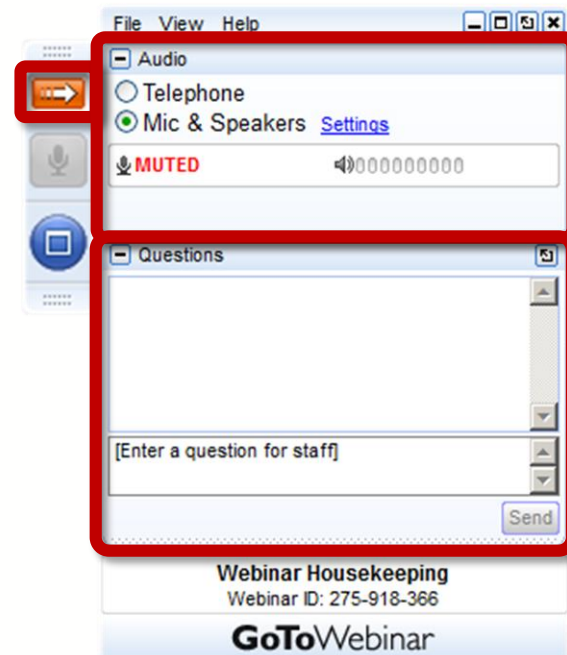
Pat Russell

Mike Yackanich

Mike McCune

Didi Davis

How Do I Participate?



Your Participation

Open and close your control panel

Join audio:

- Choose "Mic & Speakers" to use VoIP
- Choose "Telephone" and dial using the information provided

Submit questions and comments via the Questions panel

Note: Today's presentation is being recorded and will be provided within 48 hrs

Problems or Questions? Contact Dawn Van Dyke
dvandyke@ehealthexchange.org or 703.864.4062

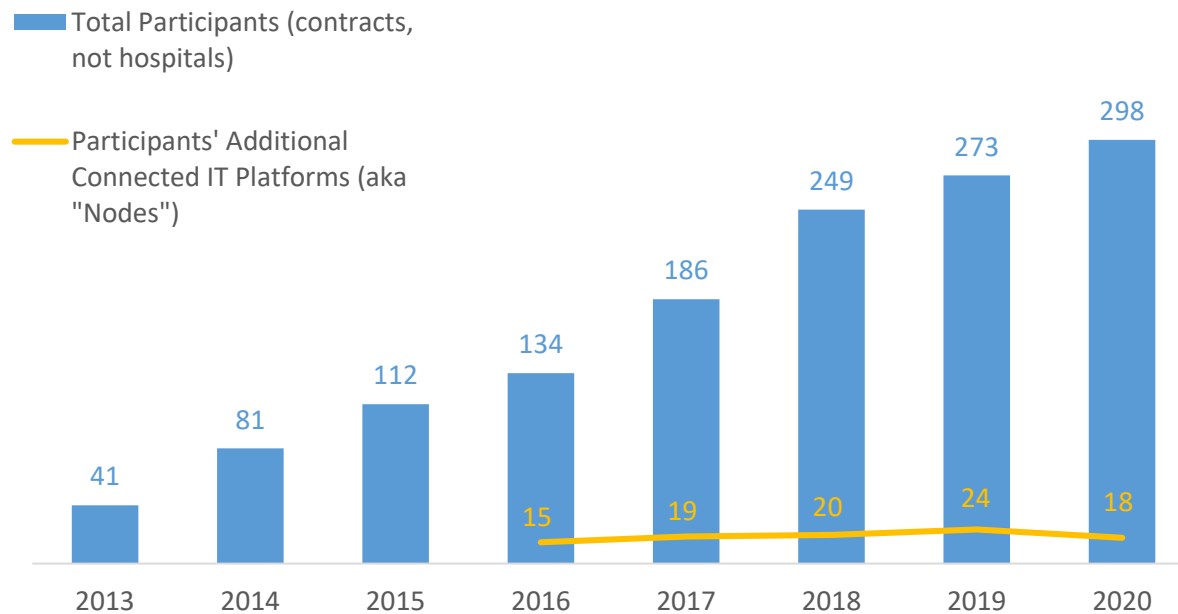
Today's Topics

1. New Participants	Kati Odom Bell
2. MIPS Attestation	Pat Russell
3. Carequality Update	Mike McCune
4. Hub Update	Mike Yackanich
6. Content Validation	Didi Davis
7. eCR Update	Kati Odom Bell
9. Certificate Authority Update	Kati Odom Bell
10. Q&A	Everyone



New Participants

Congratulations to our newest Participants!



- Orlando Health, Epic, FL

Committed to Improving Patient Care via Data Exchange



MIPS Attestation

CY 2021 85 FR 84472 - Engagement in Bi-Directional Exchange through HIE

- Alternative measure as an optional alternative to two (2) existing measures:
 - The Support Electronic Referral Loops by Sending Health Information measure, and
 - The Support Electronic Referral Loops by Receiving and Incorporating Health Information measure.
- Worth 40 points
- Reported by Attestation, requiring a Yes/No response. It was proposed that clinicians would attest to the following:
 - I participate in an HIE in order to enable secure, bi-directional exchange to occur for **every** patient encounter, transition or referral, and record stored or maintained in the EHR during the performance period in accordance with applicable law and policy.
 - The HIE that I participate in is capable of exchanging information across a broad network of unaffiliated exchange partners including those using disparate EHR's, and does not engage in exclusionary behavior when determining exchange partners.
 - I use the functions of CEHRT to support bi-directional exchange with an HIE:
 - 45 CFR 170.315(b)(1), (b)(2), (g)(8), or (g)(10)
- eHealth Exchange can provide a letter when a Participant requests to support this statement in the attestation: The HIE that I participate in is capable of exchanging information across a broad network of unaffiliated exchange partners including those using disparate EHR's, and does not engage in exclusionary behavior when determining exchange partners.
 - eHealth Exchange cannot provide data for the first or last statement of the attestation.
 - Contact administrator@ehealthexchange.org or prussell@ehealthexchange.org

Scoring Methodology for Promoting Interoperability in CY 2021

TABLE 48: Scoring Methodology for the Performance Period in CY 2021

Objective	Measure	Maximum Points
Electronic Prescribing	e-Prescribing	10 points
	<i>Bonus:</i> Query of PDMP	10 points (<i>bonus</i>)
Health Information Exchange OR	Support Electronic Referral Loops by Sending Health Information	20 points
	Support Electronic Referral Loops by Receiving and Reconciling Health Information	20 points
Health Information Exchange (alternative)	HIE Bi-Directional Exchange	40 points
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	40 points
Public Health and Clinical Data Exchange	Report to two different public health agencies or clinical data registries for any of the following: <ul style="list-style-type: none">• Syndromic Surveillance Reporting• Immunization Registry Reporting• Electronic Case Reporting• Public Health Registry Reporting• Clinical Data Registry Reporting	10 Points

Notes: The Security Risk Analysis measure is required, but will not be scored.




Carequality Update

©2020 eHealth Exchange. All Rights Reserved.

eHealth ExchangeTM

Carequality Bridge Engagement – Connecting to Carequality via the Hub

If your organization expressed an interest with connecting to Carequality and you did not receive an informational email or you have a new interest in connecting to Carequality, please email administrator@ehealthexchange.org
See the link to the right for detailed information



For participants that wish to connect to Carequality, there are four major steps:

- 1) Obtain subscription to Carequality Service
- 2) Get your organization listed in the Carequality directory
- 3) Validate your connection to Carequality via the Hub in production
- 4) Begin to initiate requests across the Carequality Bridge

For detailed onboarding steps, reference the [Carequality Connectivity Steps for Participants](#) which is available on the [Hub portal](#).

Carequality Bridge Engagement – Carequality connection prioritization

The eHealth Exchange Hub staff can help identify the best Carequality connections for your organization based on one or more of the following strategies:

- 1) Where your most dense patient populations are located and where Carequality has providers within those dense patient areas.
- 2) Identify Carequality providers by their city and state or zip code.
- 3) Identify Carequality providers by name.

NOTE: A spreadsheet that lists all viable connections by the provider's address and zip code is available. The associated implementer is identified as well. Email administrator@ehealthexchange.org to obtain a list that is updated weekly.

Hub resigning and transforms enables connectivity based on the following test harness results

23 Carequality Connections Ready Now with Hub Resigning Enabled *							
Allscripts	Central PA Connect HIE	Epic	Inovalon	Medent	OneRecord	PointClickCare	Safety Net Connect
AthenaHealth	CommonWell **	GE Healthcare	iPatientCare	Netsmart	ParticleHealth	Redox	Surescripts
Azuba Corp.	eClinicalWorks	Health Gorilla	Kno2	NextGen	Physicians Computer Company (PCC)	SAFE Health	

4 Carequality Connections <u>Not</u> Ready	
Community Care HIE	Glenwood Systems
Episource ***	Rosetta Health ***

2 Carequality Connections <u>Not</u> Functional (Already available through an eHealth Exchange Connection)	
CRISP	Santa Cruz Information Organization Behavioral Health

Hub Transforms for Carequality Connectivity - Update

- Hub message resigning and Hub transforms has provided improved connectivity to Carequality connections for some participants but not all. The Hub development team is working on four additional transforms to improve connectivity to CommonWell and other implementers. The new transforms are described below:
 - Remove the Authorization Decision Statement section within the SAML section for Access Consent Policy.* Specifically, an assertion embedded within this section is not compatible with Carequality.
 - Reorder the elements within the SOAP header Security section to appear as follows **:
 - Timestamp
 - Assertion
 - Signature
 - If multiple AttributeStatement blocks are present for each SAML attribute, remove repeating AttributeStatement blocks and surround all attributes by a single AttributeStatement block
 - Rewrite the Issuer element value to reflect the eHealth Exchange Hub Carequality certificate
- Timeline: We are expecting the transform development work to be completed by early to mid-March 2021, not including validation before deployment to production.




eHealth Exchange Hub


Upgrade Project

eHealth ExchangeTM


Hub Upgrade



FHIR R4 Support





Improved Configuration Management



Internal Performance Improvements

ZERO Downtime
No Service Outage
100% Availability

**Code Freeze**

February

Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

March

Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			




Content Validation Update

eHealth ExchangeTM

Participant Status – Content Testing Update

Out of 281 Participants who meet criteria required to pass Content Testing by May 1, 2021

- **83** Participants have at least one document passing
 - 21 Epic Customers have passed one document type (Encounter Summary)
- **75** Participants are @ Content Validated Status as of February 4, 2021
 - Up from 57 in January 2020 
- Content validated logos being added in real time to Participant listing on eHealth Exchange website:
 - <https://ehealthexchange.org/participants/>
- **6** technologies leveraged
 - Audacious Inquiry, Diameter Health, Cerner CEP, CONNECT, Epic, Intersystems, Mirth

Interoperability Testing Platform – Validator Update

- Next validator updated planned for week of February 22, 2021
 - 6 outstanding issues with current C-CDA R2.1 validators
 - The 6 outstanding issues can be found on the tooling home page found here:
 - <https://gazellecontent.sequoiaproject.org/EVSCClient/home.seam>
- Communications (Content Testing Deadline Reminder May 1, 2020)
 - Email message sent December 16, 2020
 - Phone outreach to Vendors completed (October 2020)
 - Phone outreach to Participants (Non-Epic - Tested on or before 10/1/2019) completed by February 5, 2021
 - Epic Customers should work with their TS to resolve remaining errors
 - Office hours held bi-weekly through April 26, 2021- next offering Monday March 1 and 15, 2021

eHealth Exchange Content Testing Program Office Hours

eHealth Exchange staff started additional support related to content testing for Participants to ask questions during “Office Hours” biweekly call from October 19, 2020 1:00 - 1:30pm ET through April 26, 2021.

Next Offering: February 22 and March 8, 2021

Event days and times can be located:

<https://ehealthexchange.org/event/ehealth-exchange-content-testing-program-office-hours/all/>

Please join the meeting from your computer, tablet or smartphone

<https://global.gotomeeting.com/join/988830037>

You can also dial in using your phone

United States (Toll Free): [1 877 309 2073](tel:18773092073)

United States: [+1 \(646\) 749-3129](tel:+16467493129)

Access Code: 988-830-037

New to GoToMeeting? Get the app now and be ready when your first meeting starts:

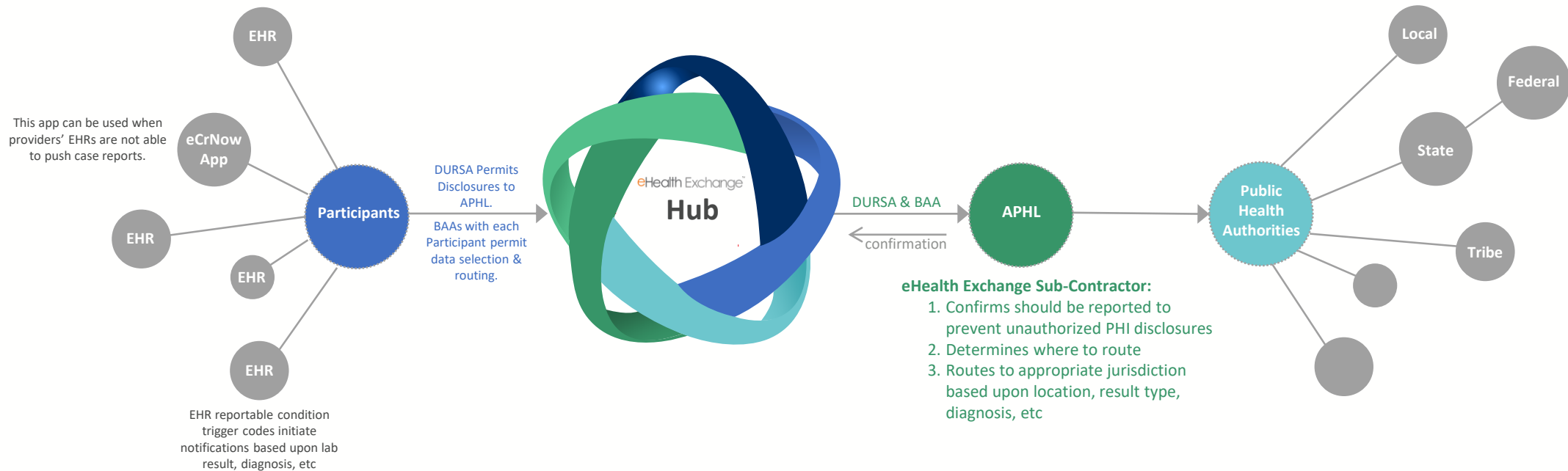
<https://global.gotomeeting.com/install/988830037>



Electronic Case Reporting (eCR Update)

eHealth ExchangeTM

Pushing Electronic Case Reports (eCr) is **Live!**



eCR Messaging flow

- 1) A matching clinical code (such as “COVID-19”) triggers the generation of an electronic case report (eCR).
- 2) Depending on the EHR vendor, eCR generation may be supported natively (“out of box”). If not, you may be able to utilize a SMART on FHIR application from APHL called “eCR Now” that will interface with your EHR system to generate an eCR.
- 3) The eCR contains a document payload which reports on items such as patient, encounter, condition and travel history information, if available.
- 4) The eCR document submission is transmitted to APHL AIMS using the Hub, however, the Hub does not store the eCR document.
- 5) APHL AIMS forwards the eCR to public health authorities according to an evaluation it performs on the reportability of the eCR.
- 6) APHL AIMS generates a reportability response (also in the form of a document submission) that is sent back to the eCR submitter.
- 7) A reportability response typically includes information about what has been determined to be reportable to public health agencies (PHAs) and which PHAs have been sent eCR information
- 8) Typically, the eCR submitter stores the APHL AIMS reportability response with the patient’s records (a.k.a. the patient’s chart).

Onboarding Steps

1. Confirm your gateway supports ITI-41 & ITI-80.
2. Confirm you have completed Hub Initiator Testing.
3. Notify administrator@ehealthexchange.org your organization wants to push electronic case reports to APHL (Association of Public Health Laboratories).
4. Respond to the ~6 questions administrator@ehealthexchange.org asks you. As an example, one question is which endpoint your organization will use to receive Reportability Response messages from APHL (Association of Public Health Laboratories).
5. Conduct transport testing first in a non-production (validation) environment, followed by a validation of submission in production.
 - a. You may choose any available synthetic test patient for the eCR submissions during testing.
 - b. APHL AIMS will likely organize and manage the testing where the eHealth Exchange provides testing support as needed.



Certificate Authority Update

What's the Plan?

- Beginning 3/1 eHealth Exchange will begin facilitating introductions to the DirectTrust team for the identified early adopter organizations.
- After the initial pilot organizations have completed the process, we will proceed with transitioning all organizations from the current Entrust certificate process to the new DirectTrust and new CA process.
- Organizations whose certificates expire in April should begin receiving outreach around soon. This outreach will come from eHealth Exchange staff and include an introduction to DirectTrust and the new forms that will need to be completed.
- We aim to complete the full transition prior to November 2021.

What do I need to do?

- **MOST IMPORTANT-** Your organization will need to update your current trust stores to include the root/intermediate certificates for the 2 new CA's.
- Your existing Entrust root/intermediate certs will need to remain installed as well. The new trust stores can be found here: <https://desk.zoho.com/portal/directtrust/en/kb/articles/installing-sequoia-project-trust-chains>
- This will allow all organizations, both those remaining on Entrust certs for the time being and those pilot orgs with certs from the new CA's, to continue to exchange with each other.
- If you need assistance updating the trust stores, please reach out to your vendor/technology partner. eHealth Exchange can determine if your trust stores have been updated by using the ITP, if needed.
- Epic customers, you should have received outreach from your TS regarding this step. If not, please reach out to them as soon as possible so they can guide you through what is needed on your end.
- If your certificate is expiring in the near future (prior to April) and you have not agreed to be a pilot Participant, please continue with your existing process for renewal by e-mailing techsupport@sequoiaproject.org.

What Will Change When It's “My Turn” to Transition?

- As mentioned, you will receive an introduction to your DirectTrust contact.
- Your organization will be required to complete a new form for DirectTrust. This form is similar to the Certificate Authority spreadsheet that you've used in the past, but it includes more information.
- This form will request contacts, your FQDN's, and a few new pieces of information such as your organization's NPI (if applicable), DUNS number (if applicable), and TaxID.
- You will need to make the decision if you'd like to transition ALL of your certificates (PRD, VAL, and Carequality) at one time, or if you'd like to stagger these as they expire. We recommend transitioning all at once.
- The “Subscriber” terminology will change. Subscriber now references the subscribing organization.
- The new term for Subscriber will be the “Sponsor.” The Sponsor will be the resource who completed identity verification and retrieves the actual certificate.

Benefits

- Consistent renewal reminders
- Simplified process after initial onboard
- Additional self service capabilities
- Multiple CA's mean additional security for the eHealth Exchange

Open Office Hours

- Beginning Monday 2/22, eHealth Exchange Staff will be hosting open office hours to assist with any questions or concerns regarding the Certificate Authority Transition
- Open office hours will be held Mondays and Thursdays at 1:00 PM ET through at least mid-March.

<https://www.gotomeet.me/KatiOdom-Bell>

Dial In: +1 (224) 501-3318

Access Code: 918-898-253



Please Engage!

We'd love to hear from you

eHealth ExchangeTM

Technical Work Group

Typical Topics:

1. Technical Specification Creation
 - a. Push notifications
 - b. Populating directory with hospital locations
 - c. Broadcast query
 - d. FHIR Directory
 - e. Consumer access
 - f. Carequality harmonization
 - g. Controlled Unclassified Information (CUI) Marking
2. Testing
3. Hub Updates
4. Capacity planning [Final Thursday each month]

Please Attend:

- <https://zoom.us/j/5128970748>
- Meeting ID: 512 897 0748
- One tap mobile: +16699006833,,5128970748#

Content Testing Office Hours

- Office hours to support content testing biweekly
 - October 19, 2020 1:00 - 1:30pm ET through April 26, 2021
 - For more information: testing@ehealthexchange.org
- Please join the meeting from your computer, tablet or smartphone.
 - <https://global.gotomeeting.com/join/988830037>
 - You can also dial in using your phone
 - United States (Toll Free): 1 877 309 2073
 - +1 (646) 749-3129
 - Access Code: 988-830-037

Certificate Authority Transition Open Office Hours

- Mondays and Thursdays at 1:00 PM ET
 - Beginning 2/22/21 through 3/31/21
 - Please e-mail administrator@ehealthexchange.org if you need more information
- <https://www.gotomeet.me/KatiOdom-Bell>
 - Dial In: +1 (224) 501-3318
 - Access Code: 918-898-253

How might I obtain additional information?

How	When	Where
1. Visit eHealth Exchange Web Site	Any time	https://ehealthexchange.org
2. Monthly Participant Web Meetings	Typically, the 3rd Thursday of Each Month at 1 pm ET	https://ehealthexchange.org/events
3. Weekly Technical Workgroup	Thursdays 4-5 ET (April through August+)	https://ehealthexchange.org/events
3. Email	Any time if you have a specific question	administrator@ehealthexchange.org

Questions & Answers

Please e-mail questions or concerns to
administrator@ehealthexchange.org