

Questions Submitted

1. We are not currently participants of the eHealth Exchange and understand that we would need to apply to submit a proposal. We also understand that fees are waived if we are awarded a grant, but what is the expectation of paying for fees if we are not an award recipient. Will fees not be due until after the award recipients are announced?
 - If your organization is not awarded a grant, it can withdraw its application to join and not pay the annual fee, or it can proceed with connectivity and pay the annual fee. We don't bill the annual fee until you are ready to move into production exchange.
2. For FHIR use cases, is there a recommendation on how to navigate to the particular use case implementation guide?
 - The Coordinating Committee, eHealth Exchange's governing body, approved FHIR R4 on 9/21/2021. See the latest use case information and validation plan in [Exhibit A](#).
3. In regards to the budget needing to be submitted, the proposed solutions that we are considering submitting all have project costs well beyond the estimated grant amounts. Are you looking for a budget around how the specific grant funds will be utilized throughout the course of the project or the entire project as a whole, and the approved grant amounts will just be paid out at the milestones?
 - We recommend including an explanation within the financial narrative, Section IV, of how the project in whole is being funded and how the grant funding specifically will be used within the scope of the project.
 - Grant funding is restricted to development, testing, and production costs related to the proposed project. Project related technology costs are not to exceed 15% of the grant funds. Equipment, training, supplies, conferences, and travel are not covered.
 - Terms and Conditions for Funding Restrictions are as follows:
 - #14. Funding Restrictions:
 - 1.1 Grant funds can only be used to deliver the specific deliverables approved in the grant award.
 - 1.2 Grant funds can only be used in furtherance of eHealth Exchange's 501(C)(3) tax-exempt purposes and may not benefit the awardee uniquely.
 - 1.3 Project related technology costs are not to exceed 15% of the grant funds.
 - 1.4 In addition, grant funds cannot be used for the following purposes:
 - To supplant or replace current public or private funding
 - To supplant ongoing or usual activities of any organization involved in the project
 - To reimburse pre-award costs
 - To cover equipment, training, supplies, conferences, and travel
4. Can an organization submit a proposal if they are helping existing Participants or potential Participants?
 - The Grant program was not written with third parties in mind. Grant applicants must either be eHealth Exchange Participants or organizations who submit an application to become an eHealth Exchange Participant with their grant application and meet the participation eligibility requirements. However, customers of an organization who are Participants or potential Participants may be eligible if they choose to submit applications to become participants and choose to submit a grant proposal.

5. Is the intent to bid binding for the eHealth Exchange Innovation Grant? Or, if an organization decides during the process to not apply, can the organization cancel the intent to bid?
 - An Intent to Reply is not binding and an organization can withdraw from the process. Please notify rfx@ehealthexchange.org if an organization chooses to withdraw.
6. Will we receive more information on what activities will be allowable for the grant? Will indirect/overhead costs be an allowable expense?
 - See answer under FAQ #3
7. Item 16. You state all work products produced by an applicant and awardee, including without limitation the proposal, all plans, designs, software, and other grant deliverables, become the sole property of eHealth Exchange to be used by eHealth Exchange to advance interoperability for the benefit of all Americans. *Does this mean that all the software and mobile application we develop to allow a patient to view their medical records that are pulled from the eHex will now be owned by the exchange?*
 - Grant funds can only be used in furtherance of eHealth Exchange's 501(C)(3) tax-exempt purposes and may not benefit the awardee uniquely.
 - eHealth Exchange grants to applicant a non-fee bearing license to use its work performed for the Grant in its other products and services with the express understanding that this license does not restrict, in any way, how the eHealth Exchange may use this same work to advance interoperability.
8. Item 17. You state eHealth Exchange reserves the right to implement ideas similar to those contained in any proposal in the future without restriction or obligation. *Does this mean that you can take all the ideas written in the proposal and implement them with others?*
 - The intent of the grant program is to accelerate interoperability and usability of data across the eHealth Exchange network. eHealth Exchange reserves the right to implement ideas similar to those contained in any proposal to further eHealth Exchange's mission.
 - If applicant decides to include information or materials that it considers to be trade secrets, its own intellectual property or other confidential information, then applicant must clearly identify all of this information or materials as such by marking on each page on which such information appears with applicant's asserted ownership, e.g., trademark, copyright, patent number, trade secret or confidential information. Such marking must be in boldface type and at least 14-point font. Applicant agrees that eHealth Exchange is permitted to share all information in applicant's response, including all marked information or materials, with the review panel and others as necessary to allow for a full and complete review and evaluation of the application. Applicant cannot assert that its entire application is confidential.
 - As a final deliverable of a grant award, a Use Case Implementation Guide for the awardee's project will be required so that other eHealth Exchange Participants can replicate this project and support eHealth Exchange's network expansion.

Exhibit A: FHIR Technical Specifications

Soap-based technical specifications are provided at <https://ehealthexchange.org/testing-program/technical-specifications>. FHIR R4 specifications have not been posted there because they will not go into effect until 11/1/2021.

Use Case	Use Case Highlights	Performance & Service Specifications ^{3, 4}	Performance & Service Specification Location	Notes
Electronic Case Reporting (eCR)	Pushes electronic case reports to public health authorities.	HL7 FHIR® Implementation Guide: Electronic Case Reporting (eCR) - US Realm	http://build.fhir.org/ig/HL7/case-reporting/electronic_initial_case_report_eicr_transaction_and_profiles.html	
Consumer Access to Health Information	Consumers (or their vendors with authorization) Query & Retrieve other eHx Participants to populate patients' PHRs & potentially share with other Participants.	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case
Electronic Lab Reporting (in support of public health)	Push discrete lab results to public health agencies according to Meaningful Use/MACRA requirements.	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net

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				CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case
Encounter Notifications	Pushes data to populate HIE longitudinal records & to fulfill other purposes, often after ED visits, inpatient discharges, & ambulatory encounters. This is also used by HIEs to marry unsolicited lab results to longitudinal records in the absence of HL7 v2 ORU order messages.	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case
Prescription Drug Monitoring Program (PDMP)	Query & retrieve medication lists, toxicology results, etc to marry state opioid repositories with EHRs.	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange

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				<p>Formulary Carequality PUSH Notifications Use Case</p>
Query & Retrieve	Query & Retrieve With Consent, No Authorization	Carequality FHIR Implementation Guide Version 1.0	<p>https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf</p>	<p>This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case</p>

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Query & Retrieve (for Life Insurance Underwriting)	Query & Retrieve With Consent & Authorization	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	<p>This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case</p>
Query & Retrieve (for Social Security Benefits Determination)	Query & Retrieve With Authorization	Carequality FHIR Implementation Guide Version 1.0	https://carequality.org/wp-content/uploads/2020/12/Carequality-FHIR-Implementation-Guide.pdf	<p>This IG references other industry IGs: FHIR US Core Implementation Guide IHE Mobile access to Health Documents (MHD) With XDS on FHIR Da Vinci Project Coverage Requirements Discovery (CRD) Da Vinci Project Documentation Templates and Coverage Rules Da Vinci Project Data Exchange for Quality Measures (DEQM) FHIR Bulk Data Access (Flat FHIR) Da Vinci Project eHealth Record Exchange: Clinical Data Exchange (CDex) Da Vinci Project eHealth Record Exchange: Payer Data Exchange (PDex) Plan Net CARIN Consumer-Directed Payer Data Exchange Da Vinci Project Payer Data Exchange Formulary Carequality PUSH Notifications Use Case</p>

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Syndromic Surveillance	MedMorph	(MedMorph) Making EHR Data More available for Research and Public Health	http://build.fhir.org/ig/HL7/fhir-medmorph/artifacts.html	<p>MedMorph Reference Architecture Implementation Guide refers to a common framework (e.g., FHIR resources, FHIR APIs, FHIR operations, security mechanisms) that will be leveraged by multiple public health and research scenarios including:</p> <p>Chronic Hepatitis C Surveillance (an infectious disease, and in the context of this IG relates to chronic hepatitis C reporting instead of acute hepatitis C reporting which is currently ongoing)</p> <p>Cancer Registry Reporting (a chronic disease)</p> <p>Health Care Surveys (a health care utilization example not pertaining to a specific condition)</p>