

# EHEALTH EXCHANGE TEFCA OPERATIONS AND REPORTING PROTOCOL

## Scope and Authority

This Protocol addresses the requirements for QHIN operations and reports that Participants and any and all levels of Subparticipants must comply with to participate in the eHealth Exchange QHIN.

The eHealth Exchange Coordinating Committee, which is the governing body of the eHealth Exchange, has established the QGC as a standing subcommittee with the authority specified in the Onboarding and Designation SOP, the eHealth Exchange QHIN TEFCA Terms and Conditions and this Protocol.

In accordance with eHealth Exchange Operating Policy & Procedures (OPP) #10 (Participant Opt-Out of New Data Sharing Agreements), this protocol applies to all Participants that do not opt-out of the eHealth Exchange QHIN and are thus bound by the TEFCA Terms and Conditions.

## Purpose

The primary purpose of this protocol is to provide standardized and clear methods and procedures for the Operation and Reporting requirements by Participants and on behalf of their Subparticipants. The QHIN Technical Framework requires eHealth Exchange QHIN Participants and all levels of Subparticipants to meet the Operation and Reporting requirements. eHealth Exchange QHIN and the QGC have further defined the process for these requirements.

The QGC will have responsibility, oversight, control, and final decision-making authority over each of the Governance Functions: (i) Technical framework of the Designated Network; (ii) The resolution of disputes regarding use of eHealth Exchange QHIN; (iii) eHealth Exchange QHIN Security Incident(s); (iv) enforcement of eHealth Exchange QHIN Participant compliance with all flow-down requirements, and; (v) change management to implement changes for the eHealth Exchange QHIN.

## Protocol

This protocol addresses the requirements of Operation and Reporting requirements to participate in the eHealth Exchange QHIN. Thus, each eHealth Exchange QHIN Participant has the obligation to implement processes and procedures to meet the requirements and to provide the data and reports as required not only for their organization but all levels of Subparticipants within their organization as outlined.

The QGC or its Designee, Healthway, Inc. (d/b/a/ "The eHealth Exchange" and its "eHealth Exchange QHIN support staff"), will conduct periodic reviews to evaluate and identify improvements to the TEFCA Security Incident notification process.

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## Procedure

### Operations:

1. Respond without Error
  - a. eHealth Exchange QHIN Participants and all levels of Subparticipants must connect and respond to all requests from every other QHIN, via the eHealth Exchange QHIN Hub, without error.
    - i. This requires the QHIN Participants and all levels of Subparticipants to be prepared to address and resolve any failure in connectivity in the shortest time that is feasible.
    - ii. If it is not feasible to resolve the error, infeasibility once determined and demonstrated must be reported to the QGC for review and determination of next steps, which may include a Corrective Action Plan, suspension or termination per the “eHealth Exchange TEFCA Enforcement Protocol”.
2. ATNA Log Entries
  - a. eHealth Exchange QHIN Participants and all levels of Subparticipants must promptly provide gateway ATNA log entries to the eHealth Exchange QHIN support staff when requested, typically during onboarding to the eHealth Exchange QHIN.
3. RCE Directory
  - a. eHealth Exchange QHIN Participants and all levels of Subparticipants must consume the eHealth Exchange QHIN directory, at **least daily**, and no more than hourly, to obtain Trusted Exchange Framework Participant information.
  - b. eHealth Exchange QHIN Participants must detail their organization’s participants and subparticipants such as individual clinicals, hospitals and other organizations in the directory.
  - c. eHealth Exchange QHIN Participants must populate the eHealth Exchange QHIN directory no less than forty-eight (48) hours before the changes are implemented in the production environment.
  - d. eHealth Exchange Participants must populate the directory with subparticipant data that includes facility locations, clinics, post-acute/long-term facilities, public health entities, payer locations and others per the RCE Directory Service Implementation Guide.
  - e. eHealth Exchange QHIN Participants and all levels of Subparticipants must Declare PurposeOfUse and populate the eHealth Exchange QHIN directory with all intended PurposeOfUse values used to request data, as required by the Recognized Coordinating Entity (RE) Standard Operating Procedure: Exchange Purposed.
  - f. eHealth Exchange Participants must not list test environments in the RCE Production Directory.

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## Reporting

### Monthly:

1. eHealth Exchange QHIN Participants are responsible to report downtime each month.
  - a. By the 5<sup>th</sup> of each month, submit to eHealth Exchange QHIN support staff, via [administrator@ehealthexchange.org](mailto:administrator@ehealthexchange.org), the previous calendar month's Initiating and Responding Gateway downtime in minutes for the Participant and any level of Subparticipant. This should include planned and unplanned downtime separately.

### Quarterly:

1. eHealth Exchange QHIN Participants must submit the following data, to eHealth Exchange QHIN support staff, via [administrator@ehealthexchange.org](mailto:administrator@ehealthexchange.org), no later than four (4) weeks post the end of the calendar quarter for the previous quarter (January – March, due April 30; April – June, due July 31; July – September, due October 31; October – December, due January 31):
  - a. Total number of member organizations and/or facilities connecting as or through your organization, including all levels of Subparticipant organizations, with counts for each hospital, clinic, mental health centers, post-acute/long-term care facilities, public health entities, payer organizations, and an aggregate count of any other member organizations and/or facilities not matching these categories.
  - b. Total number of individual clinicians connecting through your organization, including all levels of Subparticipant organizations.
  - c. Total number of consumers/patients participating in Individual Access Services through your organization, including all levels of Subparticipant organizations.

## Definitions

All capitalized terms, if not defined herein, shall have the same meaning as set forth in the TEFCA Terms & Conditions or the TEFCA Protocols.

## References

“Qualified Health Information Network (QHIN) Technical Framework (QTF) Version 1”

- <https://rce.sequoiaproject.org/tefca-and-rce-resources/>

“Recognized Coordinating Entity (RCE), Standard Operating Procedure: Exchange Purposes”

- <https://rce.sequoiaproject.org/tefca-and-rce-resources/>

## Related Protocols

Effective Date: XX/XX/XXXX

Last Revision Date: NA

QHIN Governance Committee Approval Date: xx/xx/xxxx

8300 Boone Blvd., Suite 500, Vienna, Virginia, 22182

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“eHealth Exchange TEFCA Enforcement Protocol”

ID	Date	Author	Comments
		Pat Russell	Initial Protocol