



Understanding eHealth Exchange TEFCA Technical Requirements

Eric Heflin, Consultant

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Agenda

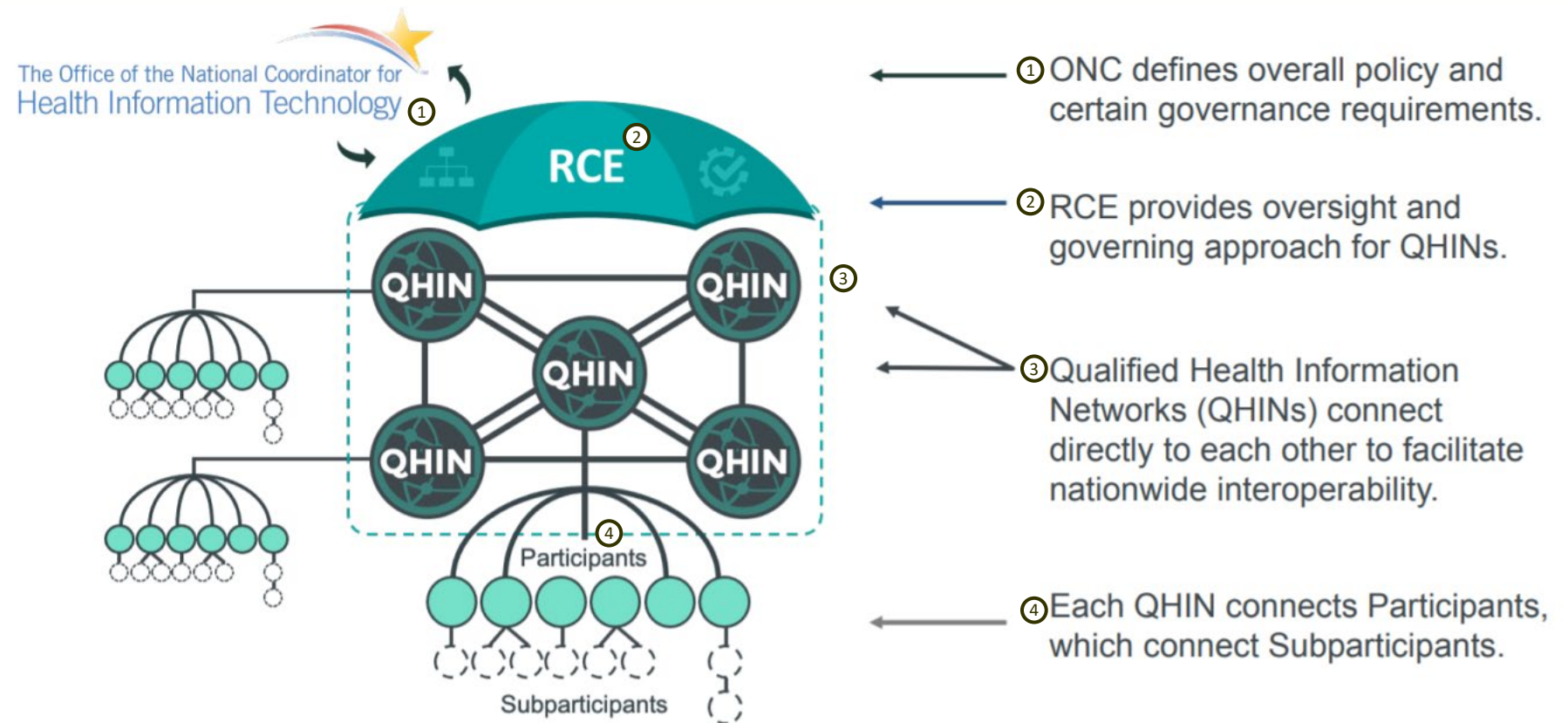
- TEFCA Overview
- Technical Requirements (Interactive Review)
- Summary of Key Requirements
- Suggested Next Steps
- For More Information

Primary Resource Page: <https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/>



TEFCA Overview

How will TEFCA Work?



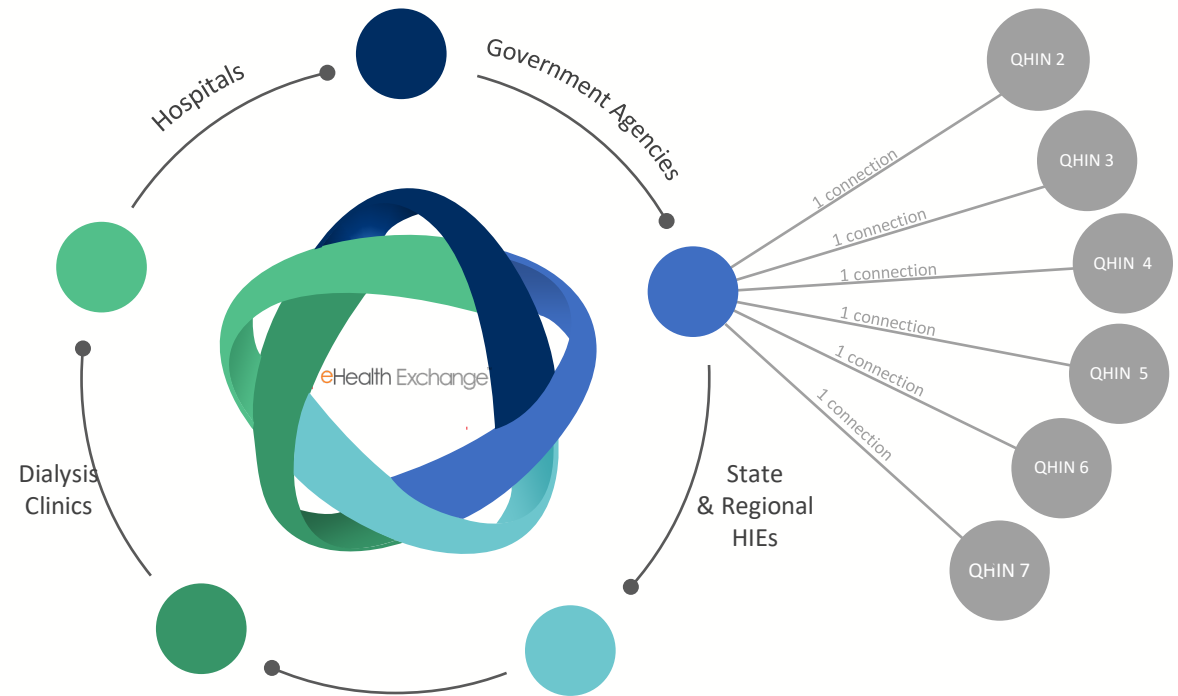
What is the Trusted Exchange Framework (TEFCA)?

It's a federally endorsed governance framework for **cross-network** exchange of healthcare records.

Similar to Carequality, it's a framework, and not a network:

- Technical & policy agreements
- Governing structure
- Federated architecture

Enables healthcare organizations connected to a TEFCA Qualified Health Information Network (QHIN) to exchange patient data with other healthcare organizations connected to other QHINs.



Which networks exchange via TEFCA?

The HHS announced that the [eHealth Exchange](#) is one of six applicants that have had their applications to become a Qualified Health Information Network (QHIN) approved

eHealth Exchange™

Epic

 **commonwell**[®]
HEALTH ALLIANCE

 **HEALTH**[™]
GORILLA

 **Kno2**[®]

KONZA
NATIONAL NETWORK

It's not yet clear which healthcare organizations will agree to exchange via TEFCA. Will yours?

eHealth Exchange QHIN: Intent to Participate

- These pioneers represent an intent to participate in the eHealth Exchange candidate QHIN from 10 HIEs across 15 states and Washington, DC:
- AL, AK, AZ, CA, CO, CT, DC, GA, IA, IN, MD, NE, TX, VA, and WV



What's changing?

Prior to eHealth Exchange Connecting with TEFCA

Your organization can exchange with the eHealth Exchange's 320+ health systems, federal agencies, providers and provider collaboratives.

Once eHealth Exchange Goes Live on TEFCA

Option for your organization to **also** exchange with healthcare organizations participating in TEFCA QHINs.

eHealth Exchange go-live on TEFCA?

Remember that:

- eHealth Exchange and other QHINs must first complete TEFCA testing
- Multiple QHINs must be ready to go-live simultaneously.

Unless you ask administrator@ehealthexchange.org by the required date to NOT connect your organization to TEFCA, your Hub connection will connect your organization to TEFCA.

QHIN Required Responses

QHIN Participants and Sub-Participants must:

1. Respond to Treatment queries (effective immediately)
2. Respond to Individuals' requests (effective March 16, 2023, based on the IAS SOP publication on September 16, 2022)
3. Respond to Government Benefits Determination queries (effective date tbd)
4. Respond to Healthcare Operations (HCO) queries (effective date tbd)
5. Respond to Payment queries (effective date tbd)
6. Respond to Public Health queries (effective date tbd)
7. Adhere to the TEFCA FHIR Roadmap (under development)

eHealth Exchange TEFCA Obligations

- We want our Participants that do not opt-out of TEFCA to be able to comply with the requirements without having to spend a lot of time and money trying to unpack the Common Agreement and SOPs
- The purpose of these Protocols is to provide additional details about the required flow-downs and guidance on what Participants need to do to comply with the flow-downs

Current Required Protocols:

1. eHealth Exchange TEFCA Governance Protocol
2. eHealth Exchange TEFCA Change Management Protocol
3. eHealth Exchange TEFCA Security Incident Protocol
4. eHealth Exchange TEFCA Enforcement Protocol
5. eHealth Exchange TEFCA Dispute Resolution Protocol
6. eHealth Exchange TEFCA Operations and Reporting Protocol
7. eHealth Exchange TEFCA Individual Access Services Protocol

Current Other Required Obligations:

1. eHealth Exchange TEFCA Terms and Conditions
2. Common Agreement for Nationwide Health Information Interoperability v1 (only the eHealth Exchange signs)
3. Validation Plan

How is the eHealth Exchange different?

eHealth Exchange

- ✓ National non-profit focused on the Public Good
- ✓ Single technical connection instead of hundreds
- ✓ Vendor agnostic
- ✓ 24x7x365 monitoring
- ✓ Enforced content quality assurance
- ✓ Analytics dashboard
- ✓ Broad federal agency connectivity
- ✓ Trust (no patient tracking, no selling data)

Other Networks

- ⚠ Single technical connection instead of hundreds
- ⚠ Vendor agnostic
- ⚠ 24x7x365 monitoring
- 🛑 Mandatory content testing
- ⚠ Analytics portal dashboard
- 🛑 Broad federal agency connectivity

- ✓ Yes
- ⚠ Sometimes
- 🛑 No

TEFCA Participant Flow-Down Checklist

- TEFCA Checklist (focus on technical requirements)
 - Performance & Service Specifications
 - Data Classes & Elements
 - Technical Messages
 - Directory (Populating & Consuming)
 - Operations
 - Reporting
- Other Checklist items (not covered today)
 - Testing Requirements
 - Legal Flow-Downs
 - eHealth Exchange TEFCA Protocols



Readiness Checklist Interactive Review

- <https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/>

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eHealth Exchange

Readiness Checklist for Connectivity to the Trusted Exchange Framework (TEFCA) via eHealth Exchange

Overview: While the eHealth Exchange Hub will address many of the new TEFCA requirements on its Participants' behalf, the requirements below represent Trusted Exchange Framework (TEFCA) requirements not previously required of eHealth Exchange Participants that your organization must address to exchange with the Trusted Exchange Framework via eHealth Exchange. Participants choosing to exchange with the Trusted Exchange Framework via eHealth Exchange must satisfy not only existing eHealth Exchange requirements, but also all of the supplemental TEFCA requirements below. The requirements below may replace, change, augment or reference existing eHealth Exchange requirements. We recommend eHealth Exchange staff review how you've populated this checklist, and subsequently discuss with you your plans to connect to the Trusted Exchange Framework.

This is a living document: As the Recognized Coordinating Entity (RCE) and Office of the National Coordinator (ONC) publish and revise artifacts at <https://rce.sequoiaproject.org/tefca-and-rce-resources>, this checklist will evolve. Please populate this document to identify gaps your organization must address before exchanging under TEFCA. We recommend eHealth Exchange staff review how you've populated this checklist, and subsequently discuss with you your plans to connect to the Trusted Exchange Framework.

Audience: Potential eHealth Exchange QHIN Participants seeking to understand the eHealth Exchange QHIN's Participant TEFCA requirements. The reader should have a basic knowledge of eHealth Exchange, IHE and TEFCA use cases. Please see other documents for additional policy, legal, and detailed technical requirements.

General Operational Concept: The eHealth Exchange QHIN Hub acts as a bi-directional TEF gateway for eHealth Exchange Participants that don't opt-out of eHealth Exchange TEFCA exchange. The eHealth Exchange QHIN Hub performs specific enforcement, mitigation, and transformation functions designed to ease the burden of TEFCA exchange. The eHealth Exchange QHIN Hub often acts to directly pass-through messages and requirements flow down to Participants, and their Sub-Participants.

Terms used (Also see the References section far below):
 TEF = Trusted Exchange Framework, the structure consisting of QHIN-to-QHIN health data exchanges, established by the TEFCA legal agreement, SOPs, and technical specifications.
 QHIN = Qualified Health Information Network.
 eHealth Exchange QHIN Hub = A unique instance of the eHealth Exchange Hub technology facilitating TEFCA transactions.

ID	Performance & Service Specification Requirements	Additional Considerations *	Citations/Links	RCE Requirement(s) ****	Not Ready	Partially Ready	Ready	Participant's Notes	Possible Future eHealth Exchange QHIN Hub Enhancements **	Revision/Added Date & Description
PSS-01	USCDI: Adopt Core for Data Interoperability (USCDI) v1 as a new standard for TEFCA exchange.	The eHealth Exchange QHIN Hub operates on a pass-through basis, so Participants must ensure their C-DA content is USCDI V1 compliant. Optionally, participants may use the Hub ITP content testing tool to verify that production representative documents comply with USCDI v1.	https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi https://ehealthexchange.org/wp-content/uploads/2023/03/TEFCA-Policy-Participant-Education-03-15-2023.pdf	QTF-047 QTF-092	X	X	X		The eHealth Exchange QHIN Hub might someday be enhanced to sample Participants' USCDI compliance.	1.4 / 14-June-2023 - added optional Hub ITP testing using the USCDI v1 content validator under the Additional Considerations column
PSS-02	US@: Adhere to Project US@ address formats v1 for constrained address standards.	US@ address formats and the data requirements for patient discovery requests. ***	https://oncoprojecttracking.healthit.gov/wiki/download/attachments/180486153/Project%20US@%20FINAL%20Technical%20Specification%20Version%201.0.pdf	QTF-038 QTF-089					For patient discovery requests, the eHealth Exchange QHIN Hub might someday validate conformance to Project US@ address requirements, and it might someday offer transformation services that enable adherence to US@ address requirements if the data holder provides sufficient information.	
		Concise C-DA guidelines.	https://carequality.org/wp-content/uploads/2022/03/Improve-C-DA-Joint-Content-WG-v2.0-FINAL-COPY-20220316.pdf	QTF-046 QTF-053 QTF-054						

Performance & Service Specifications

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Performance & Service Specification Requirements	Citations/Links	RCE Requirement(s) ****
PSS-01	USCDI: Adopt Core for Data Interoperability (USCDI) v1 as a new standard for TEFCA exchange.	https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi https://ehealthexchange.org/wp-content/uploads/2023/03/TEFCA-Policy-Participant-Education-03-15-2023.pdf	QTF-047 QTF-092
PSS-02	US@: Adhere to Project US@ address formats v1 for constrained address standards.	https://oncprojecttracking.healthit.gov/wiki/download/attachments/180486153/Project%20US@%20FINAL%20Technical%20Specification%20Version%201.0.pdf	QTF-038 QTF-089

Data Classes & Elements

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Data Classes & Elements	Citations/Links	RCE Requirement(s)
DCE-01	USCDI: Validate conformance with, and operational use of, USCDI V1.	https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi	QTF-047 QTF-092
DCE-02	Duplicate Data: The RCE might require an unspecified level of data de-duplication so that data is only returned once to the QHIN ultimate initiator. This potential requirement might flow down to eHealth Exchange QHIN Participants and Sub-Participants. This potential requirement could potentially be at the document, section, entry, FHIR resource level, or at the discrete data level. A potential approach to implement this requirement is for data aggregators to inspect C-CDA document internal unique IDs, or FHIR or C-CDA Provenance data. This item is still under research.		

Technical Messages

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Technical Messages	Citations/Links	RCE Requirement(s)
TM-01	XCPD Aggregated Responses: Initiating systems must support receiving Patient Discovery (XCPD) aggregated responses. (eHealth Exchange Hub Group Queries can return XCPD aggregated responses as can broadcast queries.) This requirement is anticipated to require development work for initiating gateways.	https://profiles.ihe.net/ITI/TF/Volume2/ITI-55.html#3.55.4.2.2.4	QTF-028 QTF-034
TM-02	No Health Data Locator: Verify your organization's system uses the NotHealthDataLocator tag in Patient Discovery (IHE XCPD) match responses.	https://profiles.ihe.net/ITI/TF/Volume2/ITI-55.html#3.55.4.2.2.5	QTF-036
TM-03	All Patient Discovery Demographics: For directed queries, when requesting data, include all known demographics according to the QTF PD Use Case QTF Alternate Flow 1, and include all known historical addresses as per USCDI v1 and those addresses must be adhere to Project US@ Patient Address Metadata Schema and formatting requirements.	https://oncprojecttracking.healthit.gov/wiki/download/attachments/180486153/Project%20US@%20FINAL%20Technical%20Specification%20Version%201.0.pdf?version=1&modificationDate=1641563329051&api=v2 https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF PD Use Case Requirements Alt Flow 1 QTF-038 QTF-047 QTF-087

Individual Access Provider Technical and Operational Requirements (If functioning as an Individual Access Services provider)

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Individual Access Provider Technical and Operational Requirements (Offering Individual Access Provider Services is <u>Optional</u>)	Citations/Links	RCE Requirement(s)
IASP-01	[If functioning as an Individual Access Service Provider] Delete Individual Data: IAS Providers MUST implement the technology and processes to delete an individual's data upon request (with audit log exceptions). Note the text "unless such deletion is prohibited by Applicable Law" exclusion which may apply to medical records retention.	See Section 10.4(i): https://rce.sequoiaproject.org/wp-content/uploads/2022/01/Common-Agreement-for-Nationwide-Health-Information-Interoperability-Version-1.pdf https://ehealthexchange.org/wp-content/uploads/2023/03/TEFCA-Policy-Participant-Eduction-03-15-2023.pdf	Common Agreement Section 10.4(i)
IASP-02	[If functioning as an Individual Access Service Provider] Export Individual Data: IAS Providers MUST implement the technology and processes to export an individual's data upon request.	See Section 10.4(ii): https://rce.sequoiaproject.org/wp-content/uploads/2022/01/Common-Agreement-for-Nationwide-Health-Information-Interoperability-Version-1.pdf https://ehealthexchange.org/wp-content/uploads/2023/03/TEFCA-Policy-Participant-Eduction-03-15-2023.pdf	Common Agreement Section 10.4(ii)

Directory (Populating & Consuming)

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Directory (Populating & Consuming)	Citations/Links	RCE Requirement(s)
DIR-01	New Directory Implementation Guide (IG): Populate and consume the QHIN Directory as specified in the Directory Implementation Guide (IG) that was published by the RCE (draft published 2023-03-04). Among other requirements and SLAs, the IG will require detailing your organization's sub-participants such as individual clinics and hospitals. The directory will be maintained by eHealth Exchange in collaboration with QHIN Participants.	https://rce.sequoiaproject.org/tefca-and-rce-resources https://rce.sequoiaproject.org/RCEIG/output/index.html	QTF-075
DIR-02	Directory Pre-Population: Populate the Directory prior to the information affecting the production environment no less than 48 hours before the changes are implemented in the production environment.	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-103 QTF-104
DIR-03	Sub-Participant Data: Populate the directory with facility locations and probably clinic, mental health center, post-acute/long-term care facility, public health entities, payer locations, and others once published in the RCE Directory Service Implementation Guide.	https://rce.sequoiaproject.org/tefca-and-rce-resources	QTF-077

Operations

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Operations	Citations/Links	RCE Requirement(s)
OPS-01	Respond Without Error: Connect and respond to all requests from every other QHIN, via the eHealth Exchange QHIN Hub, without error. Be prepared to address and resolve any failure in connectivity in the shortest time that is not infeasible, with infeasibility to be determined and demonstrated.	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-002
OPS-02	ATNA Log Entries: Provide Participant gateway ATNA log entries to eHealth Exchange when requested, typically during onboarding. This requirement is anticipated to largely, but not exclusively, focus on the onboarding testing process.	https://profiles.ihe.net/ITI/TF/Volume1/ch-9.html https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-119

Monthly and Quarterly Reports

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Reporting	Citations/Links	RCE Requirement(s)
RPT-01	Downtime Reports: By the 5th of each month, submit, to eHealth Exchange staff, the previous calendar month's Initiating and Responding Gateway downtime in minutes for the Participant and any Sub-participants with planned and unplanned downtime differentiated.	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-116
RPT-02	Quarterly Detailed Reporting: Four weeks before the end of each calendar quarter, submit the following reports for the prior calendar quarter to eHealth Exchange staff:	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-117
RPT-02a	• Total number of member organizations and/or facilities connecting as or through your organization (including Sub participants) with counts for each hospital, clinic, mental health center, post-acute/long-term care facility, public health entities , and payer organizations as well as an aggregate count of any other member organizations and/or facilities not matching these categories.	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-117
RPT-02b	• Total number of clinicians connecting through your organization (including Sub participants).	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-117
RPT-02c	• Total number of consumers/patients participating in Individual Access Services through your organization (including Sub participants).	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-117

Mock-Up TEFCA Reports (Interactive Review)

QTF-116 QHIN Participant and Subparticipant Data			Total number of member organizations and/or facilities connecting as or through your organization (including Sub participants) with counts for each hospital, clinic, mental health center, post-acute/long-term care facility, public health entities, and payer organizations as well as an aggregate count of any other member organizations and/or facilities not matching these categories.			
Year	Month	Responding QHIN	Participant or Subparticipant	Participant or Subparticipant HCID	Potential Parent HCID ???	Participant or Subparticipant Name
2023	1	EHX	Participant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	2	EHX	Subparticipant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	3	EHX	Child	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	4	EHX	Child	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
* For all counts don't include any counts that are reported by any other organization in this report						
Planned must be scheduled			Total number of clinicians connecting through your organization (including Sub participants).			
Year	Quarter	QHIN	Participant or Subparticipant	Participant or Subparticipant HCID	Potential Parent HCID ???	Participant or Subparticipant Name
2023	1	EHX	Participant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	2	EHX	Subparticipant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	2	EHX	Child	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
* For all counts don't include any counts that are reported by any other organization in this report						
Define 'event' (full TEFCA)			Total number of consumers/patients participating in Individual Access Services through your organization (including Sub participants).			
Year	Quarter	QHIN	Participant or Subparticipant	Participant or Subparticipant HCID	Potential Parent HCID ???	Participant or Subparticipant Name
2023	1	EHX	Participant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	2	EHX	Subparticipant	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
2023	2	EHX	Child	1.2.3.4.5	1.2.3.4.5	Aaaaa Bbbbbb Cccccc Dd
* For all counts don't include any counts that are reported by any other organization in this report						

Testing Requirements

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Testing Requirements	Citations/Links	RCE Requirement(s)
TST-01	Test Patients: Create and maintain one or more active QHIN test patient records and test clinician records for diagnostic and onboarding in both <u>test</u> and <u>production</u> environments. Name QHIN test patients with given name “QTF TEST” and family name QTFTEST-### (e.g., QTFTEST-001), with at least one corresponding C-CDA 2.1 document with fictional clinical data that can be queried and retrieved. This must include at least one C-CDA Discharge Summary and Progress Note template document for the test patient. Participants serving outpatient clinics and inpatient hospitals MUST create such documents. Any encounters, etc. MUST be linked to the required Test Clinician.	https://rce.sequoiaproject.org/tefca-and-rce-resources/ https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-106 QTF-107 QTF-109 QTF-110 QTF-111 QTF-112 QTF-113 QTF-114 QTF-118 QTF-121
TST-02	RCE Testing: Support eHealth Exchange in 1) meeting all applicable Trusted Exchange testing processes and requirements, 2) the use of the RCE test environment for QHIN onboarding, and 3) monthly and quarterly testing of all QHINs. Participants and Sub-Participants may need to subscribe to and use the RCE test tool to verify their conformance.	https://rce.sequoiaproject.org/tefca-and-rce-resources/ https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF_0122.pdf	QTF-106 QTF-107 QTF-109 QTF-110 QTF-118 QTF-121

Legal Flow-Downs

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Legal Flow-Downs *	Citations/Links	RCE Requirement(s)
LGL-01	<p>Required Flow-Down provisions: Ensure your organization and each of your Subparticipants agree to comply and incorporate the Required Flow-Down provisions into respective Framework Agreements. Please see the eHealth Exchange TEFCA Terms and Conditions, eHealth Exchange TEFCA Protocols, eHealth Exchange TEFCA Supplements, and any TEFCA Implementation Guides published (link to the right).</p> <p>If your organization does not opt out, as per eHealth Exchange OPP#10, it and its participants are bound by the eHealth Exchange TEFCA Terms and Conditions, eHealth Exchange TEFCA Protocols, and eHealth Exchange TEFCA Supplements which include all flow-downs in the Common Agreement. eHealth Exchange is obligated to abide by the TEFCA Onboarding and Designation guide and your organization should be available to assist as needed in this onboarding process.</p>	<p>Flow-down provisions: https://ehealthexchange.org/wp-content/uploads/2023/03/TEFCA-Terms-and-Conditions-eHealth-Exchange.pdf & https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange.</p> <p>OPP#10: https://ehealthexchange.org/wp-content/uploads/2020/08/082020-CC_OPP-10_New-Networks.pdf</p>	n/a (required by Common Agreement)
LGL-02	<p>Multi-Factor Authentication (MFA): The RCE states the following "Each QHIN, Participant, and Subparticipant shall require that Workforce members who are authorized users of systems which access TI or Protected Health Information (PHI), (including those who request TI or PHI, or request TI or PHI be sent to a third party) be authenticated at Authenticator Assurance Level (AAL2)". This requirement is pending final decision by RCE based on feedback from prospective QHINs. In addition the eHealth Exchange is seeking clarifications. The RCE cites: NIST SP 800-63B.</p>	<p>https://rce.sequoiaproject.org/wp-content/uploads/2022/11/SOP-QHIN-Participant-and-Subparticipant-Additional-Security-Requirements-for-public-feedback_FINAL.pdf</p> <p>https://pages.nist.gov/800-63-3/sp800-63b.html</p>	Required by the Draft Additional Security Requirements SoP

TEFCA Protocols (aka Policies)

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	TEFCA Protocols (aka Policies)	Citations/Links
PRO-01	<p>eHealth Exchange TEFCA Governance Protocol Draft: QHIN Participants and Sub-Participants should review and comply this new TEFCA Protocol (aka Policy) as it will apply to them. The current version of this protocol has been submitted to the RCE and is pending review. This is one of multiple policies required by the RCE.</p> <p>According to OPP#10, notification will be sent by the Coordinating Committee for eHealth Exchange Participants to review the requirements and make a decision to Opt-Out within 60 days. If the Participant does not opt out per OPP#10, they are bound by the eHealth Exchange TEFCA Terms and Conditions, eHealth Exchange TEFCA Protocols, and eHealth Exchange TEFCA Supplements which include all flow-downs in the Common Agreement.</p>	<p>https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/</p> <p>https://ehealthexchange.org/wp-content/uploads/2020/08/082020-CC_OPP-10_New-Networks.pdf</p>
PRO-02	TEFCA Security Incident Protocol Draft: Same status as the Governance Protocol Draft.	
PRO-03	Change Management Protocol Draft: Same status as the Governance Protocol Draft.	
PRO-04	Participant Enforcement Protocol Draft: Same status as the Governance Protocol Draft.	
PRO-05	Dispute Resolution Protocol Draft: Same status as the Governance Protocol Draft.	
PRO-06	Individual Access Service Provider Protocol Draft: Same status as the Governance Protocol Draft.	

Sample Upcoming Additional Requirements from RCE (dates unknown)

- Please see this section of the TEFCA Requirements Checklist for more details...

ID	Sample Upcoming Additional Requirements from RCE (dates unknown)	Citations/Links	RCE Requirement(s)
FUT-01	SLAs: Service Level Agreements. We expect the TEFCA governing body to create a Standard Operating Procedure (SOP) capping maximum response times and other Service Level Requirements (SLA).	https://rce.sequoiaproject.org/tefca-and-rce-resources/	n/a (required by SOP)
FUT-02	Onboarding: The eHealth Exchange is responsible to ensure our Participants and their Subparticipants meet the TEFCA requirements as we onboard them, and ourselves, to the TEF. Please see the eHealth Exchange resources page for more information once it becomes available.	https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/	n/a (required by SOP)
FUT-03	Updated Validation Plan: Adhere to the updated version 13 of the eHealth Exchange validation plan Attachment #3 regarding TEFCA Onboarding of Participants/Subparticipants.	https://ehealthexchange.org/wp-content/uploads/2022/10/eHealth-Exchange-Validation-Plan-v13.pdf	n/a (required by SOP)
FUT-04	Exchanging Your Directory with the RCE Directory: eHealth Exchange Participants must comply with specific field requirements and processing detailed by a new eHealth Exchange QTF Operating Policy & Procedures (OPP) which will be finalized once the RCE publishes the RCE Directory Service Implementation Guide.	https://rce.sequoiaproject.org/tefca-and-rce-resources	n/a (required by Directory IG)

References

- Please see this section of the TEFCA Requirements Checklist for more details...

References:

eHx Technical Specifications	https://ehealthexchange.org/testing-program/technical-specifications/
USCDI v1	https://www.healthit.gov/isa/sites/isa/files/2020-10/USCDI-V1.pdf
Project US@	https://oncprojecttracking.healthit.gov/wiki/download/attachment
IHE ITI Tech Framework v17+	https://profiles.ihe.net/ITI/TF/index.html
TEFCA QHIN QTF v1.0	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/TEFCA-QHIN-QTF-v1.0.pdf
Concise C-CDA v2.0	https://carequality.org/wp-content/uploads/2022/03/Improving-Clinical-Data-Exchange-Using-C-CDA-v2.0.pdf
Older IHE ITI Tech Framework v17 cited by the QTF	https://www.ihe.net/uploadedFiles/Documents/ITI/IHE_ITI_TF_17.pdf
ONC RCE TEFCA Resources	https://rce.sequoiaproject.org/tefca-and-rce-resources/
QTF v1	https://rce.sequoiaproject.org/wp-content/uploads/2022/01/QTF-v1.pdf
eHx TEFCA Terms and Conditions	https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/

Primary Resource Page: <https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/>

Major Technical Differences eHealth Exchange QHIN Participants Must Support

1. Adopt USDCI v1 data classes and elements
2. Adhere to the Concise Consolidated CDA 1.1 Specification
3. Adhere to Project US@ Postal Address Standards
4. Adopt IHE ITI Technical Framework Revisions 17.0 (versus Revision 8.0)
5. Accept aggregated XCPD responses
6. Various requirements such Purpose Of Use values, different consent attribute structure, sub-participant directory entries and detailed reporting, onboarding log submissions, specific test patients, and quarterly reporting.

Next Steps

1. Review the published policy documents (not discussed today)
2. Review the TEFCA Readiness Checklist
3. Let the eHealth Exchange staff know of your organization's intentions

email: administrator@ehealthexchange.org

Primary Resource Page: <https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/>



Questions?

How might I obtain additional information?

How	When	Where
1. Visit eHealth Exchange Web Site	Any time	https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange
2. Monthly Participant Web Meetings	Typically, the 3rd Thursday of Each Month at 1 pm ET	https://ehealthexchange.org/events
3. Monthly TEFCA Policy Compliance Meetings	Dates coming soon!	https://ehealthexchange.org/events
4. Monthly TEFCA Technical Compliance Meetings	Dates coming soon!	https://ehealthexchange.org/events
5. Email	Any time if you have a specific question	administrator@ehealthexchange.org