June 11, 2024

TEFCA Monthly eHealth Exchange Technical Webinar

Eric Heflin, Consultant

eHealth Exchange™

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Agenda

- Monthly TEFCA Technical Webinars
- TEFCA Overview – Reference
- Initial Participants Lessons Learned
  - Exchange Purposes
  - USCDI
- Authorization Framework v4 TEFCA Considerations
- Open Discussion / Q&A
- For More Information (Including Office Hours)

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Monthly TEFCA Technical Webinars

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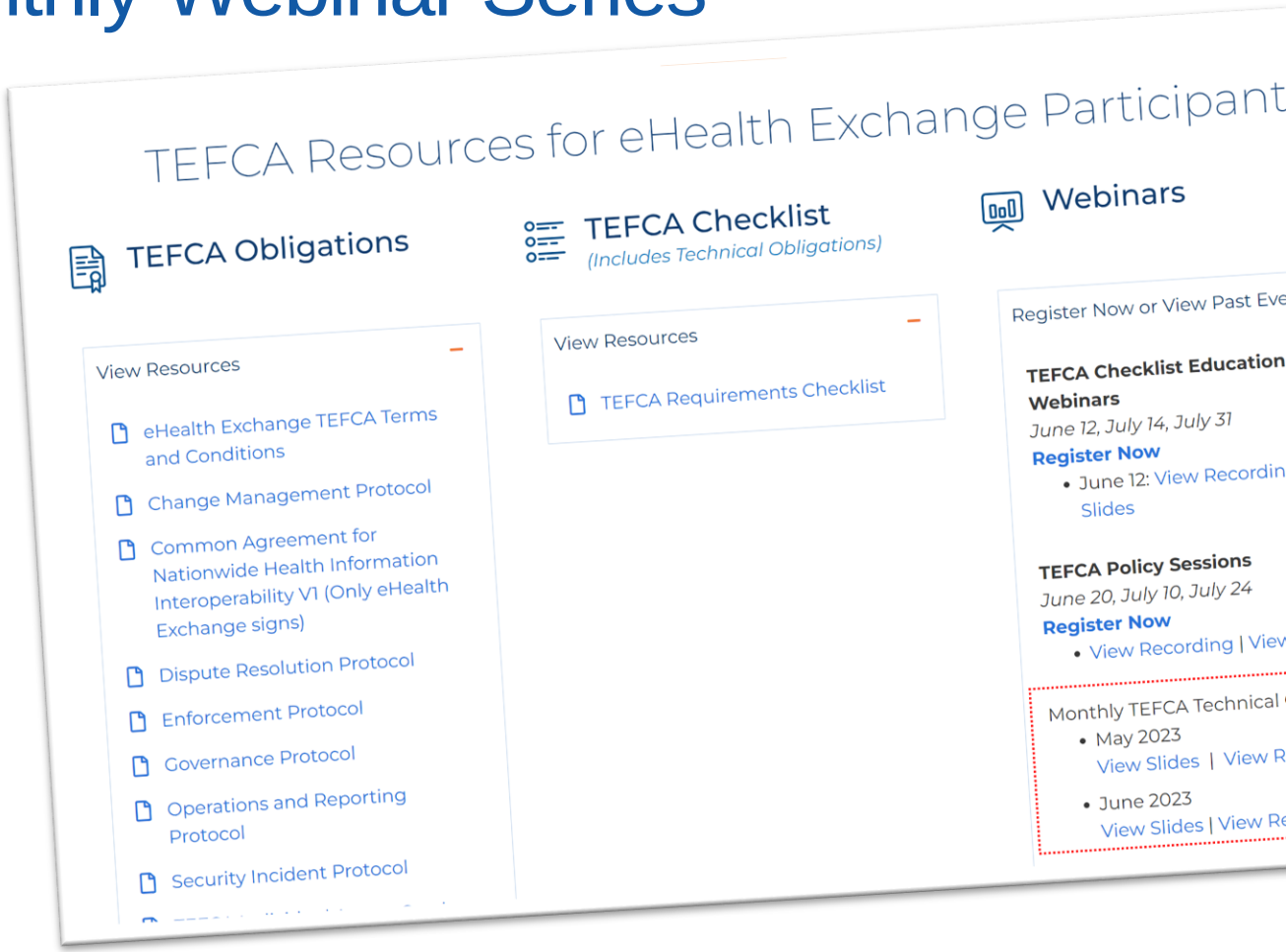
eHealth Exchange TEFCA Monthly Webinar Series

- Today's webinar is part of a series
- Prior webinars covered:
- TEFCA Readiness Checklist
- Individual Access Services Providers
- Reporting Requirements
- Error Handling
- And more



Prior webinars can be found at:

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

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eHealth Exchange Monthly TEFCA Technical Webinar Series

- May 2023 - *TEFCA Individual Access Services Providers Requirements*
  View Slides | View Recording
- June 2023 - *TEFCA Directory, Errors, Logs, and Reporting Requirements*
  View Slides | View Recording
- July 2023 - *TEFCA Draft Monthly and Quarterly Reports Review*
  View Slides | View Recording
- August 2023 - *TEFCA Updates and Aggregated Patient Discovery Requirement*
  View Slides | View Recording
- September 2023 - *TEFCA Hub Development Updates*
  View Slides | View Recording
- October 2023 - *Validation Status for the eHealth Exchange Hub, Individual Access Services Provider (IAS) SAML Simplifications, Lesson's Learned, New potential Purpose of Use*
  View Slides | View Recording
- November 2023 - *TEFCA FHIR Support, TEFCA Hub Technical Readiness, New QHIN Technical Framework, TEFCA Directory, Lessons Learned from Initial Sub-Participants*
- ・TEFCA Reporting Requirements: RCE Updates
  View Slides | View Recording
- December 2023 - *ONC/HHS/RCE Announcement, Updated FHIR Roadmap for TEFCA Exchange, TEFCA Hub Technical Readiness*
  View Slides | View Recording

- TEFCA Checklist Education Webinars
- June 12: View Recording | View Slides
- July 14: View Recording
- July 31: View Slides

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

ONC/HHS/RCE Announcement

eHealth Exchange™

« NEWS

eHealth Exchange Among First To Achieve TEFCA℠ Qualified Health Information Network™ (QHIN™) Designation

Today, **eHealth Exchange** announced it's been designated as a Qualified Health Information Network™ (QHIN™) under the Trusted Exchange Framework and Common Agreement℠ (TEFCA℠). This places eHealth Exchange's electronic data-sharing network among the country's first Designated QHINs to go live and operationally ready for exchange with other Designated QHINs.

Official Website of The Office of the National Coordinator for Health Information Technology (ONC)

HealthIT.gov

TOPICS BLOG NEWS DATA ABOUT ONC

HealthIT.gov > Topics > Interoperability > Policy > TEFCA

Interoperability

Policy

TEFCA

Information Blocking

Interoperability 2030

Advancing Interoperability with Medicaid

Health IT Certification

Standards and Technology

Investments

Trusted Exchange Framework and Common Agreement (TEFCA)

TEF

ONC released Version 2.0 of the Common Ag
published in November 2023, and includes e
Resources (FHIR®) based transactions. The Co
sets forth the requirements each Participant a
ToPs incorporate all applicable standard opera

The Trusted Exchange Framework and Commo
nationwide interoperability; (2) to simplify conn
of populations, and generate health care value;

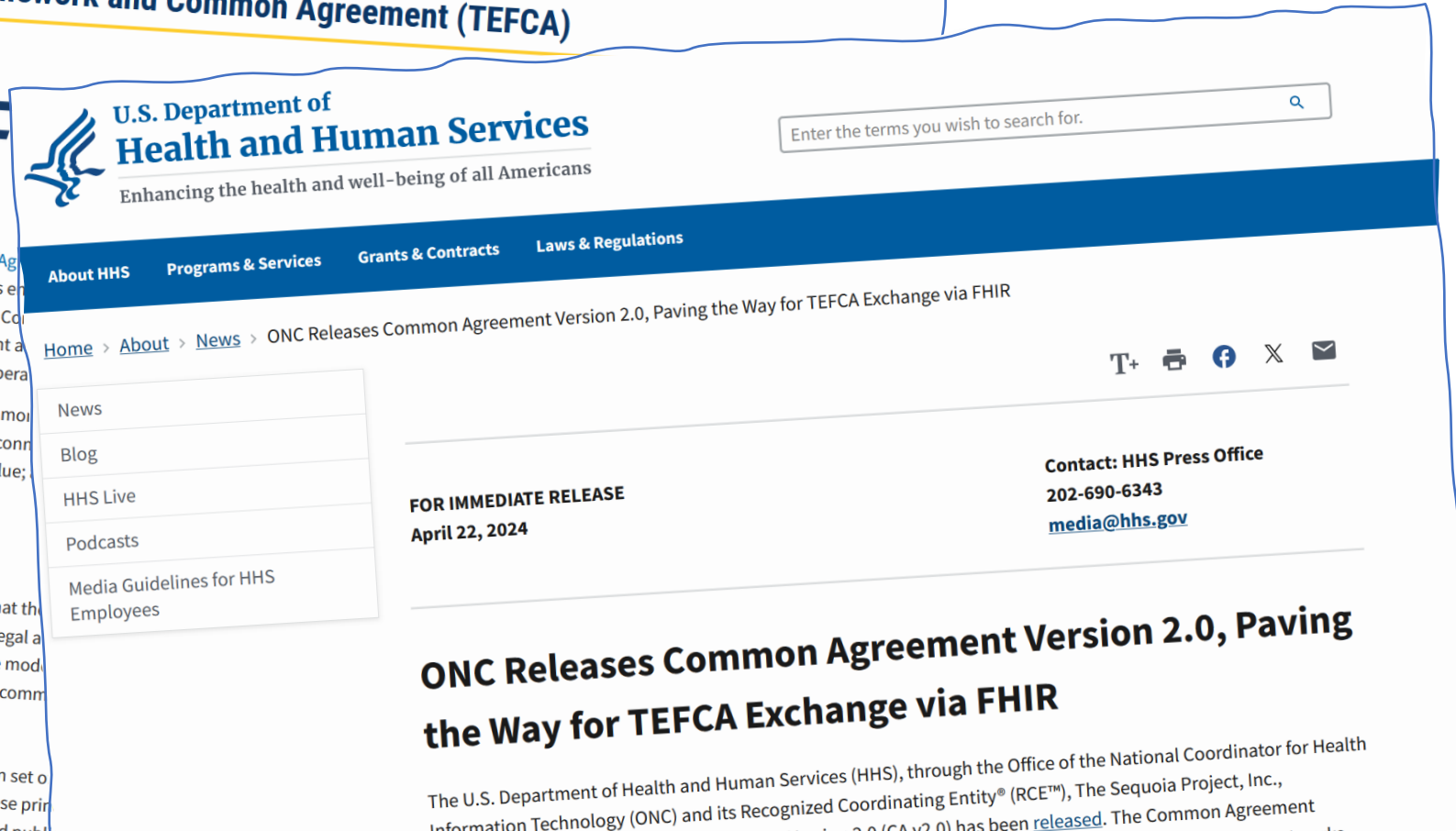
TEFCA Components

Common Agreement

The Common Agreement is the agreement that th
Network™ (QHIN™). It defines the baseline legal a
Agreement also establishes the infrastructure mod
share information with each other—all under comm

Trusted Exchange Framework

The Trusted Exchange Framework is a common set o
enable widespread information exchange. These prin
privacy, security, and safety; access; equity; and



U.S. Department of Health and Human Services

Enhancing the health and well-being of all Americans

Enter the terms you wish to search for.

About HHS Programs & Services Grants & Contracts Laws & Regulations

Home > About > News > ONC Releases Common Agreement Version 2.0, Paving the Way for TEFCA Exchange via FHIR

News

Blog

HHS Live

Podcasts

Media Guidelines for HHS Employees

FOR IMMEDIATE RELEASE
April 22, 2024

Contact: HHS Press Office
202-690-6343
media@hhs.gov

ONC Releases Common Agreement Version 2.0, Paving the Way for TEFCA Exchange via FHIR

The U.S. Department of Health and Human Services (HHS), through the Office of the National Coordinator for Health
Information Technology (ONC) and its Recognized Coordinating Entity® (RCE™), The Sequoia Project, Inc.,
released. The Common Agreement

Meet the Designated QHINs

Below are organizations that have successfully completed the Qualified Health Information Network™ (QHIN™) onboarding process and are recognized as Designated QHINs for TEFCA exchange. There are additional Candidate QHINs still in the onboarding phase listed here.

eHealth Exchange™ VISIT WEBSITE →

Epic Nexus VISIT WEBSITE →

HEALTH GORILLA® VISIT WEBSITE →

KONZA NATIONAL NETWORK VISIT WEBSITE →

MedAllies VISIT WEBSITE →

Kno2® VISIT WEBSITE →

commonwell® HEALTH ALLIANCE VISIT WEBSITE →

Meet the Candidate QHINs

Looking for a list of Designated QHINs?

Below are organizations that have completed the Qualified Health Information Network™ (QHIN™) application and have been accepted into the project planning and testing phase of the onboarding and designation process. Inclusion on this page is not an endorsement and does not guarantee that an organization will be Designated as a QHIN™.

surescripts Health Information Network™ VISIT WEBSITE →

Sources:
https://rce.sequoiaproject.org/designated-qhins/
https://rce.sequoiaproject.org/candidate-qhins/
e

eHealth Exchange is a Designated QHIN under TEFCA

eHealth Exchange is among the country's first Qualified Health Information Networks (QHINs) to achieve designation status under ONC's Trusted Exchange Framework and Common Agreement, also known as TEFCA.

We're ready to help HIEs, health systems, digital health platforms, and others who want to connect to the federally-endorsed TEFCA network.

TEFCA RESOURCES FAQS CONTACT US

TEFCA Overview - Reference

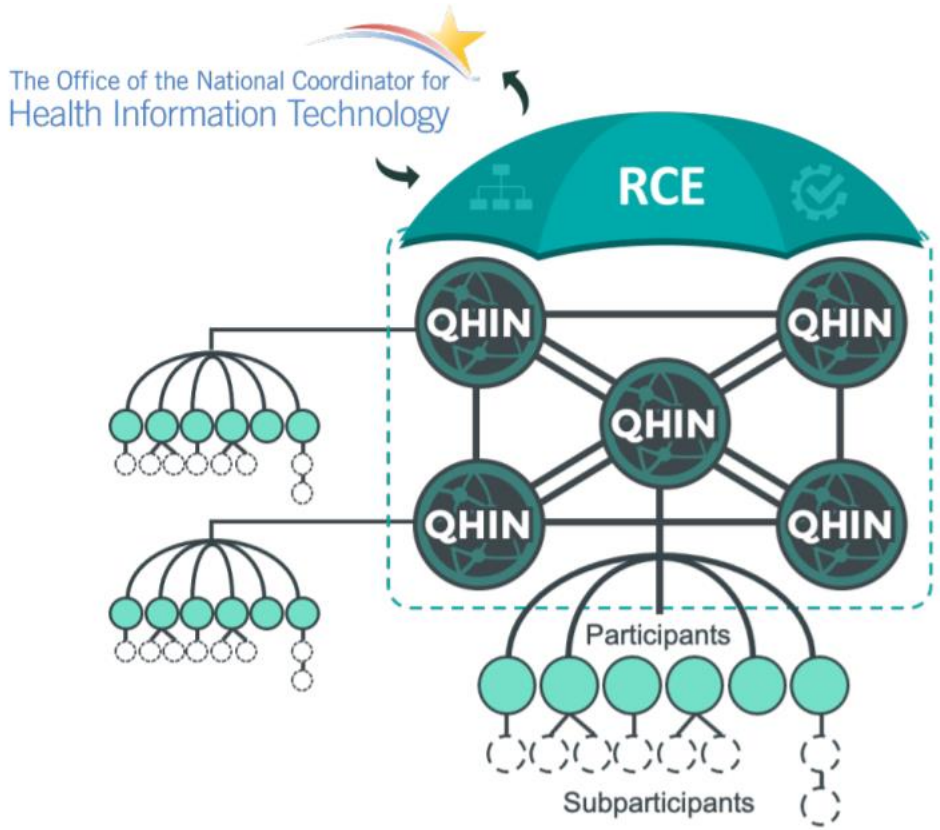
eHealth Exchange™

How Does TEFCA Work?

Common Agreement

- QHIN Technical Framework
- Standard Operating Procedures

- FHIR Roadmap



ONC defines overall policy and certain governance requirements.

RCE provides oversight and governing approach for QHINs.

Qualified Health Information Networks (QHINs) connect directly to each other to facilitate nationwide interoperability.

Each QHIN connects Participants, which connect Subparticipants.

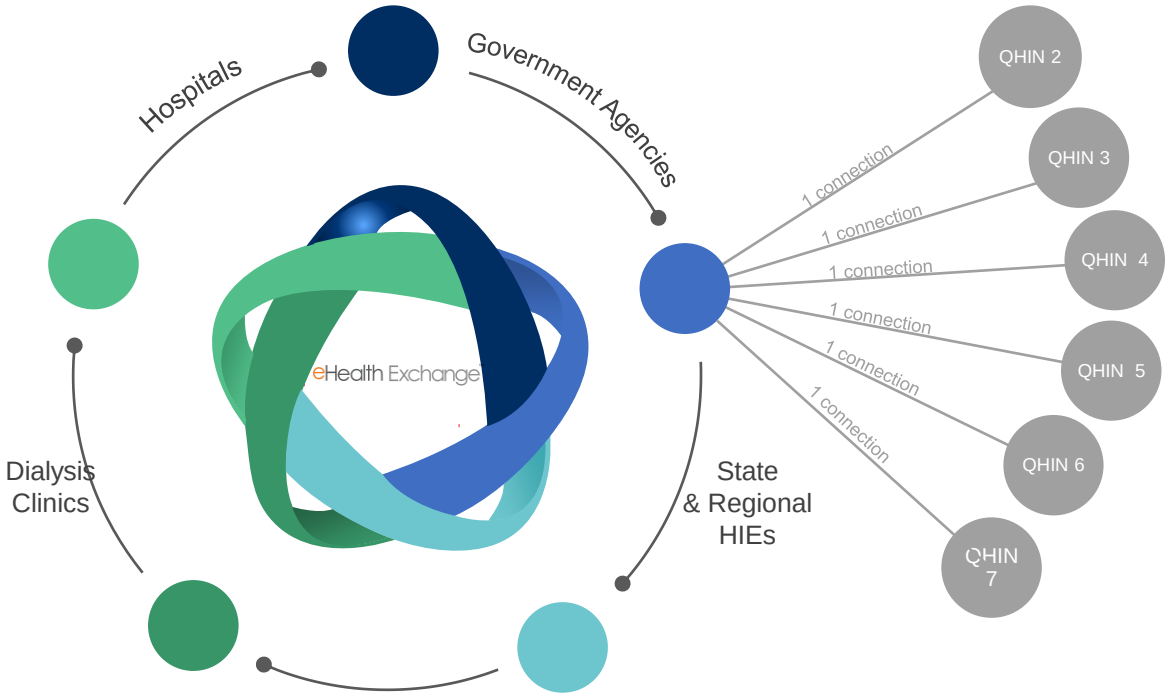
What is the Trusted Exchange Framework (TEFCA)?

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.



eHealth Exchange™

Leveraging the power of the federal government to expand & mature interoperability

eHealth Exchange DESIGNATED QHIN

Intent to Exchange from 11 HIEs Operating in 15 States Serving up to 126 Million Patients

CRISP Shared Services

Indiana Health Information Exchange

SCHIO Serving Communities Health Information Organization Community Interoperability Since 1996

GEORGIA HEALTH INFORMATION NETWORK

C3 HIE

One Health Record

Manifest MEDEX

BIG SKY CARE CONNECT

contexture℠ Creating connections. Improving lives.

CyncHealth

FROM NUMBERS TO KNOWLEDGE VHI VIRGINIA HEALTH INFORMATION

AL, AK, AZ, CA, CO, CT, DC, GA, IA, IN, MD, NE, TX, VA, and WV

Learn more: BeMyQHIN.org

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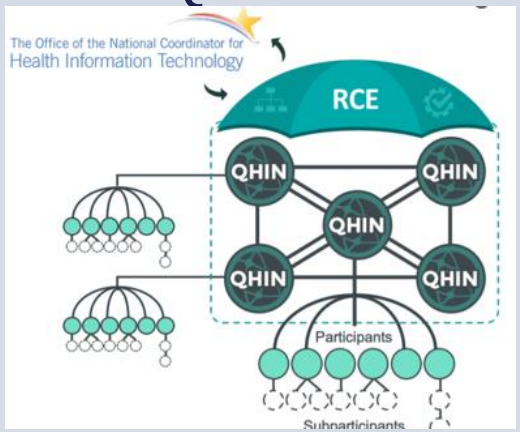
What's changed?

Before: eHealth Exchange Connected with TEFCA

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

After: eHealth Exchange Went Live on TEFCA

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



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

- ⚠ Multiple technical connections
- ⚠ Vendor specific
- ⚠ Limited to no 24x7x365 monitoring
- ⛔ No mandatory content testing
- ⚠ No or limited analytics portal dashboard
- ⛔ No broad federal agency connectivity

Initial Participants Lessons Learned

Tips for Success

eHealth Exchange™

Tip – Project US@

- A few informal tips based on some experiences and dialog with eHealth Exchange Participants joining the TEFCA via the eHealth Exchange QHIN Hub
- Note the requirements for Project US@ (pronounced “Project U.S. Address”)
- Requires transacted XCPD content to adhere to Project the US@ requirements
- Note that a prior Monthly TEFCA Technical Meeting was devoted to this topic and had an extensive analysis of the mandatory and some optional requirements of Project US@ from the perspective of an eHealth Exchange Participant or Sub-Participant

Tip – US CDI 1.0 Compliance

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2023/12/QTF-V1.1-Final-508.pdf
- Section 1.1

> The scope of data for TEFCA exchange is TEFCA Information as defined by the Common Agreement and maintained by QHINs, Participants or Subparticipants. The United States Core Data for Interoperability (USCDI) is a named data standard in the QTF but it is neither a "floor" nor a "ceiling" for data exchange in TEFCA. TEFCA Information maintained by QHINs, Participants and sub participants could be more or less than the data in the version of USCDI specified in the QTF. There is no minimum requirement for QHINs, Participants or Subparticipants to maintain all the data elements in the version of USCDI specified in the QTF. However, the USCDI provides conformance requirements when exchanged in TEFCA. When TEFCA exchange occurs for the data in the USCDI version specified in the QTF, then the data need to conform to the requirements specified in the USCDI. This could be done by the Participants or Subparticipants or by the Responding QHIN depending on the internal configuration and policies of each QHIN.

Tip – US CDI 1.0 Compliance

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2023/12/QTF-V1.1-Final-508.pdf

QTF-052 All C-CDA 2.1 format documents adhering to the Continuity of Care Document template MUST include all appropriate data classes and elements from the United States Core Data for Interoperability (USCDI) V1 when data are available.[23] The RCE will update the QTF to enable the use of future versions of USCDI that are consistent with ONC rules for health IT certification compliance.

QTF-053 Responding QHINs MAY provide patient information in other document formats if required by Applicable Law or if an alternative format is requested by the Initiating QHIN via the IHE XDSDocumentEntryFormatCode XCA parameter.

Tip – US CDI 1.0 Compliance

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2023/12/QTF-V1.1-Final-508.pdf

QTF-100 All C-CDA 2.1 format documents adhering to the Continuity of Care Document template MUST include all appropriate data classes and elements from USCDI V1[27] when data are available. The RCE will update the QTF to enable the use of future versions of USCDI that are consistent with ONC rules for health IT certification compliance.

Tip – US CDI 1.0 Compliance

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2023/04/PaymentRiskAdjustment-DraftSOP.pdf
- The RCE cites both USCDI v2 and v3 as having mandatory and optional data classes, in a DRAFT SOP for Payment

[8] https://www.healthit.gov/isa/sites/isa/files/2021-07/USCDI-Version-2-July-2021-Final.pdf
[9] https://www.healthit.gov/isa/sites/isa/files/2022-07/USCDI-Version-3-July-2022-Final.pdf

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Tip – US CDI 1.0 Compliance

6.2 QHIN Query Response

a) All QHINs, Participants, and Subparticipants SHOULD Respond to Requests for Risk Adjustment that contain the information specified in 6.1 of this document, in accordance with the Common Agreement and Applicable Law.

b) If a Health Care Provider Responds to a Request for Risk Adjustment, then it MUST Respond with all Required Information that is maintained by the Health Care Provider, including but not limited to:

i. The following data classes identified in the USCDI v2[8]

1. Allergies and Intolerances
2. Assessment and Plan of Treatment
3. Clinical Notes
4. Clinical Tests
5. Diagnostic Imaging Results
6. Encounter Information
7. Health Concerns
8. Laboratory
9. Medications
10. Patient Demographics/Information
11. Problems
12. Procedures
13. Provenance
14. Smoking Status
15. Vital Signs

ii. The Health Care Provider's Legal Authenticator

iii. The Health Status/Assessments data class, as identified in USCDI v3 Notwithstanding the foregoing, Disability Status MAY be shared.[9]

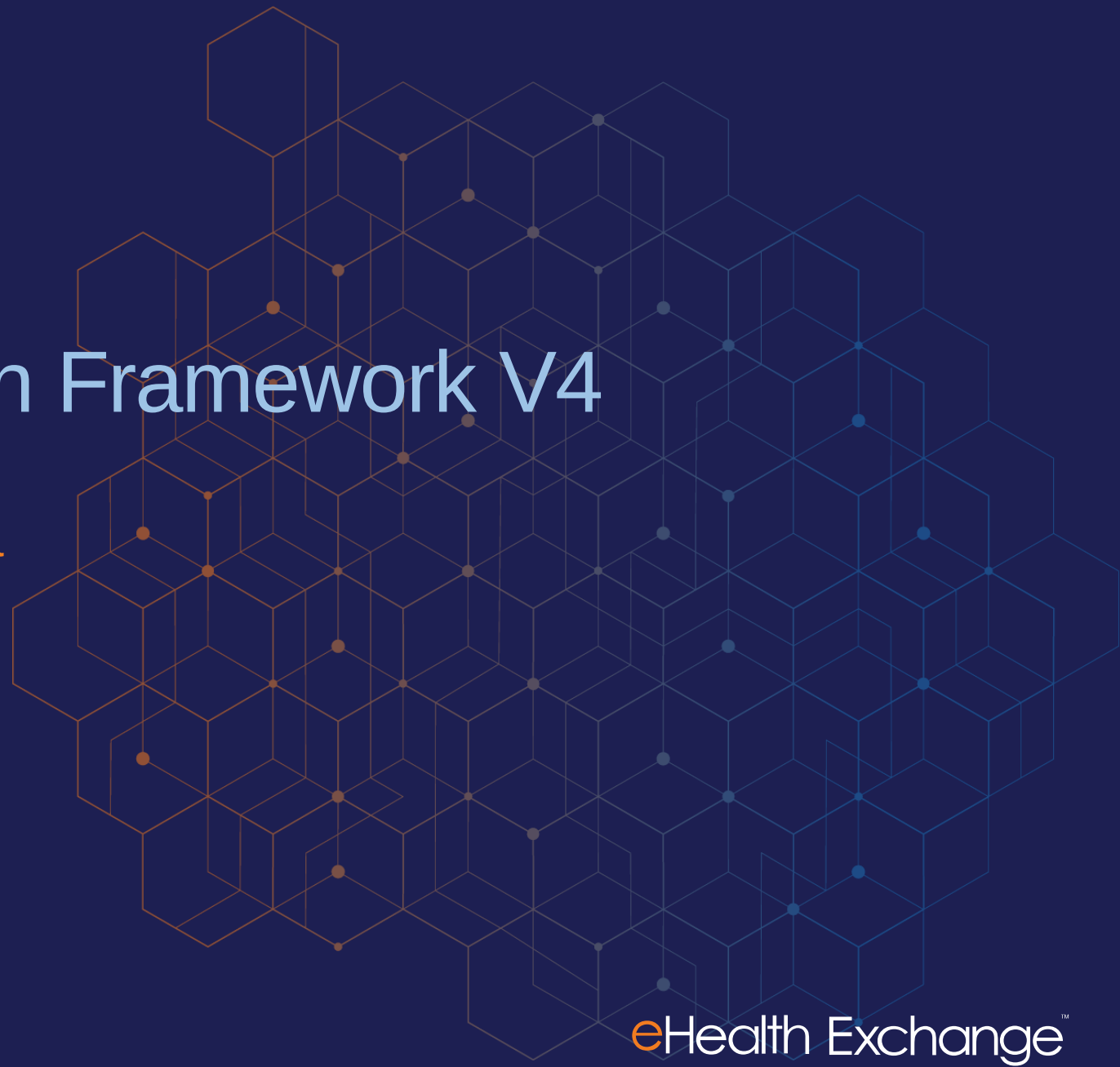
Tip – US CDI And Project US@ For Patient Matching

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2022/12/TEFCA-Facilitated-FHIR-Implementation-Guide-Draft-2-Pilot-Version.pdf
- Section 3.2 Patient Matching:

> FHIR Query Initiators SHOULD normalize all patient demographic data elements according to USCDI standards before attempting to query. The lone exception to this rule is for address, which MUST conform to the Project US@ Technical Specification[2]. Queries for information MUST include all demographic parameters that are available and can be sent and are not constrained by applicable law. Demographics SHOULD follow, at a minimum, USCDI v1 defined demographics.[3] Responding Actors SHALL NOT require more than all USCDI v1 demographics plus administrative gender before returning a patient list response.

Updated Authorization Framework V4

On the June CC Agenda



eHealth Exchange™

New Version of Authorization Framework (v4)

- If the eHealth Exchange Coordinating Committee Approves it as being proposed…
- Entirely optional
- Designed for those needing compatibility with the contemporary IHE standards
- Developed publicly by the eHealth Exchange Technical Work Group

Authorization Framework v4 TEFCA Approach

- TEFCA implications
- Known Authorization Framework scope TEFCA issues called-out

- Note: The RCE moved the Exchange Purposes into an SOP with the same name
- Exchange Purpose is now a defined term (XP)

- https://rce.sequoiaproject.org/wp-content/uploads/2022/06/SOP-Exchange-Purposes.pdf

TEFCA Authorized Exchange Purposes (XPs) (for Participants)

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2022/06/SOP-Exchange-Purposes.pdf
- Section 3:

1. **Authorized Exchange Purposes –** The Exchange Purposes under the Common Agreement and this SOP are:
    - Treatment
    - Payment
    - Health Care Operations
    - Public Health
    - Government Benefits Determination
    - Individual Access Services

TEFCA Mandatory Exchanges (for Participants)

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2022/06/SOP-Exchange-Purposes.pdf
- Section 3.3

b. Participants and Subparticipants are required to Respond to Requests transmitted via QHIN-to-QHIN exchange in accordance with the section of the Framework Agreement that flows down Section 9.4 of the Common Agreement for each of the following Exchange Purposes, except to the extent that one or more of the exceptions applies that are set forth in the section of the Framework Agreement that flows down Section 9.4.1 of the Common Agreement:

   i. Treatment – Required as of the publication date of this SOP.

   ii. Individual Access Services – Required six (6) months following the publication date of the Individual Access Services Exchange Purpose Implementation SOP.

TEFCA Exceptions to XP

- Referencing: https://rce.sequoiaproject.org/wp-content/uploads/2022/06/SOP-Exchange-Purposes.pdf

- Section 9.4.1 (partial summary)
  - Public health authority
  - Utilizes government benefits determination
  - Individual access and if there is a specified exception
  - Is not required information
  - Federal agencies have certain exceptions in some cases
  - Is not authorized

Authorization Framework v4 TEFCA Notable Considerations

- Notable TEFCA consideration in AFv4: Organizations will need to implement TEFCA PurposeOfUse (called Exchange Purposes or XP)

eHealth Exchange Actively Used PurposeOfUse Values

NHIN PurposeOfUse vocabulary *	Code *	In Use **
Treatment	**TREATMENT**	**Yes**
Payment	**PAYMENT**	**Yes**
Healthcare Operations	**OPERATIONS**	**Yes**
Use and disclosures for disaster relief purposes.	**DISASTER**	**Yes**
Uses and disclosures for public health activities	**PUBLICHEALTH**	**Yes**
Disclosures for insurance or disability coverage determination	**COVERAGE**	**Yes**
Request of the Individual	**REQUEST**	**Yes**

TEFCA Exchange Purpose Values

- The eHealth Exchange Hub does not automatically map or translate between TEFCA Exchange Purposes codes and eHealth Exchange PurposeOfUse codes
- Reason: We reviewed and felt each TEFCA Participant using the eHealth Exchange QHIN node should self-access compliance with the new TEFCA codes
- The next slide presents a technical mapping only that could perhaps be a starting point for each eHealth Exchange Participant or Sub-Participant that will be exchanging on the Trusted Exchange (TEFCA).

TEFCA Exchange Purpose Values

NHIN PurposeOfUse vocabulary *	Code *	In Use **	TEFCA Code	Mapping Considerations
Treatment	**TREATMENT**	**Yes**	Treatment - T-TRTMNT	
Payment	**PAYMENT**	**Yes**	Payment - T-PYMNT	
Healthcare Operations	**OPERATIONS**	**Yes**	Health Care Operations - T-HCO	
Use and disclosures for disaster relief purposes.	**DISASTER**	**Yes**		
Uses and disclosures for public health activities	**PUBLICHEALTH**	**Yes**	Public Health- T-PH	
Disclosures for insurance or disability coverage determination	**COVERAGE**	**Yes**	Government Benefits Determination- T-GOVDTRM	Are both participants limited to the scope of goverment disability determination?
Request of the Individual	**REQUEST**	**Yes**	Individual Access Services - T-IAS	Do both participants meet the requirements of the TEFCA individual access services (such as CSP, IASP, etc.)?

TEFCA Exchange Purposes Compliance

- Each Participant should review the exact definitions of the Exchange Purposes and confirm or establish compliance.
- Compliance with the TEFCA Exchange Purposes is the responsibility of each initiator and responder under TEFCA.

TEFCA Exchange Purposes Operational Requirements

- Directories
  - The TEFCA directory entries must be populated with the Exchange Purposes that are used by TEFCA Participants and Sub-Participants under the eHealth Exchange TEFCA QHIN Hub gateway
- Transactions
  - The eHealth Exchange Hub enforces transactions
  - Transactions inconsistent with the QHIN Directory Exchange Purposes are returned to the initiator with a SOAP Fault

eCR Public Health Reporting Via The eHealth Exchange QHIN Hub

eHealth Exchange™

eCR Public Health Reporting Via The eHealth Exchange QHIN Hub

- APHL AIMS has officially opted-in to exchange under TEFCA with the eHealth Exchange as its QHIN
- The goal to begin exchanging for eCR under TEFCA is July 1, 2024
- The eHealth Exchange, APHL AIMS and a vendor are all working together to meet the stated deadline for eCR exchange
- Testing is underway with AIMS and the eHealth Exchange with informal reportability response testing with a vendor

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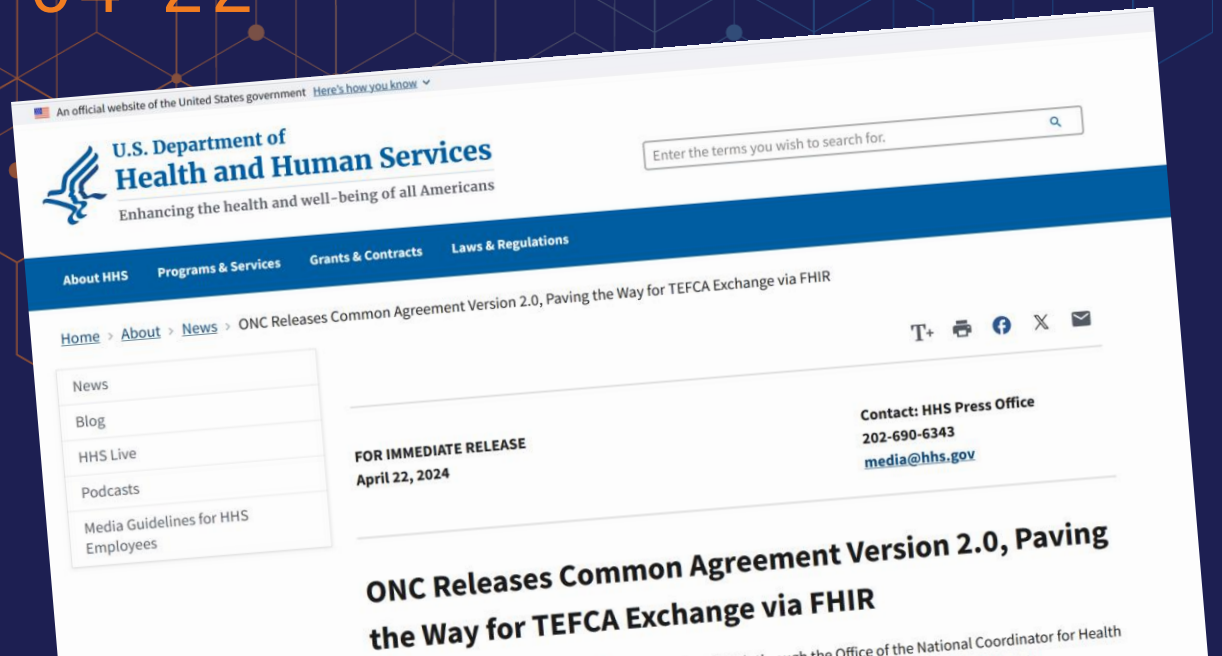
TEFCA New Common Agreement 2.0

Technical Considerations
Version 2.0 Published 2024-04-22



Common Agreement v 2.0

- Covered in detail in the May 2024 eHealth Exchange Monthly TEFCA Technical webinar
- Will be coming into effect as a phased deployment
- Please see the prior webinar for more detailed information about this new, in effect, agreement

Transition from Version 1.1 to Version 2.0

- TEFCA is currently live on Common Agreement Version 1.1 for QHINs
- Applicable Flow-Down provisions are applied to Participants and Subparticipants
- There is a transition period to allow for adoption of the new Framework Agreements by those who are already live
  - 60 days for the Common Agreement
  - 180 days for the Terms of Participation
- During the transition, all TEFCA connected entities can engage in TEFCA Exchange for approved Exchange Purposes
- QHINs are responsible for adding new TEFCA connected entities to the RCE Directory as they sign the Terms of Participation

April 2024

- Expected Publish of final Common Agreement and Terms of Participation in Federal Register

June 2024

- Common Agreement 2.0 is effective for QHINs (60 days after publication)
- Final QTF version 2.0 published and expected to be in production
- Facilitated FHIR SOP expected to be published and in production

Summer 2024

- Additional SOPs are released on a rolling basis

December 2024

- Terms of Participation are effective for all Participants and Subparticipants

Source: https://rce.sequoiaproject.org/wp-content/uploads/2024/04/RCE-Monthly-Informational-Call-4-16-2024-v2_-FINAL-FINAL.pdf

ONC Office of the National Coordinator for Health Information Technology
ONC TEFCA RECOGNIZED COORDINATING ENTITY
Common Agreement for Nationwide Health Information Interoperability
Version 1.1
November 2023

ONC Office of the National Coordinator for Health Information Technology
ONC TEFCA RECOGNIZED COORDINATING ENTITY
Common Agreement for Nationwide Health Information Interoperability
Version 2.0
April 2024

Current eHealth Exchange Protocols

- Updated Web site!
- https://ehealthexchange.org/tefca/

- TEFCA Obligations can be found at:
- https://ehealthexchange.org/tefca-requirements/

- TEFCA Webinars and office hours:
- https://ehealthexchange.org/tefca-webinars/

TEFCA Obligations

View Resources

- eHealth Exchange TEFCA Terms and Conditions
- Change Management Protocol
- Dispute Resolution Protocol
- Enforcement Protocol
- Governance Protocol
- Operations and Reporting Protocol
- Security Incident Protocol
- Validation Plan (See Attachment #3 for details)
- TEFCA SOPs
- Participant Subparticipant QHIN Quarterly Report

Q&A/Open Discussion

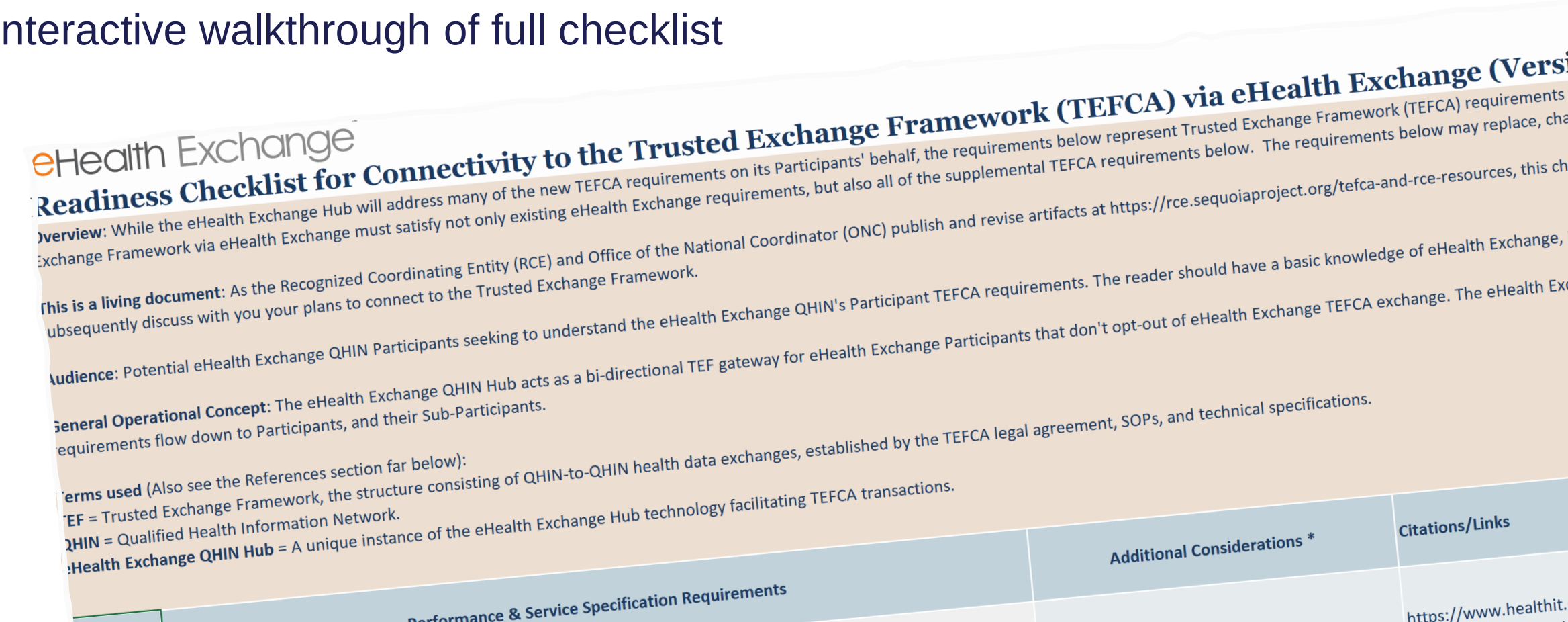
eHealth Exchange™

For More Information

eHealth Exchange™

Readiness Checklist Directory & Reporting

- https://ehealthexchange.org/what-we-do/tefca-and-ehealth-exchange/
- Interactive walkthrough of full checklist



eHealth Exchange

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

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
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, cha

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 ch
ubsequently 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,

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 Exc
equirements flow down to Participants, and their Sub-Participants.

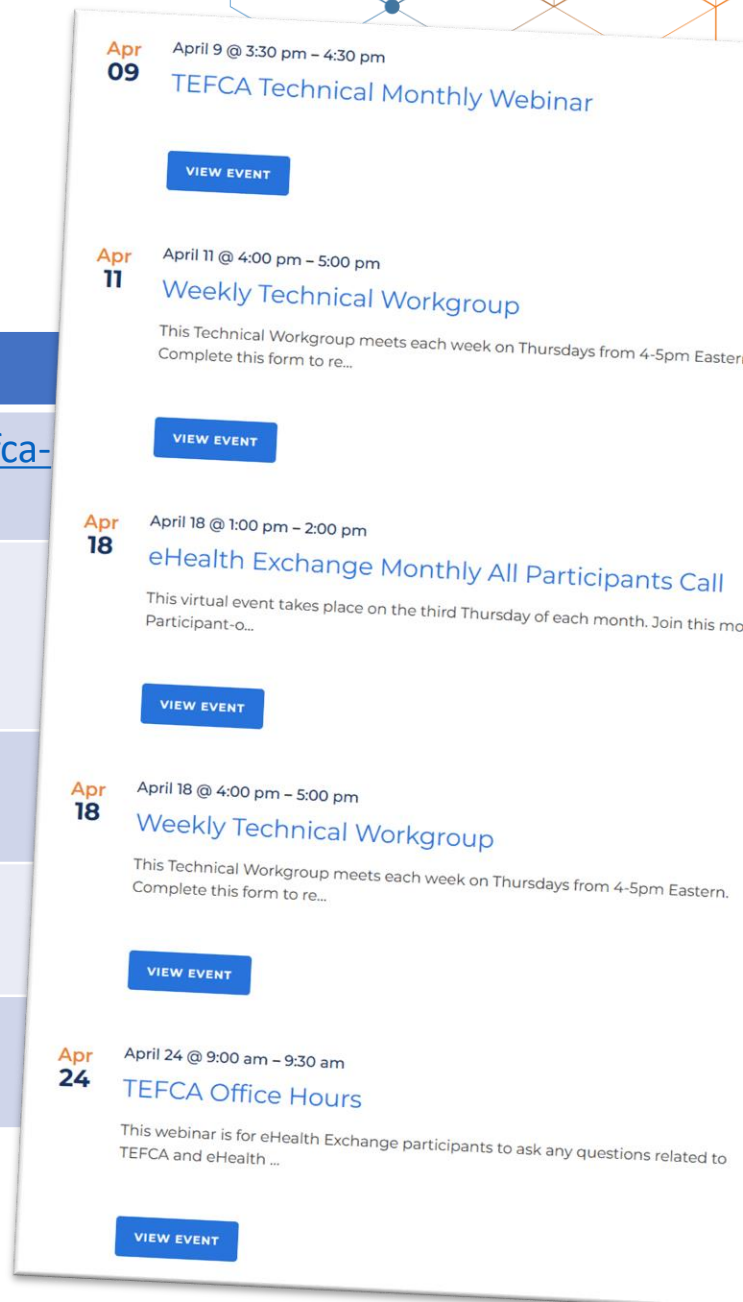
Terms used (Also see the References section far below):
TEF = Trusted Exchange Framework, the structure consisting of QHIN-to-QHIN health data exchanges, established by the TEFCA legal agreement, SOPs, and technical specifications.
QHIN = Qualified Health Information Network.
eHealth Exchange QHIN Hub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

Performance & Service Specification Requirements	Additional Considerations *	Citations/Links
		https://www.healthit.

eHealth Exchange

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 Technical Call	See web site	https://ehealthexchange.org/events
4. Email	Any time if you have a specific question	administrator@ehealthexchange.org
5. Monthly TEFCA Office Hours (Q&A)	See web site	https://ehealthexchange.org/events



Major Technical Differences eHealth Exchange QHIN Participants Must Support

- Adopt USDCI v1 data classes and elements
- Adhere to Project US@ patient addressing
- Adopt IHE ITI Technical Framework Revisions 17.0 (versus Revision 8.0)
- Accept aggregated XCPD responses
- New PurposeOfUse values
- Various requirements such 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 (if you haven't already)

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