The Office of the National Coordinator for Health Information Technology

Health IT Advisory Committee

Trusted Exchange Framework Task Force

Arien Malec, Co-Chair
Denise Webb, Co-Chair

March 5, 2018

Charge

- **Overarching charge:** The Trusted Exchange Framework Taskforce will develop and advance recommendations on Parts A and B of the Draft Trusted Exchange Framework to inform development of the final Trusted Exchange Framework and Common Agreement (TEFCA).
- **Detailed charge:** Make specific recommendations on the language included in the Minimum Required Terms and Conditions in Part B, including—
  - **Recognized Coordinating Entity:** Are there particular eligibility requirements for the Recognized Coordinating Entity (RCE) that ONC should consider when developing the Cooperative Agreement?
  - **Definition and Requirements of Qualified HINs:** Recommendations for further clarifying the eligibility requirements for Qualified HINs outlined in Part B.
  - **Permitted Uses and Disclosures:** Feedback on enhancing or clarifying the six (6) permitted purposes and three (3) use cases identified in Part B.
  - **Privacy/ Security:** Are there standards or technical requirements that ONC should specify for identity proofing and authentication, particularly of individuals?

Discussion Questions: Single On-Ramp

- With regard to the "single on-ramp" contemplated by TEFCA, should ONC's objective be to establish:
  - A "single on-ramp" for all use case that can be addressed through query based exchange (single patient query and population-based query) as implied by the interaction models in TEFCA but not explicitly stated?
  - A "single on-ramp" for all permitted purposes contemplated by TEFCA, whether query-based, push-based or other?
  - A "single on-ramp" for all clinical HIN activities, including those currently provided by other actors (Direct HISPs, eRx intermediaries such as Surescripts, lab orders & results routing)
  - A "single on-ramp" for all EHI exchange, including clinical and administrative transactions, inclusive of single query, population query, push, eRx, lab/orders, administrative transactions, others not yet contemplated.

Discussion Questions: Privacy

- Considering ONC has no authority to change state laws, how can we best solve the exchange of consent and authorization information to reduce issues related to variation in state law?
- What recommendations do you have regarding patient matching without creating a specific patient identifier or do you recommend a specific patient identifier needed?
- What recommendations do you have for maintaining the consent and revocation of consent of patients for the disclosure of their health information (e.g. policies and procedures for consent)?
- Does the HITAC have any expectations regarding educating patients on how their information will be used and disclosed, including access issues and any breaches which may occur (e.g. policies and procedures and recommended language in any notice and how it should be distributed to parties)?

Discussion Questions: Security

- Does the ID proofing level for individuals strike the right balance between not being overly burdensome, but still being stringent enough to enable trust between entities?
- Do you think that a trusted referee/authoritative source is a viable approach to supplement the ID proofing process for an individual?
- What language can we use to clarify who is responsible for ID proofing and authenticating individuals and organizations?
- Should the TEFCA have provisions for the expiration of tokens?
- In what context should the TEFCA define certificate authority, including certificate policies and the overall approach?

Discussion Questions: Flow-Down Provisions

- Are the participant and end-user obligations with respect to privacy/security reasonable? How can they be further clarified?

Next Steps

- Next Meeting - March 12th, 2-3 PM ET
- Send detailed comments to Arien Malec (Arien.Malec@RelayHealth.com), Denise Webb (Webb.denise@marshfieldclinic.org), Zoe Barber (zoe.barber@hhs.gov), and Lauren Richie (lauren.richie@hhs.gov)

Workplan

Meeting Date	Discussion Items
February 20th, 2-3pm ET	Welcome, review of TEFCA, and review of Task Force project plan
February 23rd, 1-2pm ET	Recognized Coordinating Entity (RCE) eligibility requirements
February 26th, 2-3pm ET	Qualified HIN definition and eligibility requirements
March 2nd, 2-3pm ET	Permitted Uses and Disclosures
March 5th, 2-3pm ET	Privacy/Security Begin drafting recommendations
March 9th	NO MEETING- Continue drafting recommendations
March 12th, 2-3pm ET	Review draft recommendations
March 16th, 2-3pm ET	Finalize recommendations
March 19th, 2-3pm ET	Send final recommendation to full committee for review
March 21st, 2-3pm ET	Present recommendations to full committee

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