What Does the TEFCA Mean for Your Organization?

The Trusted Exchange Framework and Common Agreement (TEFCA) presents a unique opportunity for the U.S. healthcare delivery system, establishing a universal floor of interoperability, connecting providers, public health entities, and individuals. This set of rules and non-binding principles has the potential to increase care coordination and interoperability, reduce delays in patient data exchange, and provide individuals with real control over their health data.

Many questions remain about what the TEFCA will mean for hospitals, health systems, and other providers. With this in mind, AHIMA and Oracle Cerner convened a panel of technologists and interoperability experts to address outstanding questions regarding the TEFCA and to help providers and provider organizations prepare for the TEFCA’s launch. This synopsis of the discussion serves as a guidance on TECFA participation.

**KEY FINDINGS**

1. Get started connecting with networks that are moving towards TEFCA. Providers should not wait until TEFCA is fully operational to begin preparations.

2. TEFCA will facilitate the efficient, secure exchange of healthcare information across the care continuum.

3. Top benefits of TEFCA adoption include streamlined access for patients to their healthcare information, enhanced care coordination, and improved outcomes by expanding exchange purposes and comprehensive record location.
Q: How does the TEFCA differ from previous attempts to enhance interoperability across the U.S.?
A: The Office of the National Coordinator for Health Information Technology (ONC) carefully crafted the TEFCA using learnings from previous interoperability efforts to enable the secure exchange of electronic health information nationwide through Qualified Health Information Networks (QHINs). The use cases of the TEFCA are much broader than previous attempts, to include streamlined individual access to health information and the potential to expand into payment and healthcare operations.

The TEFCA was created under the 21st Century Cures Act and consists of two parts: the Trusted Exchange Framework and the Common Agreement. The Trusted Exchange Framework outlines the common principles for data sharing. The Common Agreement is a legal agreement that outlines the governing approach, expectations, and rules for the QHINs.

This framework differs from previous efforts, creating an easy point of entry for providers and the security of a federally approved Trusted Exchange Network. Trust is key; participating providers can be confident knowing they are exchanging information with other providers and provider organizations who have all agreed upon the same terms and means of exchange.

Q: How will the TEFCA improve information sharing on a broader scale?
A: The consistent policies and technical approach under the TEFCA will greatly increase the exchange of health information and will support informed decision making, better outcomes, and lower costs.

Currently, participation in data sharing among providers remains inconsistent, at best. While many providers and provider organizations belong to health information networks (HINs), data exchange is often limited. Exchange among HINs is not universal, creating gaps and limitations in data sharing.

With QHINs set to become operational this year, there’s increased focus on how to expand use cases and make a broader impact, particularly around individual access services and public health. State and local governments and other public health entities will benefit from improved access to patient data, furthering population health initiatives and facilitating emergency preparedness and response, among other important public health functions.

Technology advancements and the Common Agreement help eliminate many of the previous barriers to information exchange, often stymied by multiple inconsistent agreements. The free flow of information between QHINs will support nationwide scalability and adaptability and facilitate enhanced data exchange.

One of the most important aspects of the TEFCA is its adaptability. It will be important for those involved in the TEFCA to recognize that data exchange today is reliant upon well-established standards, which may evolve in capability and use. To that end, the TEFCA will be able to grow and adapt as needed to ensure it serves user needs. This adaptation is already starting with a three-year roadmap for the TEFCA to begin utilizing the Fast Healthcare Interoperability Resource (FHIR) data exchange standard already in development.

Q: What do hospitals and providers need to think about from a technology and operations perspective?
A: Hospitals, health systems, clinics, and individual provider practices need to be thinking about when and how to participate in the TEFCA. For organizations not currently participating in exchange, it’s important to get started right away. Speak to your vendors about TEFCA connectivity plans to understand their readiness and what it’s going to take to connect. Find out your local/regional HIE’s plans. Consider how your organization currently communicates with patients about the exchange of their data and determine if adjustments are needed.

Q: When can organizations anticipate experiencing the benefits of the TEFCA?
A: As currently outlined, once the TEFCA and its QHINs are operational, providers will be able to query and access data more easily. It will also ensure the patient’s health record is more complete and provides a more accurate picture of the individual’s medical experience.

Q: How will the TEFCA impact patient care delivery and the patient experience?
A: The TEFCA will empower individuals, providing streamlined access to their health information. Patients can feel confident their health information is secure. The quality and timeliness of patient care will improve as providers have access to individuals’ health information on-demand. In the future, individuals may even be able to access the TEFCA themselves through individual access services (IAS) through third-party applications, which gain access to the TEFCA through a QHIN.

Providers also will have access to test results, images, and diagnostics, reducing the need for redundant tests, enhancing patient convenience, and lowering costs. Thus, the TEFCA will help providers enhance care coordination, facilitating the provision of care across the continuum.

"Hospitals and providers should be thinking about when and how to participate in TEFCA."

—ALAN SWENSON

Expert Panel

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