

Frequently Asked Questions

General FAQs for TEFCA

What is the Trusted Exchange Framework and Common Agreement (TEFCA)?

The *Trusted Exchange Framework (TEF)* contains high-level common principles to which networks in TEFCA should adhere to for trusted exchange of electronic health information (EHI).

The *Common Agreement (CA)* is a legal agreement between the *Recognized Coordinating Entity (RCE)* and *Qualified Health Information Networks (QHINs)* that defines the policies for and enables network-to-network data sharing as outlined in the Technical Framework and the Standard Operating Procedures. This creates broad industry alignment to facilitate entities' entering into effective contractual relationships for the secure electronic flow of digital health information at scale

What are the Common Agreement flow down provisions?

Some CA requirements flow down to the QHIN's Participants and Subparticipants, including:

- Cooperation and Nondiscrimination
- Confidentiality and Accountability
- Utilization of the RCE Directory Service
- Uses, Disclosures, and Responses
- Special Legal Requirements
- Individual Access Services
- Privacy
- Security

What are the Common Agreement exchange purposes?

Reasons for which information could be requested or shared through QHIN-to-QHIN exchange (Section 9):

- Treatment (required to respond)
- Payment
- Health Care Operations
- Public Health
- Government Benefits Determination
- Individual Access Services (required to respond)



Who is the RCE and what are they responsible for?

The Sequoia Project was awarded the role of Recognized Coordinating Entity (RCE). They are responsible for:

- Developing, implementing, and maintaining the CA
- Designating and monitor QHINs
- Modifying and updating an accompanying QHIN technical framework
- Engaging with stakeholders through virtual public listening sessions
- Adjudicating noncompliance with the CA
- Proposing sustainability strategies to support TEFCA beyond CA's period of performance

What are Qualified Health Information Networks (QHINs) under TEFCA?

QHINs are networks that agree to the common terms and conditions of exchange with each other and to the functional and technical requirements for. QHINs are central connection points within the TEFCA ecosystem which include the responsibility to route queries, responses, and messages among entities and individuals sharing information.

Who can become a QHIN?

All entities must apply to the RCE to become a QHIN and show proof of technical readiness through rigorous testing as defined by in the QTF and SOPs. The ONC and RCE will review all applications for completeness, accuracy and compliance.

Who is considered a Participant under TEFCA?

Participants are persons or entities that have entered into a contract to participate in a QHIN. Examples: HINs, Health Systems, Health IT Developers, Payers, Federal Agencies

Who is considered a Subparticipant/Participant Members under TEFCA?

Subparticipants or Participant Members are persons or entities that use the services of a Participant to send and receive EHI. Examples:

- If a QHIN is composed of HINs, the HINs would be the Participants, and those who use the HIN service (such as health systems, ambulatory providers, health IT developers, payers and others) are the Subparticipant
- A Health IT developer could be a direct Participant of a QHIN, in which case, the Subparticipant may be the provider practice that uses the health IT developer's software or services

What exchange modalities are included in the QTF?

Technical and functional requirements enable two information exchange modalities for QHINs:



1. QHIN Query: The act of a QHIN requesting information from one or more QHINs (sometimes referred to as a “pull”)
2. QHIN Message Delivery: The act of a QHIN delivering information to one or more other QHINs (i.e. via QHIN-to-QHIN exchange) for delivery to one or more Participants, Subparticipants, or Individuals (sometimes referred to as “push”)

Kno2 Connected FAQs

What additional effort will it take to connect to be a Participant on the Kno2 QHIN if I’m already integrated to Send, Receive and Find APIs?

Kno2’s commitment to our partners is that all connectivity performed and provided through Kno2 is made available through Kno2’s Communication API with limited to no API impact for partners that have integrated to Kno2’s Send, Receive and Find APIs. Kno2 has spent significant effort reviewing and designing the build and connectivity to become a QHIN and connect to others to ensure we maintain this commitment. Kno2 is anticipating limited changes by our partner community.

Will there be a new Directory for QHIN exchange?

Yes, but Kno2 will integrate the QHIN directory into its platform and APIs making locating endpoints and data between networks without additional effort

What role does Carequality play since they are already part of The Sequoia Project?

Carequality will remain as a separate exchange framework, connecting tens of thousands of healthcare sites exchanging millions of records per month. They also advise TEFCA with policy and technical items based on best practices. Through Kno2’s Find API, all networks including Carequality, Direct, HIEs, private repositories along with QHIN-based query will be available through a single search function.

What happens to HISPs/Direct Secure Messaging?

You will still be able to use Direct Messaging to push data as you do today. TEFCA will add another technical framework to push data, which will add to options available through Kno2’s Send API.

What about 360X?

360X, similar to other workflows, such as e-signing, exist as part of Kno2’s Communication API through a Conversation. Although 360X workflows are not currently scoped in TEFCA specifically, partners and end users access through Kno2 similar to all other workflows and communications.



What are the document standards necessary to participate in TEFCA?

TEFCA will initially require CDA and unstructured document exchange. By the end of 2023, FHIR will be an additional option for exchange.

My customers use Kno2's cloud fax offering. What happens now?

Cloud faxing will still be available as it exists today through Kno2's Communication API.

Will HIE connectivity remain important?

HIE Connectivity will remain important for the foreseeable future. The framework for accessing the patient's record – whether Carequality, CommonWell, HIE's, and others is neutralized through Kno2's Communication API.

