

National Trusted Exchange Video Series - eHealth Exchange

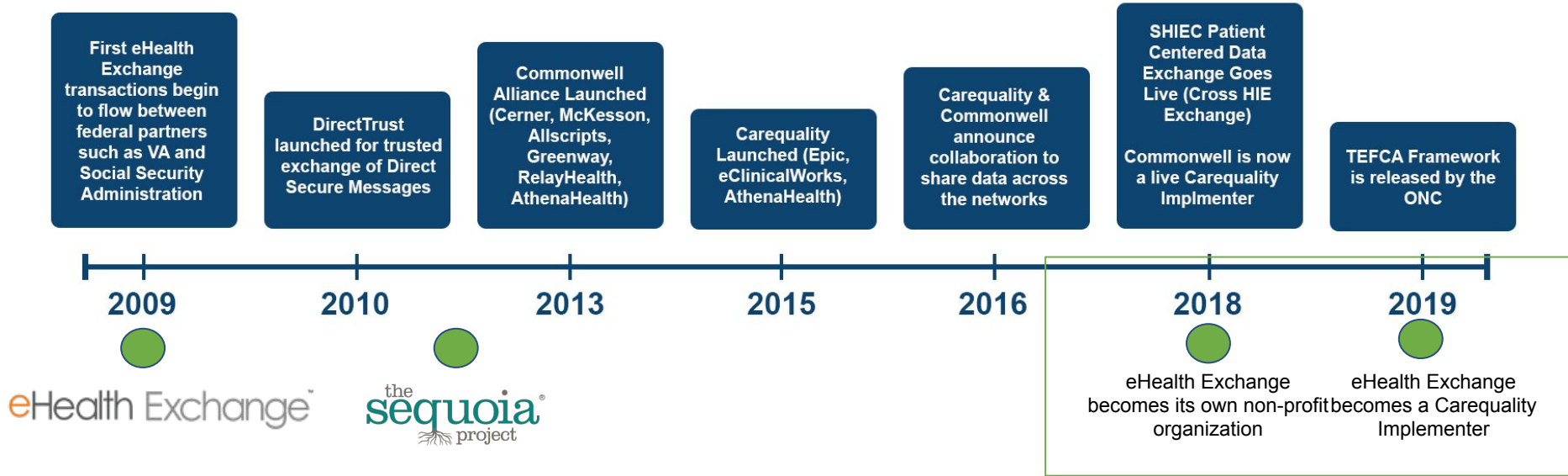


National Trusted Exchange Series



1. Introduction to National Trusted Exchange Networks
2. eHealth Exchange Deep Dive
3. Commonwell Deep Dive
4. Carequality Deep Dive
5. TEFCA's potential impact moving forward

A Timeline View



Important Information on eHealthExchange.org



eHealth Exchange

[What We Do](#)

[Participants](#)

[Onboarding](#)

[Policies](#)

[Testing Program](#)

[Participant Login](#)



The largest
health information network
in the country.

Note to be sure to check the eHealthExchange.org website as details get updated frequently.

What is eHealth Exchange?

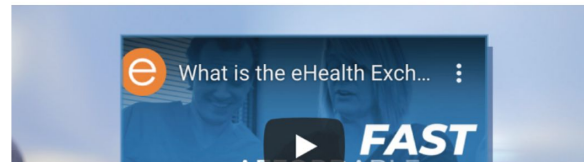
Active in all 50 states, the eHealth Exchange is the largest query-based, health information network in the country. It is the principal network that connects federal agencies and non-federal organizations, allowing them to work together to improve patient care and public health.

Our Participants

[See more](#)



eHealth Exchange in Action



eHealth Exchange



<https://ehealthexchange.org>

eHealth Exchange™

What We Do

Participants

Onboarding

Policies

Testing Program

Participant Login



Proposed Changes to 13 Operating Policy & Procedures (OPPs) & Validation Plan

[Learn More](#)

Changes are Coming!



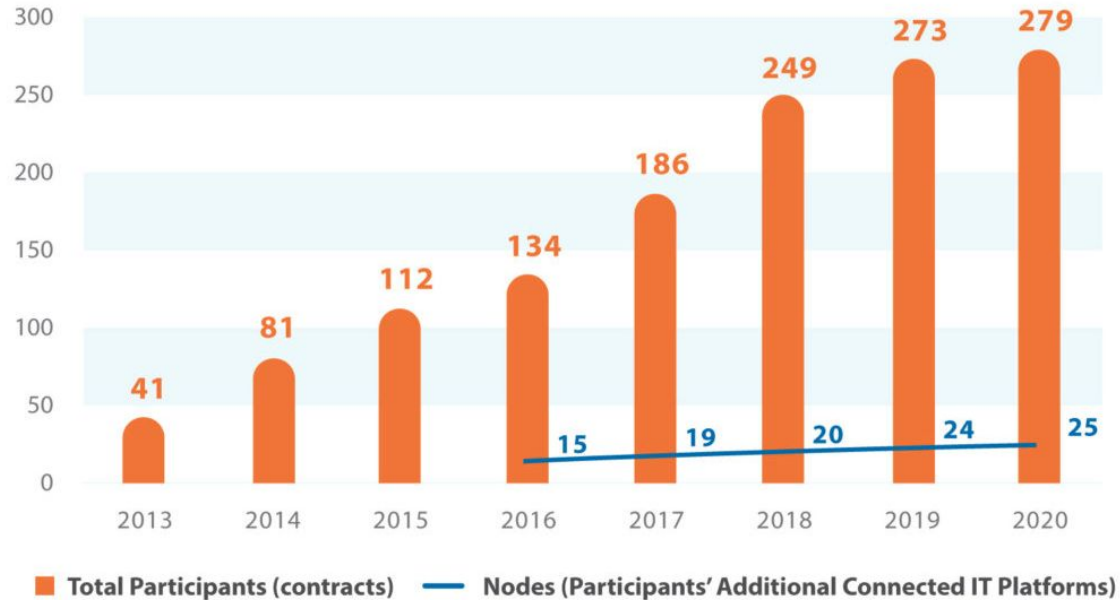
What is eHealth Exchange?

Active in all 50 states, the eHealth Exchange is the largest query-based, health information network in the country. It is the principal network that connects federal agencies and non-federal organizations, allowing them to work together to improve patient care and public health.

eHealth Exchange Participants



<https://ehealthexchange.org/participants/>



Participant Details



<https://ehealthexchange.org/participants/>



Responder-Only: Shares patient information with eHealth Exchange Participants requesting patient information via their single Hub connection.

Hub Two-Way: Shares patient information with eHealth Exchange Participants requesting patient information via their single Hub connection; Requests patient information via their single Hub connection.

Anchor Participants (*): Have demonstrated a high degree of early support for the eHealth Exchange.

Show entries

Search:

Participating Organization	Locations	Facilities	Notes
ADVault (MyDirectives)	Nationwide		<input checked="" type="checkbox"/> HUB Responder Only
AdventHealth	FL, GA, IL, KS, KY, MO, NC, TX, WI	AdventHealth Facilities	<input checked="" type="checkbox"/> HUB Two-Way <input checked="" type="checkbox"/> Content Validated
Advocate Aurora Health Care, Inc.	IL, WI		<input checked="" type="checkbox"/> HUB Two-Way
Alabama One Health Record	AL		<input checked="" type="checkbox"/> HUB Two-Way
Alameda Health System	CA		<input checked="" type="checkbox"/> HUB Two-Way

Exchange with Federal Partners



*VA / DOD - be aware there are additional steps required to onboarding with the VA once you are fully onboarded to eHealth Exchange. This primarily focuses on **data content**.*

****Beware the daily prefetch of 150K+ patients***

Social Security Administration - there are special requirements to share data with the SSA.

Getting Started



<https://ehealthexchange.org/onboarding/how-to-apply/>

How to Apply

[Home](#) → [Onboarding](#) → [How to Apply](#)

The eHealth Exchange Application Process:

- 1 Complete your [eHealth Exchange Application Package](#) and send to administrator@ehealthexchange.org. The application package includes:
 - [eHealth Exchange Application](#)
 - [Restatement II of the DURSA](#)
 - [Participation Agreement](#)
 - [eHealth Exchange Participant Testing Services Agreement](#)
 - [Testing Readiness Checklist](#) (You may need to enlist your vendor's help to complete this checklist. The Testing Readiness Checklist is not required for organizations onboarding with a Qualified Technology Solution.)
 - [Hub Checklist](#)
- 2 Once your application is received, it will be presented to the Coordinating Committee for final review and approval.
- 3 Pay Testing Fees (listed in the Testing Agreement) to eHealth Exchange via check, ACH or credit card:
 - Mail checks (payable to eHealth Exchange) to:
 - eHealth Exchange 8300 Boone Blvd., Suite 500, Vienna, VA 22182
 - For ACH & Wire instructions or to request an invoice, please contact administrator@ehealthexchange.org.
- 4 Pay Participation Fees
 - Please refer to the [eHealth Exchange Participation Fee Schedule](#).
 - Payment of the participation fees can either be made in conjunction with the testing fees or separately once you are ready to go into production on the eHealth Exchange.

Educational & Guidance Materials

[Onboarding Overview](#)

[Data Use and Reciprocal Support Agreement \(DURSA\)](#)

Partner Testing ([VLER Health](#))

- [Partner Testing with the VHA](#)
- [Partner Testing – FAST TRACK](#)

Getting Started



<https://ehealthexchange.org/onboarding/how-to-apply/>

- 1 Complete your eHealth Exchange Application Package and send to administrator@ehealthexchange.org. The application package includes:
 - eHealth Exchange Application ● *Eligibility and Exchange Use Cases
 - Restatement II of the DURSA
 - Participation Agreement ● *Pricing Information
 - Contact List
 - Testing Services Agreement

Application Form



1. Organization Type and Size	
<input type="checkbox"/> Governmental: <input type="checkbox"/> Federal <input type="checkbox"/> State (indicate the state) <input type="checkbox"/> Local Check this option if Applicant is a governmental entity and indicate if it is a Federal, State or local agency. "Governmental" is not applicable if your organization is not a governmental entity but receives funding from, or otherwise has a relationship with a governmental agency.	<input type="checkbox"/> Non-Governmental (Select all that apply) <input type="checkbox"/> Health Information Exchange Organization (HIO) <input type="checkbox"/> State HIO <input type="checkbox"/> Regional HIO <input type="checkbox"/> Other HIO <input type="checkbox"/> Integrated Delivery Network <input type="checkbox"/> Academic Institution <input type="checkbox"/> Ambulatory Provider Group <input type="checkbox"/> Vendor Intermediary <input type="checkbox"/> Payer/Health Plan/TPA <input type="checkbox"/> Value-Based Care Organization <input type="checkbox"/> Vendor <input type="checkbox"/> Other (please describe): _____
Applicant's Total Annual Revenue: \$ _____	
<ul style="list-style-type: none">• Please round down to the nearest million.• Governmental and Nonprofit organizations should report annual operating budget instead.• This information is used to determine the annual participation fee.	



What Kind of Data can be Exchanged and How?






Note to be sure to check the [eHealthExchange.org](https://www.eHealthExchange.org) website as details get updated frequently.



Use Cases - Query and Retrieve

Pull Data (Query and Retrieve):

- Query and Retrieve comprehensive clinical documents
 - Transported via IHE profiles (XCPD & XCA) [most common response]
 - Transported via FHIR 

- Retrieve comprehensive clinical documents (HL7 C-CDAs, CCDs, CDAs) [most common response]
- Retrieve large DICOM images 
- Retrieve only specific data categories via HL7 FHIR (e.g. medications only or lab results only) 

- For Treatment, Healthcare Operations, and Payment purposes. [most common response]
- With specific patient Authorization
 - for Social Security Administration benefit determinations [common response]
 - for Life Insurance policy determinations
 - for Personal Health Record population
 - for Research
 - for Other Purposes (please describe)

Use Cases - Push Data

Push Data:

- For Electronic Case Reporting (syndromic surveillance) to Association of Public Health Laboratories to route to appropriate public health authorities [\[common response\]](#)
 - Push via ITI-41 (C-CDAs pushed via XDR, XDS, or XCDR)
 - Push via Direct Securing Messaging
 - eHealth Exchange offers the trust framework to support Direct Secure Message exchange with other eHealth Exchange Participants, as well as the technical routing services via APHL (Association of Public Health Laboratories)
 - eHealth Exchange does not provide any HISP (Direct platform) services

- To populate regional HIEs' longitudinal patient records

- To push immunization administration (not to registries)

How Much Does it Cost to Participate?



Note to be sure to check the [eHealthExchange.org](https://www.eHealthExchange.org) website as details get updated frequently.



Cost Components - it's Complicated!



- One Time Onboarding Fees
- Annual Participation Fees
 - eHealth Exchange Participation Fee
 - Hub Fee (Hub no longer optional) *Only applies to some orgs*
 - Carequality Participation Fee (optional)

eHealth Exchange Fees

One time Onboarding / Testing

Smoke Testing - \$11,000

Security Testing - \$8,000 (For non-validated technology)

<https://ehealthexchange.org/testing-program/validated-products/>

eHealth Exchange Fees

Annual Participation (Recurring)

Health Systems, HIOs or other Providers:

Tiered Based on Revenues: Range of \$5,000 to \$27,000 / Year

Vendors / Payers

Tiered Based on Revenues: Range of \$6,750 to \$400,000 / Year

eHealth Exchange Fees

Annual Hub Component (Recurring)

Health Systems, HIOs or other Providers:

No fee if less than \$500M in revenues / expenses; or in less than 5 states

\$60,000 to \$110,000 / year if over \$500M in expenses and in more than 5 states

Vendors / Payers

No fee to respond to queries from the hub;

\$150,000 to \$400,000 / year to query via the hub

eHealth Exchange Fees Carequality Component (Recurring)

Health Systems, HIOs or other Providers:

\$2,500 to \$13,500 / Year - Depending on Revenues or Expenses

Vendors / Payers

\$3,375 to \$200K / Year - Depending on Revenues or Expenses

What Legal Requirements are Most Important?



Note to be sure to check the [eHealthExchange.org](https://www.eHealthExchange.org) website as details get updated frequently.



DURSA - Duty to Reciprocate



12. Expectations of Participants.

12.01. Minimum Requirement for Participants that request Message Content for Treatment. eHealth Exchange exists to promote the seamless exchange of health information across a variety of technical platforms and Health Information Networks. A core principle of eHealth Exchange is that Participants make commitments to the minimum level of data sharing that they will support so that all other Participants can know, and rely on, each Participant's commitment. All Participants that choose to participate in a specific Use Case must comply with all of the Performance and Service Specifications for a Use Case and must take measures to require that its Participant Users comply with all of the Performance and Service Specifications for a Use Case.

- a. Participants that request, or allow their respective Participant Users to request, Message Content for Treatment shall have a corresponding reciprocal duty to respond to Messages that request Message Content for Treatment. A Participant shall fulfill its duty to respond by either (i) responding to the Message with the requested Message Content or, (ii) responding with a standardized response that indicates the Message Content is not available or cannot be exchanged. Nothing in this Section 12.01(a) shall require a disclosure that is contrary to a restriction placed on the Message Content by a patient pursuant to Applicable Law.

DURSA - Adverse Security Events



14.04. Adverse Security Event Notification.

- a. As soon as reasonably practicable, but no later than five (5) business days after determining that an Adverse Security Event (or “Event”) has occurred and is likely to have an adverse impact on the Network or another Participant, Participant shall provide a notification to the Coordinating Committee and all Participants that are likely impacted by the Event. Participant shall supplement the information contained in the notification as it becomes available and cooperate with other Participants. Notwithstanding the foregoing, Participant agrees that (a) within one (1) hour of learning that an Adverse Security Event
-

Is eHealth Exchange the Right Choice for You?



Key Decision Influencers



1. Do you need a fast path to federal partners?
2. Are there other identified high value exchange partners that are only available via eHealth Exchange?
3. Do the math - how do your upfront and recurring costs compare between eHealth Exchange participation, Carequality and Commonwell?
4. Do you need added features like a RLS to optimize query success?
5. Remember that 3rd parties like Zen can fill in any existing technology gaps. Don't assume the technical framework is a blocker for any option.