



# eHealth Exchange Onboarding Overview

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# Introduction to the eHealth Exchange

Rapidly growing network for securely sharing health information over the Internet



Shared Trust Framework

Common Standards, Specifications & Policies

# 10 Years of Progress

**2006**

ONC sponsors prototype architectures, followed by trial implementations.



**2008**

Focus shifted to supporting production pilots



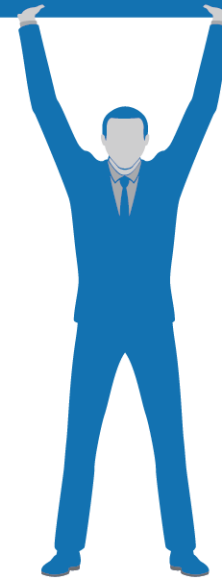
**2009**

First production exchange between Social Security Administration and MedVirginia, followed by Veterans Health Administration and Kaiser Permanente



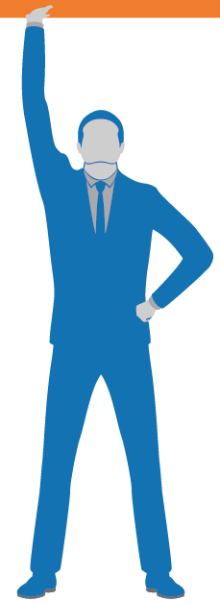
**2012**

Exchange transitions to Healthway. Private sector participation increases



**2015**

Nationwide implementation across 50 states



## eHealth Exchange Core Values



- Lead in national-level exchange of health information to establish HIE as a standard of care, while fostering and supporting innovation
- Maintain openness and transparency in the conduct of operations
- Cultivate trust and protection of information exchanged
- Encourage participation and inclusiveness across a diverse set of stakeholders
- Provide for accountability, fairness and due process
- Maximize effectiveness and efficiency in the exchange of health information
- Evaluate, learn and promote continuous improvement in its own operations

# Largest HIE Network in the U.S.

Today, the eHealth Exchange connects:

All 50 states



10,000 medical groups

Four federal agencies  
(DoD, VA, HHS including  
CMS, and SSA)



900+ dialysis centers



8200 pharmacies

30% of U.S. hospitals



Supporting more than  
100 million patients

# eHealth Exchange Anchor Participants



East Tennessee  
Health Information Network



# eHealth Exchange Overview



## eHealth Exchange Provides





- Legal/Trust Framework
- Operating Policies and Procedures
- Program Support (via Healtheway)



## Technical Services

- UDDI (phone book of other eHEX Participants)
- Security (x.509 Managed CA)
- Testing with our partner organization

# eHealth Exchange: Benefits

Benefit	How eHealth Exchange Achieves Benefit
 <p><b>Reducing Costs</b></p>	Using common standards, legal agreements and governance enables participants to reduce legal fees and avoid building custom interfaces with trading partners.
 <p><b>Improving Clinical and Business Decisions</b></p>	Access to a nationwide data sharing network provides secure access to the comprehensive health data that healthcare providers, pharmacies and payers require to improve clinical decision making, patient safety, process improvement and fair payment.
 <p><b>Exchanging Data with Government Agencies</b></p>	Federal participation in the eHealth Exchange supports data sharing among all participants and with agencies such as Centers for Medicare & Medicaid Services, the Department of Defense, the Social Security Administration and the Department of Veterans Affairs.
 <p><b>Planning for the Future</b></p>	Because the eHealth Exchange is governed by a representative set of participants, its multi-purpose interoperability platform has the ability to evolve and incorporate new use cases, standards, etc.



# Who Does the eHealth Exchange Benefit?

## PATIENTS



- Improves Care Coordination and can reduce medical errors
- Expedites Social Security Benefits for the disabled
- Ensures that individuals with End Stage Renal Disease receive the highest quality of care

## PROVIDERS



- Allows access to critical information such as test results, medication history and allergy information is available to providers when the patient is transferred to another service.
- Enables exchange with government providers with national level ROI
- Can earn credit for MU2 Transitions of Care Measures

## ACTIVE DUTY MILITARY, RETIREES, AND VETERANS



- Supports active duty military, retirees, their families, and veterans throughout their care by making it possible for medical records to follow the patient

# Economic Impact – Social Security Administration Use Case:

## Automates paper requests for records from the SSA

- Manual: weeks to months to receive medical records and determine if someone is eligible for disability benefits
- Electronic via eHealth Exchange: records received within seconds/minutes, expediting decision and provision of benefits



## Benefits for Patients

- Faster disability claim determinations
- Quicker access to monthly cash benefits
- Earlier access to medical insurance coverage

## Potential Benefits for Providers

- Payment for medical information
- Automated processing of the request for medical information and payment
- Potential to recover uncompensated care

# Sample Use Cases



## **Treatment / Care Coordination**

Allows access to critical information (e.g., test results, medication history, allergy info, immunizations) and makes available to providers when patient is transferred.

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## **Responder Only Profile Supporting the Treatment Use case (New)**

Allows other networks (e.g., release of info companies and SAAS model vendors) to respond to queries from eHealth Exchange Participants on behalf of their client.

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## **Military/Veteran Health**

DoD and VA exchange active service members and veterans' records to provide government and private caregivers with up-to-date medical histories

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## **Disability Determination**

Social Security Administration requests claimant records electronically to make disability determinations. Cuts down claims processes *from months to days*.

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## **Quality Reporting for the End Stage Renal Disease Program - CMS**

Allows Dialysis centers to send quality data to CMS to assure that individuals with End Stage Renal Disease receive the highest quality of care

# Onboarding & Testing Process



Timelines are based on averages and may be extended depending on Applicant's internal constraints (e.g., legal review, configuration/setup of technical environments, configuration control processes, technical resource availability). The test lab (Developers Integration Lab – DIL) is currently available to any organization that wants to begin practice testing.

## Eligibility Criteria

- Be a valid business in good standing or a governmental agency, operating in the US;
- Meet all solvency and financial responsibility requirements imposed by statutes and regulatory authorities;
- Be an organization or agency that oversees and conducts, on its own behalf and/or on behalf of its Participant Users, electronic transactions or exchanges of health information among groups of persons or organizations;
- Have the organizational infrastructure and legal authority (through statutes, regulations, organizational agreements, contracts or binding policies) to comply with the obligations in the DURSA and to require its Participant Users to comply with applicable requirements of the DURSA;
- Is not aware of any information that would preclude the Applicant from fully complying with the provisions of the DURSA;
- Intend to Transact information with other Participants for a Permitted Purpose as defined in the DURSA;
- Have sufficient financial, technical and operational resources to support the testing and operation of transactions among Participants;
- Submit a completed Application, signed DURSA Joinder Agreement (Attachment 7 of the DURSA), and the eHealth Exchange Participation Agreement;
- Successfully complete testing and be accepted by the eHealth Exchange Coordinating Committee.

# Architectural Requirements

- Ability to discover and exchange healthcare information amongst participant entities
- Ability to match patients to their data without a universal or national patient identifier
- Ability to support patient preferences regarding their data exchange
- Support secure data exchange
- Support harmonized standards
- Support diverse set of organizations, technologies, and approaches
- Support a common trust agreement
- Meaningful Use
- Reliability
- Scalability
- Non-repudiation

## How to Tackle the DURSA

- Review DURSA and assure you have mechanisms in place to comply with all provisions
- Consult, as necessary, with the following
  - Privacy
  - Security
  - Legal
  - Business Office
  - Human Resources
- Specifically address the DURSA “flow-down” provisions in Sections 15.04 and 15.05
  - *See DURSA Webinar on the eHealth Exchange Onboarding web page for details*
- Sign the DURSA Joinder Agreement (Attachment 7 of the DURSA, with Attachment 4 – Contacts for Notice)

# Testing and Participation Agreements

- Testing Services Agreement
  - The business agreement between Healthway and the Applicant for the provision of testing services to the applicant
  - Required to proceed to testing
- Participation Agreement
  - The business agreement between Healthway and the Participant for the provision of services, once accepted as a Participant
    - Managing digital certificates required for secure exchange
    - Maintaining UDDI registry
    - Enabling access to exchange with other participants
    - Support of the Coordinating Committee and its processes (i.e., supporting the breach notification process, etc.).
  - Countersigned by the Coordinating Committee only when applicant is accepted as Participant



# eHealth Exchange Fees

## Annual Participation Fee

Annual Revenue	Annual Participation Fee
< \$1M	\$4,750
\$1 - \$10M	\$9,950
More than \$10M	\$19,900

- Applies to eHealth Exchange Participants only
- Annual service fee that covers the cost to support participants who exchange data under the DURSA and purview of the Coordinating Committee
- Covers ongoing support and maintenance of trust framework, specifications, service registry, certificate management, etc.
- For governmental and non-profit organizations, the tiers are based upon annual operating costs.

## Testing Fees

Tests	Testing Fee
2010 Smoke Tests	No charge
2011 Smoke Tests	\$11,000
Security Tests	\$8,000
Content Tests (C32, CCDA)	\$3,000 (no charge if product is MU certified)

- Per test fee
- Covers testing and onboarding
- May apply if participant changes vendors or makes substantial changes to its system once in production
- Applicants using eHealth Exchange validated products do not need to run Security Tests.

# Product Testing Program

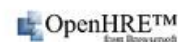
Vendors conduct rigorous set of tests to validate:

- Conformance to underlying standards and specifications
- Systems are free from known interoperability issues - transport, security, transactions and content (if not MU certified)
- Configured and operate securely (negative security tests)



Vendor

Validated Products



Clinical Exchange Platform



Care Everywhere (2012, 2014, 2015)



PrimeEXCHANGE



CareAlign 3.0



Network v7



Exchange Gateway v3

Website: <http://www.eHealthexchange.com>  
E-mail: [admin@ehealthexchange.com](mailto:admin@ehealthexchange.com)