Open@Epic
CONFERENCE

U.S. Government-Backed Connectivity Initiatives

USGBCI v2026

Presenters



Harry Freedman

Epic Public Policy

Learning Objectives

1. Understand how industry and government work together to establish and raise the interoperability floor

2. Develop perspectives on core principles of interoperability

3. Learn about TEFCA and the CMS Health Tech Pledge, including how to get involved

A Tale of New Use Cases



Agenda

01 **The Interoperability Landscape**

Definitions & History

02 **Trusted Exchange Framework and Common Agreement™**

TEFCA® - The Universal On-Ramp for Interoperability

03 **The CMS Health Tech Ecosystem Pledge**

A Novel Approach to Problem Solving

04 **Wrap Up**

Q&A, Takeaways

"TEFCA" is a registered trademark of U.S. Department of Health and Human Services and "Trusted Exchange Framework and Common Agreement' is a trademark of the U.S. Department of Health and Human Services

The Interoperability Landscape

Definitions, History, Processes, and Worthy Topics for Another Day

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time

Standard

- Are there open standards that resolve most use cases?
- If none exist, what is the most generalizable solution?

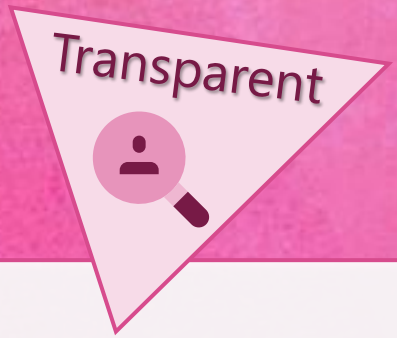


STARS

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time



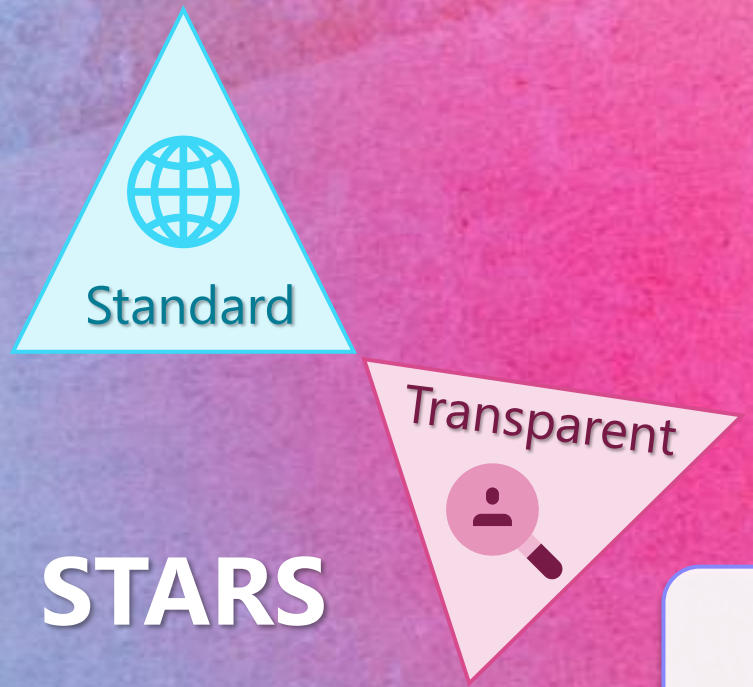


- Do the right people have visibility into what is being shared?
- Are there audit trails?

STARS

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time



STARS

- How should data appear in a workflow?
- How can data change behavior or provide value?

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time



- What does each party have to contribute?
- What structures will support mutual benefit?

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time

Secure

- What technical and procedural mechanisms are in place to protect sensitive data?

Standard

Transparent

STARS

Reciprocal

Actionable



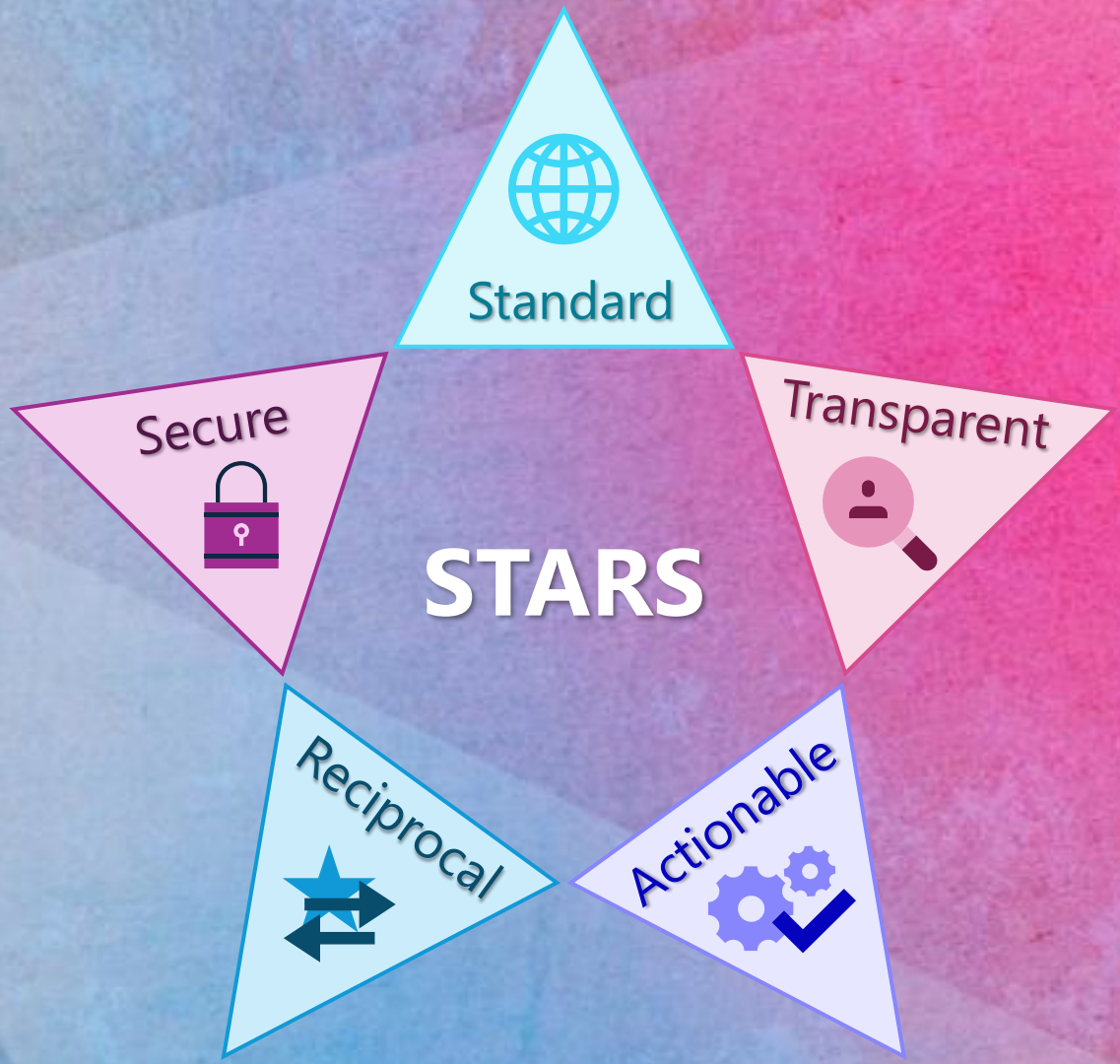
BECKER'S HEALTH IT

October 2026

Ransomware attacks targeting US healthcare jump 64%: 10 things to know

Approach to Interoperability

Right Data, Right Place, Right Person, Right Time



Reasons to Move Data



Patient Access



Operations



Treatment



Public Health



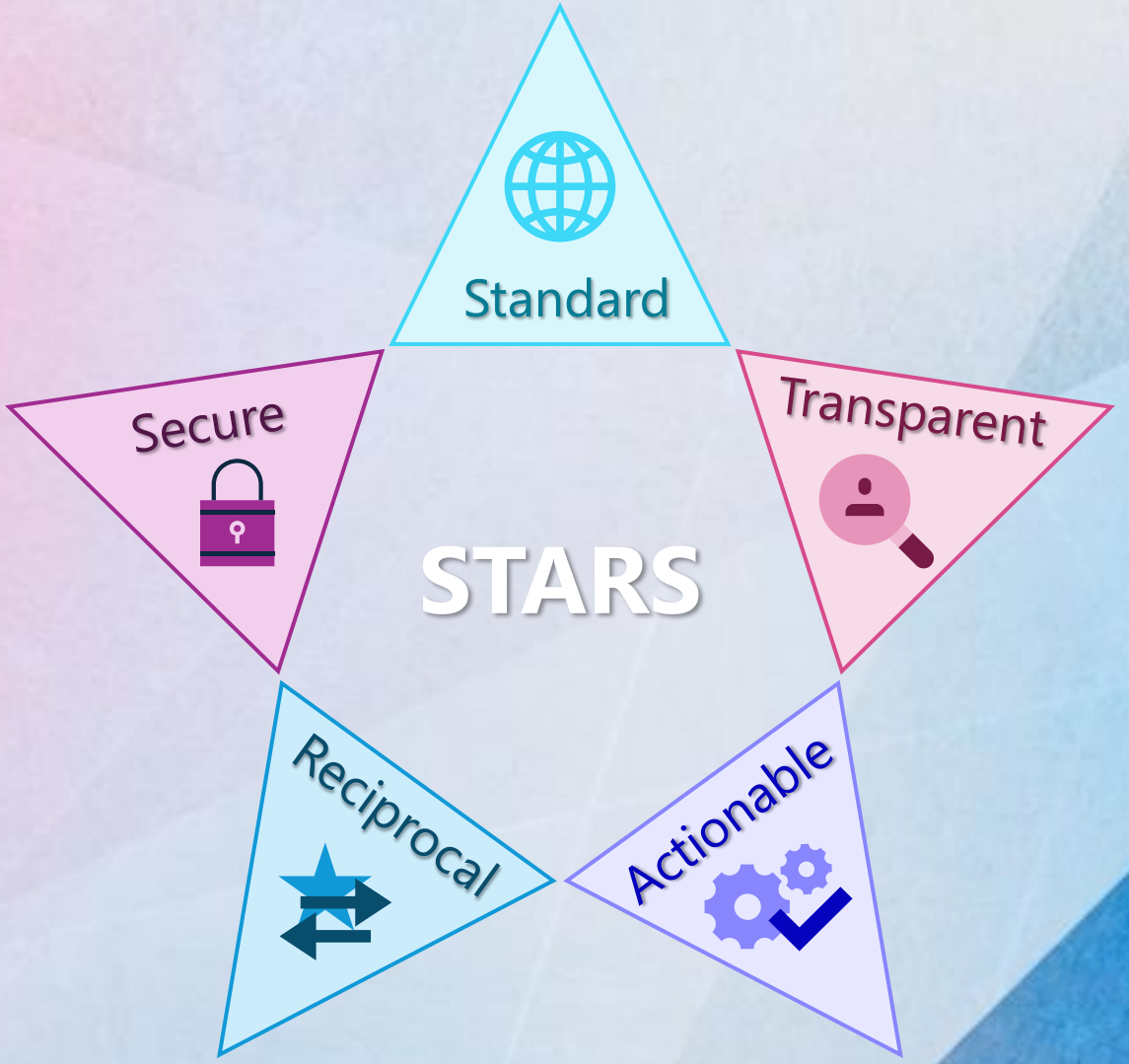
Payment



And more!

Reasons to Move Data

- Patient Access
- Operations
- Treatment
- Public Health
- Payment
- And more!



History of Interoperability

2008
Care Everywhere
Epic

2011
VA Exchange
SSA Exchange
DOD Exchange

2012
Closed-Loop Referrals

2013
Epic Record Locator

2014
100% of US Sites Live on Care Everywhere

2015
HL7 FHIR Live

2016
Happy Together

2017
Image Exchange

2018
payer platform

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Shared Instance
Ask Art Integration

Charts Exchanged: 1 Million → 1 Billion → 10 Billion

INDUSTRY

Meaningful Use Regulations

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Argonaut and Carequality

2016
Carequality Framework Live

Congress Passes 21st Century Cures Act

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Proposes Regulation



Government



Industry



Standards Bodies

Proposes Regulation

Government

Provide feedback on the rule

Provide feedback on the rule

Industry

Standards Bodies

Proposes Regulation



Regulation Finalized





Produce Value

Industry

Provide feedback on implementation and standards

Standards Bodies

Government

Develop Standards







Convene stakeholders

Establish baselines for regulation

Example: Prior Auth FHIR APIs

See Session OEC25: FHIR Prior Authorization (CMS-0057)

Right after this – in **Roll**

Government

2018: Funded Da Vinci Accelerator

2020: STU1s Published

2022: CMS-0057 Proposed

2024: CMS-0057 Finalized

2027: APIs Available in Production

Industry

Standards Bodies

How do you move faster?

Iterate quickly together **products** and **standards**



Convening, funding, and contracting communities

Ex: TEFCA, CMS Pledge

Working Groups
Trade Groups
Initiatives

Ex: FHIR Accelerators







Drafting, providing feedback & expertise

Ex: HL7 Argonaut

USGBCIs That We Won't Discuss Today

USCDI

HL7 and ONC developing a definitional floor

ONC Certification

HTI rules and more

Public Health

Electronic Case Reporting, Investigation, State efforts and data modernization

State HIEs

State by state, often most responsible for "last mile"

HITAC

Steering Committee

Connectathons

Government sponsored industry testing sessions

CMMI Models

ACO REACH, ACCESS, more

PI in MIPS

Legislation

HITECH, CURES

…HIPRA?

Rulemaking

CMS-0057-F or 0062

Grants

SHARP, HIMSS Workgroups, LEAP in Health IT

Accelerators

May be government supported, industry supported, voluntary

Agency Programs

Blue Button, Data at Point of Care, Social Security Administration on TEFCA, more

Worthy Topics for Another Day

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USGBCIs That We Will Discuss!

TEFCA

Government-sponsored network of networks

CMS Health Tech Ecosystem Pledge

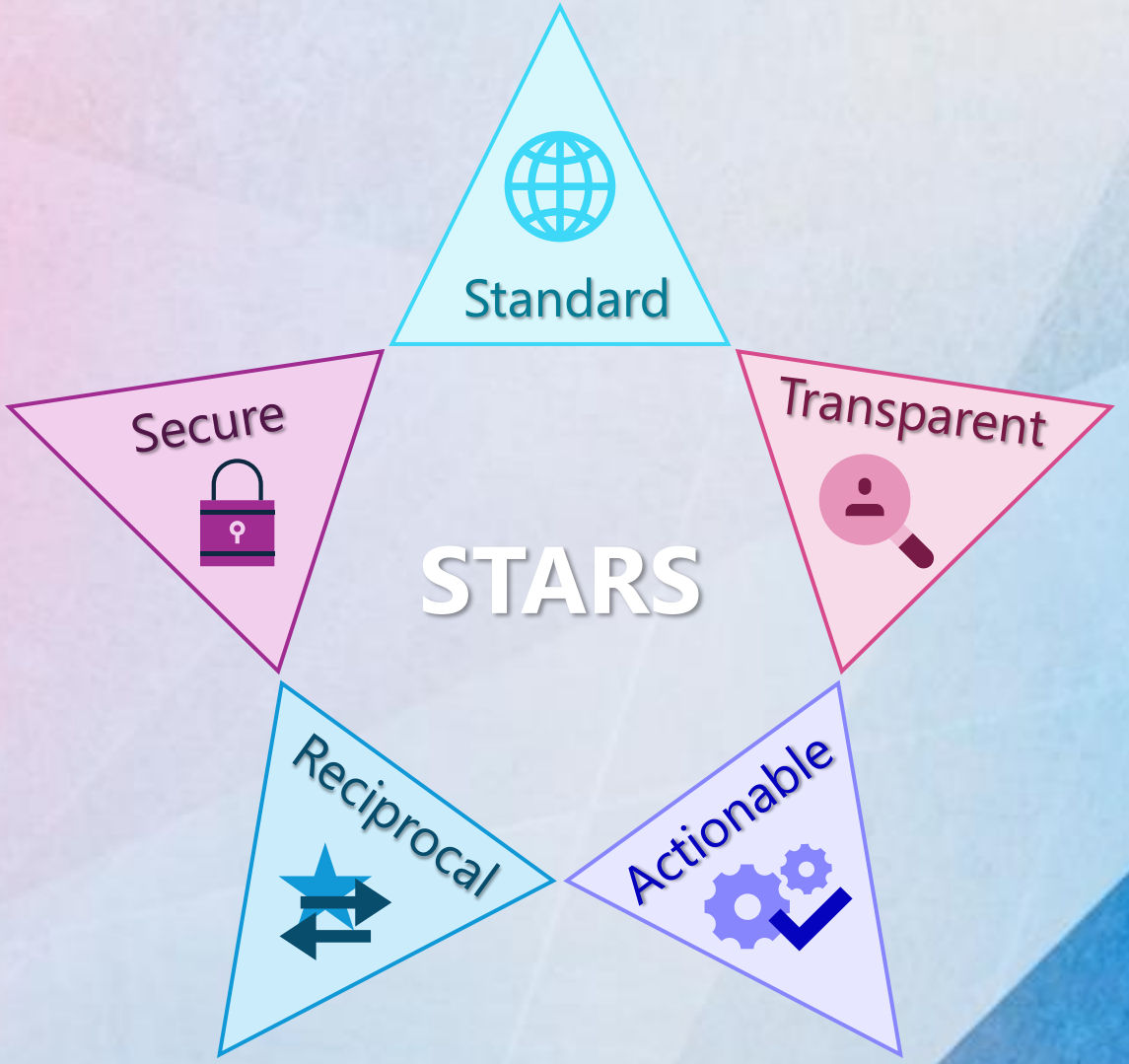
Public-private collaboration developing solutions in Health IT

What they have in common and why we are talking about them!

- Well Established Communities
- Variety of Use Cases & Flexibility to add more
- Large & Diverse Group of Actors
- Lots of Activity

Reasons to Move Data

- Patient Access
- Operations
- Treatment
- Public Health
- Payment
- And more!



Pillars of Patient Access



Identity Verification

Is the requester who they claim?



Patient Matching

Which chart belongs to requestor?



Patient Choice

Does the patient want data filtered?



See Session OEC31: Introduction to Patient Matching

Right after this – in this room!

Pillars of Patient Access



Identity Verification

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Which chart belongs to requestor?



Patient Choice

Does the patient want data filtered?

See Slides from Session OEC24: Paperless, Please: Streamlining Patient Authentication

See Slides from Session OEC11: OAuth2 in Healthcare

Pillars of Patient Access

FIERCE Healthcare

January 2026

More than 75 health systems call for stepped-up oversight of patient data sharing

InsideHealthPolicy

April 2026

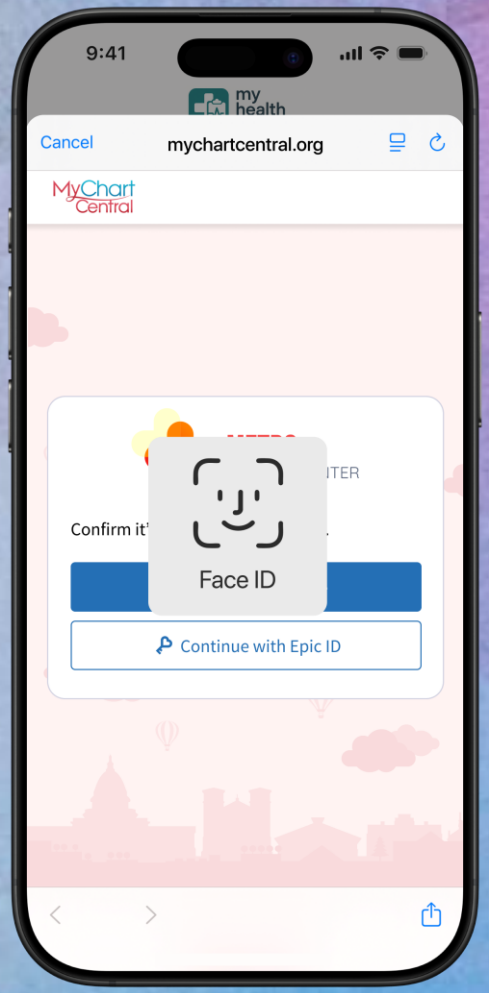
AHA raises privacy issues with TEFCA medical record access update, urges delay

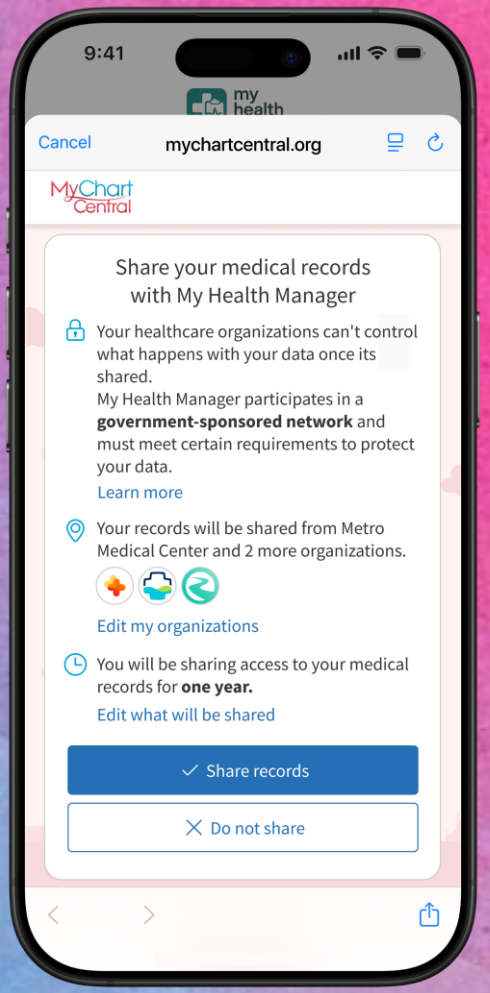


Patient Choice

Does the patient want data filtered?

Verification of Authority Streamlined with MyChart Central





May 2026

TEFCA and the CMS Health Tech Ecosystem

TEFCA

- Network of networks
- Established by 21st Century CURES Act
- Operates through governance caucuses and standard operating procedures (SOPs)

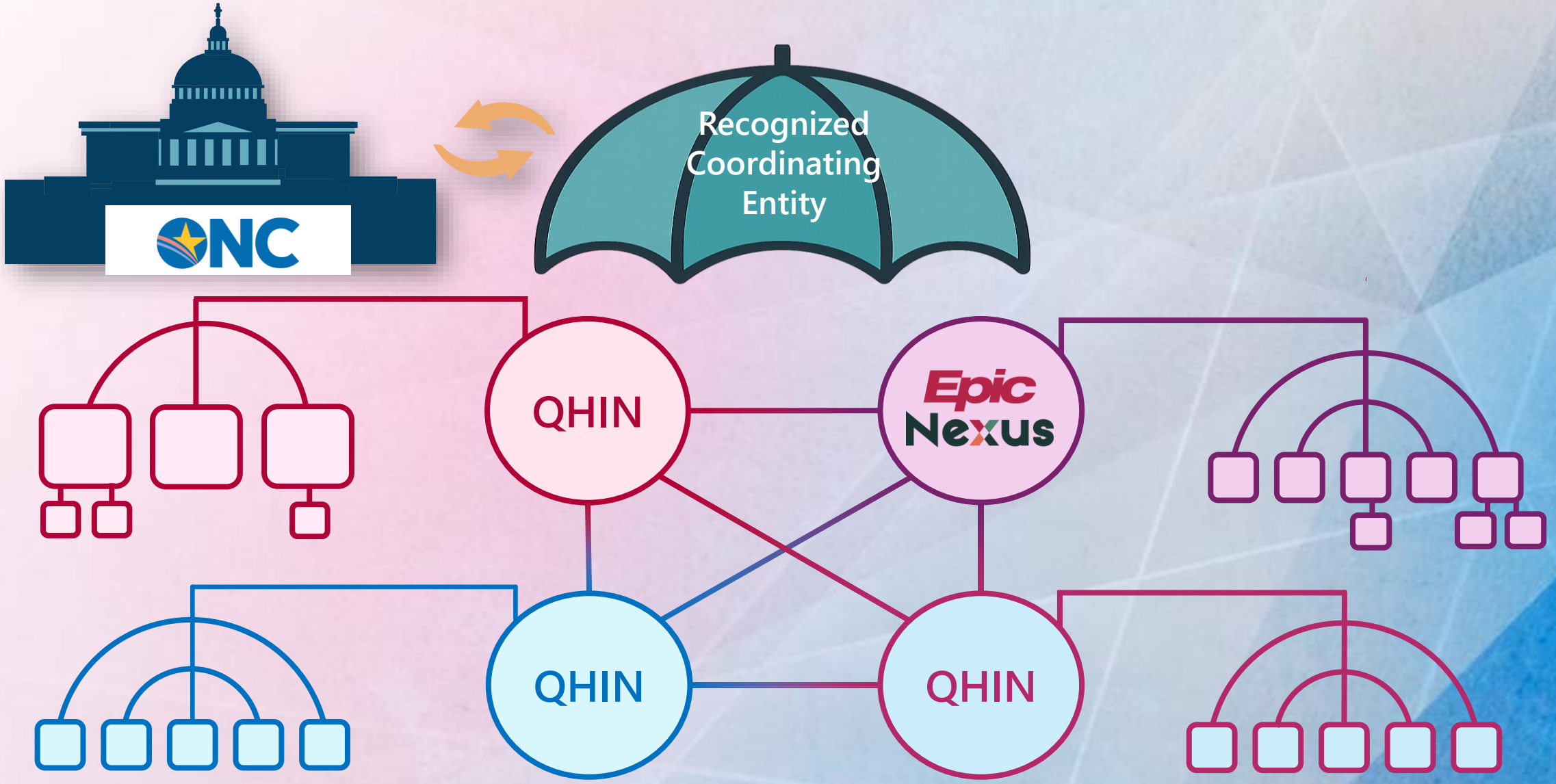
CMS Health Tech Ecosystem Pledge

- Fast, flexible approach to solving problems
- Convened by CMS and volunteers
- Operates through workgroups and requirements documents

TEFCA

The Trusted Exchange Framework and Common Agreement

TEFCA



open.epic.com/Home/Interoperate/TEFCA

TEFCA

YOUR FAVORITE NETWORK'S FAVORITE NETWORK



Photo: https://www.latimes.com/

What is TEFCA?

- Trusted Exchange Framework and Common Agreement
- A nationwide “network of networks” established under the 21st Century Cures Act
- Governed by a Common Agreement and published Standard Operating Procedures (SOPs)
- Connects Qualified Health Information Networks (QHINs), which connect Participants and Subparticipants
- Over 100,000 participants live today

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Nexus

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TEFCA™

Use Cases

Live

Treatment

Patient Access (IAS)

Public Health (eCR)

Government Benefits Determination (SSA)

Coming Soon

Care Coordination

Government Benefits Determination (VBA)

Community Adoption

346

Health systems **live**

90% of the Epic community live or installing

Participatory Governance Builds Trust

Cybersecurity Council:
4 meetings

FHIR Advisory Group (FHIAG):
15 meetings

QHIN Technical Working Group (TWG):
25 meetings

Treatment Workstream:
5 meetings

IAS Workstream:
6 meetings

IAS Breach Mitigation Subgroup:
2 meetings

Governing Council:
10 meetings

Participant / Subparticipant Caucus:
13 meetings

QHIN Caucus:
25 meetings

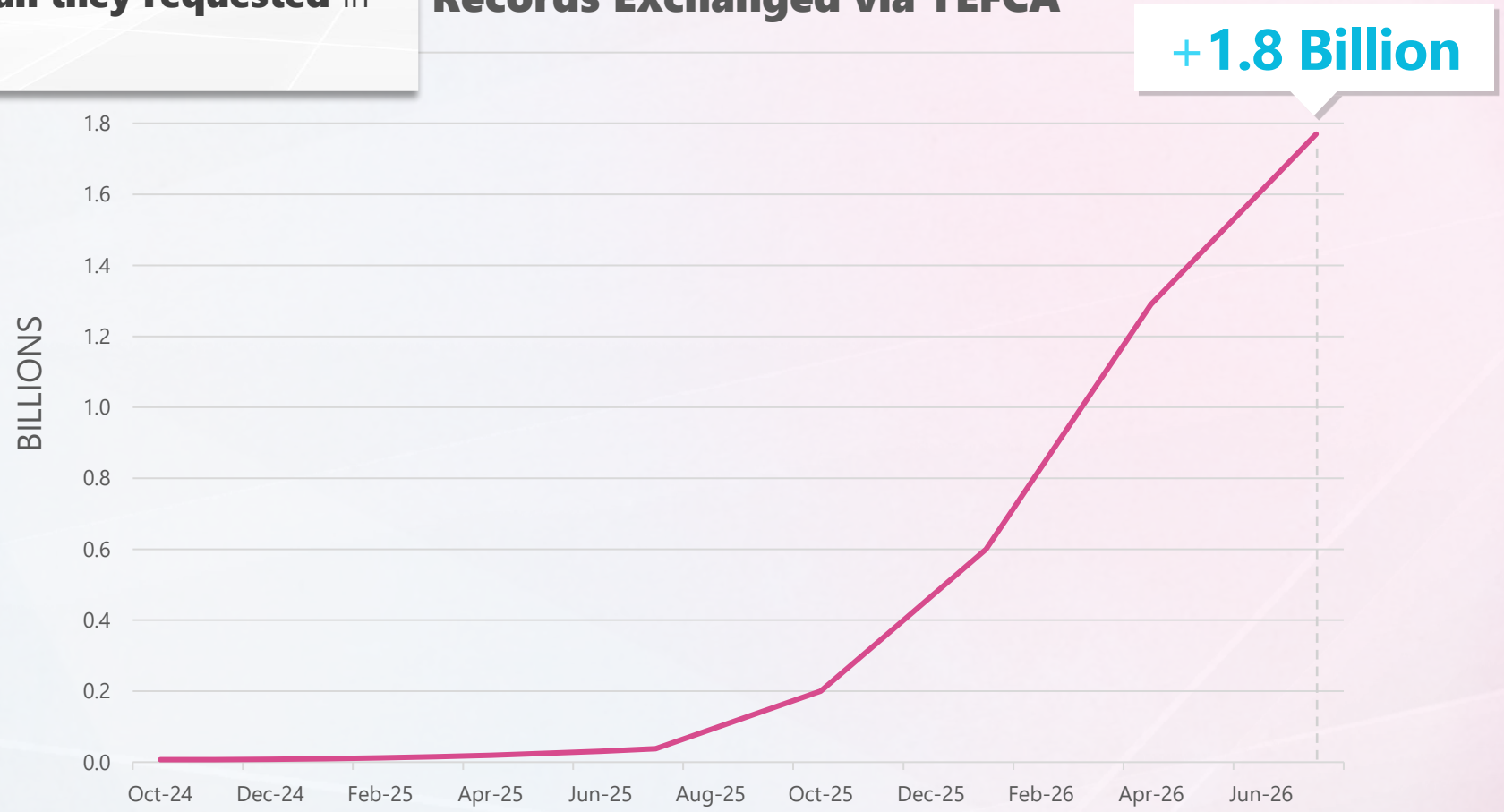
Joint Caucus:
12 meetings

Source: TEFCA RCE Monthly Informational Call 7/21/2026

Overall Exchange

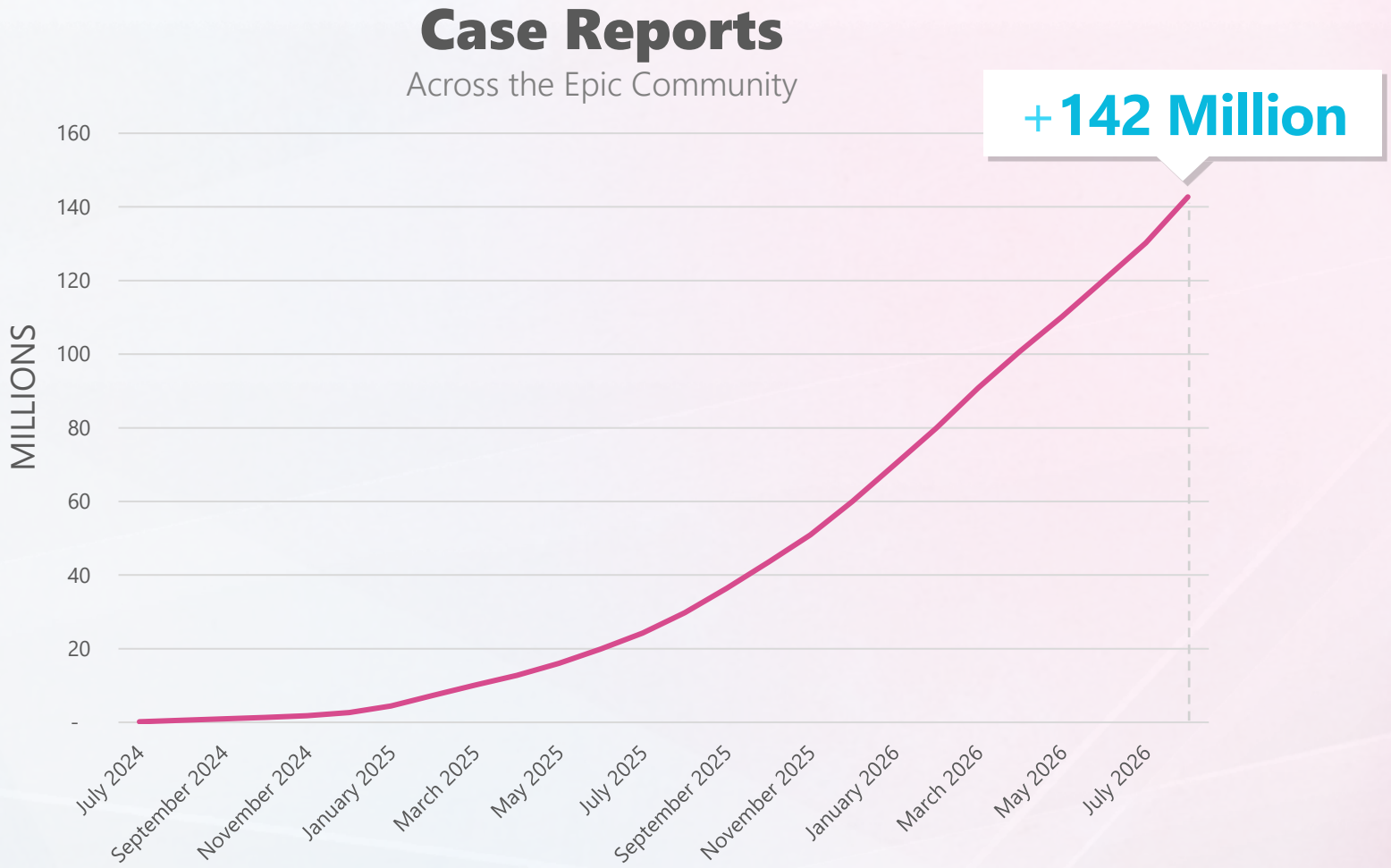
In the month of August, the Epic community shared **10 times more records than they requested** in TEFCA

Records Exchanged via TEFCA



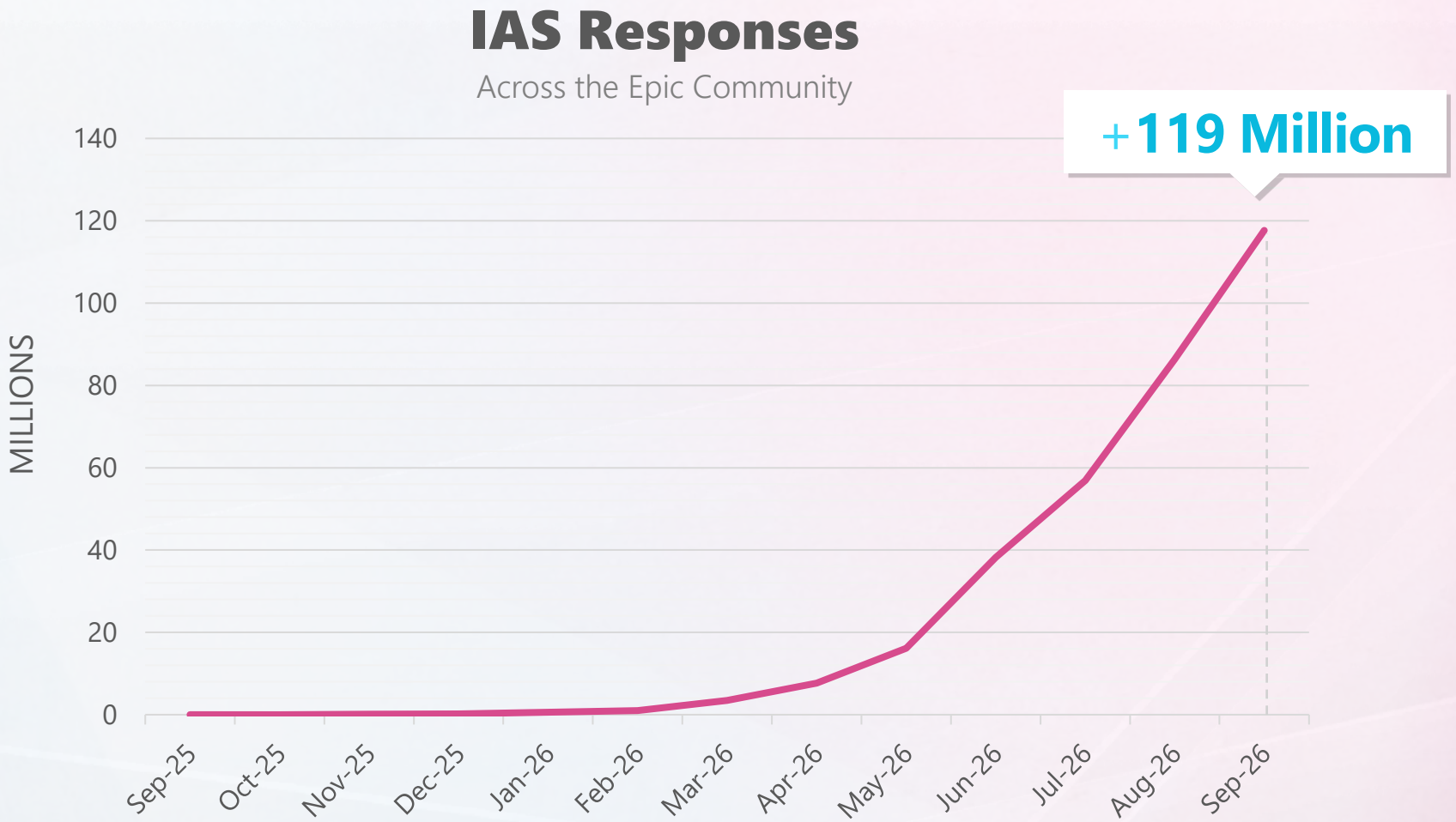
SOURCE: TEFCA RCE Monthly Informational Call 9/15/2026

Public Health Reporting at Scale



SOURCE: Epic Data

Patient Access at Scale



SOURCE: Epic Data

Government Benefits

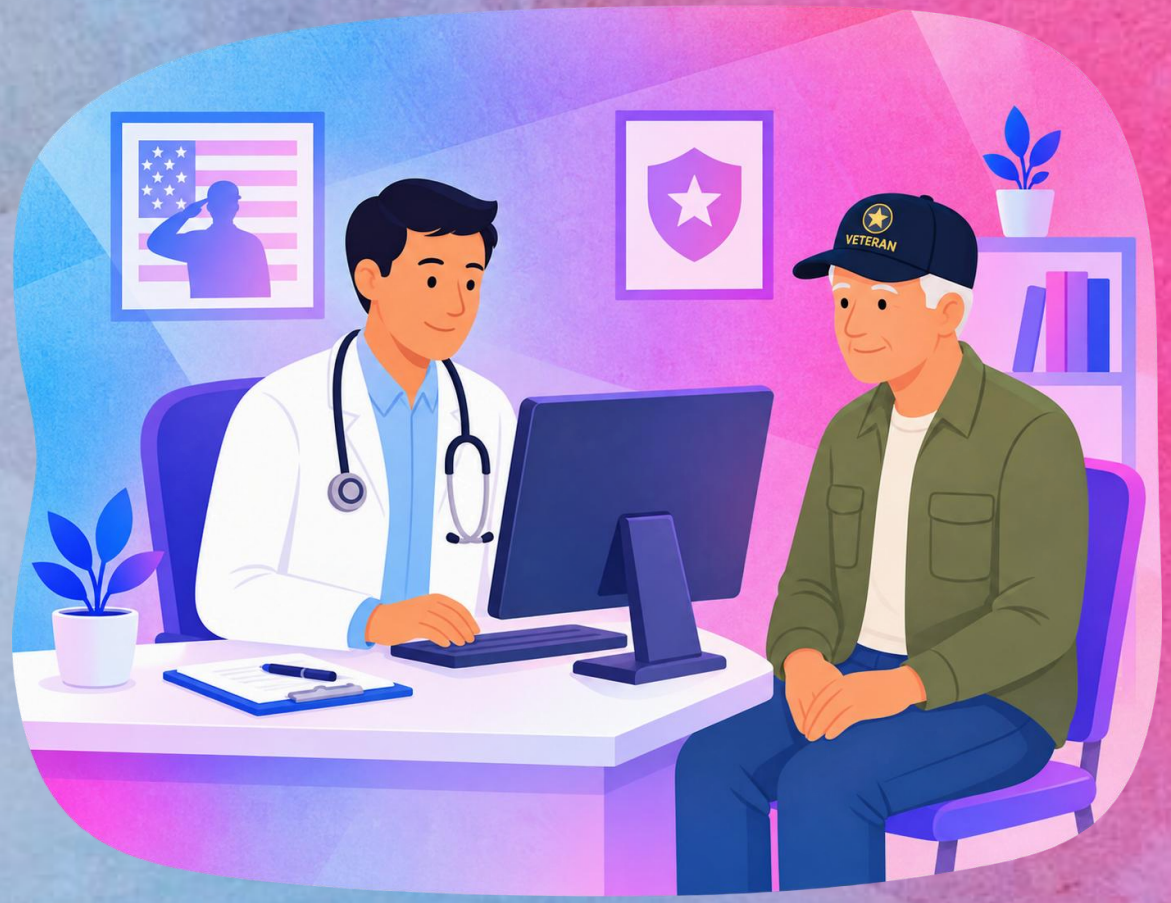
Health systems on Epic are first to connect with the Social Security Administration through TEFCA

April 8, 2026

Customers of Epic are the first to share medical records with the Social Security Administration (SSA) through TEFCA, the federally sponsored interoperability network.

Patients receive their benefits up to <u>50% faster</u> with electronic exchange

Government Benefits



Payment & Operations



Payment & Operations

Care Coordination is Coming!

May 2027

Electronic Prior Authorization (CMS-0057 APIs)

Idea

Future Possible Use Cases



Ideas

TEFCA Will Scale Further



New Types of Actors

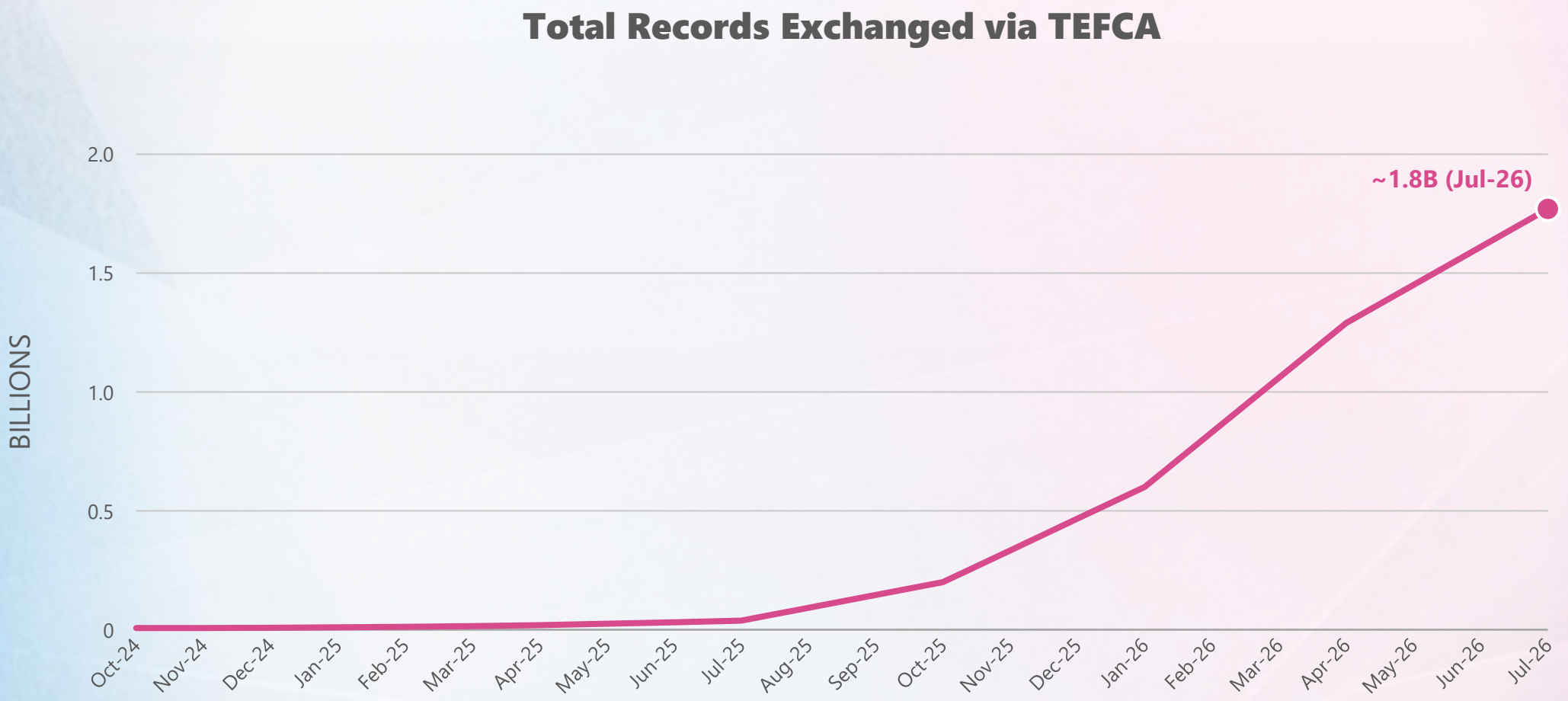


New Exchange Purposes



Last Mile of Interoperability

TEFCA Will Scale Further

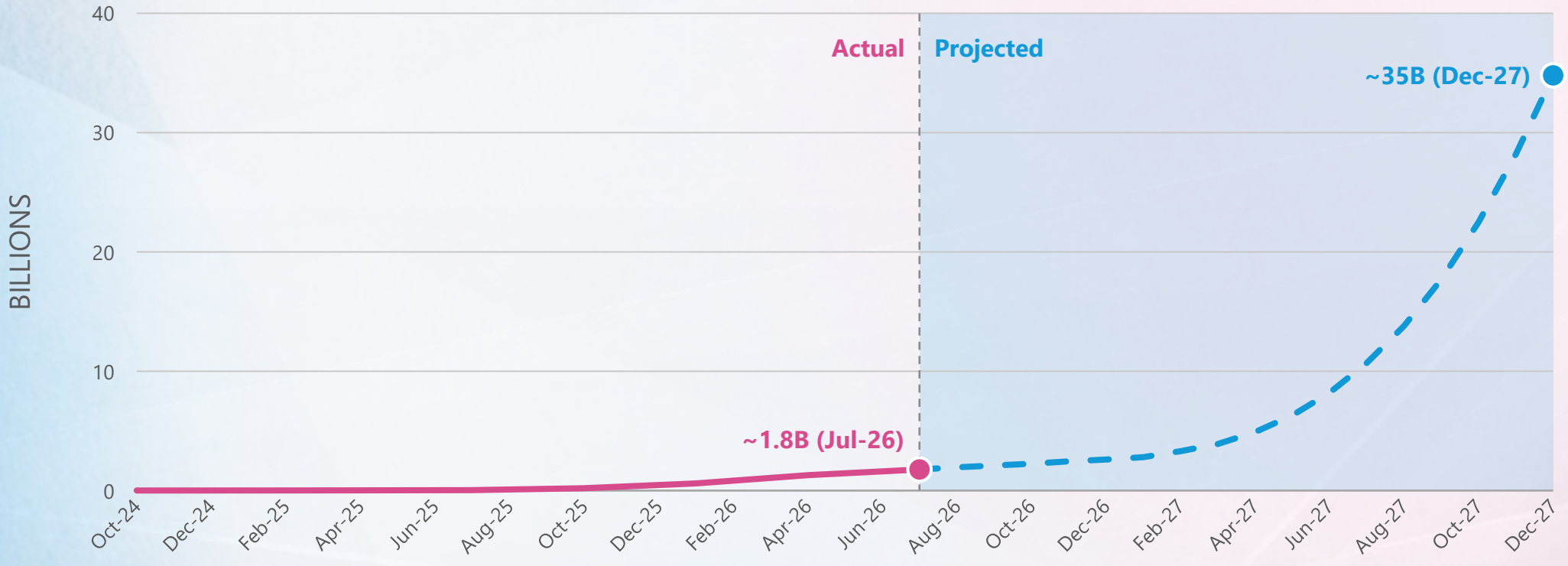


SOURCE: TEFCA RCE Monthly Informational Call 9/15/2026

TEFCA Will Scale Further

Total Records Exchanged via TEFCA: Projections

Estimated volume based on projected TEFCA adoption

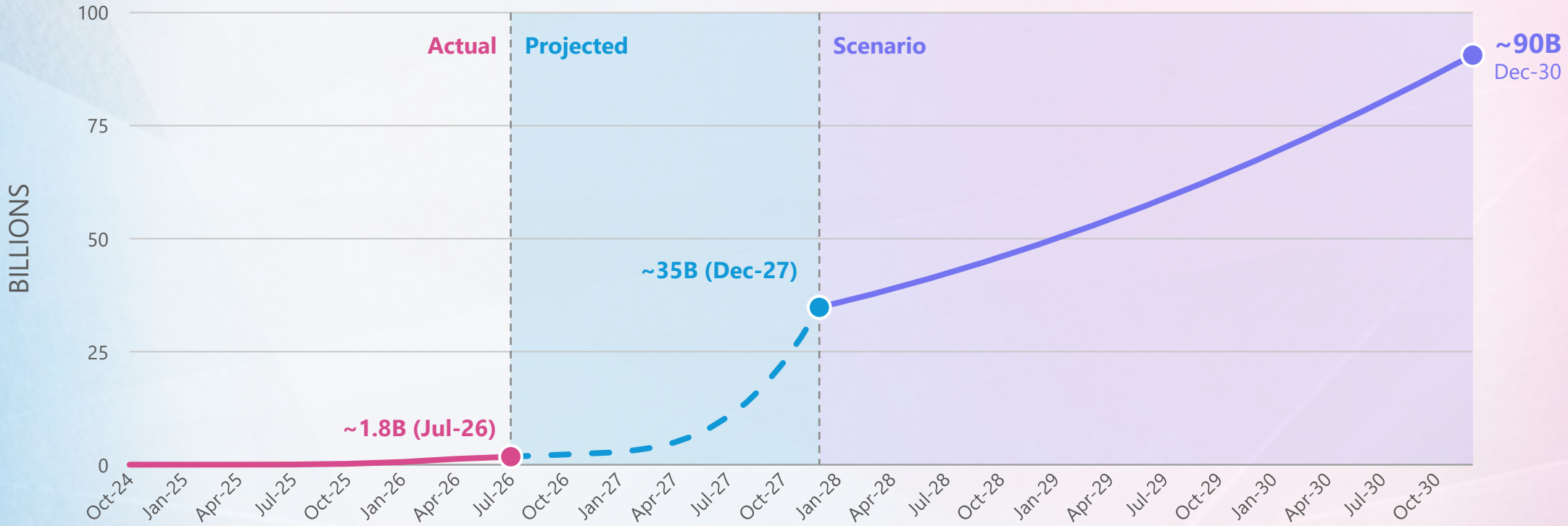


Projections and scenarios are illustrative.

TEFCA Will Scale Further

Total Records Exchanged via TEFCA: Scenarios to 2030

Scenario 1: TEFCA becomes the universal on-ramp for treatment and patient access

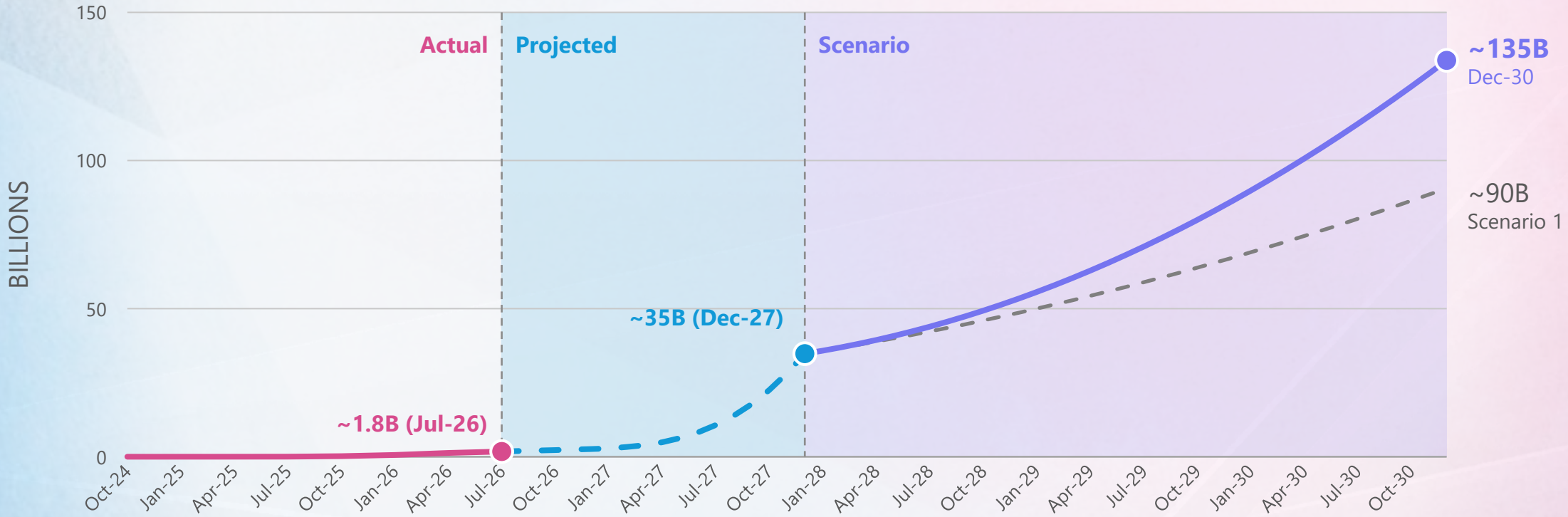


Projections and scenarios are illustrative.

TEFCA Will Scale Further

Total Records Exchanged via TEFCA: Scenarios to 2030

Scenario 2: Scenario 1 + growth in payment & operations

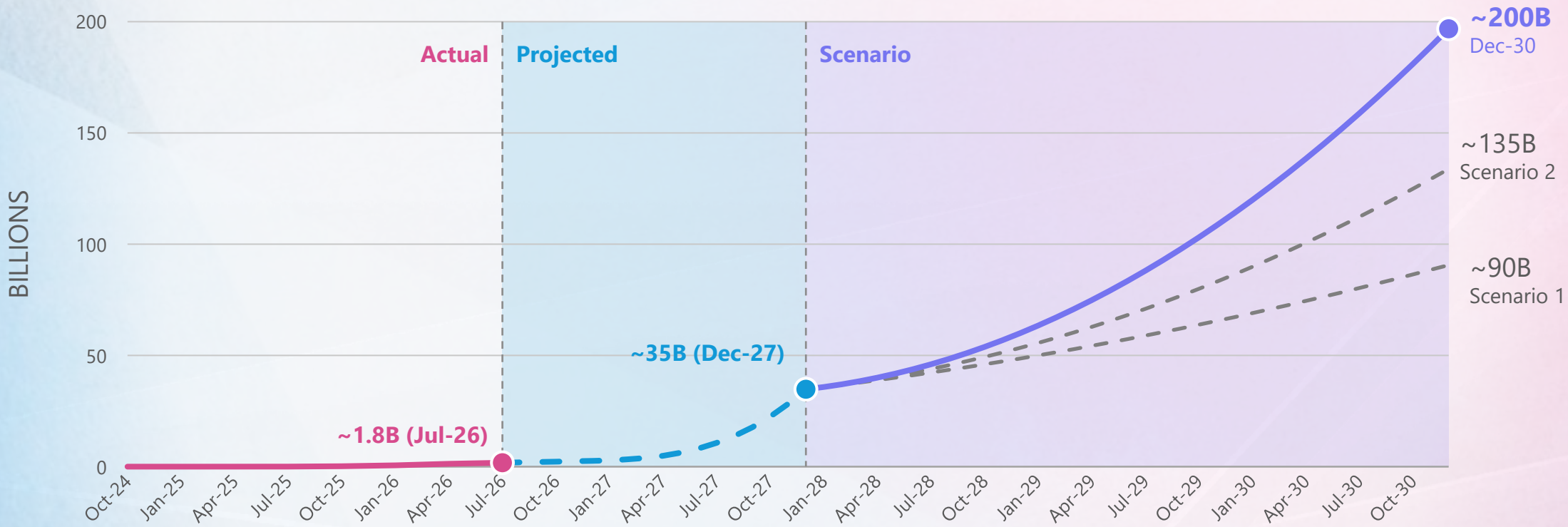


Projections and scenarios are illustrative.

TEFCA Will Scale Further

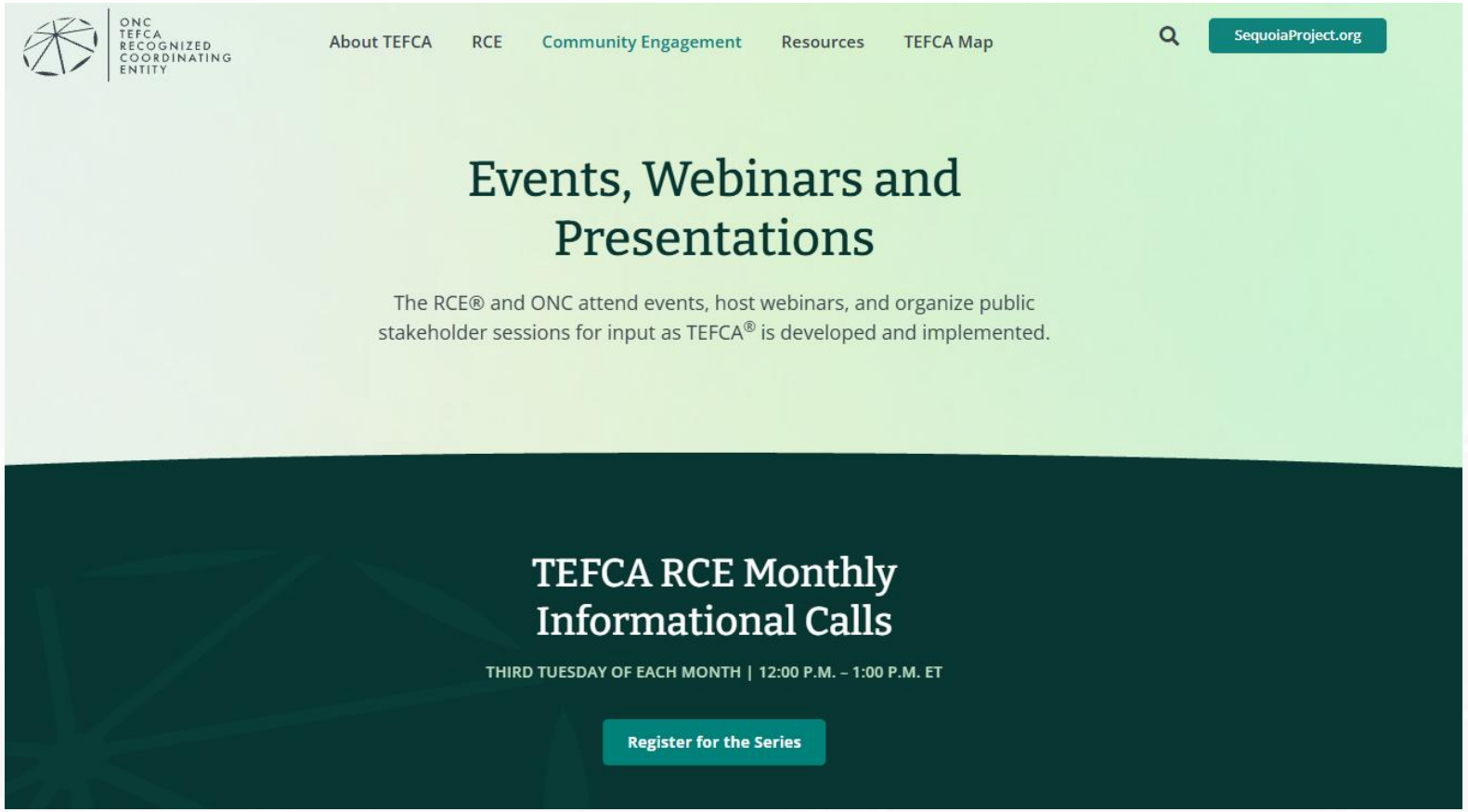
Total Records Exchanged via TEFCA: Scenarios to 2030

Scenario 3: Scenario 2 + new use cases



Projections and scenarios are illustrative.

Get Involved



https://rce.sequoiaproject.org/tefca

The CMS Health Tech Ecosystem Pledge

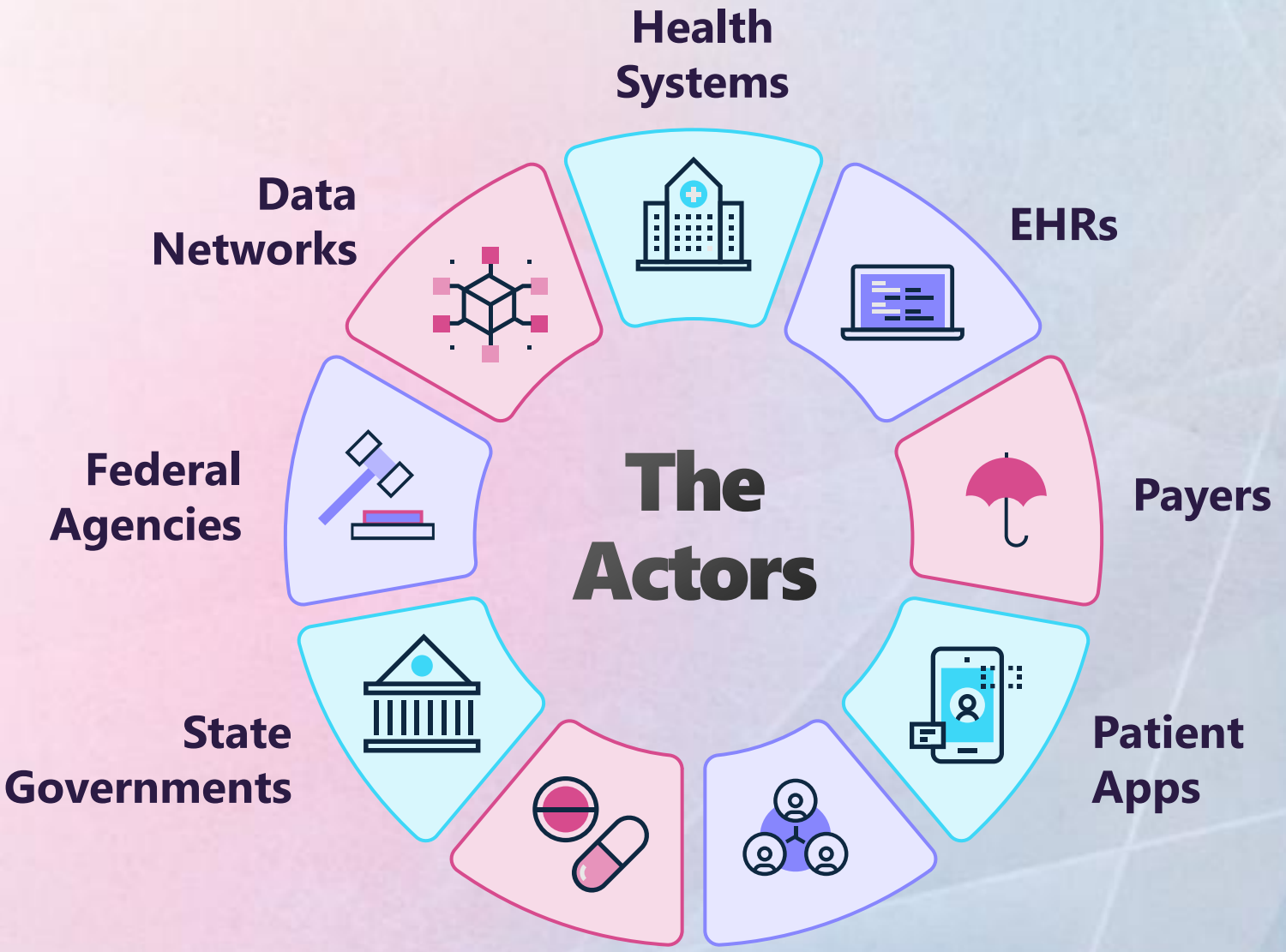
What is the Health Tech Ecosystem?

- A CMS initiative launched in 2025 to accelerate interoperability
- A voluntary pledge
- Organized around pledge categories and workgroups, coordinated via Slack and CMS events
- A fast & iterative approach to solving problems

The Opportunity

- Rapid iteration
- Anyone can have a seat at the table
- Impact proportional to effort
- Co-design with other stakeholders
- Solve problems

The Actors


Health Systems
EHRs
Payers
Patient Apps
Friends of the Ecosystem
Pharmacy Systems
State Governments
Federal Agencies
Data Networks

(Some of) The Workgroups

Digital Identity

Aligning IAL2 Tokens and developing matching algorithms

Kill the Clipboard

Developing Implementation Guidance for patient-directed sharing

National Provider Directory

Building a single trusted healthcare directory

Patient Preferences

Defining templates and pathways for data sharing decisions

Data Networks

Core architecture – establishing connectivity between the actors

Payers

Joining networks, supporting exchange, and prior authorization

Patient Apps

Achieving outcomes: Conversational AI, managing chronic diseases

Health Systems

Joining networks, supporting exchange, and adopting solutions

Electronic Prior Auth

Aligning on expectations, testing, and adopting 0057s APIs

Clinical Trials Matching

Identifying data and methods which would improve matching

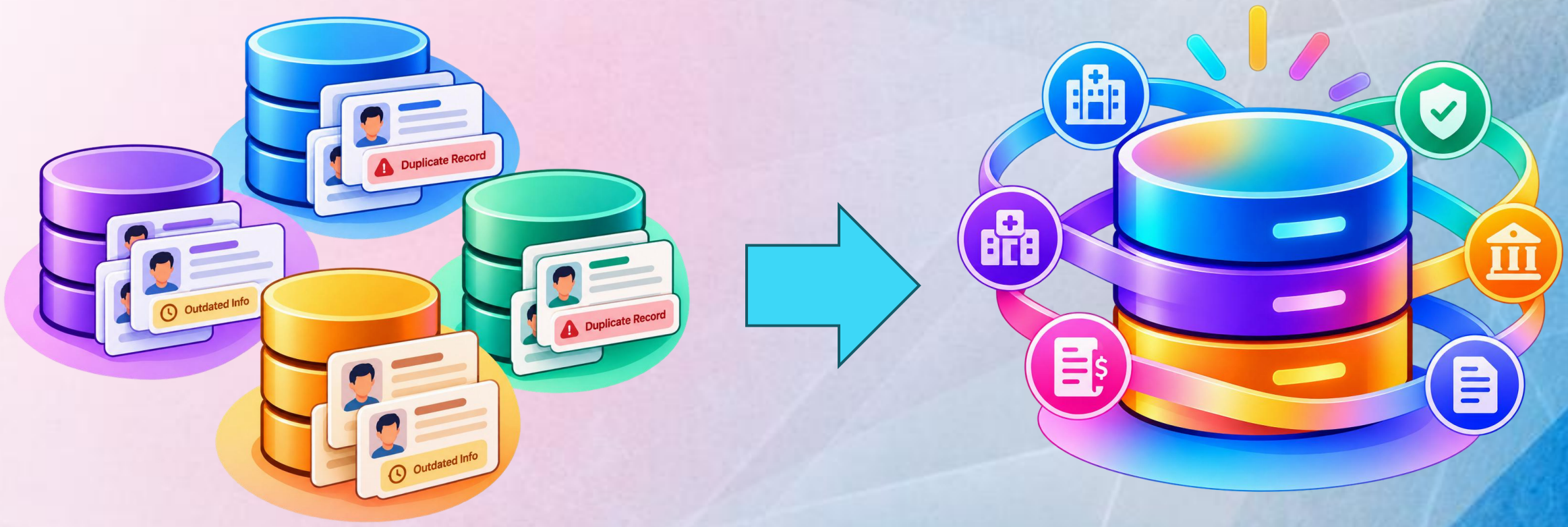
Price Transparency

Aligning on standards for data sharing and improving ease-of-use for patients

Diagnostic Image Exchange

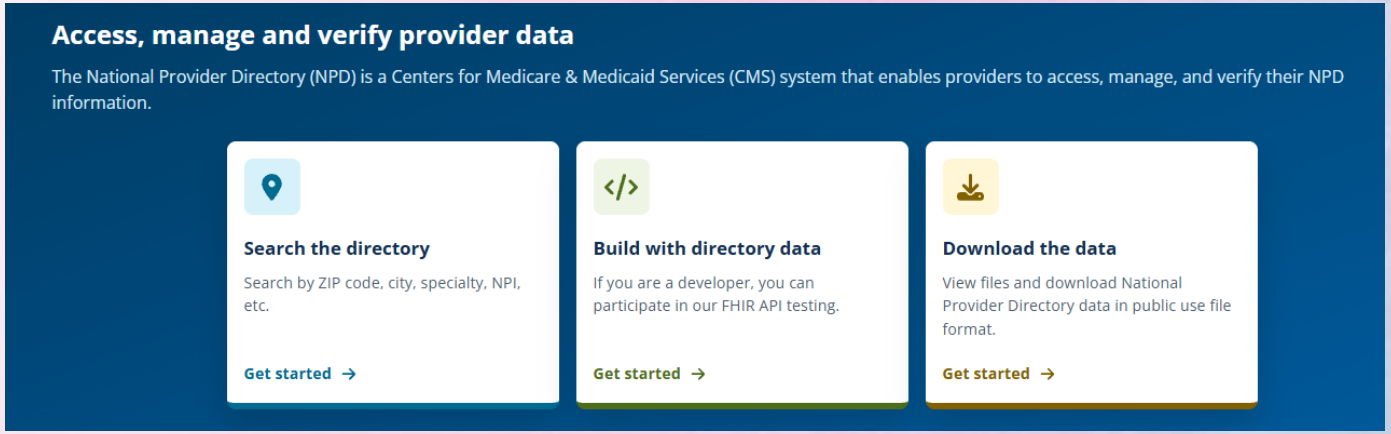
Defining specifications for exchange and language for formal pledge

Case Study: National Provider Directory



Case Study: National Provider Directory

- Access the Provider Directory at https://directory.cms.gov/



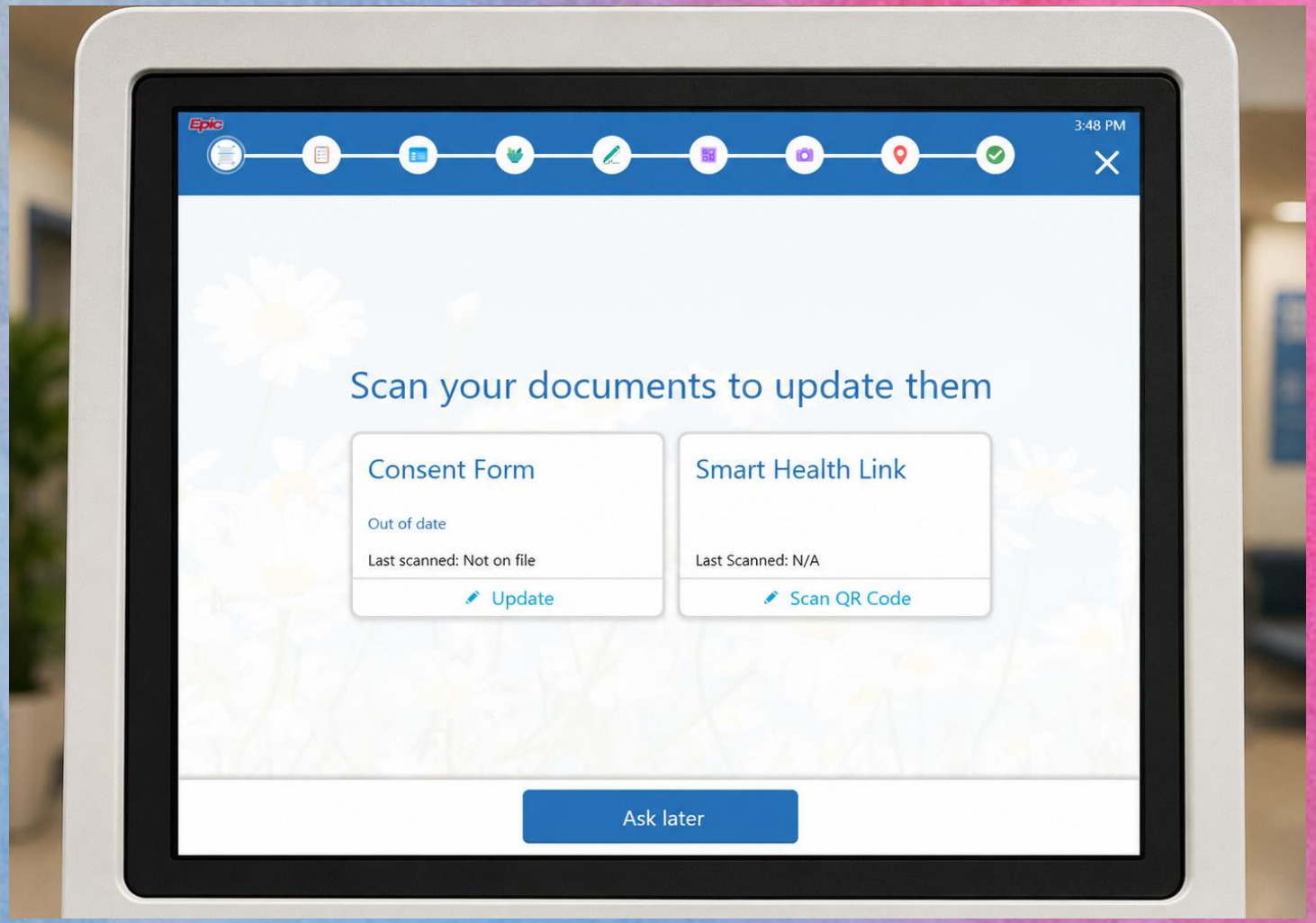


Case Study: Kill the Clipboard



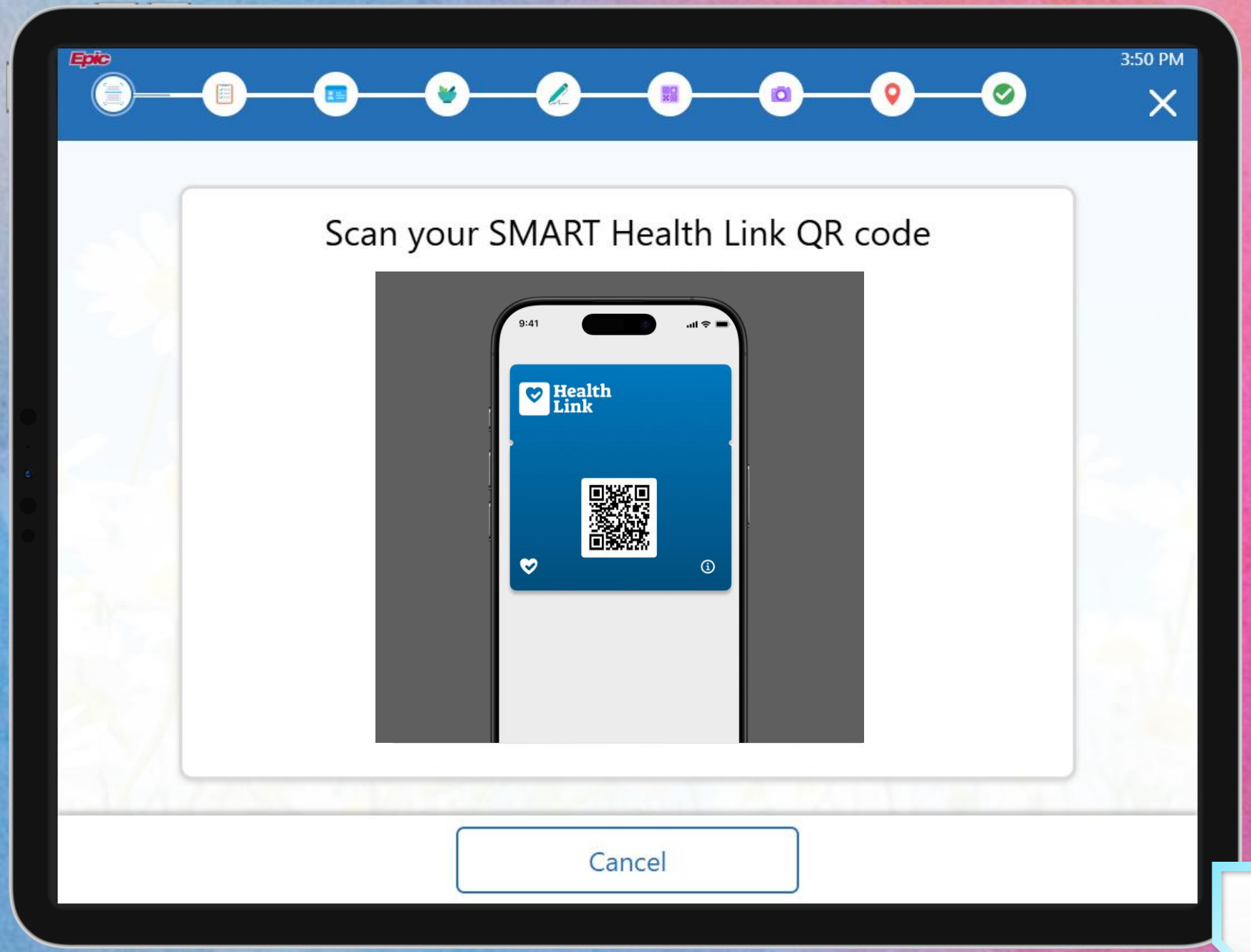
Feb 2026

Workflow in Epic



Feb 2026

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Feb 2026

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Example KTC Report



Patient Health Summary for Physician

Prepared by Patient using HealthAssist AI | May 10, 2024

This summary was generated from my personal health records and may not include all details.

Name: Jordan Smith
Date of Birth: 04/14/1985 (Age 40)
Sex: Female
Last Updated: May 10, 2024

AI Summary for My Doctor

I am a 40-year-old female with type 2 diabetes, hypertension, and high cholesterol, all generally well controlled on medication. My recent labs show good control of blood sugar (A1c 6.8%) and stable kidney function. I have a penicillin allergy (rash) and a history of appendectomy (2010). My main concerns for this visit are persistent fatigue and occasional shortness of breath with exercise over the past 2 months.

Key Takeaways

- Chronic conditions stable overall
- A1c 6.8% (at goal)
- Blood pressure controlled
- No kidney issues
- Reports fatigue and exertional shortness of breath (new)

Key Medical Conditions

Condition	Diagnosed	Status
Type 2 Diabetes Mellitus	Jan 2020	Controlled
Essential Hypertension	Mar 2019	Controlled
Hyperlipidemia	Aug 2021	Controlled
Asthma (Exercise-induced)	Childhood	Mild, Intermittent

Current Medications

Medication	Dose	Purpose
Metformin	500 mg twice daily	Diabetes
Lisinopril	10 mg daily	Blood pressure
Atorvastatin	20 mg daily	Cholesterol
Omeprazole	20 mg daily	Acid reflux
Albuterol Inhaler	2 puffs as needed	Asthma (rescue)

Allergies

Allergen	Reaction
Penicillin	Rash (Moderate)
Shellfish	Anaphylaxis (Severe)

Immunizations

Vaccine	Status	Date
Influenza	Up to date	Oct 12, 2023
COVID-19 (Moderna)	Up to date	Sep 20, 2023
Tdap	Up to date	Aug 15, 2018
Pneumococcal (PCV20)	Up to date	Jan 5, 2022

Recent Vital Signs

Date	Blood Pressure (mmHg)	Heart Rate (bpm)	Temperature (°F)	O_2 Sat (%)	Weight (lb)	BMI
May 10, 2024	118/76	72	98.4	98	165	27.0
Jan 15, 2024	122/78	68	98.6	99	168	27.5
Aug 22, 2023	120/80	70	98.1	98	170	27.8

Recent Lab Results

Test	Result	Reference Range	Date
Hemoglobin A1c	6.8%	4.0 – 5.6%	May 8, 2024
LDL Cholesterol	142 mg/dL	< 100 mg/dL	May 8, 2024
Creatinine	0.9 mg/dL	0.6 – 1.2 mg/dL	May 8, 2024
eGFR	92 mL/min	≥ 60 mL/min	May 8, 2024
Potassium	4.1 mmol/L	3.5 – 5.0 mmol/L	May 8, 2024
TSH	2.3 mIU/L	0.4 – 4.0 mIU/L	May 8, 2024

Recent Medical Encounters

Date	Visit Type / Reason	Provider / Facility	Key Findings / Notes
May 10, 2024	Primary Care – Annual Visit	Dr. Emily Carter, MD Riverton Medical Group	Overall stable. Discussed fatigue and shortness of breath with exercise.
Jan 15, 2024	Urgent Care – Respiratory Infection	Riverton Urgent Care	Viral upper respiratory infection. Resolved.
Aug 22, 2023	Primary Care – Follow-up	Dr. Emily Carter, MD	A1c improved to 6.7%. Continue current medications.

Surgical and Hospitalization History

Date	Procedure / Reason	Facility	Notes
May 2010	Appendectomy	Riverton General Hospital	No complications
Mar 2015	Hospitalization – Asthma Exacerbation	Riverton General Hospital	1 day, recovered fully

Social History

Smoking	Never
Alcohol	1–2 drinks per week
Recreational Drugs	None
Exercise	Walk 3–4 times per week
Diet	Generally balanced; working on lower carbs
Occupation	Marketing Manager
Living Situation	Lives with spouse; no children

Case Study: Kill the Clipboard

- Initial goal defined by pledge
- **February 2026:** Specification developed
- **March 2026:** Testing on the floor at HIMSS
- **August 2026:** General Availability for whole Epic Community
  - Providence first to go live



What's Next for KTC Workgroup?

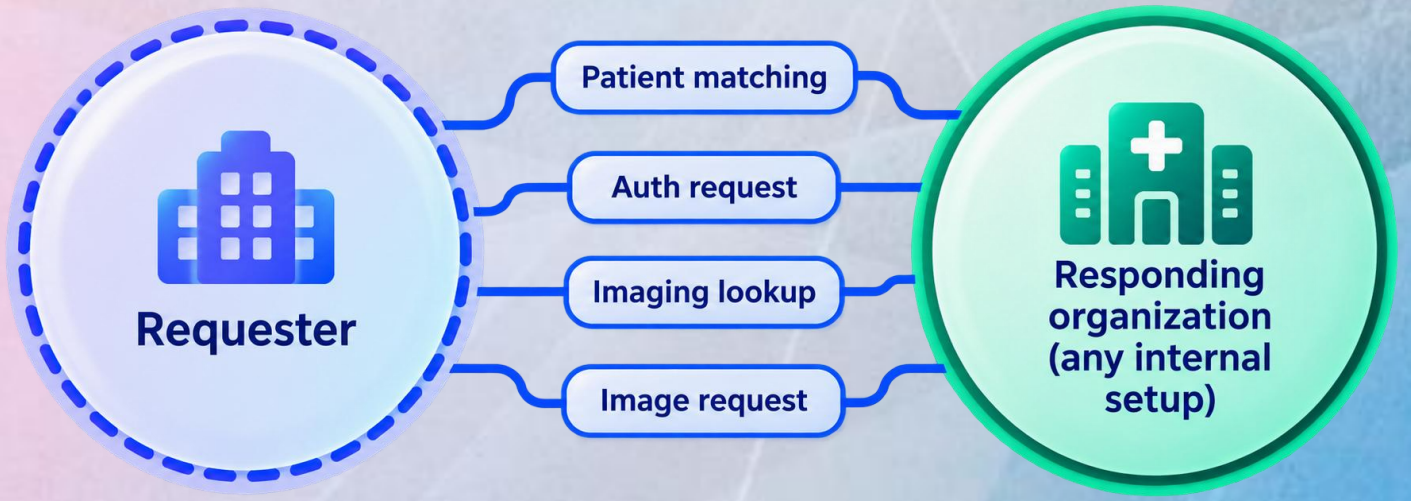
- New pattern to allow for pre-check-in workflow
- Structured data retrieval & reconciliation
- Sharing patient endpoints for direct querying

Case Study: Ditch the Disc

- **Problem**: Patients are still using CDs to transfer diagnostic quality images between their providers
- **Solution**: Workgroup designing pledge language and implementation specifications

Case Study: Ditch the Disc

- Epic recommendations:
  - DICOMweb
  - FHIR ImagingStudy
  - Facilitated FHIR exchange via TEFCA
- Playbook available now on Open.Epic.Com



Get involved

- Learn more on the CMS Health Tech Ecosystem Pledge Website
- Fill out CMS interest form to get started

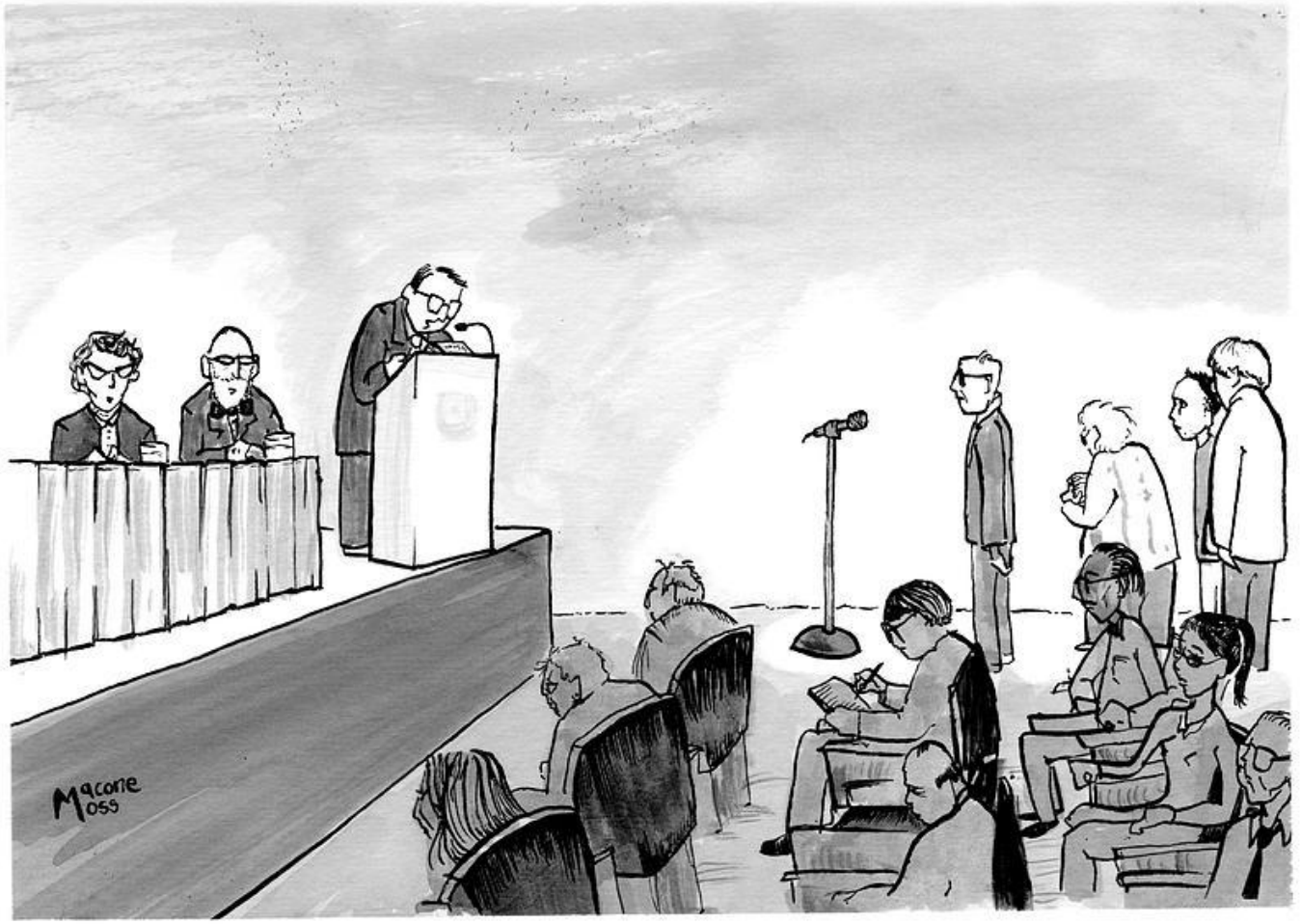


Join CMS in Making Health Tech Great Again

Is your company interested in joining? Please fill out this pledge form to express your interest.

Wrap Up

Q&A



"We'd now like to open the floor to shorter speeches disguised as questions."

Wrap Up

Harry Freedman | hfreedma@epic.com

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