

FAQ: ONC Health Data, Technology, and Interoperability: Patient Engagement, Information Sharing, and Public Health Interoperability (HTI-2) Proposed Rule

Updated: July 2024

Background

On July 10, 2024, the Office of the National Coordinator for Health Information Technology (ONC) released the Health Data, Technology, and Interoperability: Patient Engagement, Information Sharing, and Public Health Interoperability (HTI-2) [proposed rule](#). This rule reflects ONC's efforts to advance interoperability and improve information sharing among patients, providers, payers, and public health authorities. A comprehensive set of [fact sheets](#) from ONC offers further details on the specific proposals in HTI-2.

The proposed rule builds on policies included in the ONC Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing (HTI-1) final rule, which was released in January 2024 and focused on algorithm transparency, information blocking, and additional updates to the ONC Health IT Certification Program.

Key Provisions

- Two sets of new certification criteria are designed to enable health IT for public health as well as health IT for payers to be certified under the ONC Health IT Certification Program, including:
 - Public health-oriented certification criteria to support the Centers for Disease Control and Prevention's (CDC) ongoing Data Modernization Initiative; and
 - Payer-oriented certification criteria supporting technical requirements for electronic prior authorization as detailed in the [CMS Interoperability and Prior Authorization final rule](#).
- Addition of two information blocking exceptions and slight revisions to several others, including:
 - The Protecting Care Access Exception covering actors limiting electronic health information (EHI) sharing to reduce a risk of potentially exposing patients, providers, or persons who facilitate care to legal action based on the fact that they sought, obtained, provided, or facilitated reproductive healthcare. The proposed exception also covers actors limiting the sharing of EHI related to reproductive health to protect a patient from potential exposure to legal action;
 - The Requestor Preferences Exception providing actors a framework under which they can be confident they will not be committing information blocking if they agree to a requestor's ask for limitations on the amount, conditions, and when EHI is made available to the requestor; and
 - Revisions to existing exceptions including the expansion of the application of the Privacy Exception to support actors' practices that protect the privacy of patients' health information and updating the Infeasibility Exception to offer actors more clarity and flexibility under certain conditions.

- Requires the adoption of United States Core Data for Interoperability (USCDI) version 4 by January 1, 2028 with new data elements focused on areas including advancing public health, health equity, and social determinants of health use cases.
- Establishes certain Trusted Exchange Framework and Common Agreement (TEFCA) governance rules, including provisions that will establish the qualifications necessary for an entity to receive and maintain designation as a Qualified Health Information Network (QHIN) and procedures governing QHIN onboarding and designation, suspension, termination, and administrative appeals to ONC
- Advances FHIR-based capabilities through adoption of the HL7 FHIR Bulk Data Access v2.0.0: STU 2 implementation specification (Bulk v2 IG).
- Technology and standards updates that build on the HTI-1 final rule, including certification requirements for linking to imaging systems and exchanging clinical images, a real time prescription benefit tool that will allow providers at the point of care to help patients understand their insurance coverage for prescriptions, and the addition of multi-factor authentication support.

If you have questions about the provisions in the proposed rule, please contact the AHIMA Policy & Government Affairs team at advocacy@ahima.org.