

CAQH Committee on Operating Rules for Information Exchange (CORE)  
FAQs Part A: General CAQH CORE

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CAQH CORE is the authoring entity for two sets of ACA Section 1104 mandated national operating rules.

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I. Overview of CAQH CORE

1. What is CAQH CORE?

The Committee on Operating Rules for Information Exchange (CORE) is a multi-stakeholder initiative of CAQH. CAQH CORE was established in 2005 with the mission to build consensus among healthcare industry stakeholders on a set of operating rules that facilitate administrative interoperability between providers and health plans.

Since its inception, CAQH CORE has been structured around a model that operating rules authoring entities should take the responsibility of going above and beyond authorship in order to help drive adoption. To do this, CAQH CORE applies an integrated model in which CAQH CORE:

- Develops operating rules through broad-based stakeholder input that supports using standards.
- Develops and offers a certification program that ensures operating rules are objectively and rigorously tested, and, thus, there is a solid base of early implementers.
- Builds broad-based awareness of the operating rules.
- Provides in-depth, detailed technical knowledge and assistance through early adopters.
- Promotes operating rules adoption by a majority of all stakeholders.
- Tracks industry progress on adoption and return on investment (ROI).
- Maintains the operating rules as business needs change.
- Provides regular status updates to the industry and Federal oversight committees and agencies.

The CAQH CORE Integrated Model
2. **What is CAQH?**

CAQH, an unprecedented nonprofit alliance of health plans, networks and trade associations, is a catalyst for industry collaboration on initiatives that simplify healthcare administration. CAQH solutions:

- Promote quality interactions between plans, providers and other stakeholders
- Reduce costs and frustrations associated with healthcare administration
- Facilitate administrative healthcare information exchange
- Encourage administrative and clinical data integration

See [www.caqh.org](http://www.caqh.org) for more details.

3. **What are operating rules?**

Section 1104(1) of the [Patient Protection and Affordable Care Act (ACA)](http://aca.hhs.gov) defines operating rules as “the necessary business rules and guidelines for the electronic exchange of information that are not defined by a standard or its implementation specifications”. Operating rules build on existing standards to make electronic transactions more predictable and consistent, regardless of the technology. By addressing the rights and responsibilities of all parties, security, transmission standards and formats, response time standards, liabilities, exception processing, error resolution and more, operating rules facilitate interoperability among parties who exchange healthcare data. Beyond reducing cost and administrative hassles, operating rules foster trust among all participants.

CAQH CORE Operating Rules are based on principles similar to those that govern ATM networks and direct deposit banking in the banking industry, as well as those that maintain and facilitate electricity flow in the power industry.

4. **Why develop operating rules for exchange of healthcare administrative information?**

The initial HIPAA standards provide a foundation for the exchange of administrative information, but do not go far enough to promote interoperability. Operating rules address gaps in standards, help refine the infrastructure that supports electronic data exchange, and recognize interdependencies among transactions. Current healthcare operating rules build upon a range of standards – healthcare specific (e.g., ASC X12) and industry neutral (e.g., OASIS, W3C, NACHA CCD+) – and support the national HIT agenda.

Operating rules promote interoperability between the numerous stakeholders that create, send, and/or transmit administrative healthcare information and address both data content of transactions and infrastructure. Interoperability ensures that information can be uniformly requested, provided, and understood by all stakeholders. The [Phase I](http://www.caqh.org) and [Phase II](http://www.caqh.org) CAQH CORE Operating Rules, for example, streamline the way eligibility/benefits and claim status healthcare administrative information is exchanged electronically. Easier, more reliable access to this information at the point of care can reduce the amount of time providers spend on administration by improving the accuracy of claims submitted, providing enhanced information on patient financial responsibility, and checking the status of a patient claim electronically.

5. **What are the CAQH CORE Guiding Principles and where can they be located?**

CAQH CORE rule-writing and other interdependent activities are based upon a clear set of Guiding Principles. The CAQH CORE Guiding Principles drive rule development, maintenance, modification, and CORE Certification. The Guiding Principles were applied throughout Phase I, II, and Phase III rules development efforts.

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and the updating of the CAQH CORE Operating Rules for v5010. The CAQH CORE Guiding Principles are described in CAQH CORE Policies 100, 200, and 300.

6. Will CAQH CORE build a database?

No. CAQH CORE is solely focused on developing operating rules that will guide the exchange of healthcare administrative data and an integrated model that supports implementation and rule maintenance. In practical terms, this exchange will happen through existing or new infrastructure, such as clearinghouses or direct from provider to health plan. The CAQH CORE Operating Rules are vendor agnostic; providers use the vendor system of their choice to request and receive information.

7. How do the CAQH CORE Operating Rules work?

Operating rules typically do not specify technology or tools that must be used in communicating information; rather they govern how that information is exchanged. Entities that create, transmit, or use the transactions can implement the CAQH CORE Operating Rules. The CAQH CORE Operating Rules specify both data content (e.g., patient financial information) and infrastructure requirements (e.g., response time, connectivity, system availability) for the following healthcare administrative and financial transactions:

- Phase I: X12 v5010 270/271 Eligibility and Benefits Inquiry/Response
- Phase II: X12 v5010 270/271 Eligibility and Benefits Inquiry/Response and X12 v5010 276/277 Claim Status Inquiry/Response
- Phase III: X12 v5010 835 Claim Payment/Remittance Advice and Healthcare EFT Standards (NACHA CCD+ and X12 v5010 835 TR3 TRN Segment)

8. How were the CAQH CORE Operating Rules created?

The CAQH CORE Governing Procedures establish a multistage quorum-based voting process for development and approval of the CAQH CORE Operating Rules.

- Phase I CAQH CORE rules development took place from January 2005 to March 2006. Per the CORE Voting Process, over several months the CORE Work Groups created and refined draft rules for review by the CORE Steering Committee. In February 2006, the CORE Steering Committee approved the draft rules for Full CORE Voting Membership ballot. The following month the rule set was approved by the Full CORE Voting Membership via official ballot.
- Phase II CAQH CORE rules development took place from May 2006 to June 2008. Building upon the Phase I Rules, the CORE Work Groups created a set of draft rules for review by the CORE Steering Committee. In June 2008, the CORE Steering Committee approved the draft rules for Full CORE Voting Membership ballot and the rules were approved by the Full CORE Voting Membership.
- Phase III CAQH CORE rules development took place from April 2011 to June 2012. Building upon the Phase I & II Rules, the CORE Work Groups created a set of draft rules for review by the CORE Steering Committee. The CORE Steering Committee approved the draft rules for Full CORE Voting Membership ballot and the rules were then approved by the Full CORE Voting Membership.

9. How will the CAQH CORE Rules be updated?

Changes to the CAQH CORE Operating Rules are categorized as major (for example, additional rule requirements or clarifications to a rule, or a new CAQH CORE Operating Rules Phase) or minor (for example, changes due to a typo or grammatical error). Minor modifications do not require CORE-certified entities to

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complete re-certification. Major changes (e.g., a new set of operating rules) may require completing the applicable CORE Certification or Endorsement process and payment of all applicable fees. Major changes will only occur after the Full CORE Membership approves, by formal vote, major modifications, changes, or deletions to the rules.

Generally, CAQH CORE Operating Rules will not be amended between CAQH CORE Rule versions unless government regulations are issued that impact the rules or problems arise upon implementation which need to be addressed. In this scenario, adoption of the modified rule(s) by CORE-certified entities will be within a reasonable timeframe, but will acknowledge/comply with Federal mandates. See the CORE Certification Policies (Phase I, Phase II, & Phase III) for more information.
II. Introduction to CORE Participation

1. How can entities become involved in the CAQH CORE rules development process?

CAQH CORE uses an open, transparent process to draft its operating rules and any entity is welcome to join this process. Currently, over 130 entities, representing different stakeholder types, participate in CAQH CORE rules development. The CAQH CORE Operating Rules are developed in a phased approach that establishes milestones to encourage feasible progress in resolving industry business needs while minimizing barriers to implementation. The CAQH CORE Governing Procedures establish a multistage voting process for development and approval of the CAQH CORE Operating Rules.

Participation in CAQH CORE rule-making is open to any interested healthcare stakeholder, including health plans, providers, technology companies, government entities, trade associations, vendors, and standard-setting organizations. Please refer to the CORE Participation Application for information on how to become a CAQH CORE Participating Organization.

Only CORE Participating Organizations may directly vote on development of the CAQH CORE Operating Rules. Non-CORE Participating Entities can contribute at various stages of the process such as during public surveys asking for input, in response to Public CAQH CORE Town Hall calls or via the CMS process for comment on draft regulations.

2. How is CORE Participation different from CORE Certification and CORE Endorsement?

CORE Participating Organizations support the rules-making process by providing expertise and input through a consensus building process. Participation in the CAQH CORE rules development process is open to any interested healthcare stakeholder, including health plans, providers, technology companies, government entities, trade associations, vendors, financial institutions, and standard-setting organizations. Only organizations that join CAQH CORE as Participants may contribute to the CAQH CORE rules development process via CORE Subgroup and Work Group efforts. See the CORE Participation Application for further information.

CORE Certification means an entity has demonstrated its conformance with the CAQH CORE Operating Rules by signing a CORE Certification Pledge committing its IT systems to perform according to the CAQH CORE Operating Rules and completing certification testing with a CAQH CORE-authorized testing vendor. Entities that have successfully completed CORE Certification testing will receive a CORE Certification Seal for the appropriate phase of CAQH CORE Operating Rules. Once an entity obtains its respective CORE Certification Seal, it can market itself as CORE-certified.

CORE Endorsement is available for entities that do not create, transmit, or use administrative healthcare transactions, and therefore cannot implement the CAQH CORE Operating Rules. CORE Endorser Organizations demonstrate their support for the CAQH CORE mission and the CAQH CORE Operating Rules by signing the CORE Endorser Pledge for the appropriate phase and applying for the respective CORE Endorser Seal. Endorsers may or may not be CORE Participating organizations; there is no fee to obtain the CORE Endorser Seal.

For more information on CORE Certification and CORE Endorsement, see the CAQH CORE FAQs Part F: ACA Section 1104 Certification, CORE Certification, Proposed CORE HIPAA Credential, and CORE Endorsement.
3. How do I become a CORE Participant?

CORE Participation is open to any interested healthcare stakeholder, including health plans, providers, technology companies, government entities, trade associations, vendors, and standard-setting organizations. See CORE Participating Organizations for a list of current participants. Please refer to the CORE Participation Application for information on how to become a CORE Participant.

4. Do all CAQH CORE Participating Organizations or CORE-certified entities contract with one another (become trading partners) by participating in CAQH CORE?

No. CAQH CORE will not be involved in trading partner relationships, will not dictate contractual relationships between trading partners, and will not determine with whom and how health plans/providers/vendors/others conduct their contracting. This includes entities that decide to become CORE-certified. This said, some entities that are CORE-certified require their trading partners to become CORE-certified, but that is the choice of that entity, it is not CAQH CORE policy. See the CORE Certification Policies (Phase I, Phase II, & Phase III) for more information.

For more information on CORE Certification and CORE Endorsement, see the CAQH CORE FAQs Part F: ACA Section 1104 Certification, CORE Certification, Proposed CORE HIPAA Credential, and CORE Endorsement.
III. Introduction to CORE Certification and CORE Endorsement

For policies related to CORE Certification and Endorsement, including guidance on the steps to achieve CORE Certification or become a CORE Endorser, please see CAQH CORE FAQs Part F: ACA Section 1104 Certification, CORE Certification, Proposed CORE HIPAA Credential, and CORE Endorsement.

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IV. CAQH CORE Measures of Success

1. What is the “CAQH CORE Measures of Success Study”?

The CAQH CORE Measures of Success Study is the method CAQH CORE used to track the financial/operational impact, by stakeholder type, of implementing the Phase I CAQH CORE Operating Rules. Specifically, volunteers from each stakeholder type tracked, quarterly, a small set of standard metrics agreed upon by the volunteering entities. The purpose of the Measures of Success Study was to:

- Support CAQH CORE’s momentum by reminding participants of the progress they are/have made
- Demonstrate market need for the CAQH CORE Operating Rules by tracking actual direct/indirect ROI benefits of the operating rule
- Provide easy story for the press/media existence and tracking of concrete health care measures of success that were developed by a group of multi-stakeholder CORE Participants
- Participating in the Measures of Success Program is not a requirement for completing CORE Certification.

2. What are the CAQH CORE Measures of Success?

The CAQH CORE Measures of Success are a realistic set of metrics (e.g., change in call volumes/EDI inquiries), by stakeholder group (health plans, front-end vendors, clearinghouses, and providers), used to measure the benefits of Phase I CAQH CORE Rules adoption. The metrics include agreed upon methodologies that were applied by each stakeholder group to track the impact of the Phase I CAQH CORE Operating Rules. Results from the Phase I CAQH CORE Measures of Success Program are published and available at http://www.caqh.org/COREIBMstudy.php.

3. Which entities participated in the Measures of Success Program?

The following entities participated in the Phase I CAQH CORE Measures of Success Program:

- Aetna, Inc.
- Blue Cross and Blue Shield of North Carolina
- Cedars-Sinai Health System
- East Carolina University School of Medicine Physicians
- Emdeon
- Health Net, Inc.
- IBM Corporation
- RelayHealth
- Montefiore Medical Center
- NaviNet, Inc.
- RealMed Corporation
- WellPoint, Inc.
V. CAQH CORE Resources and Links

1. CAQH Contact Information

CAQH  
1900 K Street, NW  
Suite 650  
Washington, DC 20006  
E: info@caqh.org  
T: (202) 517-0400  
F: (202) 517-0397

2. CORE Contact Information

CAQH Re: CORE  
1900 K Street, NW  
Suite 650  
Washington, DC 20006  
E: CORE@caqh.org  
T: (202) 517-0400

3. CAQH CORE-Authorized Testing Vendor Contact Information

Please see link for full contact information for all CAQH CORE-authorized testing vendors.

4. List of CORE Participants

Please click here for listing of CORE Participants on CAQH CORE’s website.

5. List of CORE-Certified Entities

Please click here for a listing of CORE-certified entities on CAQH CORE’s website.

6. List of CORE Endorsers

Please click here for a listing of Endorsers on CAQH CORE’s website.

7. List of Standard Development/Advisory Organizations

- Accredited Standards Committee (X12): http://www.x12.org
- American National Standards Organization: http://www.ansi.org/
- Health Level 7 (HL7): http://www.hl7.org
- NACHA: http://www.nacha.org
- NCPDP: http://www.ncpdp.org
- NCVHS: http://www.ncvhs.org
- WEDI: http://www.wedi.org/

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