CAQH Committee on Operating Rules for Information Exchange (CORE)  
FAQs Part E: CAQH CORE Operating Rules In Development

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

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I. Development of Remaining ACA-Mandated Operating Rules

1. Of the operating rules mandated by the Affordable Care Act (ACA), which have yet to be adopted?

ACA Section 1104 requires the Secretary of the Department of Health and Human Services (HHS) to adopt and regularly update operating rules for each of the HIPAA-mandated healthcare administrative transactions. HHS has not adopted operating rules for the following HIPAA-mandated administrative transactions:

- Health claims or equivalent encounter information
- Health plan enrollment/disenrollment
- Health plan premium payments
- Referral certification and authorization
- Health claims attachments

2. Will CAQH CORE be the authoring entity for the remaining ACA-mandated operating rules?

On September 12, 2012, the Secretary of HHS concurred with the recommendation from the National Committee on Vital and Health Statistics (NCVHS) that CAQH CORE be designated the authoring entity for the remaining operating rules mandated under ACA Section 1104. CORE Participants are using the open CAQH CORE rules-making process to produce a set of draft operating rules for the following transactions: health claims or equivalent encounter information, health plan enrollment/disenrollment, health plan premium payments, referral certification and authorization, and health claims attachments.

3. What is the timeline for CORE Participants to develop operating rules for health claims or equivalent encounter information, health plan enrollment/disenrollment, health plan premium payments, and referral certification and authorization?

CAQH CORE’s goal is to develop draft operating rules for the following transactions by the end of 2014: health claims or equivalent encounter information, health plan enrollment/disenrollment, health plan premium payments, and referral certification and authorization.

Note that CAQH CORE Operating Rules address both data content and infrastructure (e.g., connectivity, response time, system availability, etc.) requirements. The draft operating rules addressing the remaining ACA-mandated transactions will primarily address infrastructure. The infrastructure operating rules would apply across the remaining transactions and will build on existing draft CAQH CORE Operating Rules. (For more information on the existing draft CAQH CORE Operating Rules see “Are there any draft CAQH CORE Operating Rules in development that have not been adopted by HHS?”)

To date, CAQH CORE Operating Rules addressing Acknowledgements have been excluded from the operating rules adopted in regulation (although required for Voluntary CORE Certification). However, operating rules requiring the use of acknowledgements would create significant efficiencies for entities conducting the health claims or equivalent encounter information transaction. CAQH CORE is working to move recognition of the importance of Acknowledgements forward.

CORE Participants are currently developing operating rules for these transactions. For more information on the status of current rule development or to get involved, email core@caqh.org.

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NOTE: Only organizations that join CAQH CORE as Participants may contribute to the CAQH CORE rules development process via CORE Subgroup and Work Group efforts. 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. Any CORE Participating Organization and their representatives can join the Subgroup and any entity can become a CORE Participating Organization. See the CORE Participation Application for further information.

4. What is the timeline for adoption of a Federal standard(s) and operating rules for the health claims attachments transaction?

ACA Section 1104 requires HHS to adopt a standard, and applicable operating rules, for the health claims attachments transaction. To date, HHS has not adopted a standard for health claims attachments or indicated what standard(s) it might consider for the transaction. The CAQH CORE Board will determine the benefit of starting development of health claims attachments operating rules in advance of a transaction standard(s).

Since 2012, CAQH CORE has conducted extensive research to identify how regulatory requirements can help drive the adoption of electronic attachments. A market assessment was conducted in 2013 to identify business needs, data content and format requirements, technical infrastructure, and priorities for the exchange of attachments/additional information using administrative transactions. In 2014, CAQH CORE held listening sessions with over 300 participants to continue dialogue, discuss trends, and obtain data from current industry activities and experience. The findings of this research indicate that the vast majority of entities are still using paper to provide clinical data on a claim or other administrative transactions, and, when attachments are electronic, the most common formats are PDF, JPG, TIF, and Word.

Based on these findings, CAQH CORE supports an incremental, flexible use of operating rules to move attachments from paper to electronic documents, as recommended by NCVHS in its June 21, 2013 letter to the Secretary. For example, CAQH CORE Operating Rules could adopt requirements around a limited set of industry-neutral electronic document formats to quickly (two years) provide the industry with efficiencies and movement toward electronic formats; e.g., use of JPEG and requiring a trace number or other tracing mechanism to link an attachment to its request. Additionally, based on CAQH CORE research, it is evident that industry-wide education will be key given the current level of knowledge of specific attachment-related standards such as HL7 C-CDA. CAQH CORE will support such industry education and coordinate with key stakeholders.

After HHS adopts a standard for health claims attachments, there are additional opportunities for CAQH CORE Operating Rules, such as:

- Use of LOINC attachment type codes to identify specific document/information needed
- Workflow/business rules for unsolicited attachments
- Business rules for using Direct Data Entry (DDE) or other source
- Scenario-based adoption of structured documents
- Potential ways to reduce the number of attachments

5. How can my organization become involved in the CAQH CORE rules-making process for upcoming operating rules?

CAQH CORE uses an open, transparent rules-making process to draft its operating rules, and any entity is welcome to join this process. 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

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barriers to implementation. The CAQH CORE Governing Procedures establish a multistage voting process for development and approval of the CAQH CORE Operating Rules.

There are several avenues through which organizations can contribute to the rules-making process for the remaining ACA-mandated operating rules:

- **Become a CORE Participating Entity:** The most effective way for individual organizations to assure they have direct input on the ACA-mandated operating rules is by becoming a CORE Participating Organization.
  - Participation in the CAQH CORE rules-making process is open to any interested stakeholder, including health plans, providers, technology companies, government entities, trade associations, vendors, financial institutions, and standard-setting organizations.
  - Benefits available to CORE Participating Entities include:
    - Participation on Subgroup/Work Group calls, straw polls, and eligibility to Chair groups
    - Entity vote on CAQH CORE Work Group and Full CORE Membership voting levels
    - Access to CAQH CORE Education Sessions specific to CORE Participating Organizations
  - The cost of CORE Participation is extremely low or free; participants pay an annual membership fee based on based on the entity’s stakeholder type and net annual revenues. Refer to the CORE Participation Application for information on how to become a CORE Participating Organization.

- **Contribute as a Non-CORE Participating Entity:** While only CORE Participating Organizations may vote directly on the CAQH CORE Operating Rules, Non-CORE Participating Entities can also indirectly contribute through:
  - Public CAQH CORE Town Hall Calls
    - CAQH CORE holds bi-monthly Town Hall calls which provide attendees an update on recent activities including status of rule development and opportunities for public involvement; email core@caqh.org to be added to the distribution list
  - CAQH CORE Industry Surveys
    - CAQH CORE periodically conducts industry-wide surveys to obtain directional feedback on operating rule opportunities; email core@caqh.org to be added to the distribution list
  - Attending or listening to NCVHS hearings; a schedule of meetings is available on the NCVHS website
  - Submitting comments to:
    - CAQH CORE, comments can be submitted to core@caqh.org
    - CMS Office of E-Health Standards and Services (OESS), comments can be submitted to:
      - Geanelle Herring, Health Insurance Specialist
        - Geanelle.Herring@cms.hhs.gov
      - Denesecia Green, OEM/OESS/ASG Acting Director
        - Denesecia.Green@cms.hhs.gov

6. **Are the Draft Phase IV CAQH CORE Operating Rules available for review?**

Once they have been approved by the CAQH CORE Subgroups for CAQH CORE Work Group review, the Draft Phase IV CAQH CORE Operating Rules are made publicly available on the CAQH CORE website HERE. **NOTE:** The links are to DRAFT versions of the Phase IV CAQH CORE Operating Rules only. The draft rules are subject to change throughout the formal CORE Voting Process.

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CAQH CORE will update the industry once the draft rules have been finalized via the CORE Voting Process and highlight any adjustments. Additionally, CAQH CORE will be holding public, free education sessions in Q1 and Q2 2015 to highlight the content of the Draft Phase IV CAQH CORE Operating Rules in more detail. Please visit the CAQH CORE website HERE to view a list of upcoming education events as well as materials from past events. Additionally, please email core@caqh.org to be added to the CAQH CORE listserv to receive event announcements.

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II. Development of Voluntary Operating Rules

1. Will CAQH CORE continue to develop operating rules for voluntary industry adoption in addition to the operating rules being developed to fulfill the Affordable Care Act (ACA) mandate?

Yes. CAQH CORE was established in 2005 to build consensus among healthcare industry stakeholders on a set of voluntary operating rules that facilitate administrative interoperability between providers and health plans. Interoperability ensures that information can be uniformly requested, provided, and understood by all stakeholders. Additionally, interoperability reduces the amount of time and resources providers must exert on administrative functions – time better spent with patients.

Given the ROI to be achieved, CAQH CORE is committed to continuing to use the CAQH CORE Guiding Principles to develop healthcare operating rules for voluntary adoption by the industry. This voluntary work includes:

- Maintenance of CAQH CORE Operating Rules not adopted by HHS (e.g., CAQH CORE 150 and 151 Acknowledgments Rules)
- Completing the rule approval process for the existing draft voluntary CAQH CORE Operating Rules (e.g., Draft CAQH CORE Acknowledgements for X12 837 Claims Rule)
- Drafting new voluntary operating rules to address industry pain points and evolving business needs

2. Are there any draft CAQH CORE Operating Rules in development that have not been adopted by HHS?¹

Yes. CAQH CORE was established in 2005, prior to the passage of the ACA, to develop healthcare operating rules for voluntary adoption by the industry. From 2005 to 2008, the Phase I and II CAQH CORE Eligibility and Claim Status Operating Rules were developed and approved. Thereafter, the CORE Participants have developed a number of other draft voluntary operating rules including the following operating rules that have not been adopted by HHS:

- Additional data content and infrastructure enhancements for the eligibility/benefits and claim status transactions (these operating rules were considered during CAQH CORE’s ACA-driven Tiger Team work in a response to an NCVHS request):
  - Draft CAQH CORE Eligibility & Benefits Data Content (X12 270/271) Rule
  - Draft CAQH CORE Uniform Use of Claim Status Category and Claim Status Codes (X12 276/277) Rule
  - Draft CAQH CORE Real Time X12 276/277 Claim History Availability Rule
- Infrastructure requirements for the health claims or encounter and referral certification and authorization transactions:
  - Draft CAQH CORE Acknowledgements for X12 837 Claims Rule
  - Draft CAQH CORE Health Care Services Request for Review/Response (X12 278) Rule
- Inefficiencies in use of Healthcare Identification Cards:
  - Draft CAQH CORE Health Insurance Identification Card Rule

¹ NOTE: For information on the federally mandated CAQH CORE Operating Rules see the CAQH website and CAQH CORE FAQs Part B: ACA Section 1104 Mandate for Federal Operating Rules.

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As CORE Participants develop operating rules for the health claims or equivalent encounter information, health plan enrollment/disenrollment, health plan premium payments, referral certification and authorization, and health claims attachments transactions, some of the existing draft CAQH CORE Operating Rules may be considered for inclusion. Per CAQH CORE’s commitment to continue development of voluntary operating rules, any draft CAQH CORE Operating Rules not adopted by HHS will move through the CAQH CORE rules approval process for voluntary industry adoption.

3. How can my organization be involved in development of the voluntary CAQH CORE Operating Rules?

CAQH CORE uses an open, transparent process to draft its operating rules and any entity is welcome to join this process. Currently, over 140 entities participate in CAQH CORE rules development, representing different stakeholder types including health plans, providers, technology companies, government entities, trade associations, vendors, and standard-setting organizations.

There are several avenues through which organizations can contribute to development of the voluntary CAQH CORE Operating Rules:

- **Become a CORE Participating Entity**: The most effective way for individual organizations to assure they have direct input on the development of either voluntary or mandated operating rules is by becoming a [CORE Participating Organization](#).
  - Participation in the CAQH CORE rules development process is open to any interested stakeholder, including health plans, providers, technology companies, government entities, trade associations, vendors, financial institutions, and standard-setting organizations.
  - Benefits available to CORE Participating Entities include:
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- **Contribute as a Non-CORE Participating Entity**: While only CORE Participating Organizations may vote directly on the CAQH CORE Operating Rules, Non-CORE Participating Entities can also indirectly contribute through public activities such as:
  - **Public CAQH CORE Town Hall Calls**
    - CAQH CORE holds bi-monthly [Town Hall calls](#) which provide attendees an update on recent activities including status of rule development and opportunities for public involvement; email core@caqh.org to be added to the distribution list.
  - **CAQH CORE Industry Surveys**
    - CAQH CORE periodically conducts industry-wide surveys to obtain directional feedback on operating rule opportunities; email core@caqh.org to be added to the distribution list.
  - **Submitting comments to CAQH CORE**, comments can be submitted to core@caqh.org.

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