

CAQH FACTS



Why can't verifying patient eligibility and benefits and other administrative data in provider offices be as easy as making an ATM withdrawal?

CORE Mission and Vision

CAQH launched the Committee on Operating Rules for Information Exchange (CORE) after completing a year of research with health plans, providers and industry leaders. The research showed that improved electronic access to accurate, timely healthcare administrative information, including eligibility and benefits data, would significantly reduce the resources required by providers to verify patient coverage, submit cleaner claims and help eliminate unnecessary bad debt.

CORE's vision is provider access to healthcare administrative information before or at the time of service using the electronic system of their choice for any patient or health plan.

CORE is over 100 industry stakeholders (www.caqh.org/ben_participating.php) – health plans, providers, vendors, CMS and other government agencies, associations, regional entities, standard-setting organizations and other healthcare entities.

CORE participants maintain eligibility and benefits data for more than 130 million lives, or more than 75 percent of the commercially insured plus Medicare and state-based Medicaid beneficiaries.

Working in collaboration they are building consensus on a set of operating rules that will:

1. Enhance interoperability between providers and payers
2. Streamline eligibility and benefits data transactions
3. Reduce the amount of time and resources providers spend on administrative functions – time better spent with patients.

Operating rules build on existing standards to make electronic transactions more predictable and consistent, regardless of the technology. Rights and responsibilities of all parties, security, transmission standards and formats, response time standards, liabilities, exception processing, error resolution and more must be clearly defined in order to facilitate successful interoperability. Beyond reducing cost and administrative hassles, operating rules foster trust among all participants.

CORE is solely focused on creating operating rules and will not develop software solutions, a switch, a database or central repository of administrative information.

Visit <http://www.caqh.org/CORE/> to view a brief overview presentation.

CORE: A Multi-phase Initiative

Phase I, completed in April 2006, developed operating rules that cover a limited number of key eligibility and benefits data elements and the processes required to exchange them. They will help providers:

- Determine whether a health plan covers the patient
- Determine patient benefit coverage
- Confirm coverage of certain treatments and the patient's co-pay amount, coinsurance level and base deductible levels (as defined in the member contract) for each of those types

Phase I rules and policies developed to govern exchange of this data include:

- System connectivity
- Standard inquiry acknowledgements
- Maximum response times (batch and real-time)
- Minimum hours a system must be available
- Standard 270/271 companion guide flow and format
- Standard testing, certification and enforcement processes to ensure CORE compliance

Additional eligibility components and business transactions will be addressed by CORE in Phase II (2006-2007) and later phases (2007-and beyond).

CORE Phase I Certification/Endorsement

Use of the CORE rules/policies is voluntary and open to all organizations that create, send or transmit healthcare administrative data, including eligibility and benefits information.

To receive a CORE-certification Seal, organizations must sign a binding pledge to adopt, implement and comply with CORE Phase I rules. By signing the CORE Pledge, the organization commits to work with a CORE-authorized testing vendor to prove its IT system(s) are compliant with the CORE Phase I rules. Testing must be completed within 180 days of signing the CORE Pledge. CORE testing and certification is tailored for providers, health plans, vendors and clearinghouses.

Organizations that do not create, send or transmit data can demonstrate their support for CORE's mission and the Phase I rules by signing the CORE Pledge and applying for a CORE Endorser Seal.

CAQH has authorized the Claredi certification testing solution from Ingenix (www.ingenix.com) and Edifecs, Inc. (www.edifecs.com) to certify that healthcare organizations' IT systems are in compliance with CORE Phase I rules.

Over 20 organizations have endorsed CORE and over 30 organizations are certified or committed to certification. Visit http://www.caqh.org/CORE_pending.php#clear for more information.

CORE Phase I Certification Seal Fees

Clearinghouses	
Below \$75 million in net annual revenue:	\$4,000
\$75 million and above in net annual revenue:	\$6,000
Health Plans	
Below \$75 million in net annual revenue:	\$4,000
\$75 million and above in net annual revenue:	\$6,000
Vendors	
Below \$75 million in net annual revenue:	\$4,000
\$75 million and above in net annual revenue:	\$6,000
Providers	
Up to \$1 billion in net annual revenue:	\$ 500
\$1 billion and above in net annual revenue:	\$1,500
Endorsers	
(Only entities that do not create, transmit or use eligibility data)	No fee

NOTES:

- There is no charge to Federal or State government entities to receive the CORE Seal.
- There is no charge to CAQH member plans to receive the CORE Seal.
- The CORE Phase I Certification Seal fee is a one-time cost.
- The CORE Certification Seal fee does not include fees required for CORE certification testing, which are set by CORE-authorized testing organizations.
- A list of CORE-authorized testing organizations and their respective testing fees is available at www.caqh.org.
- Organizations that become decertified will be required to complete the certification process again and pay all applicable fees in order to become re-certified.
- Any major change to the CORE Phase I rules (allowable once per year) approved by a full CORE vote will require that all CORE-certified organizations complete the certification process again and pay all applicable fees in order to remain CORE Phase I certified.
- CORE certification and CORE participation are two separate activities. CORE participants can assist with writing the rules/policies in addition to voting on the next phase of rules. CORE certification does not bestow CORE participation status. Additional information about CORE participation is available at www.caqh.org.

**CAQH Committee on Operating Rules for Information Exchange (CORE)
 Current Participants (as of February 2008)**

Health Plans

Aetna Inc.
 AultCare
 Blue Cross Blue Shield of Michigan
 Blue Cross and Blue Shield of North Carolina
 BlueCross BlueShield of Tennessee
 CareFirst BlueCross BlueShield
 CIGNA
 Coventry Health Care
 Excellus Blue Cross Blue Shield
 Group Health, Inc.
 Harvard Pilgrim HealthCare
 Health Care Service Corporation
 Health Net, Inc.
 Health Plan of Michigan
 Horizon Blue Cross Blue Shield of New Jersey
 Humana Inc.
 Independence Blue Cross
 UnitedHealth Group
 WellPoint, Inc.

Associations / Regional Entities / Standard Setting Organizations

America's Health Insurance Plans (AHIP)
 ASC X12
 Blue Cross and Blue Shield Association (BCBSA)
 Delta Dental Plans Association
 eHealth Initiative
 Health Level 7 (HL7)
 Healthcare Association of New York State
 Healthcare Billing and Management Association
 Healthcare Information and Management Systems Society (HIMSS)
 Healthcare Financial Management Association (HFMA)
 LINXUS (initiative of GNYHA)
 National Committee for Quality Assurance (NCQA)
 National Council for Prescription Drug Programs (NCPDP)
 NJ Shore (WEDI/SNIP NY Affiliate)
 Private Sector Technology Group
 Smart Card Alliance Council
 Utah Health Information Network (UHIN)
 Utilization Review Accreditation Commission (URAC)
 Work Group for Electronic Data Interchange (WEDI)

Government Agencies

Louisiana Medicaid – Unisys
 Michigan Department of Community Health
 Michigan Public Health Institute
 Minnesota Department of Human Services
 Oregon Department of Human Resources
 TRICARE
 United States Centers for Medicare and Medicaid Services (CMS)
 United States Department of Veterans Affairs

Other

Accenture
 Foresight Corporation
 PNC Bank
 PricewaterhouseCoopers LLP

Providers

Adventist HealthCare, Inc.
 American Academy of Family Physicians (AAFP)
 American College of Physicians (ACP)
 American Medical Association (AMA)
 Catholic Healthcare West
 Cedars-Sinai Health System
 Greater New York Hospital Association (GNYHA)
 Healthcare Partners Medical Group
 Mayo Clinic
 Medical Group Management Association (MGMA)
 Mobility Medical, Inc.
 Montefiore Medical Center of New York
 New York-Presbyterian Hospital
 North Shore LIJ Health System
 Partners HealthCare System
 University Physicians, Inc. (University of Maryland)

Vendors

ACS EDI Gateway, Inc.
 athenahealth, Inc.
 Availity LLC
 CareMedic Systems, Inc.
 ClaimRemedi, Inc.
 Claredi (an Ingenix Division)
 Edifecs
 Electronic Data Systems (EDS)
 Electronic Network Systems, Inc. (ENS) (an Ingenix Division)
 Emdeon Business Services
 Enclarity, Inc.
 First Data Corp. – Healthcare
 GE Healthcare
 GHN-Online
 Health Management Systems, Inc.
 Healthcare Administration Technologies, Inc.
 HTP, Inc.
 IBM Corporation
 Infotech Global, Inc.
 InstaMed
 IVANS, Inc.
 MedAvant Healthcare Solutions
 MedData
 Microsoft Corporation
 National Account Service Company (NASCO)
 NaviMedix
 NextGen Healthcare Information Systems, Inc.
 Passport Health Communications
 Payerpath, a Misys Company
 Quovadx
 RealMed Corporation
 Recondo Technology, Inc.
 RelayHealth
 RxHub
 Siemens / HDX
 SureScripts
 The SSI Group, Inc.
 The TriZetto Group, Inc.
 VisionShare, Inc.

CORE Phase I Certified Entities / Products and Endorsements
(as of February 2008)

Clearinghouses

ACS EDI Gateway, Inc. / ACS EDI Gateway Eligibility Engine
 Availity, LLC / Availity Health Information Network
 Emdeon Business Services / Emdeon Real-Time Exchange
 Emdeon Business Services / Emdeon Batch Verification
 Health Management Systems, Inc. / HMS
 MedAvant Healthcare Solutions / Phoenix Processing System
 MedData / MedConnect
 NaviMedix, Inc. / NaviNet
 Passport Health Communications / OneSource
 RelayHealth / Real Time Eligibility
 RxHub / PRN
 Siemens Medical Solutions / Healthcare Data Exchange
 The SSI Group, Inc. / ClickON® E-Verify

Health Plans

Aetna Inc.
 AultCare Corporation
 Blue Cross and Blue Shield of North Carolina
 BlueCross BlueShield of Tennessee
 Health Net
 WellPoint, Inc. and its 14 Blue Cross and Blue Shield-licensed subsidiaries

Providers

Mayo Clinic
 Montefiore Medical Center
 U.S. Department of Veterans Affairs

Vendors

athenahealth, Inc. / athenaCollector
 Emerging Health Information Technology / TREKS
 GE Healthcare / EDI Eligibility 270/271
 HTP, Inc. / RevRunner
 Medical Informatics Engineering, Inc. / WebChart EMR *
 NoMoreClipboard.com
 Post-N-Track / Doohickey™ Web Services
 The SSI Group, Inc. / ClickON® E-Verify
 VisionShare, Inc. / Secure Exchange Software

Certification in 2008

Health Plans

Blue Cross Blue Shield of Michigan
 CareFirst BlueCross BlueShield
 Humana, Inc.

Vendors

Quovadx
 VIIAD Systems, LLC

Endorsements

Accenture
 American Academy of Family Physicians (AAFP)
 American College of Physicians (ACP)
 American Health Information Management Association (AHIMA)
 California Regional Health Information Organization (CalRHIO)
 Claredi, an Ingenix Division
 Edifecs, Inc.
 eHealth Initiative
 Electronic Healthcare Network Accreditation Commission (EHNAC)
 Enclarity, Inc.
 Foresight Corporation
 Greater New York Hospital Association (GNYHA)
 Healthcare Financial Management Association (HFMA)
 Healthcare Information and Management Systems Society (HIMSS)
 Medical Group Management Association (MGMA)
 Michigan Public Health Institute
 Microsoft Corporation
 MultiPlan, Inc.
 NACHA – The Electronic Payments Association
 Pillsbury Winthrop Shaw Pittman, LLP
 Smart Card Alliance Council
 URAC
 Workgroup for Electronic Data Interchange (WEDI)

* Product also certified by the Certification Commission for Healthcare Information Technology (“CCHIT”). For accurate information on certified products, please refer to the product listings at www.cchit.org.