simplifying healthcare administration

CAQH®

CAQH CORE & Edifecs:

National Webinar on *Voluntary* CORE Certification

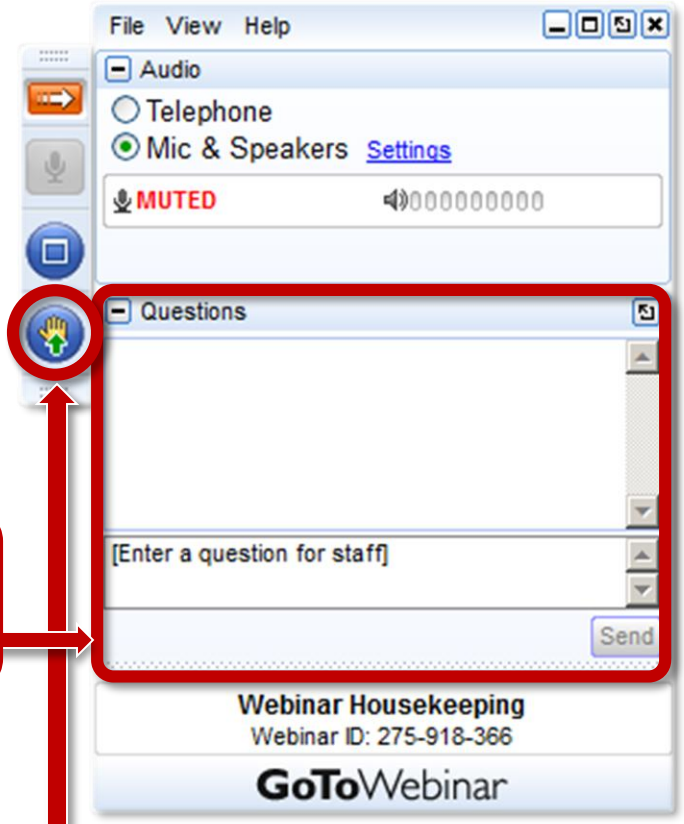
Featuring Orbograph

November 6, 2014
2:00 – 3:30pm ET

CORE®
Committee on Operating Rules for Information Exchange
A CAQH Initiative

Participating in Today's Session

- Download a copy of today's presentation on the CAQH.org website
  - Navigate to the CORE Education Events page and access a pdf version of today's presentation under the list for today's event
- The phones will be muted upon entry and during the presentation portion of the session
- At any time throughout the session, you may communicate a question via the web
  - Submit your questions on-line ***at any time*** by entering them into the **Q&A panel on the right-hand side of the GoToWebinar desktop**
  - On-line questions will be addressed first
- There will be an opportunity today to submit questions using the telephone
  - **When directed by the moderator**, **press the "raise hand" button** to join the queue for audio questions



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Session Topics

- Welcome Introduction
- HHS Health Plan Certification Documentation of Compliance
  - HIPAA Credential
  - CORE Certification
- CORE Certification and Operating Rule Implementation Insights
  - Guest Speaker from ***Orbograph***
- Overview of Certification Testing Site
  - Guest Speaker from ***Edifecs***
- Free CORE Implementation Resources and Tools
- Q&A

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HHS Health Plan Certification Documentation of Compliance

HIPAA Credential and CORE Certification

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Scope: ACA Mandated Operating Rules and Certification Compliance Dates

Mandated Requirements available and should be in use in market

Compliance in Effect as of January 1, 2013

- Eligibility for health plan
- Claim status transactions

HIPAA covered entities conduct these transactions using the CAQH CORE Operating Rules

Compliance in Effect as of January 1, 2014

- Electronic funds transfer (EFT)
- Health care payment and remittance advice (ERA)

HIPAA covered entities conduct these transactions using the CAQH CORE Operating Rules

HHS NPRM and deadline adjustment issued 12/31/13

***Proposes an adjusted Implementation*: December 2015**

Proposes health plans certify via either CORE certification or HIPAA Credential; applies to Eligibility/ Claim Status/EFT/ERA operating rules and underlying standards

Applies only to health plans and includes potential penalties for incomplete certification; existing voluntary CORE Certification is for vendors/PMS/large providers, and health plans

CAQH CORE in Process of drafting rules

Implement by January 1, 2016
(Draft Rules available in Late 2014)

- Health claims or equivalent encounter information
- Enrollment/disenrollment in a health plan
- Health plan premium payments
- Referral, certification and authorization
- Health claims attachments (HHS Standard not yet mandated)

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HHS NPRM on Health Plan Certification

Ultimate goal:

"Reduce the clerical burden on patients, health care providers, and health plans"

- HIPAA (42 U.S.C. 1320d Note)

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HHS NPRM on Health Plan Certification
Background

- **Notice of Proposed Rule Making (NPRM)** published in *Federal Register*, January 2, 2014
- Before December 31, 2015, Controlling Health Plans (CHPs) must submit to HHS:
  - Documentation of Compliance, and
  - Number of Covered Lives

NPRM Proposed Documentation of Compliance Options

CORE Phase III Certification Seal

Framework: Conformance Testing

- Involves Testing with Independent Testing Entity
- Part of the established Voluntary CORE Certification Process

OR

HIPAA Credential*

Framework: Attestation

- Requirements outlined in NPRM
- Involves coordination with trading partners
- Draft forms here

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*May be adjusted pending final rule

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HIPAA Credential

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Draft HIPAA Credential Forms

Per the NPRM,* *"To obtain the HIPAA Credential, a CHP would have to submit…"*

Proposed Requirements in the NPRM	Corresponding Draft Form & Purpose
"HIPAA Attestation Form…*(similar to the form required for the CORE Certification)"*	**Title:** Draft HIPAA Credential – Attestation of HIPAA Compliance Form **Purpose:** To enable the entity to demonstrate its good faith intention to certify HIPAA compliance
*"**An application form (similar to the form required to obtain a CORE Seal)….**with signature verifying that all forms …are submitted….indicating that HHS may view the application and associated forms if such a request is made"*	**Title:** Draft HIPAA Credential - Application Form **Purpose:** To verify that all forms have been submitted and to acknowledge that HHS may view the application
*"**An attestation form**… in which the CHP confirms that it has successfully tested [operating rules for the three transactions] with trading partners. For each of the three transactions, the CHP must confirm that the number of transactions conducted with those trading partners collectively accounts for at least 30% of the total number of transactions conducted with providers."*	**Title:** Draft HIPAA Credential – Attestation of Trading Partner Testing Form **Purpose:** To document that successful testing of transactions has occurred and to indentify trading partners with whom the entity tested

**See Federal Register page 305.*

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Draft HIPAA Credential Forms
Industry Feedback and CTSG Tasks

- **Industry Feedback collected on initial draft forms:**
  - **Over 250 comments** were received from both CORE Participants and non-Participants
- **CAQH CORE Certification & Testing Subgroup (CTSG)**, comprised of CORE Participants,* was tasked with adjudicating both the substantive and non-substantive comments on the initial draft forms
- CTSG conducted **Market Assessment** to "case test" the draft forms
  - The Subgroup subsequently made the form simpler, clearer, and better aligned the language with the requirements of the NPRM
- Updated draft forms published in September, 2014

These draft forms are for illustrative purposes only and cannot be used to apply for the HIPAA Credential. These draft forms are subject to change based on the release of an HHS Final Rule.

**For more information on how to become a CORE Participating Organization, please visit our website HERE*

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Draft HIPAA Credential Forms
Requirements

Updated HIPAA Credential Draft Form Requirements
Title: Draft HIPAA Credential – Attestation of HIPAA Compliance Form 1. Attestation of Compliance with HIPAA as amended by HITECH and ACA 2. Name and signature of authorized representative 3. CHP Information, HPID
Title: Draft HIPAA Credential - Application Form 1. Name and signature of Authorized Signature 2. CHP Information, HPID
Title: Draft HIPAA Credential – Attestation of Trading Partner Testing Form 1. CHP Information, HPID 2. List of Trading Partners per Transaction with which the CHP has successfully tested 3. Trading Partner Contact Information NPRM: "For each of the [four] transactions, the CHP must confirm that it has **successfully tested** with at least three trading partners, but if the number of transactions conducted with three trading partners does not account for **at least 30 percent of the total number of transactions conducted with providers**, the CHP could confirm that it has successfully tested with up to 25 trading partners." (79 FR 305)

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Voluntary CORE Certification

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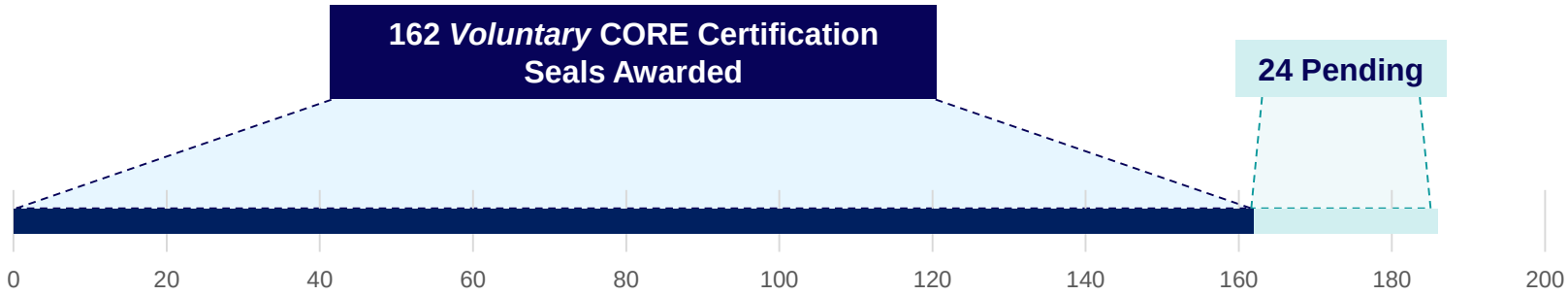
Voluntary CORE Certification

- CAQH CORE offers *voluntary* CORE Certification to health plans, vendors, clearinghouses, and providers
  - *Voluntary* CORE Certification provides verification that your IT system or product operates in accordance with the federally mandated Operating Rules
  - CORE Certification is stakeholder-specific
    - Each entity completes testing specific to their stakeholder type in order to become CORE Certified
  - **More than 150 CORE Certifications** have been achieved with over 20 Certifications currently pending. Access a list of these organizations HERE



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Voluntary CORE Certification *Transactions*

Voluntary CORE Certification is available for the following transactions:

Phase I — Eligibility and Benefits

Phase II — Claim Status

Phase III — EFT & ERA

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Voluntary CORE Certification: *Benefits*

Give Assurance:

The CORE Certification Seal demonstrates that an organization is operating in conformance with federally-mandated operating rules.

Pay it Forward:

When an organization becomes CORE Certified, it gives their customers the opportunity to leverage the organization's CORE Certification and become CORE Certified as well.

Attract Attention:

CORE Certified organizations and solutions/products are recognized on the CAQH CORE® website and featured in press releases and national webinars.

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Voluntary CORE Certification:
A Step-by-Step Process

Timing Depends on organization's internal efforts

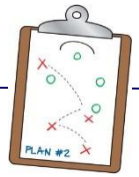
Average 2 to 6 Months

180 Business Days — *Must complete testing in this timeframe*

Average 20 – 60 Business Days

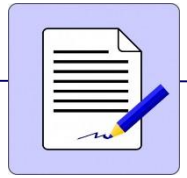
30 Business Days *for CORE Confirmation*

Step 1
Pre-certification Planning & Systems Evaluation



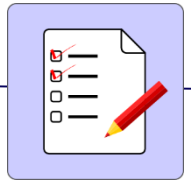
- Understand requirements of the CAQH CORE Operating Rules and scope your internal efforts to adopt and implement the operating rules

Step 2
Sign and Submit CORE Pledge



- Formally communicate your intent to pursue CORE Certification for a given phase of CAQH CORE Operating Rules

Step 3
CORE Certification Testing



- An entity seeking CORE Certification works with a CORE-authorized testing vendor to perform tests based upon CORE Phase I-III testing criteria specific to that entity's stakeholder type

Step 4
Apply for CORE Certification Seal

CERTIFIED CORE Phase III STAKEHOLDER
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- Entities successfully achieving CORE Certification will receive a CORE "Seal" from CAQH that corresponds with the CORE Phase and stakeholder-type

NOTE: If the entity seeking CORE Certification outsources any portion of the applicable transactions to a trading partner, then that trading partner must become CORE Certified for that transaction in order for the seeking entity to complete the CORE Certification process

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Voluntary CORE Certification Testing:
Types of Test Scripts

CORE Certification Testing is comprised of stakeholder-specific test scripts for each CAQH CORE Operating Rule

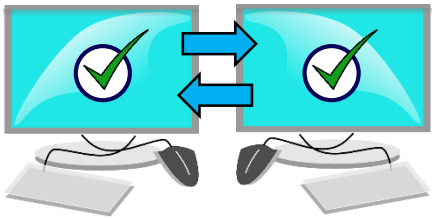
Attestation

Along with other specified documentation, an entity must sign an attestation signifying their current or planned compliance

Upload

Upload specified document to the testing site as proof of compliance

System Transaction



Conduct the actual transaction for which you are testing with the CORE-certified testing vendor

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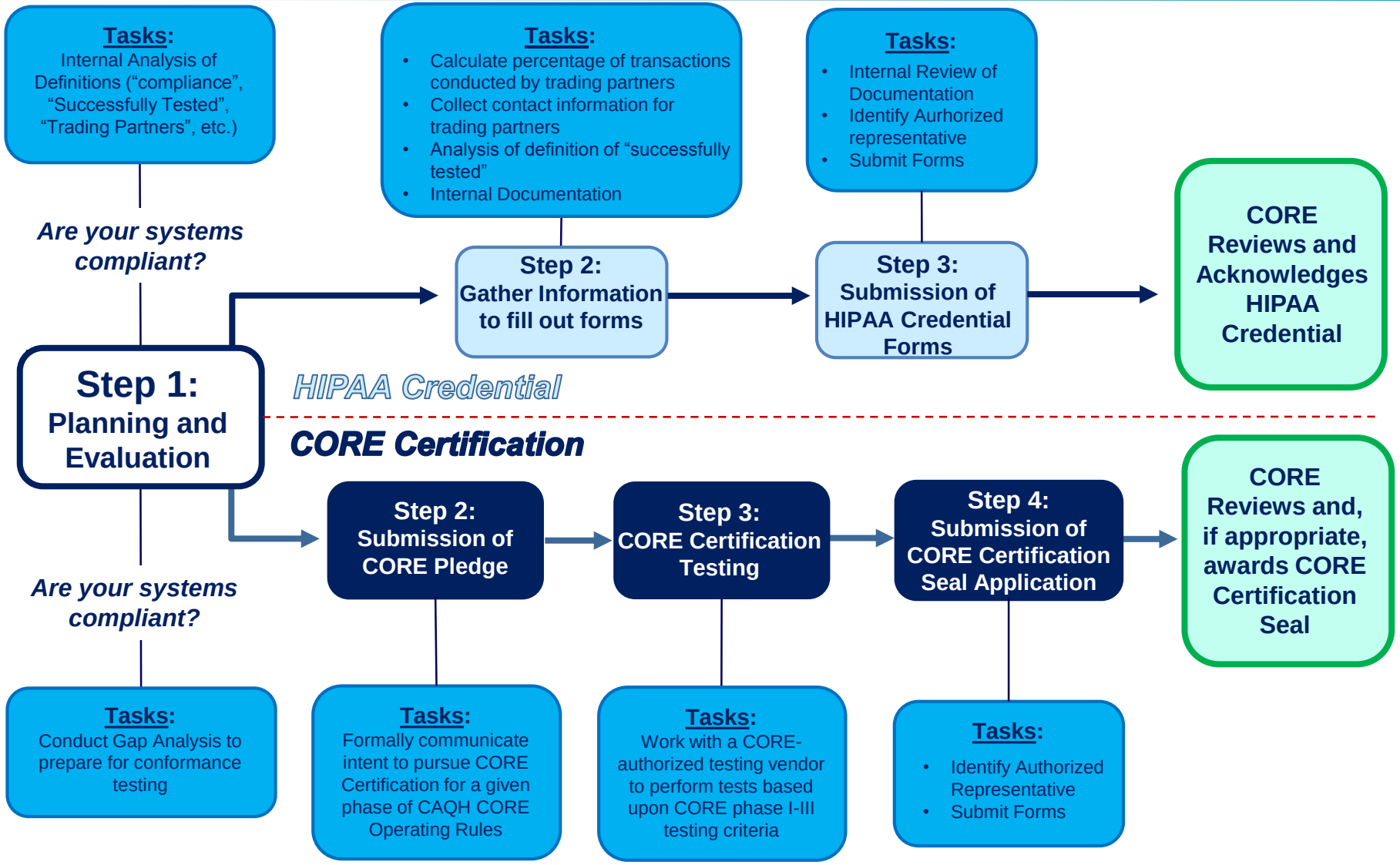
Documentation of Compliance:
A Task-by-Task Comparison



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Polling Question #1

Would you consider achieving Voluntary CORE Certification as a viable part of your overall CORE Operating Rule Implementation Process?

1. **Yes**
2. **No**
3. **Maybe**
4. **N/A**

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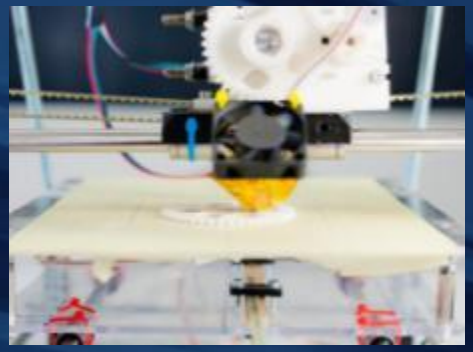

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Envision More. Achieve More.

CAQH CORE National Webinar 11/6/14

CAQH CORE Certification

- About Orbograph
- Trading and Business Partners
- EFT/ERA Background & Challenges
- Phase III Certification and Implementation
- EFT/ERA & Certification Benefits

Lines of Business

NEXT GENERATION RECOGNITION

18 Years of Continual Improvements…
Check Processing Automation

HEALTHCARE PAYMENTS AUTOMATION CENTER™ (HPAC)

4+ Years of Innovation…
Delivering Healthcare Payments Automation within Revenue Cycle Management (RCM)

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The premier solution provider of payment automation in healthcare and check recognition in the financial industry.

Innovation Creates Customer Value & ROI

People + Foundation = Predictable Client Experience ("Excellence")

We Build Partnerships

1996

MARKET INTRODUCTION

1600+

MAJOR LICENSES INSTALLED

Many Workflows in Check Payments

Teller/Branch Automation

RDC/Mobile/Self Service Innovations

Reinventing Remittance/ Medical Lockbox

Healthcare Payments Automation Center™ (HPAC)

CERTIFIED CORE VENDOR PRODUCT Phase III
A CAQH Initiative

Healthcare Payments

Automation of Paper Payments

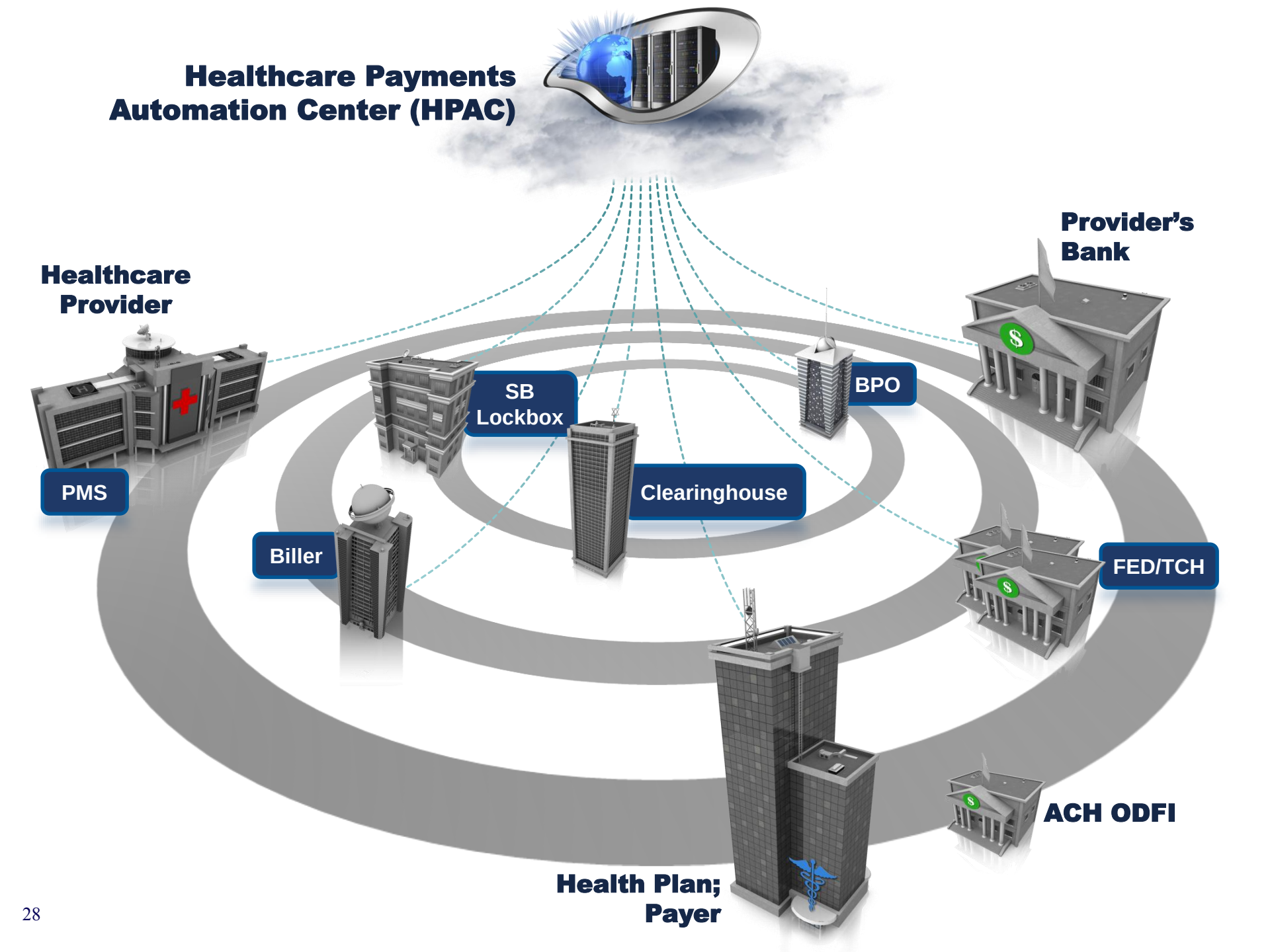
- Orbograph P2Post™: Powered by Opti-Lift™ (EOB Conversion/Image Data Lift)
- Supports Patient Pays, Correspondence
- Seamless Client Experience

Healthcare Payments

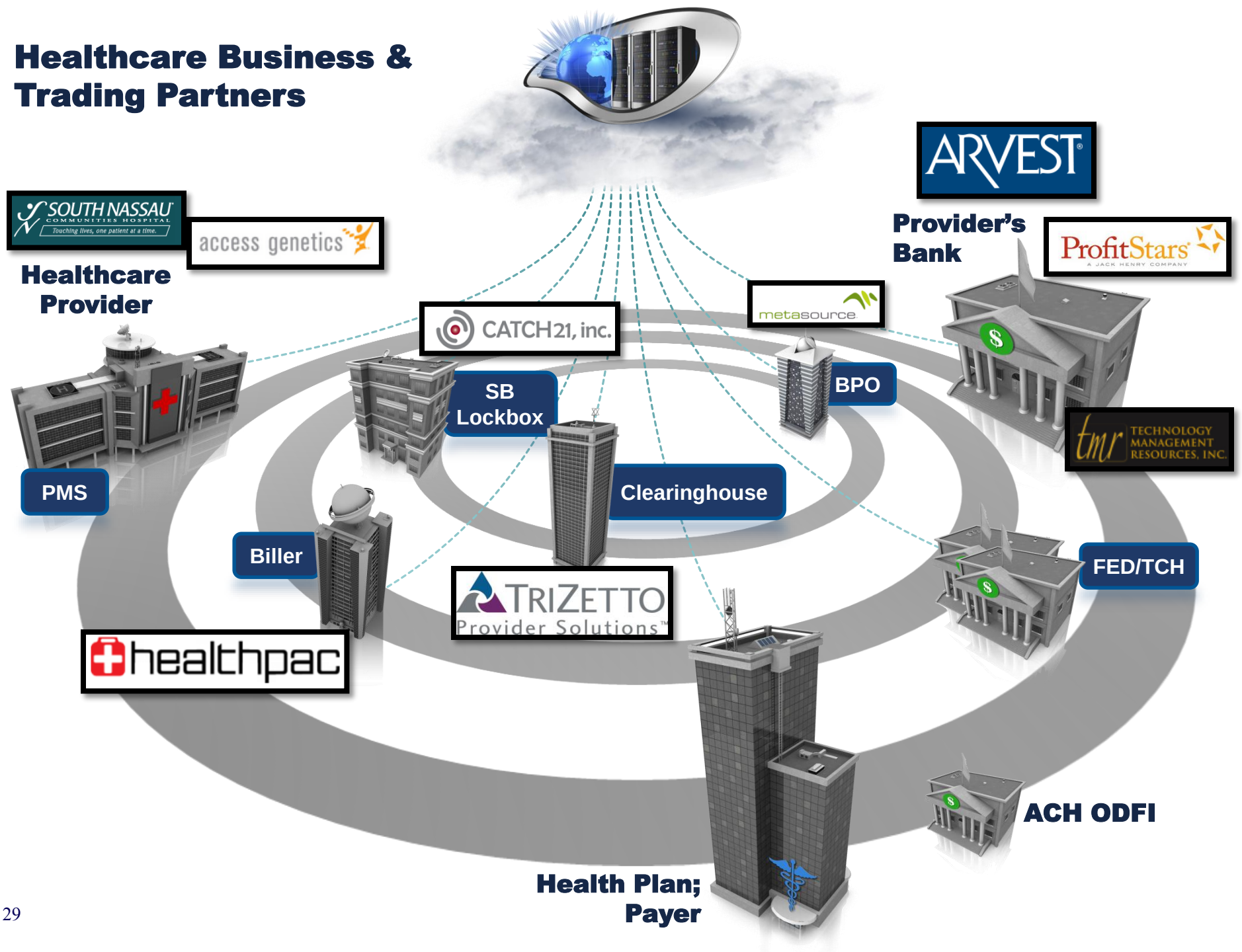
EDI Processing Services

- Orbograph E2Post™: 835 Normalization (Populate For Auto Posting)
- Payment Reconciliation
  - EFT Reassociation To ERA
  - Receivables Tracking
- Electronic File Viewing (EOR)

CERTIFIED CORE VENDOR PRODUCT Phase III A CAQH Initiative


Healthcare Payments Automation Center (HPAC)
Provider's Bank
Healthcare Provider
SB Lockbox
BPO
PMS
Clearinghouse
Biller
FED/TCH
ACH ODFI
Health Plan; Payer

Healthcare Business & Trading Partners

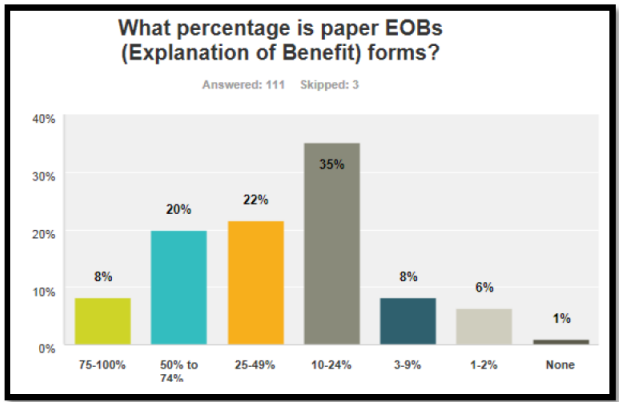


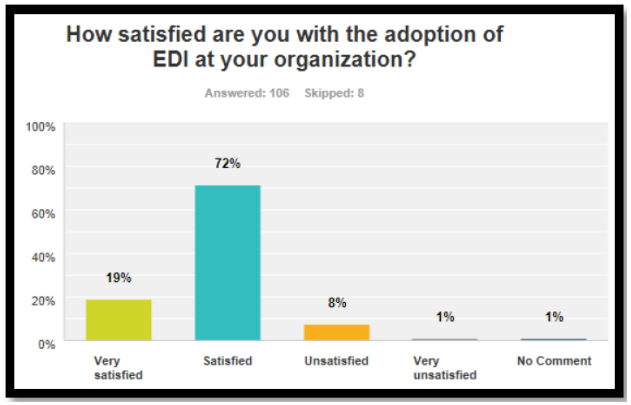
Processing Clients/Volumes

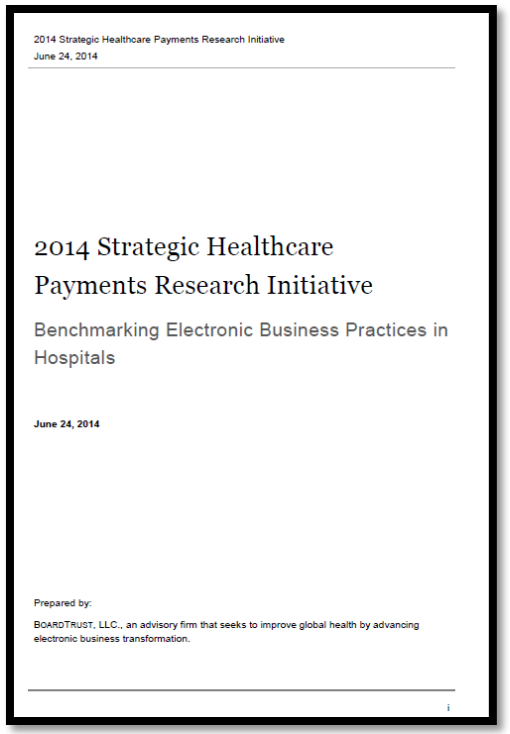
- 35 clients in production
  - 50,000 to 100,000 claims per month
- 35 clients in test
  - Higher volume clients in process
- Reassociation
  - 2 billers in production with multiple smaller providers
  - 1 mid sized hospital

Electronic Business Practice Adoption in Hospitals

- 123 responses across all tiers
  - ~2% response rate per tier
- % of EOB to ERAs






2014 Strategic Healthcare Payments Research Initiative
June 24, 2014

2014 Strategic Healthcare Payments Research Initiative

Benchmarking Electronic Business Practices in Hospitals

June 24, 2014

Prepared by:

BOARDTRUST, LLC., an advisory firm that seeks to improve global health by advancing electronic business transformation.

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http://www.orbograph.com/2014-strategic-healthcare-payments-research-initiative.htm

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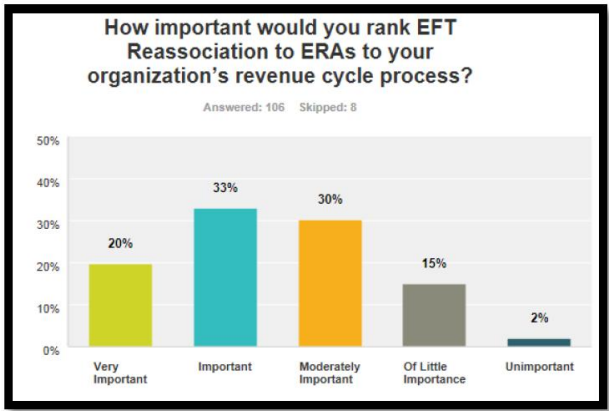
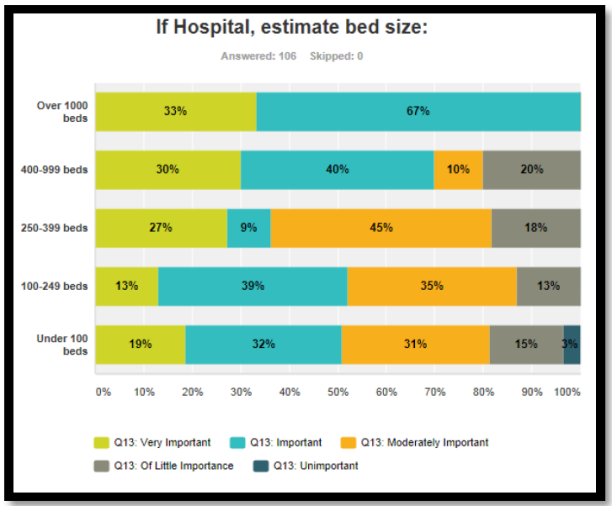
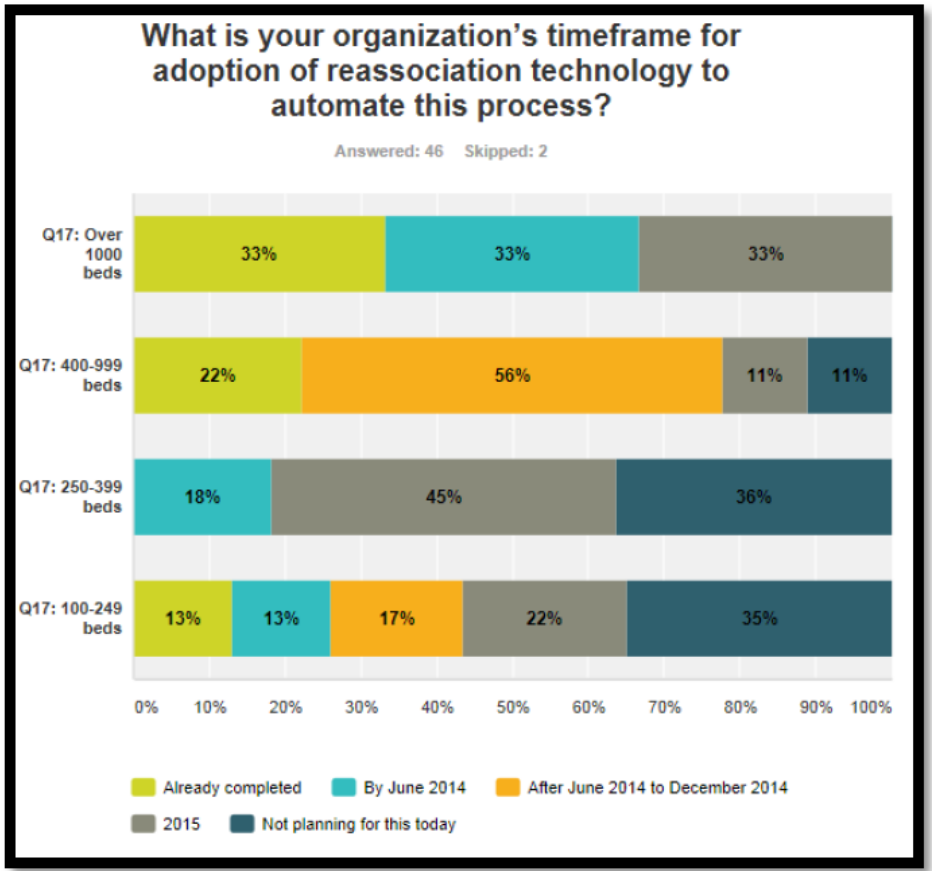
Electronic Business Practice Adoption in Hospitals







http://www.orbograph.com/2014-strategic-healthcare-payments-research-initiative.htm

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Phase III Considerations
Why CORE Certification?

- Requested by various providers and business partners
- Show industry support and commitment
- Confirmation of requirements
- Anticipated for RFPs
- Competitive differentiator

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Phase III Certification Process: Successes

- Product functionality designed by internal ACH expert; well-versed in NACHA rules
- Considered a “vendor”; streamlined process
- Client Services completed certification
- Planning guide was generally helpful
- Allocated 2 people, ½ day per week for 4 weeks
- Access to EDI 835 files and claim information
- No changes to production system needed!

Phase III Certification Challenges

- Anticipated vs. actual work required: 5X
- Encountered special work to support connectivity requirements
  - Submit Generic Batch Retrieval Request and validate payload receipt confirmation using X509 Certificate (Rule 350.1)
  - SOAP (Simple Object Access Protocol)
- Conformance testing, rather than “production readiness”
  - Simulated matching process offline
  - Manual file adjustments and validations
- Communication challenges

Challenges with 999 Files

```
ISA~00~          ~00~          ~ZZ~OrboStew       ~ZZ~EDIFECSTEST    ~140524~1408~*~00501~100002555~0~P~^
GS~FA~EDIFECSTEST~OrboStew~20140522~0845~100002555~X~005010X231A1
ST~999~0001~005010X231A1
AK1~HP~100002555~005010X221A1
AK2~835~100002555~005010X221A1
IK5~A
AK9~A~1~1~1
SE~6~0001
GE~1~100002555
IEA~1~100002555
```

- Unfamiliar with EDI 999 file format for implementation acknowledgement
- Segments in file had to be adjusted
- Iterative process
- Difficult to get information on this topic ahead of time

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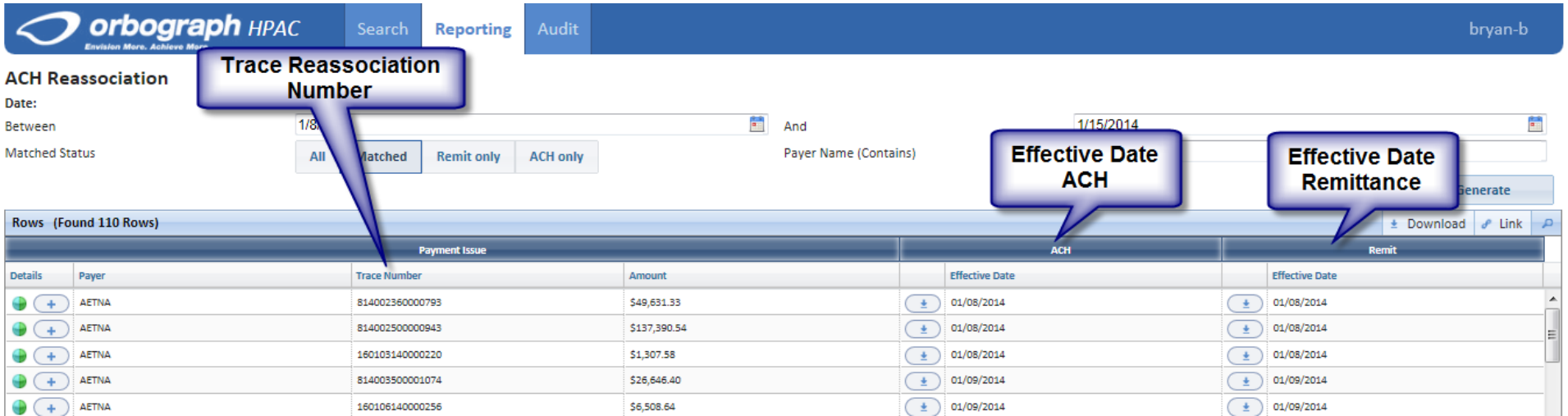
EFT/ACH, Bank Deposit Reconciliation Challenges

- Blend of ACH + checks
- Blend of 835 + EOB
- Different workflows
- Reassociation can be payer dependent
  - Manual process of reconciliation
  - Now multiple processes
- Incorrect claims
- Unpaid claims aggregate over time
- Incorrect payments
- Duplicate amounts for multiple payments
- Receivables tracking can be more difficult

Resolutions

- Better training to bridge the gap as payers are converted onto reassociation
- More comprehensive view of payment variations



EFT/ERA Operating Rule & Certification Benefits

- Education opportunity
- Consultative approach
- Active use of seal for trade shows
- Webinars & case studies

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Enabling Transformation

Facilitate electronification via a payment automation platform, which optimizes posting & reconciliation, achieving the maximum benefits of straight-through-processing

Edifecs in Healthcare

Smart "pathways" to successful partnerships

Vision

"Our team commitment to only build healthcare solutions that drive down healthcare costs, achieve regulatory compliance and accelerate true reform, is our vision backbone and drives everything we do".

- Sunny Singh

Business

- Employee-owned
- Leading healthcare solutions supporting regulatory compliance and healthcare reform
- Powering reform & the federal exchange

Customers

- 46 Blue Plans out of total 64
- 173 Total Payers
- 70+ Providers
- 31 State Medicaid Programs out of 56 (including CMS)

215 Million Total Lives

Talent

- 745+ Worldwide
- 30% + Engineering & Development
- Extensive Healthcare and Technology expertise

1996 — **2014**

Smart Trading
EDI / HL7 Validation Any Format / Any Source

Mandate Compliance
HIPAA, CAQH, ICD-10, ONC, CMS

Enterprise Applications
Population Insights for ACOs, VBRs, PCMHs HIX, PSR, RRM, etc

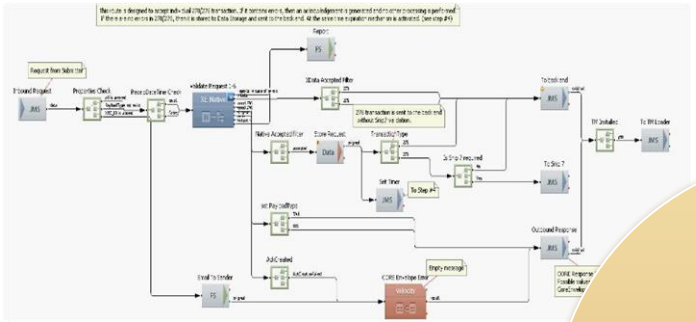
Partnership Platform
Cloud – SasS / PaaS, Future Exchanges

edifecs confidential 2014

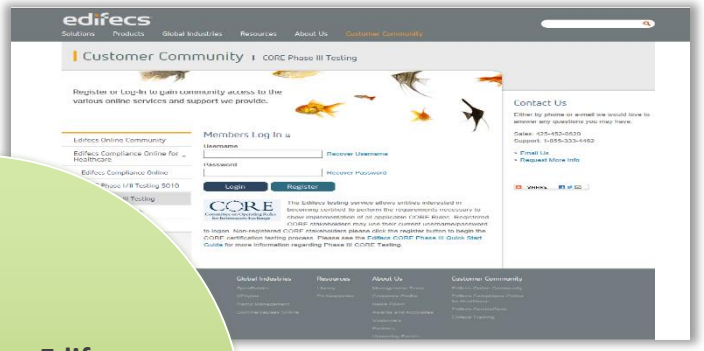
edifecs

Edifecs – CORE Operating Rules

Connectivity, Transaction Workflow & Enrichment

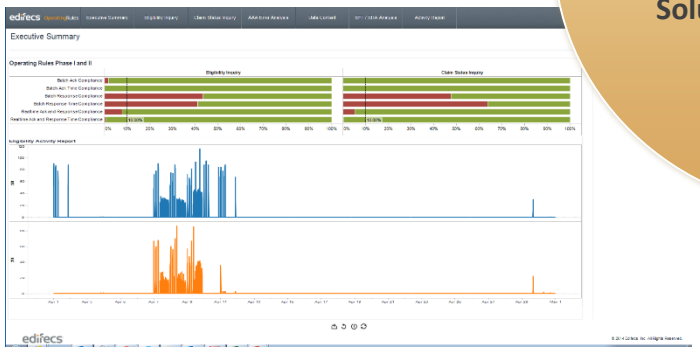


CORE Certification Testing Website



Edifecs Operating Rules Solution

Edifecs CORE Certification Testing



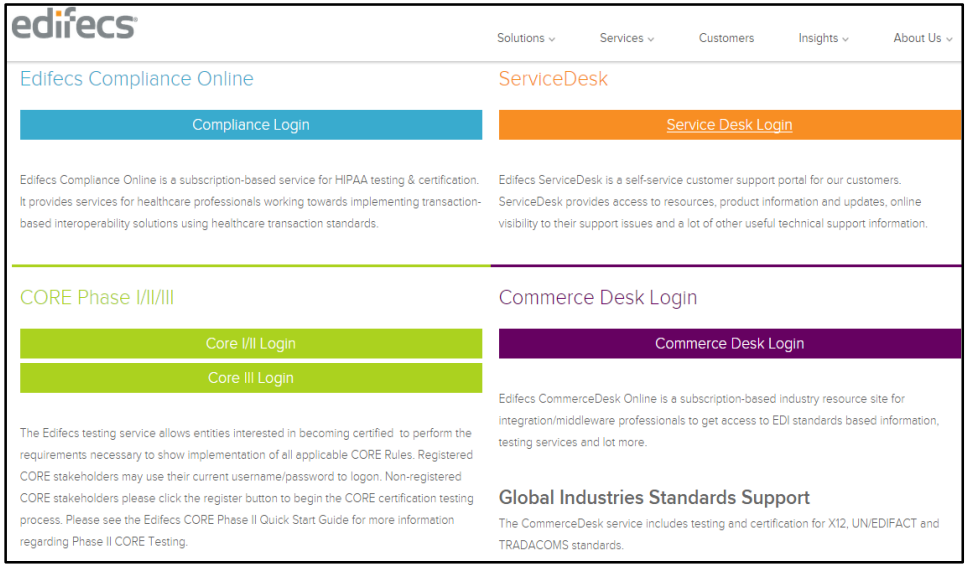
Compliance Tracking & Troubleshooting

Online & Live Support

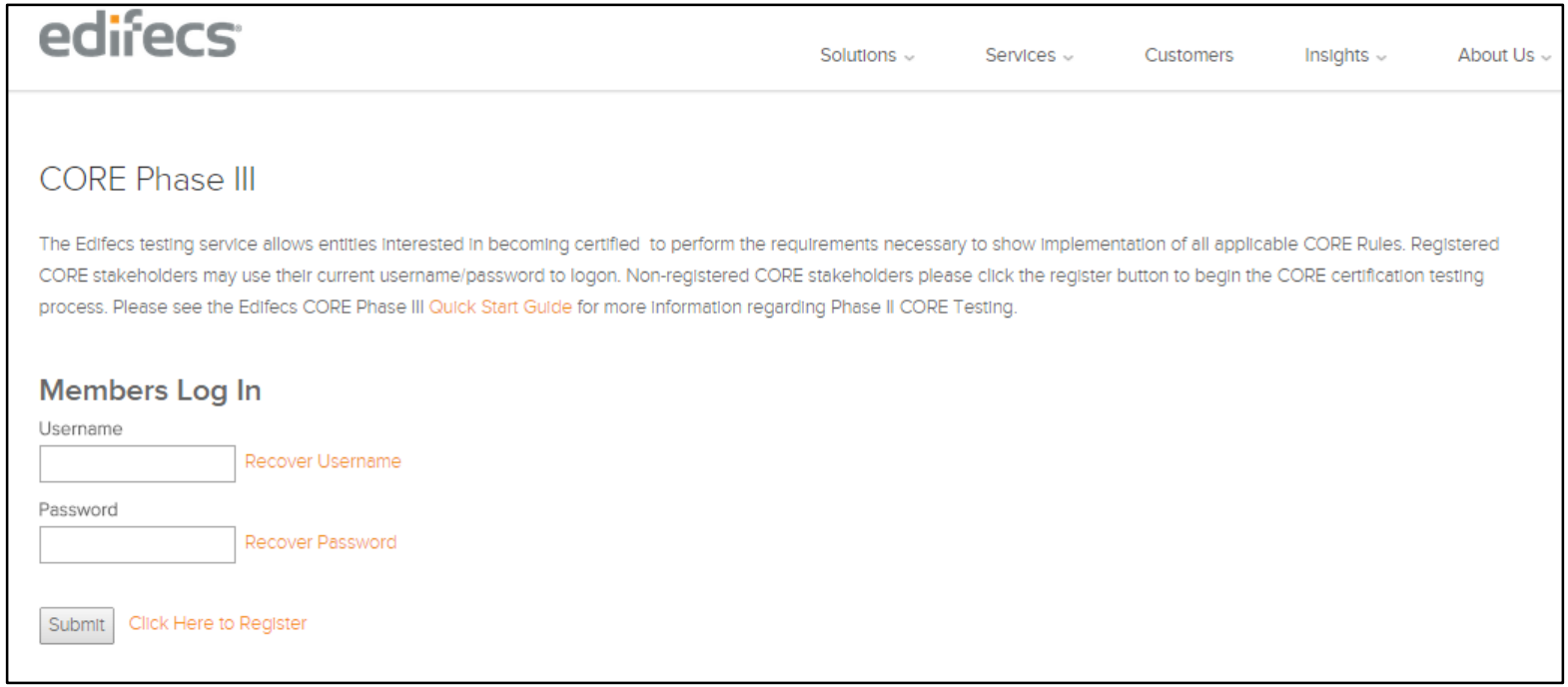
[Click here for more information on the Edifecs Operating Rules solution]

Edifecs and CAQH CORE Partnership

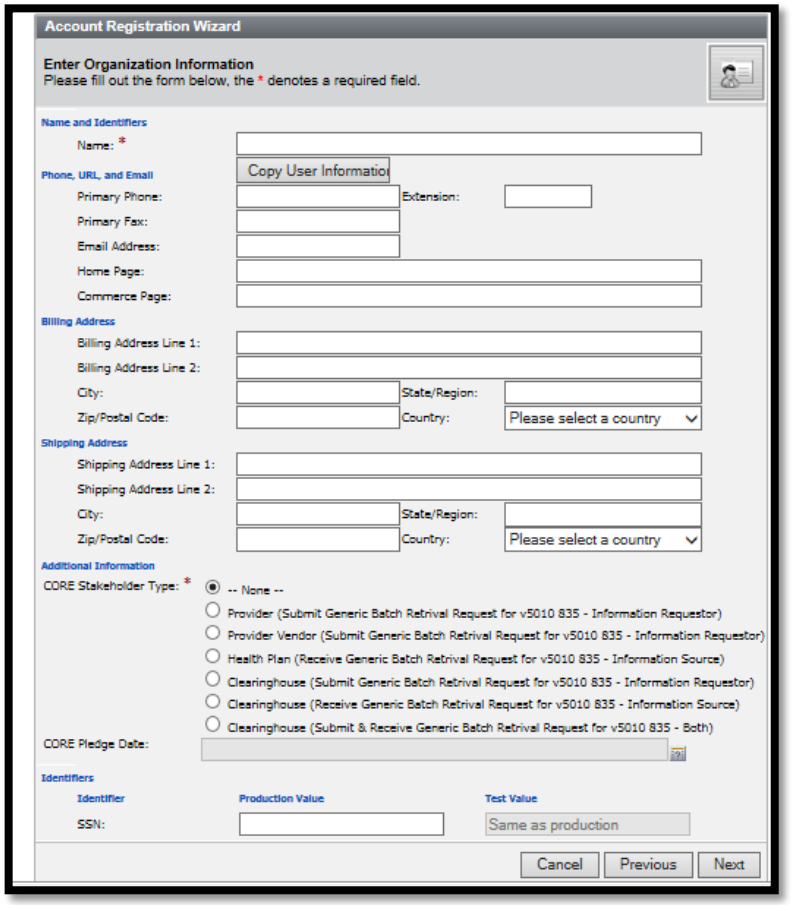
- Edifecs is the first CAQH CORE authorized Testing vendor for CAQH CORE Operating Rules Phase I, II and III
- The CORE Phase III EFT/ERA Certification Testing Portal is currently open for registrations
- Helping healthcare organizations with voluntary CORE certification testing since 2006
  - Provides free testing service based upon the CORE-approved Phase I , II and III Test Suites
  - Dedicated web portal available 24/7
  - Has on-line support for issue resolution
- Edifecs has enabled 162 CORE Certifications as of 11/5/14



Login Screen for Edifecs Certification Testing



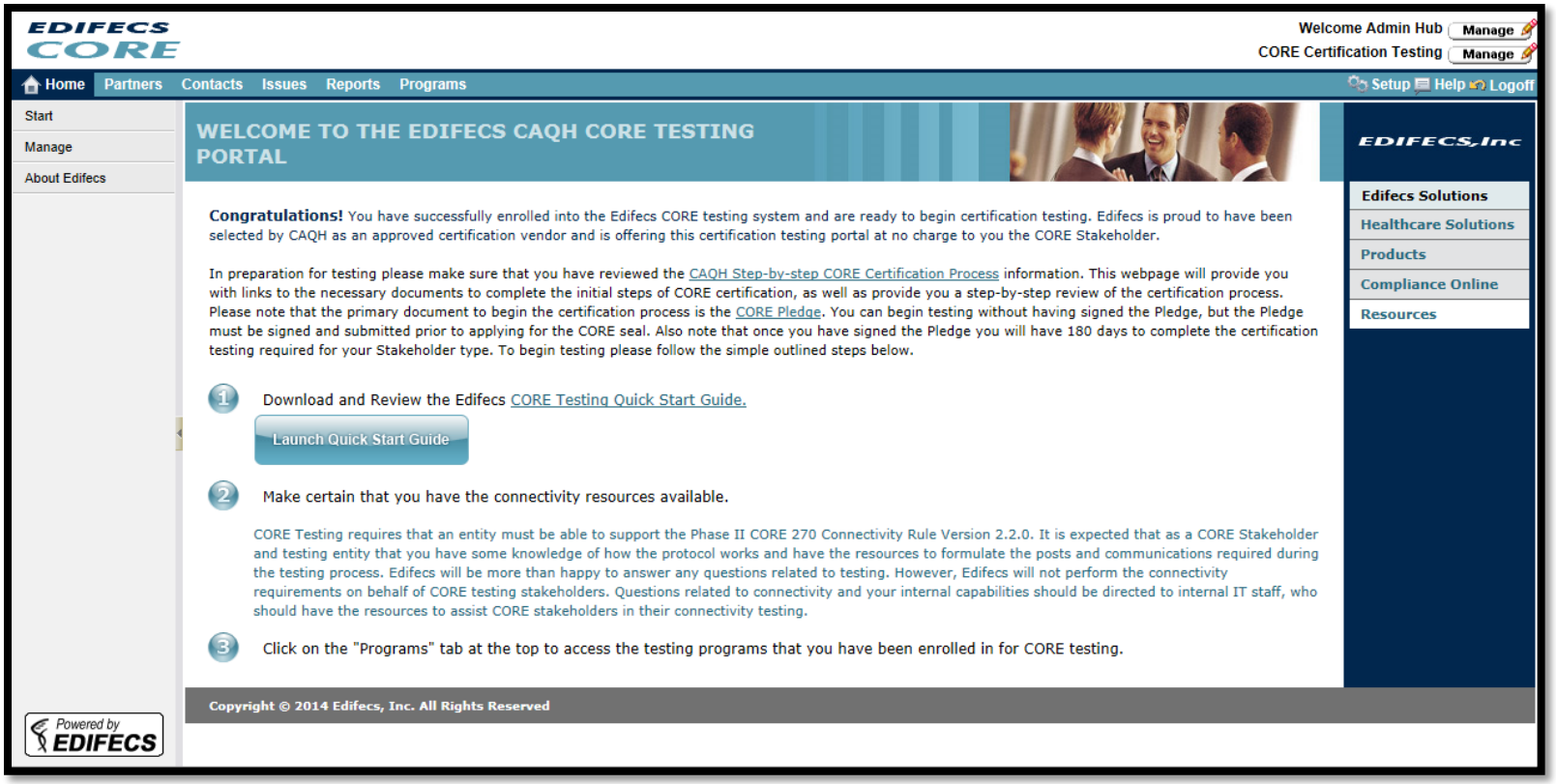
Registration/Setting up a Test Account



Key Points to take care while registration:

- Provide organization's information to avoid account rejection- Individual accounts are not acceptable due to security reasons.
- Registration should be made with the user who would responsibility of certification testing.
- Stakeholder Type- Select the most appropriate stakeholder and transaction type on the basis of your organization's business structure and applicability. This would affect the test programs and test cases which would be enrolled in your account.

Overview of Certification Testing Site



Best Practices for CORE Testing with Edifecs

Based on the questions that Edifecs support team most frequently receives from the certification testing portal, Edifecs recommends that the portal users:

- Review, understand and analyze the following components of CORE Certification in depth provided by CAQH
  - CORE Testing Policy
  - Operating Rules and their applicability
  - Master test bed data for CORE Testing
  - CORE Test Suite cases

- On the connectivity side making sure that your system follows the requirements specified in the connectivity specification provided by CAQH. The testing entities system must be up to date and compliant with the Operating rules connectivity (Phase I/II/II) prior to testing.

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CAQH CORE EFT & ERA Operating Rules

Available CORE Resources

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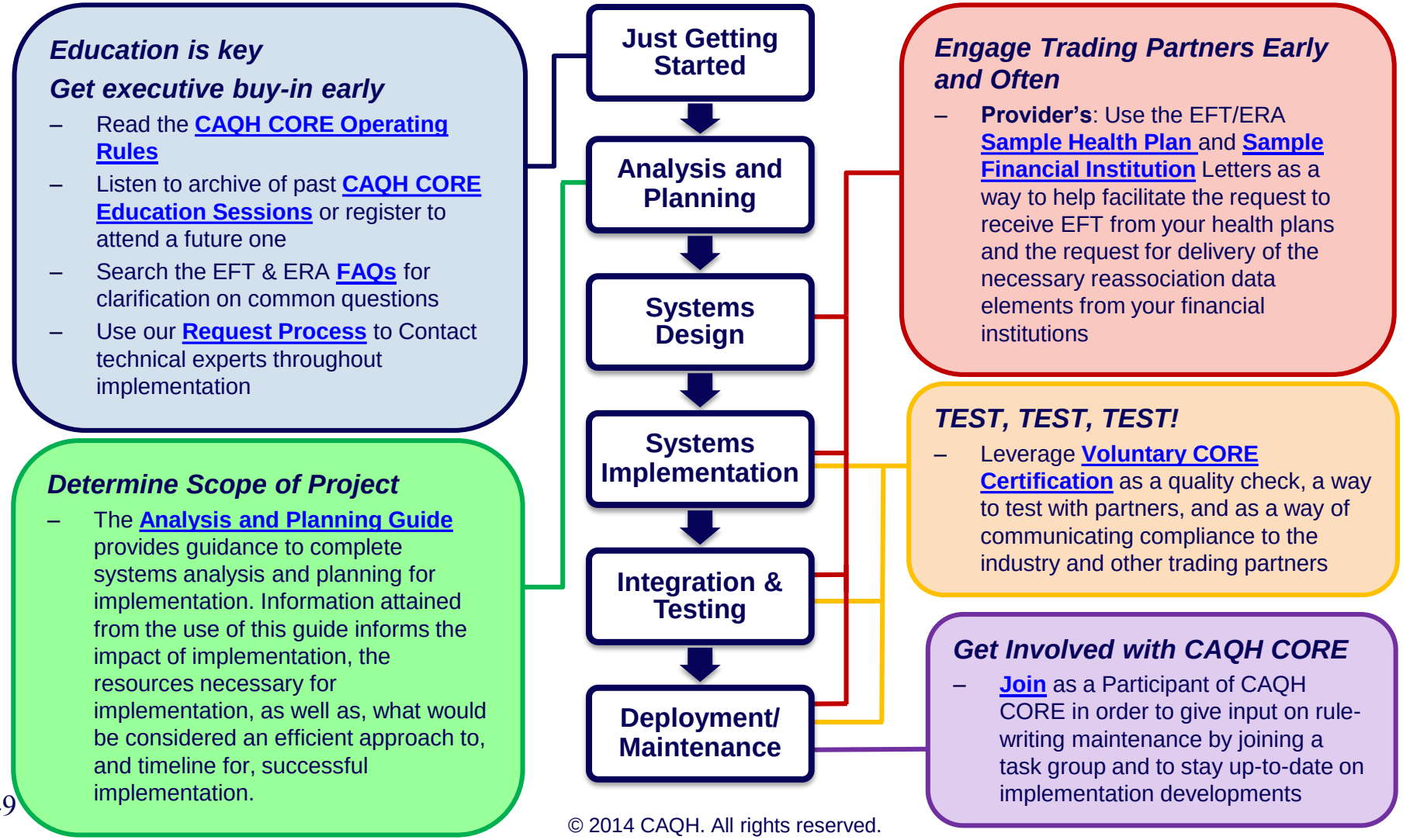
Implementation Steps for HIPAA Covered Entities

Free Tools and Resources

CAQH CORE has a ***NEW*** **Implementation Resources webpage** which contains descriptions of and links to all available free tools and resources including those outlined below and many others!



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Get Involved!

- Any CORE Participating Organization can join any CAQH CORE group
  - If you are a CORE Participating Organization and would like to join one of these group calls, please email CORE@caqh.org

CAQH CORE Group	Current Group Focus	Frequency	Next Meeting
CORE Claims/Prior Authorization Subgroup	Develop infrastructure requirements for the claims and prior authorization transactions	Wednesdays 3:00-4:30pm ET bi-weekly*	Wednesday, November 12th 3:00-4:30pm ET
CORE Benefit Enrollment & Maintenance/Health Plan Premium Payment Subgroup	Develop infrastructure requirements for the enrollment/disenrollment and premium payment transactions	TBD	First Call will Occur in November
CORE Code Combination Task Group (CCTG)	Process improvements and preparation for 2014 Market-based Review	Tuesdays 3:00-4:30pm ET bi-weekly*	December 2014 (Date TBD)
CORE Connectivity and Security Subgroup	Drafting the connectivity and related infrastructure options for Third Set of the ACA-mandated operating rules	Thursdays 2:30-4:00pm ET bi-weekly*	TBD

*Frequency of calls are subject to change. Please check the CORE Participant Calendar for the most accurate Subgroup call dates and times.

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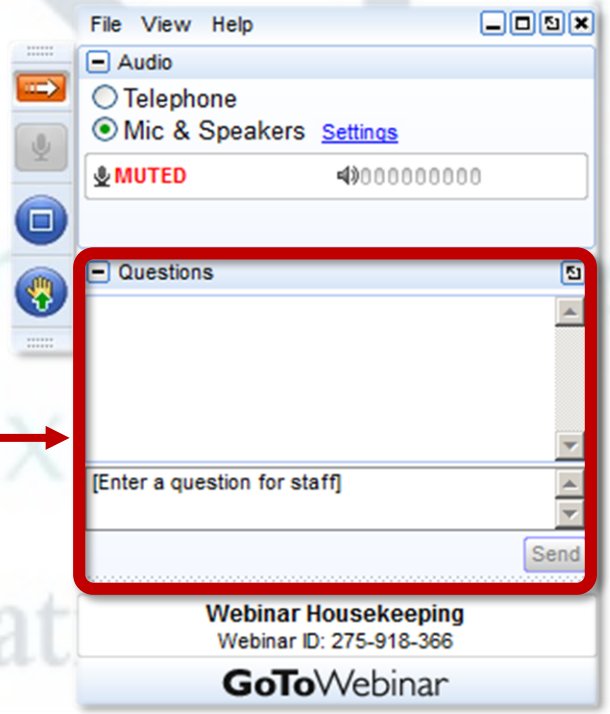
Q&A

Please submit your question:

- **Via the Web**: Enter your question into the Q&A pane in the lower right hand corner of your screen



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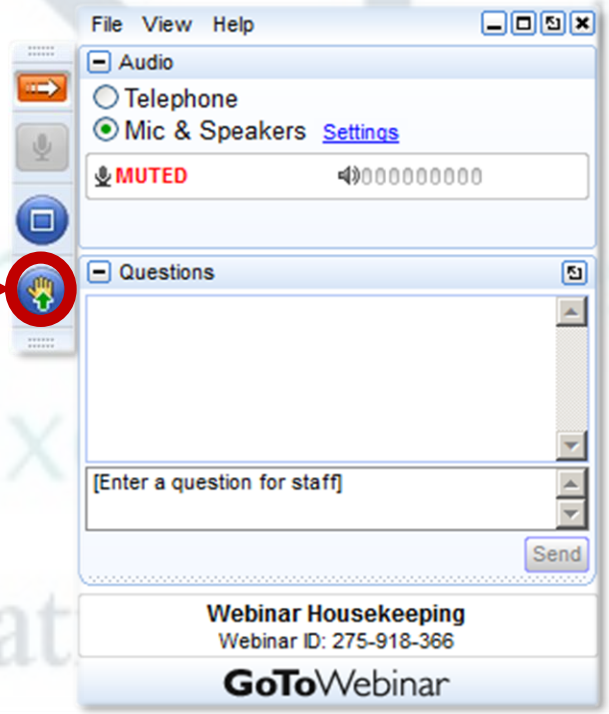
Q&A

Please submit your question:

- **<u>By Phone or VoIP</u>**: When prompted for audio portion of Q&A, please press "Raise Hand" Button to queue up to ask a question



***<u>NOTE</u>**: In order to ask a question during the audio portion of the Q&A please make sure that you have entered the **"Audio PIN"** (which is clearly identified on your user interface) by using your telephone keypad.*

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Thank You for Joining Us!

website: www.CAQH.org

email: CORE@caqh.org

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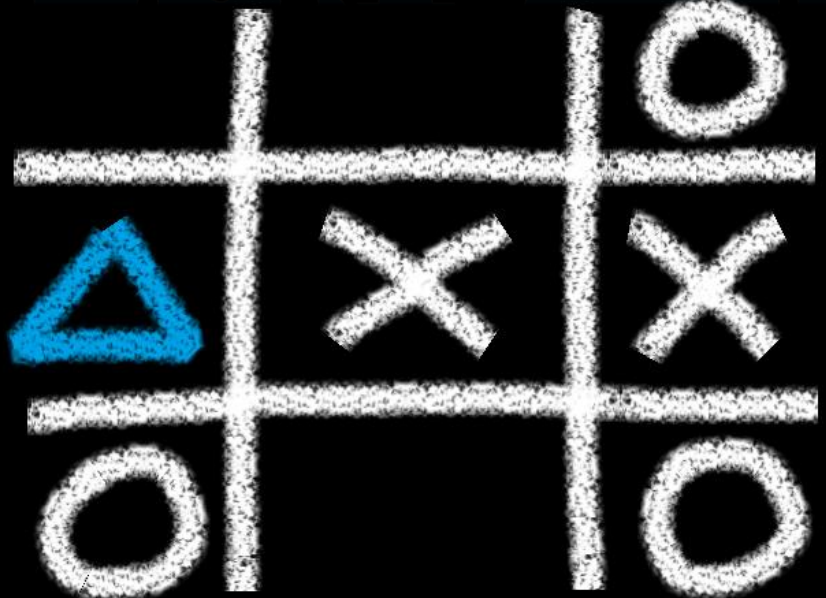
You Can't Win



If You Don't Know The Rules

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APPENDIX

Additional Information and Resources

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Available NACHA Resources

- Healthcare Payments Resources Website
  - Provides a repository of information on a wide variety of topics for both financial institutions and the healthcare industry. Includes links to many other resources, as well as customized information to help “translate” concepts from one industry to the other (FAQs, reports, presentations).
- Healthcare EFT Standard Information
  - Located within the healthcare industry tab of the above website, specific information can be found on the healthcare EFT standard.
- Healthcare Payments Resource Guide
  - Publication designed to help financial institutions in implementing healthcare solutions. It give the reader a basic understanding of the complexities of the healthcare industry, identify key terms, review recent healthcare legislation, and discuss potential impacts on the financial services industry.
  - Order from the NACHA eStore “Healthcare Payments” section
- Revised ACH Primer for Healthcare Payments
  - A guide to understanding EFT payment processing. Introduces the healthcare industry to the Automated Clearing House (ACH) Network, explains ACH transaction flow and applications, and includes two “next steps checklists,” one each for origination and receipt.
- Ongoing Education and Webinars
  - Check the Healthcare Payments Resource Website for “Events and Education”

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Available CMS OESS Resources

- HIPAA Covered Entity Charts
  - Use the HIPAA Covered Entity Charts to determine whether your organization is a HIPAA covered entity
- CMS FAQs
  - Frequently asked questions about the ACA, operating rules, and other topics
- Affordable Care Act Updates
  - Updates on operating rules; compliance, certification, and penalties; and engagement with standards and operating rules
- CMS eHealth University
  - What Administrative Simplification Does For You – This fact sheet explains the basics behind how Administrative Simplification will help improve health care efficiency and lower costs
  - Introduction to Administrative Simplification – This guide gives an overview of Administrative Simplification initiatives and their purposes
  - Introduction to Administrative Simplification: Operating Rules – A short video with information on Administrative Simplification operating rules
- Additional Questions
  - Questions regarding HIPAA and ACA compliance can be addressed to:
    - Geanelle Herring, Health Insurance Specialist, Geanelle.Herring@cms.hhs.gov

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Promote Provider Adoption of EFT & ERA Operating Rules

Take Action Now!

Contact Your Health Plans!

- To benefit from new EFT and ERA mandates, ensure your provider organization has requested the transactions from its health plans and EFT & ERA Operating Rule implementation status
- To help facilitate this request, CAQH CORE developed the ***Sample Provider EFT Request Letter***
- Providers can use this sample letter as template email or talking points with health plan contacts to request enrollment in EFT/ERA and benefits of operating rules
- The tool includes background on the benefits EFT, key steps for providers, an actual letter template, and glossary of key terms

Contact Your Banks!

- To maximize the benefits available through the CAQH CORE Reassociation Rule, providers must request delivery of the necessary data for EFT and ERA reassociation
- To help facilitate this request, CAQH CORE developed the ***Sample Provider EFT Reassociation Data Request Letter***
- Providers can use this sample letter as template email or talking points with bank contacts to request delivery of the reassociation data
- The tool includes background on the benefits of the letter, key steps for providers, an actual letter template, and glossary of key terms

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Relationship between Ongoing HIPAA Enforcement and HHS Health Plan Certification

The complaint-driven HIPAA Enforcement Process is an established and existing program that will be maintained ***in addition to*** the HHS Health Plan Certification program; the two programs are complementary

	Complaint-Driven HIPAA Enforcement Process	Proposed HHS Health Plan Certification of Compliance
Applicable Entities	All HIPAA covered entities	Health plans
Action Required	Implement CAQH CORE Eligibility & Claim Status and EFT & ERA Operating Rules, and applicable Standards	File statement with HHS that demonstrates health plan has obtained a CAQH CORE Certification Seal for Phase III or HIPAA Credential and thus are in compliance with the standards and operating rules
Compliance Date	*First Set* – **January 1, 2013** *Second Set* – **January 1, 2014**	**December 31, 2015** (proposed)
Applicable Penalties	Due to HITECH, penalties for HIPAA non-compliance have increased, now up to **$1.5 million per entity per year**	Fee amount equals **$1 per covered life until certification is complete**; penalties cannot exceed $20 per covered life or $40 per covered life (for deliberate misrepresentation) on an annual basis
Verification of Compliance	***Ongoing*** complaint-driven process to monitor compliance prompted by anyone filing a complaint via CMS's Administrative Simplification Enforcement Tool (ASET) for non-compliance with the standards and/or operating rules	"***Snapshot***" of health plan compliance based on when the health plan obtains CORE Certification/HIPAA Credential and files statement with HHS

Example of complementary nature of HIPAA Enforcement Process and Proposed HHS Health Plan Certification: An entity could file a complaint for non-compliance against an HHS-certified Health Plan using the HIPAA Enforcement Process if they believe the Health Plan has fallen out of compliance since their certification (e.g. A certified Health Plan acquires another non-compliant Health Plan).

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