

**Draft CAQH CORE® HIPAA Credential –
Attestation of HIPAA Compliance*
Draft Version 3.0.1 September 2014**

1 **These draft forms are for illustrative purposes only**, as the Department of Health and Human Services (HHS) has
2 not published a final rule on the Affordable Care Act (ACA)-mandated health plan certification. CAQH CORE’s
3 intent in publishing these draft forms is to give the industry, especially health plans, a general sense of the type of
4 documentation that may be required to complete the HIPAA Credential application process, according to the [Notice](#)
5 [of Proposed Rule Making \(NPRM\)](#), "[Administrative Simplification: Certification of Compliance for Health Plans](#)"
6 (CMS-0037-P), published on January 2, 2014 in the Federal Register.

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8 These forms are subject to change based on the release of the HHS final rule. These forms cannot be used to apply
9 for the HIPAA Credential.

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11 As the proposed administrator of the HIPAA Credential, CAQH CORE initiated a transparent and collaborative
12 industry-wide effort to develop forms designed to meet the needs of the HIPAA Credential as described in the
13 NPRM. In February 2014, CAQH CORE published the initial draft HIPAA Credential Forms on its website,
14 developed based upon the proposed requirements in the [NPRM](#). From May through June, 2014, CAQH CORE
15 solicited industry input on the clarity and content of the forms and received more than 250 comments from both
16 CORE and non-CORE Participating Organizations.

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18 Over a 5-month period, the CAQH CORE Certification/Testing Subgroup, composed of a broad cross-section of
19 industry stakeholders, revised several draft versions based upon industry feedback, surveys, and market testing
20 before approving these Final Draft HIPAA Credential Forms. Once HHS issues a final rule on the ACA-mandated
21 health plan certification, the CAQH CORE Certification/Testing Subgroup will reconvene to make any necessary
22 adjustments to the draft forms.

23 Comments are welcome at Certification.Credential@CAQH.org.

24
25 [_____], a controlling health plan¹ (“CHP”), in consideration of the CAQH
26 Committee on Operating Rules for Information Exchange (“CORE”) deeming Entity eligible to apply to
27 receive the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) Credential, hereby
28 submits this attestation of compliance with applicable provisions of the Administrative Simplification provisions
29 of HIPAA as amended by the Health Information Technology for Economic and Clinical Health Act
30 (“HITECH”) (enacted as part of the American Recovery and Reinvestment Act of 2009) and the
31 Affordable Care Act (“ACA”) (Public Law Nos. 111-148 and 111-152, enacted in March 2010) and the
32 standards, operating rules, and related regulations and guidance promulgated thereunder (referred to collectively,
33 hereinafter, as “the HIPAA requirements”), as may be amended from time to time. **(Note: Will update based on**
34 **Final Rule on certification.)**

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36 CHP understands that it must comply with applicable Federal law and cannot rely on CAQH CORE for
37 determinations of compliance.

**This form is to be submitted by CHPs seeking the CAQH CORE HIPAA Credential to demonstrate compliance with the HIPAA Standards and Operating Rules per Option #1 under the [proposed first HHS Health Plan Certification of Compliance Requirements](#). If your CHP organization is seeking a CORE Certification Seal per Option #2 under the proposed first HHS Health Plan Certification of Compliance Requirements, please refer to [CORE Certification: A Step-By-Step Process for Phase I, Phase II and Phase III](#).*

¹ Controlling health plan (from HPID regulation 45 CFR 162.103) is defined as a health plan that controls its own business activities, or is controlled by an entity that is not a health plan; and if it has subhealth plans (SHPs) exercises sufficient control over the SHP to direct their business activities.

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With this attestation, the CHP hereby represents and warrants the following:

- a) It is, and shall remain, to the best of its knowledge, compliant with standards, operating rules, and related regulations promulgated by the Secretary of the U.S. Department of Health and Human Services (the “Secretary”) under HIPAA, including, as applicable, the standards, operating rules, and related regulations adopted under Parts 160 and 162 of Title 45 of the Code of Federal Regulations, as outlined in sections (b), (c), and (d) below and as may be amended from time to time;
- b) It can send and receive, as applicable the:
 - *Retail pharmacy drugs*. The Telecommunication Standard Implementation Guide Version D, Release 0 (Version D.0), August 2007, and equivalent Batch Standard Implementation Guide, Version 1, Release 2 (Version 1.2), National Council for Prescription Drug Programs.
 - *Dental, professional, and institutional health care eligibility benefit inquiry and response*. The Accredited Standards Committee (ASC) X12 Standards for Electronic Data Interchange Technical Report Type 3—Health Care Eligibility Benefit Inquiry and Response (270/271), April 2008, ASC X12N/005010X279, Type 1 Errata to Health Care Eligibility Benefit Inquiry and Response (270/271), June 2010, ASC X12N/005010X279A1 and Errata to Health Care Eligibility Benefit Inquiry and Response (270/271), January 2009, ASC X12N/005010X279E1.
 - *Health care claim status request and response*. The ASC X12 Standards for Electronic Data Interchange Technical Report Type 3—Health Care Claim Status Request and Response (276/277), August 2006, ASC X12N/005010X212, Errata to Health Claim Status Request and Response (276/277), April 2008, X12N/005010X212E1 and Errata to Health Claim Status Request and Response (276/277), January 2009, X12N/005010X212E2.
 - *Health care electronic funds transfers (EFT)*.
 - The National Automated Clearing House Association (NACHA) Corporate Credit or Deposit Entry with Addenda Record (CCD+) implementation specifications as contained in the 2011 NACHA Operating Rules & Guidelines, A Complete Guide to the Rules Governing the ACH Network as follows - NACHA Operating Rules, Appendix One: ACH File Exchange Specifications; and NACHA Operating Rules, Appendix Three: ACH Record Format Specifications, Subpart 3.1.8 Sequence of Records for CCD Entries.
 - For the CCD Addenda Record (“7”), field 3, of the NACHA CCD+, the Accredited Standards Committee (ASC) X12 Standards for Electronic Data Interchange Technical Report Type 3 —Health Care Claim Payment/Advice (835), April 2006, ASC X12N/005010X221, Type 1 Errata to Health Care Claim Payment/Advice (835), ASC X12 Standards for Electronic Data Interchange Technical Report Type 3, June 2010, ASC X12N/005010X221A1 and Errata to Health Care Claim Payment/Advice (835), ASC X12 Standards for Electronic Data Interchange Technical Report Type 3, January 2009, ASC X12N/005010X221E1: Section 2.4: 835 Segment Detail: “TRN Reassociation Trace Number”
 - *Health care electronic remittance advice (ERA)*. ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 - Health Care Claim Payment/Advice (835), April 2006, ASC X12N/005010X221, Type 1 Errata to Health Care Claim Payment/Advice (835), ASC X12

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Standards for Electronic Data Interchange Technical Report Type 3, June 2010, ASC X12N/005010X221A1 and Errata to Health Care Claim Payment/Advice (835), ASC X12 Standards for Electronic Data Interchange Technical Report Type 3, January 2009, ASC X12N/005010X221E1

- c) It is compliant with the following Phase I & II CAQH CORE Eligibility & Claim Status Operating Rules, excluding where such rules reference and/or pertain to acknowledgements and CORE Certification:
- Phase I CORE 152: Eligibility and Benefit Real Time Companion Guide Rule, version 1.1.0, March 2011, and CORE v5010 Master Companion Guide Template
 - Phase I CORE 153: Eligibility and Benefits Connectivity Rule, version 1.1.0, March 2011
 - Phase I CORE 154: Eligibility and Benefits 270/271 Data Content Rule, version 1.1.0, March 2011
 - Phase I CORE 155: Eligibility and Benefits Batch Response Time Rule, version 1.1.0, March 2011
 - Phase I CORE 156: Eligibility and Benefits Real Time Response Rule, version 1.1.0, March 2011
 - Phase I CORE 157: Eligibility and Benefits System Availability Rule, version 1.1.0, March 2011
 - Phase II CORE 250: Claim Status Rule, version 2.1.0, March 2011, and CORE v5010 Master Companion Guide, 00510, 1.2, March 2011
 - Phase II CORE 258: Eligibility and Benefits 270/271 Normalizing Patient Last Name Rule, version 2.1.0, March 2011
 - Phase II CORE 259: Eligibility and Benefits 270/271 AAA Error Code Reporting Rule, version 2.1.0
 - Phase II CORE 260: Eligibility & Benefits Data Content (270/271) Rule, version 2.1.0, March 2011
 - Phase II CORE 270: Connectivity Rule, version 2.2.0, March 2011
- d) It is compliant with the following Phase III CAQH CORE EFT & ERA Operating Rules:
- Phase III CORE 350 Health Care Claim Payment/Advice (835) Infrastructure Rule, version 3.0.0, June 2012, except Requirement 4.2 titled “Health Care Claim Payment/Advice Batch Acknowledgement Requirements”
 - ACME Health Plan, CORE v5010 Master Companion Guide Template, 005010, 1.2, March 2011 (incorporated by reference in § 162.920), as required by the Phase III CORE 350 Health Care Claim Payment/Advice (835) Infrastructure Rule, version 3.0.0, June 2012
 - Phase III 360 CORE Uniform Use of CARCs and RARCs (835) Rule, version 3.0.0, June 2012
 - CORE-required Code Combinations for CORE-defined Business Scenarios for the Phase III CORE 360 Uniform Use of Claim Adjustment Reason Codes and Remittance Advice Remark Codes (835) Rule, version 3.0.0, June 2012 and subsequent updated versions as published by CAQH CORE.
 - Phase III CORE 370 EFT & ERA Reassociation (CCD+/835) Rule, version 3.0.0, June 2012
 - Phase III CORE 380 EFT Enrollment Data Rule, version 3.0.0, June 2012
 - Phase III CORE 382 ERA Enrollment Data Rule, version 3.0.0, June 2012
- e) It is, and shall remain, to the best of its knowledge, compliant with applicable provisions of the HIPAA Privacy and Security requirements of Parts 160 and 164 of Title 45 of the Code of Federal Regulations, as may be amended from time to time.

CHP acknowledges that CAQH CORE will rely on this attestation and that any omissions, misrepresentations, or inaccuracies are the responsibility of the CHP. The CHP contractually requires that any entities that provide services pursuant to that contract with such CHP shall comply with any applicable certification and compliance requirements as are in effect as of the date of this Attestation.

CHP HPID: _____

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121 **Authorized Representative Information**

122 The undersigned authorized representative of CHP affirms that he or she is duly empowered to represent the
123 CHP for purposes of this attestation and has knowledge confirming the accuracy of this attestation. The
124 undersigned representative also acknowledges that HHS may view the CAQH CORE HIPAA Credential
125 Application and associated forms.
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127

128 Signature of Authorized Representative
129 *(Executive-level or otherwise authorized signature)*

130
131 Printed Name

132
133 Position/Title

134
135 Name of CHP Organization

136
137 Date

138
139 Health Plan Identifier (HPID): CHP

140 *After reviewing this document and ensuring you have all the required documentation, please submit your CAQH*
141 *CORE HIPAA Credential Application, CAQH CORE Attestation of HIPAA Compliance, and CAQH CORE*
142 *Attestation of Trading Partner Testing to**:*

143 CAQH CORE
144 RE: HIPAA Credential
145 1900 K Street, NW
146 Suite 650
147 Washington, DC 20006

148 Email: CORE@caqh.org Fax: 202-517-0397
149

150 ***With final submission process, forms will be able to be completed on line, or forms can be uploaded to CAQH CORE secure*
151 *website or sent in via US Post.*

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