CAOH. CORE



Enhancing Industry Interoperability: CAQH CORE Connectivity Operating Rules

> July 22, 2020 2:00-3:00 pm EST

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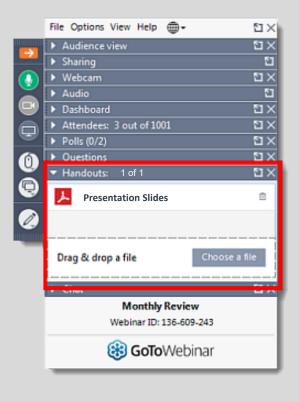
Agenda

- CAQH CORE Overview and Industry Update
- Existing CAQH CORE Connectivity Rule Requirements
- CAQH CORE Connectivity Rule Update
- Q&A

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Speakers

Patrick Murta

Chief Interoperability Architect & Fellow, Enterprise Architecture, Humana

Co-Chair of the CAQH CORE Connectivity & Security Work Group Robert Bowman

CAQH CORE Director

Emily TenEyck CAQH CORE Manager



CAQH CORE Overview and Industry Update

Robert Bowman CAQH CORE Director

CAQH CORE Mission/Vision & Industry Role

Industry-led, CAQH CORE Participants include healthcare providers, health plans, vendors, government entities, associations and standard-setting organizations. Health plans participating in CAQH CORE represent **75 percent of the insured US population**.

MISSION Drive the creation and adoption of healthcare operating rules that **support standards**, **accelerate interoperability and align administrative and clinical activities** among providers, payers and consumers.

VISION An **industry-wide facilitator** of a trusted, simple and sustainable healthcare data exchange that evolves and aligns with market needs.

DESIGNATION CAQH CORE is the **national operating rule author to improve the efficiency, accuracy and effectiveness of industry-driven business transactions.** The Department of Health and Human Services (HHS) designated CAQH CORE as the author of national operating rules for the HIPAA-covered administrative transactions.

INDUSTRY ROLE Develop business rules to help industry effectively and efficiently use electronic standards while remaining technology- and standard-agnostic.

 CAQH CORE BOARD
 Multi-stakeholder. Members include health plans, providers (some of which are appointed by associations such as the AHA, AMA, MGMA), vendors, and government entities. Advisors to the Board include SDOs (X12, HL7, NACHA, NCPDP) and WEDI.



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CAQH CORE Operating Rule Overview

		Infrastructure	Data Content	Other	Connectivity Rule Application	
Rule Set	Eligibility & Benefits	Eligibility (270/271) Infrastructure Rule*	Eligibility (270/271) Data Content Rule*		Connectivity Rule vC.1.1.0 (PI)* Connectivity Rule vC.2.2.0 (PII)*	
	Claim Status	Claim Status (276/277) Infrastructure Rule*			Connectivity Rule vC.2.2.0 (PII)*	
	Payment & Remittance	Claim Payment/ Advice (835) Infrastructure Rule*	EFT/ERA 835/CCD+ Data Content Rule*	EFT/ERA Enrollment Data Rules*		CAQH CORE is proposing Connectivity Rule vC3.1.0 be
	Prior Authorization & Referrals	Prior Authorization (278) Infrastructure Rule**	Prior Authorization (278) Data Content Rule**	Prior Authorization Web Portal Rule		
	Health Care Claims	Health Care Claim (837) Infrastructure Rule				adopted to replace existing federal mandates for vC1.1.0 and
	Benefit Enrollment	Benefit Enrollment (834) Infrastructure Rule			Connectivity Rule vC.3.1.0 (PIV)**	 vC2.2.0 for eligibility, claim status, and ERA transactions.
	Premium Payment	Premium Payment (820) Infrastructure Rule				
	*					J

*Indicates rule is federally mandated.

**Indicates rule was proposed in 2020 to NCVHS for federal mandate.

End Goal: Single Connectivity Rule across rule sets



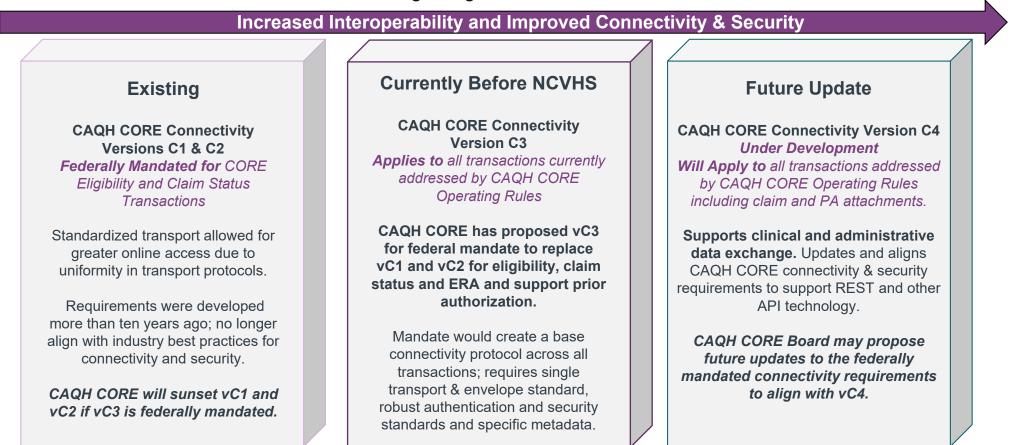
CAQH CORE Rule Package for NCVHS/HHS Consideration

Prior Authorization & Connectivity Operating Rules Increase Value & Use of Electronic Transactions

- In February 2020, the CAQH CORE Board sent a <u>letter</u> to NCVHS proposing a CAQH CORE Prior Authorization and Connectivity Operating Rules package for recommendation to the HHS Secretary for national adoption under HIPAA that includes:
 - 1. CAQH CORE Prior Authorization & Referrals (278) Data Content Rule vPA.1.0
 - 2. CAQH CORE Prior Authorization & Referrals (278) Infrastructure Rule vPA.2.0
 - 3. CAQH CORE Connectivity Rule vC3.1.0
- The Board proposed this rule package for federal mandate for three reasons:
 - The prior authorization operating rules address a pressing need to improve automation and timeliness of the prior authorization process.
 - The connectivity operating rule enhances security and promotes uniform interoperability requirements across administrative transactions.
 - These operating rules set the stage for future operating rules to further enable the critical convergence of administrative and clinical data and support the use of new technologies with existing standards.
- In June 2020, CAQH CORE sent a <u>letter</u> updating NCVHS on the re-structuring of the operating rules and the impact on the proposed rule set.
- An <u>NCVHS Hearing</u> on the proposed rule package is scheduled for August 25-26 in Washington, D.C. <u>Public comments</u> may be submitted to NCVHS by July 24.

CAQH CORE Connectivity Roadmap

The CAQH CORE Connectivity Rules address connectivity and security of administrative and clinical data exchange and establish a national base guiding healthcare communication.



CAQH CORE Participants will continue to update and maintain the Connectivity Rule at regular intervals over time to align with current interoperability, privacy and security standards.



Existing CAQH CORE Connectivity Rule Requirements

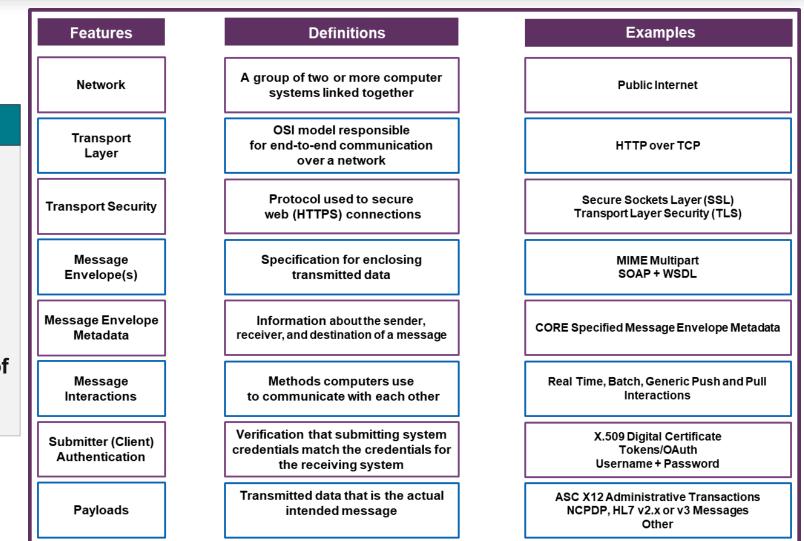
Emily TenEyck CAQH CORE Manager

CAQH CORE Connectivity

Key Features & Definitions

Connectivity

- Generic term for **connecting devices** such as computers, information systems or networks to **facilitate data access and exchange**.
- Addresses a variety of **protocols and standards**.
- The healthcare industry employs a **variety of communication modes**, each of which has its own protocols or standards.





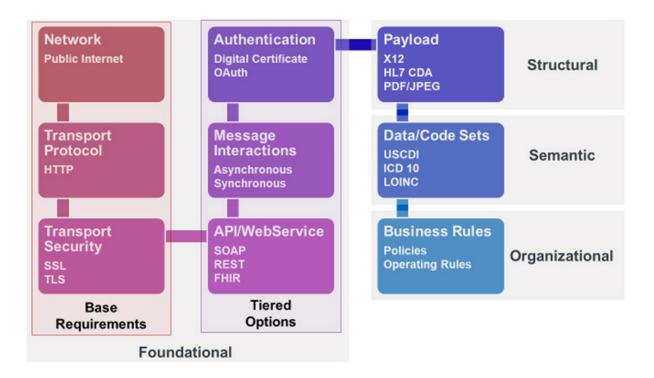
CAQH CORE Connectivity to Advance Interoperability

Connectivity enables the transport of information to support data exchange.

Health information technology interoperability is characterized by the needs and opportunities of a particular segment of the data exchange:

- Foundational interoperability is the capability of a system to transfer data to and from another system.
- **Structural interoperability refers** to the capacity to preserve the original composition or syntax of healthcare data as it moves between systems.
- Semantic interoperability is the ability of two or more systems to enter a data exchange and use the information transferred -- leverages data structure against a common vocabulary.
- **Organizational interoperability** refers to the policies and governance needed to support the smooth exchange of data.

CAQH CORE Connectivity – Potential Interoperability Approach



Evolution of CAQH CORE Connectivity Requirements

Rule Evolved to Align with Industry Best Practices for Security and Connectivity

Given large install base of vC2.2.0 due to current federal mandates, implementation costs for vC.3.1.0 will be limited due to commonalities in transport, envelope, authentication standards, and metadata. Implementation costs may be further reduced given the single submitter authentication standard.

Connectivity Rule Area	CAQH CORE Connectivity vC.1.1.0	CAQH CORE Connectivity vC.2.2.0	CAQH CORE Connectivity vC.3.1.0		
Network	Internet	Internet	Internet		
Transport	HTTP	HTTP	НТТР		
Transport Security	SSL	SSL 3.0 with optional use of TLS 1.x	SSL 3.0, or optionally TLS 1.1 or higher Entities that must also be FIPS 140-2 compliant or that require stronger transport security may implement TLS 1.1 or higher in lieu of SSL 3.0		
Submitter (Originating System or Client) Authentication	Name/Password	UserName + Password OR X.509 Digital Certificate	X.509 Digital Certificate based authentication over SSL/TLS Removed Username + Password		
Envelope and Attachment Standards	Unspecified	SOAP 1.2 + WSDL 1.1 and MTOM (for Batch) OR HTTP+MIME	SOAP 1.2 + WSDL 1.1 and MTOM (for both Real Time and Batch) <i>Removed HTTP+MIME</i>		
Envelope Metadata	Unspecified	Metadata defined (Field names, values) (e.g., <i>PayloadType, Processing Mode, Sender ID, Receiver ID</i>)	Metadata defined (Field names, values) (e.g., <i>PayloadType, Processing Mode, Sender ID, Receiver ID</i>) SHA-1 for Checksum FIPS 140-2 compliant implementations can use SHA-2 for checksum.		
Message Interactions/ Routing	Real-time Batch (Optional if used)	Real-time Batch (Optional if used)	Batch and Real-Time processing requirements defined for each transaction Generic push and pull interactions		
Acknowledgements, Errors	Specified	Enhanced vC1.1.0, with additional specificity on error codes	Errors Codes updated		
Basic Conformance Requirements for Client/Server Roles	Minimally specified	Well specified	Well specified		
Response Time	sponse Time Specified Ma		Maintained vC1.1.0 time requirements		
Connectivity Companion Guide	Specified	Enhanced vC1.1.0, with additional recommendations	Enhanced vC1.1.0, with additional recommendations		



Benefits of CAQH CORE Connectivity vC.3.1.0 over vC.2.2.0

Single standard: Reduces complexity and simplifies interoperability by requiring the SOAP + WSDL envelope standard and establishes more robust and uniform support for handling transaction payload by requiring MTOM for SOAP for both real time and batch processing modes.



Improved Security: By requiring use of X.509 Client Certificate-based authentication and removing the security vulnerable username + password, implementors benefit from a more robust and industry standard security. Additionally, provides support for FIPS 140-2 compliance for entities requiring such compliance, in terms of transport security and message envelope security.



Additional transaction standard support: Provides support for additional transactions relative to the previous rules, including prior authorization in addition to eligibility, claim status, and electronic remittance advice.



Safe Harbor: The CAQH CORE Connectivity safe harbor specifies that application vendors, clearinghouses, providers, and health plans can be assured CAQH CORE Connectivity will be supported by any HIPAA covered entity and/or a CORE-certified entity, meaning the entity is capable and ready at the time of the request by a trading partner to exchange data using the CAQH CORE Connectivity Rule. The rule does not require entities to remove existing connections. For example, while the X.509 digital certificate must be used if requested by a trading partner, the rule clearly state there is no requirement to use a CAQH CORE-compliant method if trading partners agree to use different security requirements, e.g., a virtual private network (VPN) or secure file transfer protocol (SFTP).

Improves Messaging and Error Reporting: Enhances the communication of errors with updated error codes.



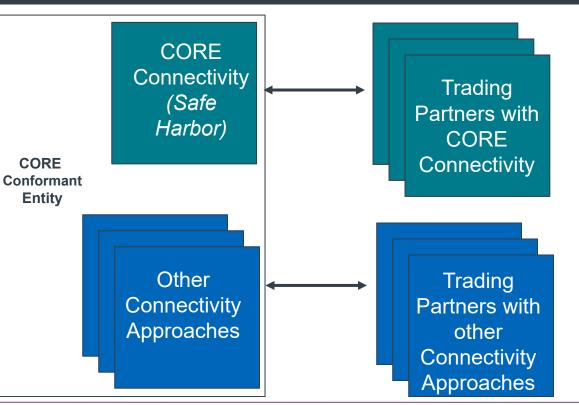
CAQH CORE Connectivity

Safe Harbor Principle

Using the Internet as a delivery option establishes a **Safe Harbor connectivity method** that application vendors, providers, and health plans can be assured <u>will be supported by any HIPAA covered entity</u>, meaning that the entity is capable and ready to exchange data at the time of a request by a trading partner using the CAQH CORE Connectivity Rule.

The Safe Harbor connectivity method enables trading partners to:

- Use different communications & security methods than what is specified in rule
- Does not require discontinuation of any existing connectivity methods that do not conform with CAQH CORE Operating Rules.



Polling Question #1

Which CAQH CORE Connectivity benefits are most important to your organization? (Select all that apply)

- Reduces Complexity (Single Standard)
- Improved Security
- Additional Transaction Standard Support
- Safe Harbor
- Improved Messaging and Error Reporting



CAQH CORE Connectivity Rule Update

Patrick Murta

Chief Interoperability Architect & Fellow, Enterprise Architecture, Humana Co-Chair of the CAQH CORE Connectivity & Security Work Group



Aligning Connectivity Requirements to Support Industry Advancement

CAQH CORE Connectivity Rule Update Goals:

- Align the CAQH CORE Connectivity Rule to support frameworks proposed in the CMS and ONC interoperability rules and modernize the CORE Connectivity Requirements.
- Establish a **Safe Harbor** that aligns with existing IT implementations and supports emerging approaches for exchanging data.
- Develop a CAQH CORE Connectivity Rule that support the intersection of administrative and clinical data exchange.

Specific Draft Connectivity & Security Requirement Updates:

- Require the use of **public internet** and **web services for connectivity** and **TLS v1.2 or higher for security**.
- Define submitter authentication and authorization methods to establish trust within an attachment exchange such as X.509
 Digital Certificates and OAuth 2.0.
- Add support for **REST APIs** and the exchange of **Attachments transactions**.



CAQH CORE Connectivity & Security Work Group Roadmap

We are here 2020									
Feb	Mar	Apr May	Jun	July	Aug	Sept	Oct	Nov	Dec
Conne	Connectivity & Security Work Group Drafts Requirements for CAQH CORE Connectivity Rule Update				Formal CAQH CORE Voting Process				
CSWG Recruitment	CSWG Launches	CSWG Chooses Rule Requirements for Update	Upda	CSWG Drafts ted Connectivit Requirements	ty Rule	CSWG Finalizes & Ballots Updated Connectivity Rule	Final CORE Participal Vote	CORE nt Board Vote	

NOTE: Timeline may be subject to adjustments based on Work Group needs. New connectivity rule will support/align with other new operating rules developed in 2020/2021, (e.g. attachments, value-based payments) per the CAQH CORE Roadmap.



Provide for Updated, Consistent Connectivity Modes for Data Exchange

CAQH CORE proposed to NCVHS that the CAQH CORE Connectivity Rule vC.3.1.0 replace current regulations mandating support for CAQH CORE Connectivity Rules vC.1.1.0 and vC.2.2.0 for the eligibility and benefits, claim status, and electronic remittance advice transactions in addition to prior authorization, to promote uniform interoperability requirements across administrative transactions.

Proposed to NCVHS : CAQH CORE Connectivity Rule vC.3.1.0 Establishes a Safe Harbor Connectivity Method that drives industry alignment by converging on common Connectivity standards and requirements.	Under Development: Draft CAQH CORE Connectivity Rule vC.4.0.0 The updates to CORE Connectivity will serve as a bridge between the existing and emerging standards and protocols to ensure industry interoperability needs are met.				
 Key Existing Connectivity Requirements: Support for Simple Object Access Protocol (SOAP)* based web services with specific metadata, message structure, and error handling Use of HTTPS* (SSL 3.0, or optionally TLS 1.1 or higher for compliance with FIPS 140-2 TLS 1.1 or higher in lieu of SSL 3.0) over the Public Internet TCP/IP* 	 Updates to Existing CORE Connectivity Requirements Under Consideration: Add support for the exchange of Attachments transactions Specify TLS 1.2 or higher for security Add OAuth 2.0 as an authorization standard 				
 Establishes a Safe Harbor Connectivity Method* X.509 Digital Certificate Submitter Authentication (mutual authentication)* * Continue to be supported in the Draft CAQH CORE Connectivity Rule vC4.0.0 	 New REST Requirements Under Consideration: Support for Representational State Transfer (REST) style web resources for X12 and non X12 exchanges. Use of JSON to exchange REST messages 				
	 Support for specific HTTP Methods (e.g. POST and GET) Support for REST API and CORE Connectivity Rule Versioning Specify API Endpoint Naming Conventions 				

Future Connectivity Opportunities: Once a single Connectivity Rule is established across all CAQH CORE operating rule sets, CAQH CORE Participants will continue to update the rule to align with current interoperability, privacy and security standards.

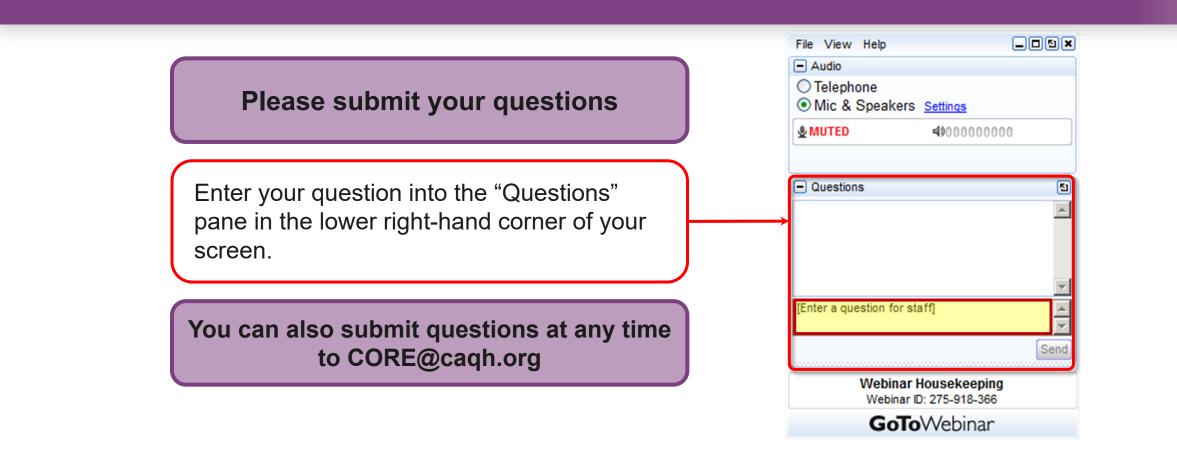
Polling Question #2

Does your organization use RESTful APIs for data exchange?

- Yes
- No
- No, but plan to implement



Audience Q&A



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Join Us



Collaborate across stakeholder types to develop operating rules.

Present on CAQH CORE education sessions.

Engage with the decision makers that comprise 75% of the industry.



Represent your organization in work groups.

*

Influence the direction of health IT policy

Drive the creation of operating rules to accelerate interoperability

Click here for more information on joining CAQH CORE as well as a complete list of Participating Organizations.



Resource Library





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CAGH CORE PARTICIPANT CALENDAR

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e-Learning Resources

Welcome to the CAQH CORE e-Learning Resources page.

Value-based Payments Opportunity Areas October 8, 2019

Use this learning module to learn about the opportunity areas to streamline implementation of Valuebased Payment.





CAQH CORE Integrated Model

October 7, 2019

Click on this Integrated Model to explore how CAQH CORE is changing the industry.

Utilize our interactive online tools to learn more about the CORE Certification process and the CAQH CORF model

Explore our YouTube page to access over 75 CAQH CORE tutorials and webinar recordings.

Listen to a tutorial on the Phase V Operating Rules.

Go to our FAQs page for answers to questions on topics such as operating rule implementation and CORE Participation.

Read our latest white paper "The Connectivity Conundrum: How a Fragmented System is Impeding Interoperability and How Operating Rules Can Improve It."



Upcoming CAQH CORE Education Sessions and Events



WEDI Forum August 4-6, 2020



Prior Authorization Case Study Webinar August 17 | 2:00-3:00 pm EST



Thank you for joining us!



Website: www.CAQH.org/CORE Email: CORE@CAQH.org

The CAQH CORE Mission

Drive the creation and adoption of healthcare operating rules that support standards, accelerate interoperability and align administrative and clinical activities among providers, payers and consumers.

