

**Overview of CAQH CORE Attachments Operating Rules  
February 2022**

**Introduction**

The tables below is intended to provide an overview or “cheat sheet” outlining the new [CAQH CORE Attachments Operating Rules proposed to NCVHS for federal adoption](#) by the CAQH CORE Board. The proposed rules address **both infrastructure and data content requirements** for health care claims and prior authorization attachments. A link to each rule is included in the first column, followed by a high-level overview of the rule requirements, and example industry benefits.

<b>1. Health Care Claims Attachments Operating Rules</b>		
<b>Operating Rule</b>	<b>Rule Requirements</b>	<b>Rule Benefits</b>
<a href="#">CAQH CORE Attachments Health Care Claims Infrastructure Rule vHC.1.0</a>	<ul style="list-style-type: none"> <li>• X12 v6020X316 275 Attachment/Non-X12 Methods:               <ul style="list-style-type: none"> <li>- 90% system availability + 24-hour quarterly downtime</li> <li>- References the most current version of CORE Connectivity</li> <li>- Capability to accept minimum of 64MB of data</li> </ul> </li> <li>• X12 v6020X316 275 Attachment Only:               <ul style="list-style-type: none"> <li>- Batch and Real Time Processing Modes</li> <li>- Version agnostic <a href="#">CAQH CORE Master Companion Guide</a> to support non-5010 transactions</li> <li>- Acknowledgements &amp; data error handling</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Establishes key infrastructure requirements that promote uniform, electronic attachments implementation across multiple proposed standards supporting EDI and API</li> <li>• Ensures consistent security and authorization standards through CORE Connectivity</li> <li>• Enable consistent, electronic exchange of needed supporting documentation leading to quicker coverage decisions to support patient care</li> </ul>
<a href="#">CAQH CORE Attachments Health Care Claims Data Content Rule vHC.1.0</a>	<ul style="list-style-type: none"> <li>• Establishes common codes and data elements that should be used to assist with reassociation for prior authorization and healthcare claims transactions for X12 and non-X12 methods</li> </ul>	<ul style="list-style-type: none"> <li>• Promotes uniformity for X12 and non-X12 data exchange methods</li> <li>• Provide a standards-agnostic solution for complicated and wasteful attachments reassociation efforts in support of prior authorization and healthcare claims adjudication</li> <li>• Simplify reassociation of a claim or prior authorization to an attachment reducing the need for manual intervention</li> </ul>

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<b>2. Prior Authorization Attachments Operating Rules</b>		
<b>Operating Rule</b>	<b>Rule Requirements</b>	<b>Rule Benefits</b>
<a href="#">CAQH CORE Attachments Prior Authorization Infrastructure Rule vPA.1.0</a>	<ul style="list-style-type: none"> <li>• X12 v6020X316 275 Attachment/Non-X12 Methods:               <ul style="list-style-type: none"> <li>- 90% system availability + 24-hour quarterly downtime</li> <li>- References the most current version of CORE Connectivity</li> <li>- Capability to accept minimum of 64MB of data</li> </ul> </li> <li>• X12 v6020X316 275 Attachment Only:               <ul style="list-style-type: none"> <li>- Batch and Real Time Processing Modes</li> <li>- Version agnostic <a href="#">CAQH CORE Master Companion Guide</a> to support non-5010 transactions</li> </ul> </li> </ul> <p>Acknowledgements &amp; data error handling</p>	<ul style="list-style-type: none"> <li>• Establishes key infrastructure requirements that promote uniform, electronic attachments implementation across multiple proposed standards supporting EDI and API</li> <li>• Ensures consistent security and authorization standards through CORE Connectivity</li> <li>• Enable consistent, electronic exchange of needed supporting documentation leading to quicker coverage decisions to support patient care</li> </ul>
<a href="#">CAQH CORE Attachments Prior Authorization Data Content Rule vPA.1.0</a>	<ul style="list-style-type: none"> <li>• Establishes common codes and data elements that should be used to assist with reassociation for prior authorization and healthcare claims transactions for X12 and non-X12 methods</li> </ul>	<ul style="list-style-type: none"> <li>• Promotes uniformity for X12 and non-X12 data exchange methods</li> <li>• Provide a standards-agnostic solution for complicated and wasteful attachments reassociation efforts in support of prior authorization and healthcare claims adjudication</li> <li>• Simplify reassociation of a claim or prior authorization to an attachment reducing the need for manual intervention</li> </ul>