



Phase IV CAQH CORE Certification and Testing Policies v4.0.0

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Phase IV CAQH CORE 401 Pledge v4.0.0

Phase IV CAQH CORE 401 Pledge
v4.0.0 September 2015

Phase IV CAQH CORE™ Pledge

***NOTE:** Organizations that are Phase I, Phase II and Phase III CORE-certified are required to sign only the Phase IV Addendum found on page 7.*

The Council for Affordable Quality Healthcare (“CAQH”) has created the Committee on Operating Rules for Information Exchange (“CORE”). CORE’s mission is to use common business rules (the “Operating Rules”) to promote interaction of healthcare trading partners and the exchange of healthcare-related information in a consistent, clear, and standardized manner and in compliance with applicable laws and regulations. Developing consistency between trading partners, and thus promoting interoperability, would benefit the healthcare industry by improving the usefulness of healthcare information and reducing administrative costs for stakeholders involved in healthcare data exchange.

Phase I of CAQH CORE’s mission is focused on promulgating Operating Rules to increase the usefulness of, and reduce the administrative challenges associated with, eligibility, benefit, and other administrative inquiries by giving providers access to a patient’s information at the time of service (or before) using the provider’s preferred electronic means. Subsequent phases will broaden the Operating Rules to expand the Operating Rules surrounding eligibility and benefit inquiries and to include additional administrative transaction types consistent with the CAQH CORE Vision. As additional Operating Rules are promulgated in subsequent phases, Participant and CAQH CORE may incorporate those additional Operating Rules into this Pledge by executing a separate addendum that incorporates the additional Operating Rules into this Pledge.

_____ (“Participant”) hereby endorses CAQH CORE’s mission.

In furtherance of CAQH CORE’s mission, Participant pledges to adopt, implement, and comply with the CAQH CORE Operating Rules as promulgated by CAQH CORE and in effect as of the date of this Pledge, in accordance with the timeframes set forth in the Operating Rules, *as and to the extent applicable to Participant’s business*. In addition, Participant pledges to use reasonable efforts to encourage Participant’s trading partners to use the CAQH CORE Operating Rules. Moreover, Participant will participate in the CORE Certification Program described in the CAQH CORE Operating Rules (“Certification”) to the extent applicable.¹ Finally, with the goal of improving the quality and utility of the Operating Rules on an ongoing basis, Participant pledges to provide feedback (which may be either qualitative or quantitative) relating to the Operating Rules.

By signing this Pledge, the Participant also agrees to be publicly recognized as a supporter of CAQH CORE’s mission and an endorser of the CAQH CORE Operating Rules. CAQH CORE may use Participant’s name and logo (as provided by Participant and subject to any reasonable restrictions around use of the logo provided by the Participant to CAQH CORE in writing) solely in connection with such CAQH CORE publicity. CAQH CORE will make any materials using Participant’s name or logo available to Participant promptly after release and will respond to Participant promptly and in good faith if Participant objects to CAQH CORE’s use of Participant’s name or logo. In particular, CAQH CORE will discontinue any use of Participant’s name or logo to the extent requested to do so by Participant in writing. Participant, at its option, may participate in the CAQH CORE Work Group responsible for designing CAQH CORE’s publicity campaign “CAQH CORE Marketing Work Group.” Participant may describe itself as an “endorser of the Phase I CAQH CORE Operating Rules” or an “endorser of CAQH CORE” as long as this Pledge is in effect. Participant may describe itself as “CORE-certified” only after achieving certification in accordance with the CAQH CORE Operating Rules. Participant may not otherwise use the CORE name or marks without CAQH CORE’s prior written consent.

¹ This clause is meant to address entities that are not subject to voluntary CORE Certification (e.g., associations or industry groups) and to address the differences in voluntary CORE Certification applicable to different participant-types that are subject to voluntary CORE Certification (e.g., providers, payers, vendors, and clearinghouses).

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Participant recognizes that the CAQH CORE Operating Rules have been developed by a team of representative members of the healthcare industry that have been coordinated by CORE through CAQH and the stakeholders participating in CORE, and Participant agrees that neither CAQH nor CORE (nor their respective members, representatives, and/or agents) will be held responsible for the results of using the Operating Rules in Participant's business and that neither CAQH nor CORE (or their respective members, representatives, and/or agents) shall have any liability to Participant arising from or related to the Operating Rules or their use by Participant. Remedies for breach of the Operating Rules are as set forth in the Operating Rules; this Pledge does not create any additional remedies against Participant.

Participant recognizes that, as a standard, the CAQH CORE Operating Rules are being made publicly available for use by the healthcare industry in anticipation of broad industry adoption. As such, Participant acknowledges that it has no intellectual property rights in the Operating Rules and that any intellectual property rights in the Operating Rules are owned by CAQH on behalf of CORE.

Participant represents that its participation with CAQH CORE and this Pledge to use the CAQH CORE Operating Rules are entirely voluntary. Participant may withdraw from using the Operating Rules at any time by submitting sixty (60) days written notice to CAQH CORE. In addition, CORE (including CORE as acting through CAQH) may terminate this Pledge upon written notice if Participant loses its CORE Certification and such CORE Certification is not reinstated within one-hundred eighty (180) days, or if Participant fails to obtain voluntary CORE Certification within one-hundred eighty (180) days of execution of this Pledge. In the event of termination of the Pledge for any reason, Participant must immediately stop using all CORE marks, including any references to being "CORE-certified."

Accepted:

Acknowledged:

Participant:

Council for Affordable Quality Healthcare
on behalf of CORE

By: _____

By: _____

Name: _____

Robin J. Thomashauer

Title: _____

President

Date: _____

Date: _____

For Phase IV Certification or Endorsement: Refer to page 7 for the Phase IV Addendum.

After signing this document (and ensuring your organization will be able to successfully complete CORE Certification Testing in 180 days if you are seeking CORE Certification), please submit to:

CORE c/o CAQH
2020 K Street, NW
Suite 900 Washington,
DC 20006

E: CORE@caqh.org F:
202-517-0397

**Phase IV CAQH CORE 401 Pledge
v4.0.0 September 2015**

**CAQH CORE™ PLEDGE
PHASE II ADDENDUM**

This addendum to the Phase I CAQH CORE Pledge supplements the Phase I CAQH CORE Pledge (the “Pledge”) signed by CAQH and Participant, and extends Participant’s support of the Committee on Operating Rules for Information Exchange (“CORE”) to Phase II CORE. In particular, CAQH has promulgated Phase II of CORE (“Phase II CORE”) to build upon the Phase I Eligibility and Benefits (270/271) related Phase I CORE Operating Rules updated to support v5010 of the HIPAA adopted ASC X12 Technical Report Type 3 implementation guides, and add operating rules updated to support v5010 of the ASC X12 005010X212 Health Care Claim Status Request and Response (276/277) transaction. Participant hereby extends its support of CAQH CORE in the Pledge to include support of Phase II. Subject to the extension to Phase II as set forth in this addendum, the provisions of the Pledge shall continue to apply to Phase I CORE without change.

Accepted:	Acknowledged:
Participant: _____	Council for Affordable Quality Healthcare on behalf of CORE
By: _____	By: _____
Name: _____	Robin J. Thomashauer
Title: _____	President
Date: _____	Date: _____

After signing this document (and ensuring your organization will be able to successfully complete CORE Certification Testing in 180 days if you are seeking CORE Certification), please submit to:

CORE
c/o CAQH
2020 K Street, NW
Suite 900
Washington, DC 20006

E: CORE@caqh.org
F: 202-517-0397

**Phase IV CAQH CORE 401 Pledge
v4.0.0 September 2015**

**CAQH CORE™ PLEDGE
PHASE III ADDENDUM**

This addendum to the CAQH CORE Pledge supplements the CAQH CORE Pledge (the “Pledge”) signed by CAQH and Participant, and extends Participant’s support of the Committee on Operating Rules for Information Exchange (“CORE”) to CORE Phase III. In particular, CAQH has promulgated Phase III of CORE (“Phase III CORE”) to add operating rules to support v5010 of the ASC X12 005010X221A1 Health Care Claim Payment/Advice (835) transaction and the Healthcare EFT Standards (NACHA CCD+ and the X12 v5010 835 TR3 TRN Segment). Participant hereby extends its support of CAQH CORE in the Pledge to include support of Phase III. Subject to the extension to Phase III as set forth in this addendum, the provisions of the Pledge shall continue to apply to Phase I and Phase II CORE without change.

Accepted:

Acknowledged:

Participant:

Council for Affordable Quality Healthcare
on behalf of CORE

By: _____

By: _____

Name: _____

Robin J. Thomashauer

Title: _____

President

Date: _____

Date: _____

After signing this document (and ensuring your organization will be able to successfully complete CORE Certification Testing in 180 days if you are seeking CORE Certification), please submit to:

CORE
c/o CAQH
2020 K Street, NW
Suite 900
Washington, DC 20006

E: CORE@caqh.org
F: 202-517-0397

**Phase IV CAQH CORE 401 Pledge
v4.0.0 September 2015**

**CAQH CORE™ PLEDGE
PHASE IV ADDENDUM**

This addendum to the CAQH CORE Pledge supplements the CAQH CORE Pledge (the “Pledge”) signed by CAQH and Participant, and extends Participant’s support of the Committee on Operating Rules for Information Exchange (“CORE”) to CORE Phase IV. In particular, CAQH has promulgated Phase IV of CORE (“Phase IV CORE”) to add operating rules to support v5010 of the ASC X12N 005010X222 Health Care Claim (837) Professional, ASC X12N 005010X223 Health Care Claim (837) Institutional, ASC X12N 005010X224 Health Care Claim (837) Dental, ASC X12N 005010X217 Health Care Services Review – Request for Review and Response (278), ASC X12N 005010X220 Benefit and Enrollment Maintenance (834), and ASC X12N 005010X218 Payroll Deducted and Other Group Premium Payment for Insurance Products (820) transactions. Participant hereby extends its support of CAQH CORE in the Pledge to include support of Phase IV. Subject to the extension to Phase IV as set forth in this addendum, the provisions of the Pledge shall continue to apply to Phase I, Phase II, and Phase III CORE without change.

Accepted:

Acknowledged:

Participant:

Council for Affordable Quality Healthcare
on behalf of CORE

By: _____

By: _____

Name: _____

Robin J. Thomashauer

Title: _____

President

Date: _____

Date: _____

After signing this document (and ensuring your organization will be able to successfully complete CORE Certification Testing in 180 days if you are seeking CORE Certification), please submit to:

CORE
c/o CAQH
2020 K Street, NW
Suite 900
Washington, DC 20006

E: CORE@caqh.org
F: 202-517-0397



Phase IV CAQH CORE 402 Certification Policy v4.0.0

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**Phase IV CAQH CORE 402 Certification Policy
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GUIDING PRINCIPLES

- *After signing the CAQH CORE Pledge and/or Addendum, the entity has 180 days to complete CAQH CORE Certification Testing.*
- *CAQH CORE will not certify Phases that CAQH CORE has not clearly defined and voted upon.*
- *CAQH CORE Certification Testing will be required by any entity seeking voluntary CORE Certification. CAQH CORE will authorize testing entities to conduct CAQH CORE Certification Testing. All CAQH CORE-authorized Testing Vendors will need to be capable of testing for all Phase IV rules.*
- *Entities pursuing voluntary Phase IV CORE Certification will be required to test for the Batch Processing Mode required by the Phase IV rules.*
- *Upon successful completion of CORE Certification Testing, CORE-certified entities will receive a CORE Certification Seal from CAQH.*
- *Entities undergoing Phase IV CORE Certification Testing must be Phase I, Phase II, and Phase III CORE-certified, if applicable.*
- *Entities seeking voluntary CORE Certification will be required to adopt all of Phase IV CAQH CORE Operating Rules that apply to their business and will be responsible for all their own company-related testing costs.*
- *CAQH CORE will not oversee trading partner relationships. CORE-certified entities may work with non-CORE-certified entities if they so desire.*
- *Role of HIPAA compliance:*
 - *It will be assumed by CAQH CORE that any covered entity under HIPAA applying for voluntary CORE Certification will be HIPAA compliant; when submitting testing certification documentation to CAQH CORE, covered entities will be asked to sign an attestation form attesting that they are HIPAA compliant to the best of their knowledge (“CAQH CORE HIPAA Attestation”) for security, privacy, and the X12 270/271, the X12 276/277, the X12 278, the X12 820, the X12 834, the X12 835, the X12 837 transaction(s), and the Healthcare EFT Standards (NACHA CCD+ and X12 v5010 TR3 TRN Segment) as they are applicable to the HIPAA covered entity. HIPAA compliance will not be defined by CAQH CORE.*
- *Role of CAQH CORE-authorized Testing Vendors:*
 - *CAQH CORE-authorized Testing Vendors will be expected to sign the CAQH CORE HIPAA Attestation on their own behalf as well, demonstrating that they support compliant transactions.*
- *Who will be certified:*
 - *CAQH CORE Certification Testing will vary based on participant type. Associations, medical societies and the like will not be certified; instead, these entities will receive a CORE Endorser “Seal” after signing the CAQH CORE Pledge. Entities successfully achieving voluntary CORE Certification will receive the CORE Certification Seal that corresponds with their testing application as testing varies by stakeholder type. There will be five different types of CORE Certification Seals:*
 - *CORE-certified health plan*
 - *CORE-certified vendor (product specific)*
 - *CORE-certified clearinghouse (product specific)*
 - *CORE-certified provider*

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- *CORE Endorser (for entities that do not create, use, or transmit eligibility, claim status, payment, remittance advice, claim, benefit enrollment, request for review, and/or premium payment information)*
- *A parent corporation seeking voluntary CORE Certification will not be certified unless all subsidiaries of the corporation are compliant with CAQH CORE Operating Rules. Otherwise, each subsidiary of the parent must individually seek voluntary CORE Certification. For vendors, voluntary CORE Certification will apply only to specific vendor products rather than corporate entities.*
- *Ancillary services are not assumed to be subsidiaries, as a subsidiary is a legal entity of its own that serves as one of the types of key stakeholders that can become certified, e.g., health plan, vendor, or clearinghouse.*
- *If a CORE-certified entity is acquired by an entity that is not CORE-certified, that company will only be allowed to be CORE-certified if the acquired company is the only business that is applicable to the CAQH CORE Operating Rules. If this is not the case, then the newly merged company will be required to seek voluntary CORE Certification.*
- *If a CORE-certified entity begins offering a new transaction for which voluntary CORE Certification exists, or it acquires an organization that offers the transaction, the entity will have 12 months to certify that new transaction; if the CORE-certified entity does not certify for the new transaction, it will lose its CORE Certification Seal. (Note: An entity has 180 days to complete CORE Certification Testing once the CAQH CORE Pledge has been signed.)*
- *Endorsers will not become certified, but will be expected to participate in the CAQH CORE public relations campaign, provide CAQH CORE feedback and input when requested to do so, and encourage their members to consider participating in CAQH CORE.*

POLICY

Section 1: Fees

- Entities seeking voluntary CORE Certification will be charged two fees: fees related to CAQH CORE Certification Testing as determined by the CAQH CORE-authorized Testing Vendors and the CAQH CORE Certification Fee for the CORE Certification Seal as determined by CAQH CORE. The goal of CAQH CORE is to develop a low-cost certification process in order to support CAQH CORE market adoption by small and large entities.

Section 2: Period for Which Certification Applies

- Once certified, CORE-certified entities will remain compliant with applicable CAQH CORE Operating Rules throughout any system upgrades. When vendors release new versions of their products that affect the functionality of CAQH CORE Operating Rules, such versions will need to become CORE-certified in order to maintain the CORE Certification Seal.
- Assuming certification is not revoked, voluntary CORE Certification, except for vendor products, will remain valid until a new version of the CAQH CORE Operating Rules is established by vote. Revisions will not be made to the rules more than once (1) per year. Revisions to approved rules, if necessary, will become official 20 business days after enacted by CAQH CORE. (Version is defined as a substantive change to any approved CORE Phase that requires Full CAQH CORE Voting Participating Organization approval.)

Section 3: Key Steps

The five key steps of voluntary CORE Certification are presented below:

Subsection 3.1: Step 1: Existing entities currently engaged in HIPAA testing will be “authorized” by CAQH CORE as CAQH CORE-authorized Testing Vendors if they meet certain criteria.

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- CAQH CORE-authorized Testing Vendors will test entities using the CAQH CORE Voluntary Certification Test Suite.
- CAQH CORE will allow any interested entity to apply to CAQH CORE to become a CAQH CORE-authorized Testing Vendor. However, to become a CAQH CORE-authorized Testing Vendor, an interested testing entity must be capable of testing for all Phase I, Phase II, Phase III, and Phase IV CAQH CORE Operating Rules and must meet a CORE-developed set of criteria. An RFP and beta approval process will identify authorized companies.
- CAQH CORE will list any testing entity that is a CORE-authorized Testing Vendor on its website.

Subsection 3.2: Step 2: CORE Participants seeking certification will work with the CAQH CORE-authorized Testing Vendor of their choice to test for CORE compliance.

- CAQH CORE Certification Testing will differ by the role the entity undergoing CAQH CORE Certification Testing plays in any of the transactions addressed by the Phase I, Phase II, Phase III, and Phase IV CAQH CORE Operating Rules.
- Any fee/cost imposed by CAQH CORE-authorized Testing Vendor will be independent and separate from the fee CAQH CORE will charge to obtain the CORE Certification Seal. Certification testing fees will be established by each CAQH CORE-authorized Testing Vendor; thus prices will be market-driven.
- If a vendor or clearinghouse does not offer a product/service for which voluntary CORE Certification exists in Phase IV, it must submit an attestation to this fact.
- A CAQH CORE-authorized Testing Vendor will only provide paperwork to an entity seeking CORE Certification after that entity has successfully demonstrated its ability to conform to the rules.

Subsection 3.3: Step 3: CAQH CORE will grant the appropriate CORE Certification Seal after an entity provides all documentation required, including documentation from a CAQH CORE-authorized Testing Vendor demonstrating the entity's compliance with CAQH CORE Operating Rules through successful testing.

- CAQH CORE will be responsible for providing the official CORE Certification Seal (after compliance is proven).
- CAQH CORE (or its agents) will review test results and maintain a record of CORE-certified entities.
- Applicants will be responsible for ensuring that an authorized person signs the final CAQH CORE Seal Application and the CAQH CORE HIPAA Attestation, indicating that to the best of the person's knowledge, the applicant is HIPAA compliant for security, privacy, and the transaction(s) addressed by the Phase I, Phase II, Phase III, and Phase IV CAQH CORE Operating Rules (or, in the case of a vendor, supports these transaction(s)).
 - See attached Phase IV CAQH CORE Attestation.
- Upon receiving documentation of successful completion of CAQH CORE Certification Testing from an applicant, CAQH CORE will have a maximum of 20 business days to respond to the applicant with a clear response of approval or need for clarification. CAQH CORE will inform those who apply for voluntary CORE Certification of the "certification" queue status at the time of their application submission. CAQH CORE will complete its assessment within 30 business days unless there are extenuating circumstances. CAQH CORE will report on its website:
 - List of CORE-certified entities.
 - In the case of vendors and clearinghouses, the CORE-certified transaction(s) processed by their product.

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- The fee for the Phase IV CORE Certification Seal will be the same as the Phase I, Phase II, and Phase III CORE Certification Fees, regardless of the number of transactions for which an entity has completed Phase IV testing.
- The cost of the CORE Certification Seal will be a one-time fee, unlike the CAQH CORE Participation fee, which is an annual fee. The CORE Certification Seal indicates that an entity/product is CORE-certified. The CAQH CORE Participation fee is separate from the CAQH CORE Certification Fee and allows entities to participate in the CAQH CORE rule writing and voting process. CAQH CORE Participating Organizations may voluntarily decide whether or not to become CORE-certified entities.
- Voluntary CORE Certification will be effective until a new version of the CAQH CORE Operating Rules is made available, provided an organization has no complaints filed against it, except for vendors, who will be required to seek new voluntary CORE Certification when a new version of a previously CORE-certified product is released.
- If an entity removes its name from the CAQH CORE Pledge, it automatically loses voluntary CORE Certification.
- When new phases are approved by the CORE Participating Organizations, re-certification by a CORE-certified entity is not required for an already certified phase.
- As stated in the CAQH CORE Pledge, a CORE-certified entity is permitted to market its CORE Certification Seal only if the entity's Seal is valid and current.

Subsection 3.4: (Potential) Step 4: Re-certification will be required if an entity's CORE Certification Seal is revoked as a result of a validated complaint of non-compliance. (See enforcement for steps involved in the complaint process.)

- See enforcement process regarding how a validated complaint of non-compliance will be defined and pursued.

Subsection 3.5: Step 5: Re-certification when CAQH CORE Operating Rules are modified.

- CAQH CORE Operating Rules will become official 20 business days after being approved by CAQH CORE; however, adoption of the rules is not required by an entity until 180 business days after signing the CAQH CORE Pledge. A similar timeframe for an entity's adoption will be added for revisions.
- CAQH CORE reserves the right to revise the rules.
- Minor modifications that would improve a rule will not require re-certification (see CORE version control document).
- Major substantive changes, e.g., new phases, will require re-certification and re-signing of the CAQH CORE Pledge relative to the new phase, should the entity choose to pursue certification for the new phase.
- Except for vendors and entities with validated non-compliance, re-certification will be required only after the CAQH CORE Participating Organizations approve, by vote, major modifications, changes, or deletions to CAQH CORE Operating Rules.
- Generally, CAQH CORE Operating Rules will not be amended between CAQH CORE rule phases unless government regulations are issued that impact the rules or as necessary to address problems that arise upon implementation. In this scenario, adoption of the modified rule(s) by CORE Participating Organizations will be within a reasonable timeframe and will acknowledge/comply with Federal mandates.

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Section 4: Certification Testing Appeals Process

- Prior to any appeal being submitted, it is assumed efforts have already been taken to try to resolve the issue privately between an entity seeking voluntary CORE Certification and a CAQH CORE-authorized Testing Vendor, but efforts have not succeeded.
- In the event an entity seeking voluntary CORE Certification is not satisfied with its testing results, it is permitted to file an appeal of the results to CAQH CORE.
- CAQH CORE will have 20 business days to investigate the issue. If the appeal is deemed valid, CAQH CORE will ask the CAQH CORE-authorized Testing Vendor to re-test the results in question within 21 business days of request.
- The Enforcement Committee will have oversight of this process. Please see the Phase IV CAQH CORE 405 Enforcement Policy v4.0.0 for more details.

**Phase IV CAQH CORE HIPAA Attestation
v4.0.0 September 2015**



[_____] (“Entity”), in consideration of the Committee on Operating Rules for Information Exchange (“CORE”) deeming Entity eligible to apply to participate in the CORE Certification Program, hereby submits this attestation to compliance with applicable provisions of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) as amended by the Health Information Technology for Economic and Clinical Health Act (“HITECH”) (enacted as part of the American Recovery and Reinvestment Act of 2009) and the Affordable Care Act (“ACA”) (Public Law Nos. 111-148 and 111-152, enacted in March 2010) and the standards, operating rules, and related regulations and guidance promulgated thereunder (referred to collectively, hereinafter, as “the HIPAA requirements”), as may be amended from time to time.

Entity recognizes that CAQH CORE does not certify for all aspects of the HIPAA requirements or define “HIPAA Compliance.” Entity will not rely on CAQH CORE for these determinations but will look to the Federal government for its various requirements.

With this attestation, the Entity 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 that govern health care claims or equivalent encounter information, health plan enrollment/disenrollment, health plan premium payments, and referral, certification and authorization, 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 may be amended from time to time;
- (b) it can send and receive, as applicable, or, in the case of a software vendor, support the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3—Health Care Claim (837) Professional, June 2006, ASC X12N/005010X222; the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3— Health Care Claim (837) Institutional, June 2006, ASC X12N/005010X223; the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3— Health Care Claim (837) Dental, June 2006, ASC X12N/005010X224; the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3— Health Care Services Review— Request for Review and Response (278), August 2006, ASC X12N/005010X217; the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3— Benefit Enrollment and Maintenance (834), August 2006, ASC X12N/005010X220; and the Accredited Standards Committee (“ASC”) X12 Standards for Electronic Data Interchange Technical Report Type 3 — Payroll Deducted and Other Group Premium Payment for Insurance Products (820), February 2007, ASC X12N/005010X218 as specified in §162.1602 of 45 CFR or the current version of such standards, as may be updated or amended from time to time (the “Transactions”);
- (c) 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.

Entity acknowledges that CAQH CORE will rely on this attestation and that any omissions, misrepresentations, or inaccuracies may be a basis for CAQH CORE to deny or revoke CORE Certification.

Entity agrees to notify CAQH CORE if it discovers that any of the representations and warranties were not true when made or if it fails to remain compliant with any of the applicable standards, operating rules, and related regulations and guidance set forth above. Entity understands that a loss of compliance with the standards set forth above, or in the case of a software vendor, the ability to support the Transactions, may affect CORE Certification.

[Continued on Next Page]

**Phase IV CAQH CORE HIPAA Attestation
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The undersigned representative of Entity affirms that he or she is duly empowered to represent the Entity for purposes of this attestation and has knowledge confirming the accuracy of this attestation.

Signature

Printed Name

Position

Date

Please submit this attestation along with your organization's Phase IV CAQH CORE Seal Application.

**For entities seeking Phase IV voluntary CORE Certification. If your organization is seeking a Phase IV CORE Endorser Seal, please refer to the CORE Endorsement Overview.*



Phase IV CAQH CORE Seal Application
v4.0.1 January 2019

**Phase IV CAQH CORE Seal Application
v4.0.1 January 2019**



A. Contact Information

Organization

Name of product being certified (*if applicable*)

Contact Name (*individual responsible for your organization's CORE-certification process*)

Mailing Address

Phone

Fax

Email

B. Required Documents (Please attach the following with this application)

Certifiers

1. Phase IV CAQH CORE Certification Testing results documentation (as provided by the CAQH CORE-authorized Testing Vendor with which you worked).
2. Phase IV CAQH CORE HIPAA Attestation (requires executive-level signature).
3. Phase IV CAQH CORE Health Plan IT System Exemption Request Form (if applicable; requires executive-level signature).
4. Signed Phase IV CAQH CORE Pledge (Unless previously submitted)

Endorsers

1. Signed Phase IV CAQH CORE Endorser Pledge

C. Phase IV CORE Certification and Endorsement Terms and Conditions

1. An entity's CORE Certification Seal will be revoked as a result of a validated complaint of non-compliance (see Phase IV CAQH CORE 405 Enforcement Policy for more information).
2. Voluntary CORE Certification is required for each Phase of CAQH CORE Operating Rules.
3. Re-certification and re-endorsement is required for each substantive change made to Phase IV CAQH CORE and additional Phase rules. Substantive changes will occur no more than once per year.
4. To health plans granted an exemption, the 12-month IT system exemption period will begin on the day that the health plan is granted its Phase IV CAQH CORE Certification Seal.
5. After receiving a Phase IV CAQH CORE Certification Seal, the entity may market itself as a CORE Endorser or as CORE-certified.

D. CAQH CORE Responsibilities

1. CAQH CORE will notify you of your "certification" queue status at the time CAQH CORE receives your application.
2. CAQH CORE will complete its assessment within 30 business days unless there are extenuating circumstances.
3. CAQH CORE will grant your stakeholder-specific CORE Certification Seal following review and approval of your application.
4. Entities receiving the Phase IV CORE Certification Seal will be promoted in CAQH CORE marketing materials and on the CAQH CORE Website.

**Phase IV CAQH CORE Seal Application
v4.0.1 January 2019**

E. CAQH CORE Certification Fee for the CORE Certification Seal

Please review the fee structure and notes below to determine your CAQH CORE Certification Seal Fee. Then check the appropriate box under the stakeholder type for the CORE Certification Seal you are requesting.

Health Plans

- | | |
|---|-------------|
| <input type="checkbox"/> Below \$75 million in net annual revenue | \$6,000 fee |
| <input type="checkbox"/> \$75 million and above in net annual revenue | \$9,000 fee |

Clearinghouses

- | | |
|---|-------------|
| <input type="checkbox"/> Below \$75 million in net annual revenue | \$6,000 fee |
| <input type="checkbox"/> EHNAC HNAP-EHN accredited (apply 10% (\$600) discount) | |
| <input type="checkbox"/> \$75 million and above in net annual revenue | \$9,000 fee |
| <input type="checkbox"/> EHNAC HNAP-EHN accredited (apply 10% (\$900) discount) | |

Vendors

- | | |
|---|-------------|
| <input type="checkbox"/> Below \$75 million in net annual revenue | \$6,000 fee |
| <input type="checkbox"/> \$75 million and above in net annual revenue | \$9,000 fee |

Providers

- | | |
|--|-------------|
| <input type="checkbox"/> Up to \$1 billion in net annual revenue | \$750 fee |
| <input type="checkbox"/> \$1 billion and above in net annual revenue | \$2,250 fee |

Endorser

(Only for entities that do not create, transmit or use HIPAA transactions.) No fee

Fee Notes:

1. Organizations pursuing more than one Phase at a time are eligible for a 20% discount.
2. There is no charge to Federal or State government entities and [CAQH member plans](#) to receive the CORE Seal.
3. Per the [Phase IV CAQH CORE 402 Certification Policy](#), vendor products, and not entire vendor organizations, receive the CORE Certification Seal.
4. The CAQH CORE Certification Fee does not include the fee for CAQH CORE Certification Testing. See <http://www.caqh.org> for a list of CORE-authorized Testing Vendors and their associated testing fees.
5. Any Clearinghouse/EHN entity actively seeking voluntary CORE Certification as of June 1, 2009 or later that has already achieved EHNAC HNAP-EHN accreditation can take advantage of the partnership program discount. The Clearinghouse/EHN will indicate that it holds a current EHNAC HNAP-EHN accreditation when submitting a CAQH CORE Seal Application. (CAQH CORE will confirm EHNAC-EHN accreditation status independently.)

Please review these materials to ensure you have all the required documentation.

Payment Options (please check one):

TO PAY BY ACH, contact CAQH CORE for an invoice. Send your CORE Seal Application form and HIPAA Attestation form to the address below.

TO PAY BY PAPER CHECK, make your check payable to CAQH and send your check with CORE Seal Application form and HIPAA Attestation form to:

CAQH CORE
2020 K Street, NW
Suite 900 Washington,
DC 20006



Phase IV CAQH CORE 403 Health Plan IT System Exemption Policy v4.0.0

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Phase IV CAQH CORE 403 Health Plan IT System Exemption Policy v4.0.0 September 2015

BACKGROUND

This policy addresses certification exemptions that health plans seeking voluntary CORE Certification may request when the health plan has a scheduled migration of an existing IT system(s) if the remainder of the health plan's IT systems are CORE compliant. This policy is complementary and does not replace the following CAQH CORE policies, which are already part of the Phase IV CAQH CORE 402: Certification Policy v4.0.0.

- *Entities may seek certification for their subsidiaries versus their corporate entity. The CORE Certification Seal will apply to the subsidiary or the corporation, whichever entity seeks voluntary CORE Certification.*
- *If a CORE-certified entity is acquired by an entity that is not CORE-certified, that company will only be allowed to be CORE-certified if the acquired company is the only business that is applicable to the CAQH CORE Operating Rules. If this is not the case, then the newly merged company will be required to seek certification.*

POLICY

Section 1: Required Criteria to be Granted a CAQH CORE Health Plan IT System Exemption:

Any health plan seeking a CAQH CORE Health Plan IT System Exemption must meet the following criteria or gain approval for an exception/out of scope designation:

Subsection 1.1: Percentage

Percentage of a health plan's health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment transactions that are processed by the IT system(s) for which the exemption is being requested:

No more than 30 percent of a health plan's total of health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment transactions can be processed by the IT system(s) to be covered by the exemption.

Subsection 1.2: Timing

Time period for which the IT system(s) in question must be scheduled for migration:

- Migration must be scheduled for completion no later than 12 months from the date of when the health plan is granted voluntary CORE Certification.
- If migration is not completed within the agreed-upon 12 months from the date of voluntary CORE Certification, the health plan could be de-certified (see below).

Section 2: Deadlines for exemptions and requests for exceptions/out of scope designations

- IT system exemptions *and exceptions/out of scope designations* will be reviewed and granted on an individual health plan basis.
- Exemptions that are due to newly acquired entities will only be granted if the same above parameters on time periods and percentage of Phase IV transactions (health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment) are met.
- Reviewing and approving exceptions/out of scope designations will be the responsibility of the CAQH CORE Enforcement Committee.

Section 3: Exemption Request and Review Process

Subsection 3.1: Exemption Request

Any health plan seeking an exemption must follow the CAQH CORE Certification Policy, excluding the IT system(s) for which they are seeking the exemption.

Phase IV CAQH CORE 403 Health Plan IT System Exemption Policy v4.0.0 September 2015

- When providing CAQH CORE with the documentation to prove successful CORE Certification Testing and attest to HIPAA compliance, the health plan must provide CAQH CORE with an executive-level attestation stating that the health plan meets the agreed-upon IT system exemption criteria and has the ability to identify those transactions to which the exemption applies. As a result, CAQH CORE will be able to accurately respond to those Requests for Review of Possible Non-Compliance that are the result of IT system exemptions.
- If possible, the plan will communicate to CAQH CORE, in a way that is most meaningful to the market/providers, the systems/groups/products for which CAQH CORE compliant data will not be available until after the exemption time period expires.
- If the proper CORE Certification documentation is received, CAQH CORE will be responsible for granting exemptions just as it is responsible for granting CORE Certification Seals.
- The 12-month IT system exemption period will begin on the day that the health plan is granted voluntary CORE Certification (a CORE Certification Seal) by CAQH CORE.

Subsection 3.2: Review Process

On or before the last business day of the month in which exemption ends, the health plan must communicate to CAQH CORE that the migration is/is not complete.

- It is the goal of CAQH CORE to build momentum for voluntary CORE Certification and this goal will be taken into consideration when reviewing requests for *exceptions* to the exemption policy.
- If a CORE-certified health plan with an exemption communicates to CAQH CORE that the IT system migration was not completed in the agreed-upon timeframe, the CAQH CORE Board will determine how to address the issue.
- Decisions by CAQH CORE to remove the CORE Certification Seal or to provide an exception shall be conducted within 20 business days.
- If de-certified, the health plan will need to reapply for voluntary CORE Certification.
- The CAQH CORE Enforcement Policy outlines the steps to become re-certified after being de-certified. Health plans wanting to become re-certified due to non-compliance with an IT exemption rule will need to be re-certified for all transactions for which voluntary CORE Certification exists.

Section 4: Communication Concerning Which CORE-certified Systems Have Exemptions

- All CORE-certified entities will be listed on the CAQH CORE website (see Phase IV CAQH CORE 402: Certification Policy v4.0.0). In addition, Phase IV CORE-certified vendors and clearinghouses will have the transaction(s) listed for which they have certified.
- There will be a footnote next to those certified health plans that have an IT system exemption. The footnote will indicate that a portion of the plan's IT systems are not CAQH CORE compliant; detailed information identifying those systems/groups/products specific to each plan will be provided, if available.
- The footnote will only be removed when the health plan communicates to CAQH CORE that its exempted system(s) are in compliance.



**Phase IV CAQH CORE Health Plan IT System Exemption
Request Form
v4.0.0 September 2015**

**Phase IV CAQH CORE Health Plan IT System Exemption Request Form
v4.0.0 September 2015**



A. Contact Information

Organization: _____

Contact Name: _____

Mailing Address: _____

Phone: _____

Email: _____

B. Required Criteria to be Granted a CAQH CORE Health Plan IT System Certification Exemption:

Any health plan seeking an IT System Certification Exemption must meet the following criteria or gain approval for an exception:

1. Percentage

Percentage of a health plan's health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment that are processed by the IT system(s) for which the exemption is being requested:

- No more than 30 percent of a health plan's total of Phase IV transactions (health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment) can be processed by the IT system(s) to be covered by the exemption.

2. Timing

Time period for which the IT system(s) in question must be scheduled for migration:

- Migration must be scheduled for completion no later than 12 months from the date of when the health plan is granted voluntary CORE Certification.
- If migration is not completed within the agreed-upon 12 months from the date of voluntary CORE Certification, the health plan could be de-certified (see below).

C. Exemptions and Requests for Exceptions/Out of Scope Designations

- IT system exemptions *and exceptions/out of scope designations* will be reviewed and granted on an individual health plan basis.
- Exemptions that are due to newly acquired entities will only be granted if the same above parameters on time periods and percentage of Phase IV transactions (health care claims or equivalent encounter information; referral, certification, and authorization; enrollment/disenrollment; and health plan premium payment) are met.
- Approving exceptions/out of scope designations will be the responsibility of the CAQH CORE Enforcement Committee.

D. Required Documents

Please attach the following with this application:

1. CAQH CORE HIPAA Attestation (signed by your organization's appropriate senior executive).

**Phase IV CAQH CORE Health Plan IT System Exemption Request Form
v4.0.0 September 2015**

2. A list of the states, markets and systems for which the exemption applies. The list should provide enough detailed information for providers to easily determine when your health plan will begin providing CORE compliant transactions in their practice area.

By signing this form, your organization is stating that your health plan meets the agreed-upon IT system exemption criteria.

Signature: _____

Name: _____

Title: _____

Please submit this form with your Phase IV CAQH CORE Seal Application.

Please contact CAQH at CORE@caqh.org or (202) 517 - 0400 with questions.



Phase IV CAQH CORE 404 Certification Testing Policy v4.0.0

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Phase IV CAQH CORE 404 Certification Testing Policy

v4.0.0 September 2015

GUIDING PRINCIPLES

- *The CAQH CORE Certification Testing Policy will be used to gain voluntary CORE Certification only; it does not outline trading partner implementation interoperability testing activities.*
- *Third parties that have become CAQH CORE-authorized Testing Vendors through a standard CAQH CORE evaluation process will be used by interested parties to test for CAQH CORE Operating Rules compliance. CAQH CORE will authorize any testing vendor that meets CAQH CORE's testing vendor criteria. A key criterion in becoming a CAQH CORE-authorized Testing Vendor will be that the vendor is capable of testing for all Phase I, Phase II, Phase III, and Phase IV CAQH CORE Operating Rules.*
- *A prerequisite for obtaining a stakeholder-specific CORE Certification Seal will be the successful completion of a stakeholder-specific CAQH CORE Certification Test Suite, which will be demonstrated through proper documentation from a CAQH CORE-authorized Testing Vendor.*
- *All parties essential to the success of the transactions will be addressed in the CAQH CORE Certification Testing process: providers, health plans, clearinghouses, and vendors. CORE Certification testing will vary by stakeholder type, e.g., provider, health plan, clearinghouses, vendors. Associations, medical societies and the like will not undergo CAQH CORE Certification Testing as they are endorsers of CAQH CORE rather than CORE-certified entities.*
- *The CAQH CORE Certification Testing protocol will be scoped only to demonstrate conformance with CAQH CORE Operating Rules, and not overall compliance with HIPAA; however, each entity submitting an application for voluntary CORE Certification will sign a statement attesting that it is HIPAA compliant to the best of its knowledge.*

POLICY

Section 1: Key Steps

Subsection 1.1: Step 1: CORE Pre-Certification, Self-Testing

- To prepare for voluntary CORE Certification, entities seeking voluntary CORE Certification can review rules and conduct internal testing as they see appropriate.

Subsection 1.2: Step 2: CAQH CORE Certification Testing Process

- A CAQH CORE-authorized Testing Vendor performs testing with an entity seeking voluntary CORE Certification based upon Phase IV CAQH CORE testing criteria specific to that entity's stakeholder type.
- Entities seeking voluntary CORE Certification can work with the CAQH CORE-authorized Testing Vendor of their choice to test and/or use a testing website developed by one or more of the companies to conduct their Phase IV CAQH CORE Certification Testing. If a website approach is taken, individual company testing results would not be shared publicly. The CAQH CORE Voluntary Certification Test Suite includes scenario-based testing and expected outcomes.

Subsection 1.3: Step 3: CAQH CORE-Authorized Testing Vendor Verifies Testing Completion

- CAQH CORE-authorized Testing Vendor verifies, with documentation, that an entity seeking voluntary CORE Certification has successfully completed testing; entity can apply to CAQH CORE to obtain the CORE Certification Seal by submitting documentation to CAQH CORE. (See Phase IV CAQH CORE 402 Certification Policy v4.0.0.)

**Phase IV CAQH CORE 404 Certification Testing Policy
v4.0.0 September 2015**

Subsection 1.4: Step 4: Certification Testing Appeals Process

- Prior to any appeal being submitted, it is assumed efforts have already been taken to try to resolve the issue privately between an entity seeking certification and the CAQH CORE-authorized Testing Vendor, and such efforts have not succeeded.
- In the event an entity seeking voluntary CORE Certification is not satisfied with its testing results, it will be permitted to file a written appeal of the results to CAQH CORE, under the guidance of the CAQH CORE Enforcement Committee (See Phase IV CAQH CORE 405 Enforcement Policy.)
- CAQH CORE will have 20 business days to investigate the issue. If the appeal is deemed valid, CAQH CORE will ask the CAQH CORE-authorized Testing Vendor to re-test the test scripts in question within 21 business days of request.



Phase IV CAQH CORE 405 Enforcement Policy v4.0.0

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**Phase IV CAQH CORE 405 Enforcement Policy
v4.0.0 September 2015**

CAQH CORE GUIDING PRINCIPLES

- *Parties to the complaint will be encouraged to privately resolve disputes before submitting a formal complaint of non-compliance against a CORE-certified entity.*
- *Enforcement will be a complaint-driven process that will require documentation (electronic or paper) demonstrating multiple instances of non-compliance.*
- *Any healthcare provider that is an end-user of a CORE-certified product/service may lodge a complaint against a CORE-certified entity. Beyond end-users of a CORE-certified product/service, only an organization that is CORE-certified and involved in the alleged non-compliant transactions may file a complaint.*
- *The details of a specific complaint will remain confidential. Names or other identifying information will not be publicly released. This information will only be used and disclosed by CAQH CORE for its non-compliance review. If an entity is found to be in actual violation of a CAQH CORE Operating Rule(s), its voluntary CORE Certification will be terminated and its name removed from the CAQH CORE website if the complaint is not remedied per the CAQH CORE Enforcement Policy timeline.*
- *The complaint process will be progressive, but will last no more than six (6) months between filing of complaint and resolution. Extensions may be granted on a case-by-case basis due to mitigating factors decided upon by the CAQH CORE Enforcement Committee.*
- *The CAQH CORE Enforcement Committee will consist of a balance of stakeholder types from the CORE Participants (CORE-certified health plans, provider PMS vendors, clearinghouses, and providers). No one stakeholder type will be permitted to have a dominant representation.*
- *Entities are permitted to withdraw a complaint at any time during the complaint process.*
- *Personal health information (PHI) must not be submitted without appropriate authorization.*
- *CAQH CORE will accept and review any submitted complaint that contains the required documentation.*

POLICY

Section 1: Complaint Filing

Every effort must be made to resolve problems before a complaint is filed. Conformance language for each rule should assist entities with what is required of CORE-certified entities.

Subsection 1.1: Step 1: Complaint formally filed with CAQH CORE, including proper documentation.

- Includes a completed CORE-developed form, Request for Review of Possible Non-Compliance Form, which outlines the violation, and at least five documented examples of the violation(s) over a 30-day period, demonstrating that the violation was not a one-time occurrence but occurred in multiple instances.
- Organization filing complaint must do so within 90 days of the most recent compliance violation(s) for which the complaint is being filed.

Subsection 1.2: Step 2: CAQH CORE, under the guidance of the CAQH CORE Enforcement Committee, reviews complaint form for completeness and timeliness, and verifies/dismisses complaint.

- Information gathered from entity filing complaint.
- Organization in question given an opportunity to respond to complaint in writing.
- CAQH CORE must respond to the complaint within 20 business days.

Phase IV CAQH CORE 405 Enforcement Policy v4.0.0 September 2015

- All organizations involved in the complaint must respond to requests for information by CAQH CORE within 20 business days. The complaint must be deemed valid or invalid within 30 business days after all documentation is reviewed by CAQH CORE and requests for information are received.

(Process ends if inquiry dismissed. If inquiry verified, process continues.)

Section 2: For Verified Complaints Only

Subsection 2.1: Step 1: Entities found to be out of compliance with a CAQH CORE Operating Rule(s) will be informed by CAQH CORE that they have a defined grace period (40 business days) in order to remedy the problem by successfully re-testing for compliance with the CAQH CORE Operating Rule(s) or be de-certified.

- A CAQH CORE Enforcement Committee composed of objective members will review verified complaints, and will be responsible for providing any extension to this grace period.
- CAQH CORE Enforcement Committee terms will be limited to one year from date of appointment.
- Conflicts of interest will be avoided on a case-specific basis at the request of the entity being reviewed for non-compliance. If a member of the CAQH CORE Enforcement Committee is party to a complaint, then he/she will recuse him/herself for the duration of the resolution of the complaint.
- The membership of the CAQH CORE Enforcement Committee will be appointed by the CAQH CORE Board from nominations made by the CAQH CORE Board members and/or CAQH CORE Participating Organizations. Until there is an equal representation of stakeholders, or until a sufficient number of certified entities exist, Subgroup and/or Work Group Chairs will serve on the CAQH CORE Enforcement Committee.
- 10 business days after the grace period, entities will prove they have remedied the problem by presenting to the CAQH CORE Enforcement Committee documentation of at least five instances on five different business days over a span of 10 business days in which there was no issue of compliance with the entity that filed the complaint, in addition to providing documentation of successful re-testing.
- The CAQH CORE Enforcement Committee will be responsible for granting variances to the 40 business day grace period.

Section 3: For Complaints not Remedied

Subsection 3.1: Step 1: De-certification/removal of CORE Certification Seal.

Section 4: For De-Certified Entities Interested in Re-Certification

Subsection 4.1: Step 1: A de-certified entity may seek re-certification; entities are responsible for all fees associated with re-certification, including any fees for a new CORE Certification Seal.

- Entities seeking re-certification due to non-compliance will only need to do so for the rule with respect to which they were found to be non-compliant. CAQH CORE-authorized Testing Vendors will provide documentation on the entity's compliance with the rule specific to the applicable CAQH CORE Voluntary Certification Test Suite.

**Phase IV CAQH CORE 405 Enforcement Policy
v4.0.0 September 2015**

Request for Review of Possible Non-Compliance Form

PREREQUISITES

- 1) Entity filing complaint must be party to the transaction and with the exception of providers, CORE-certified. Any healthcare provider that is an end-user of a CORE-certified product/service may lodge a complaint against a CORE-certified entity.
- 2) Entities being filed against must be CORE-certified.
- 3) Filing this form assumes reasonable steps have already been taken by your company to try to resolve the issue privately with your trading partner, and such efforts were not successful.
- 4) At least five documented examples of the violation(s) over a 30-day period must be provided with this form.
- 5) Entity must file a complaint within 90 days of the most recent compliance violation(s) for which it is being filed.
- 6) The details of a specific complaint remain private. Names or other identifying information will not be publicly released. This information will only be used and disclosed by CAQH CORE for its non-compliance review. If an entity is found to be in actual violation of a CAQH CORE Operating Rule(s), its certification will be terminated and its name removed from the CAQH CORE website if the complaint is not remedied per the CAQH CORE Enforcement Policy timeline.
- 7) Entities are permitted to withdraw a complaint any time during the complaint process.

If you have any questions about this form, contact CAQH at: (202) 517-0434 or CORE@caqh.org

CAQH CORE: Request for Review of Possible Non-Compliance Form			
Please provide your contact information (All fields required.)			
Organization Name and Type (Health Plan, Provider, Clearinghouse, Vendor)			
Name (First and Last)			
Street Address	City/Town	State	Zip
Telephone Number		Email Address	
Organization filing complaint against (All fields required.)			
Organization Name and Type (Health Plan, Provider, Clearinghouse, Vendor)			
Name (First and Last)			

**Phase IV CAQH CORE 405 Enforcement Policy
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CAQH CORE: Request for Review of Possible Non-Compliance Form			
Street Address	City/Town	State	Zip
Telephone Number		Email Address	
When did this alleged violation occur? mm/dd/yyyy (Required field) 1. 2. 3. 4. 5.			
Have efforts been made to address the problem? Who at the company in question have you been working with to resolve the issue?			
Identify the rule complaint category. (Required field.) Select one category listed below per complaint submission. Complete this form again to file a complaint for another category.			
Eligibility <ul style="list-style-type: none"> <input type="checkbox"/> Response Time <input type="checkbox"/> System Availability <input type="checkbox"/> Service Type and Benefit Summary <input type="checkbox"/> Patient Financial Responsibility <input type="checkbox"/> Acknowledgements <input type="checkbox"/> Connectivity <input type="checkbox"/> Companion Guide <input type="checkbox"/> Last Name Normalization 			

**Phase IV CAQH CORE 405 Enforcement Policy
v4.0.0 September 2015**

CAQH CORE: Request for Review of Possible Non-Compliance Form

<p><input type="checkbox"/> Use of AAA Error Codes</p> <p>Claim Status</p> <ul style="list-style-type: none"><input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Connectivity<input type="checkbox"/> Response Time<input type="checkbox"/> System availability <p>EFT & ERA</p> <ul style="list-style-type: none"><input type="checkbox"/> Uniform Use of CARCs and RARCs<input type="checkbox"/> 835 Infrastructure<ul style="list-style-type: none"><input type="checkbox"/> Connectivity<input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Dual Delivery<input type="checkbox"/> EFT/ERA Reassociation<input type="checkbox"/> EFT Enrollment<input type="checkbox"/> ERA Enrollment <p>Health Care Claim</p> <ul style="list-style-type: none"><input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Connectivity<input type="checkbox"/> Response Time<input type="checkbox"/> System availability <p>Health Care Services Review</p> <ul style="list-style-type: none"><input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Connectivity<input type="checkbox"/> Response Time<input type="checkbox"/> System availability <p>Benefit Enrollment & Maintenance</p> <ul style="list-style-type: none"><input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Connectivity<input type="checkbox"/> Response Time<input type="checkbox"/> System availability <p>Health Plan Premium Payment</p> <ul style="list-style-type: none"><input type="checkbox"/> Acknowledgements<input type="checkbox"/> Companion Guide<input type="checkbox"/> Connectivity

**Phase IV CAQH CORE 405 Enforcement Policy
v4.0.0 September 2015**

CAQH CORE: Request for Review of Possible Non-Compliance Form	
<input type="checkbox"/> Response Time <input type="checkbox"/> System availability	
Describe, in detail, the alleged violation. (Required field.) You may attach/upload additional pages as needed. Please enclose at least five examples of your complaint.	
Please sign and date this complaint. (Required field)	
SIGNATURE:	DATE:

**Phase IV CAQH CORE 405 Enforcement Policy
v4.0.0 September 2015**

SUBMISSION PROCESS

Filing a complaint with CAQH CORE is voluntary. However, without the information required on the Request for Review of Possible Non-Compliance Form, CAQH CORE may not be able to proceed with a complaint. Names or other identifying information will remain private unless an entity is found to be in actual violation of a CAQH CORE Rule(s), at which time their CORE Certification will be terminated and their name removed from the CAQH CORE website if the complaint is not remedied per the CAQH CORE Enforcement Policy timeline.

To submit a complaint electronically please:

- Send as an attachment by email to CORE@caqh.org;
- Submit by fax 202-517-0397;
- Mail to:

CAQH re: CORE Compliance Review
2020 K Street, NW
Suite 900
Washington, DC 20006.

Note: All signatures must be hand-written. Electronic signatures will not be accepted.

NEXT STEPS

See Phase IV CAQH CORE 405 Enforcement Policy v4.0.0 Section 2.