



# Advancing Value-based Payment through Streamlined Data Exchange:

## CAQH CORE Value-based Payment (VBP) Subgroup Overview

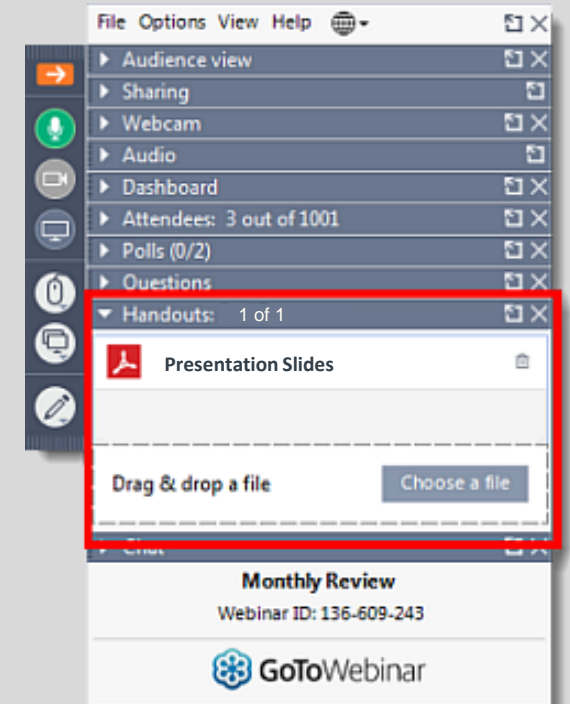
May 3, 2023

# Logistics

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  - A copy of the slides and the webinar recording will also be emailed to all attendees and registrants in the next 1-2 business days.
- Questions can be submitted ***at any time*** using the **Questions panel on the GoToWebinar dashboard.**

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# Agenda

- CAQH CORE Overview
- Value-based Payments Research and Focus
- Discussion
- Q&A

# Value-based Payment Subgroup Co-chairs

## CAQH CORE Value-based Payment Subgroup Co-chairs



**Michael Alwell, MPA**  
Vice President, Revenue Cycle, St.  
Joseph's Health



**Naveen Maram, MD, MPH, MSHI**  
Vice President, Digital Operations,  
Centene Corporation



**Michael Pattwell**  
Principal Business Advisor,  
VBC, Edifecs

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# CAQH CORE Overview

# CAQH CORE Mission, Vision, & Industry Role

**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:** The **Department of Health and Human Services (HHS)** designated **CAQH CORE as the national Operating Rule Authoring Entity** for all HIPAA mandated administrative transactions to improve the efficiency, accuracy, and effectiveness of industry-driven business 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.



# More than 100 CAQH CORE Participating Organizations

## Health Plans

- Aetna
- Ameritas Life Insurance Corp.
- AultCare
- Blue Cross and Blue Shield Association (BCBSA)
- Blue Cross Blue Shield of Michigan
- Blue Cross Blue Shield of North Carolina
- Blue Cross Blue Shield of Tennessee
- CareFirst BlueCross BlueShield
- Centene Corporation
- CIGNA
- Elevance Health
- Health Care Service Corp
- Horizon Blue Cross Blue Shield of New Jersey
- Humana
- Medical Mutual of Ohio, Inc.
- Point32Health
- UnitedHealthGroup

## Government

- Arizona Health Care Cost Containment System
- California Department of Health Care Services
- Centers for Medicare and Medicaid Services (CMS)
- Federal Reserve Bank of Atlanta
- Florida Agency for Health Care Administration
- Health Plan of San Joaquin
- Michigan Department of Community Health
- Minnesota Department of Health
- Minnesota Department of Human Services
- Missouri HealthNet Division
- North Dakota Medicaid
- Oregon Department of Human Services
- Oregon Health Authority
- Pennsylvania Department of Public Welfare
- South Dakota Medicaid
- TRICARE
- United States Department of Treasury Financial Management
- United States Department of Veterans Affairs

## Integrated Plan/Provider

- Highmark Health (Highmark, Inc.)
- Kaiser Permanente
- Marshfield Clinic/Security Health Plan of Wisconsin, Inc.

## Providers

- American Hospital Association (AHA)
- American Medical Association (AMA)
- Aspen Dental Management, Inc.
- Children's Healthcare of Atlanta Inc
- Cleveland Clinic
- Greater New York Hospital Association (GNYHA)
- Healthcare Financial Management Association (HFMA)
- Laboratory Corporation of America
- Mayo Clinic
- Medical Group Management Association (MGMA)
- Montefiore Medical Center
- New Mexico Cancer Center
- OhioHealth
- Ortho NorthEast (ONE)
- St. Joseph's Health
- Virginia Mason Medical Center

## Vendors & Clearinghouses

- AIM Specialty Health
- athenahealth
- Availity, LLC
- Averhealth
- Cedar Inc
- Cerner/Healthcare Data Exchange
- Change Healthcare
- ClaimMD
- Cloud Software Group
- Cognizant
- Conduent
- CSRA
- DXC Technology
- Edifecs
- Epic
- Experian
- Healthedge Software Inc
- HEALTHeNET
- HMS
- Infocrossing LLC
- InstaMed
- NantHealth NaviNet
- NextGen Healthcare Information Systems, Inc.
- OptumInsight
- PaySpan
- PNC Bank
- PriorAuthNow
- SS&C Health
- Surescripts
- The SSI Group, Inc.
- TriZetto Corporation, A Cognizant Company
- Utah Health Information Network (UHIN)
- Wells Fargo

## Other

- Accenture
- ASC X12
- Cognosante
- Healthcare Business Management Association
- Healthcare Business Association of New York (HCBA)
- HL7
- NACHA The Electronic Payments Association
- National Association of Health Data Organizations (NAHDO)
- National Committee for Quality Assurance (NCQA)
- National Council for Prescription Drug Programs (NCPDP)
- New England HealthCare Exchange Network (NEHEN)
- Preferra Insurance Company Risk Retention Group
- Private Sector Technology Group
- Tata Consultancy Services Ltd
- Utilization Review Accreditation Commission (URAC)
- Work Group for Electronic Data Interchange (WEDI)

Commercial, Governmental, and Integrated Health Plans account for 75% of total American covered lives

# Operating Rules Defined



## ACA Definition

- The “necessary business rules and guidelines for the electronic exchange of information that are not defined by a standard or its implementation specifications.”
- Federally mandated for the HIPAA adopted electronic standards.



## Common in Other Industries

- Financial services, transportation, and retail are examples of other industries that rely on operating rules.
- For example, ATM data exchange.



## Support Revenue Cycle Automation

- Operating rules create common expectations for electronic data exchange, allowing provider and payer systems to automate communications across trading partners.
- Can address both the data content and infrastructure to support a transaction.



# 2023: A Rule Development Year for CAQH CORE

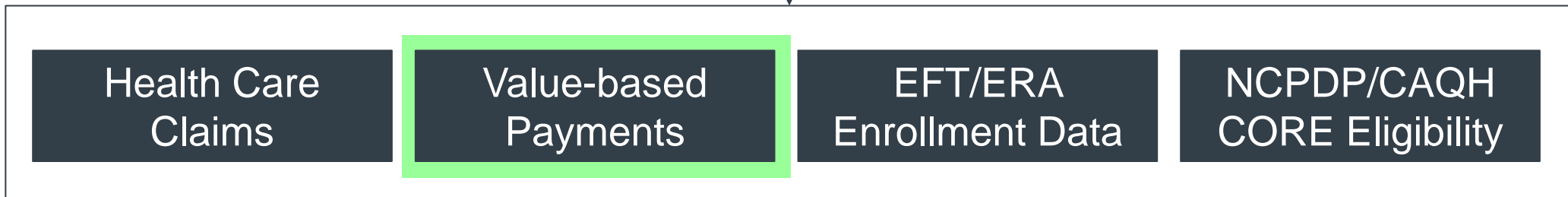
## Operating Rule Development Process:



**Environmental Scans, Industry Surveys, and Advisory Groups** are used to research opportunities for a potential new rule and/or an update to an existing rule.

**Subgroups** develop requirements and **draft rules**. New groups form as CAQH CORE rule development focus changes.

**CAQH CORE Participants** vote on the proposed rule(s). Once quorum and approval levels are achieved, the **CORE Board votes for final approval**.



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# Value-based Payment Research and Focus

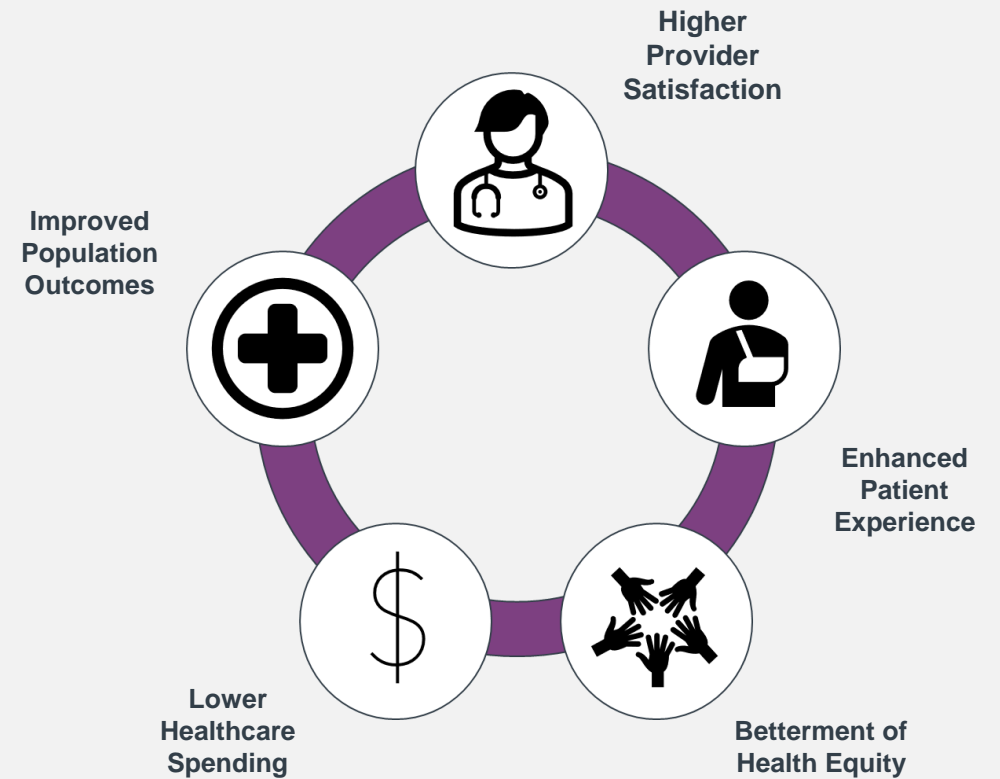
# What is Value in Healthcare and Why Does it Matter?

## *Incentivizing Outcomes Over Volume*

“**Value-based care** ties the amount health care providers earn for their services to the results they deliver for their patients, such as **quality, equity, and cost of care**. Through financial incentives and other methods, value-based care programs aim to hold providers **more accountable for improving patient outcomes** while also giving them greater flexibility to deliver the right care at the right time.”

([Commonwealth Fund, 2023](#); emphasis added)

## The Quintuple Aim



# CAQH CORE Operating Rules for Value-based Payment Administration

## *A Comprehensive Environmental Scan Informed Directions and Targets for Operating Rules*

**Value-based payments were prioritized by Participating Organizations and approved by the CORE board. Investigation of key operational areas involved >20 industry interviews and the formation of a VBP Focus Group.**

### Interoperability

Technical interoperability is nascent in VBP, creating siloes that inhibit care coordination and delay the involvement of community-based services.

### Uniform Data

Non-uniform data limits generalized analysis and population-level insights, delaying innovation, targeted interventions, and the streamlined collection for SDOH.

### Complexity

To decrease cost and promote better outcomes, VBP models have become increasingly reliant on complex network development, performance monitoring and burdensome contracting.

# Identified Topics for Operating Rule Development

*Foundational Topics Minimize Complexity and Support Innovation*



## X12 834 Benefit Enrollment

Align race and ethnicity data collection to standardize electronic exchange and improve the data quality and integrity of socio-demographic information.



## X12 837 Claim Submission

Unify industry pathways for EDI submission of supplementary diagnosis information that supports VBP methodologies.



## CAQH CORE VBP Infrastructure Rules

Identify operational gaps in CAQH CORE infrastructure rules and recommend additions for VBP data exchange.



## Alignment of VBP Terminology

Develop “best practice” definitions for industry use to align contractual terminology and common VBP methodologies.

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# Discussion

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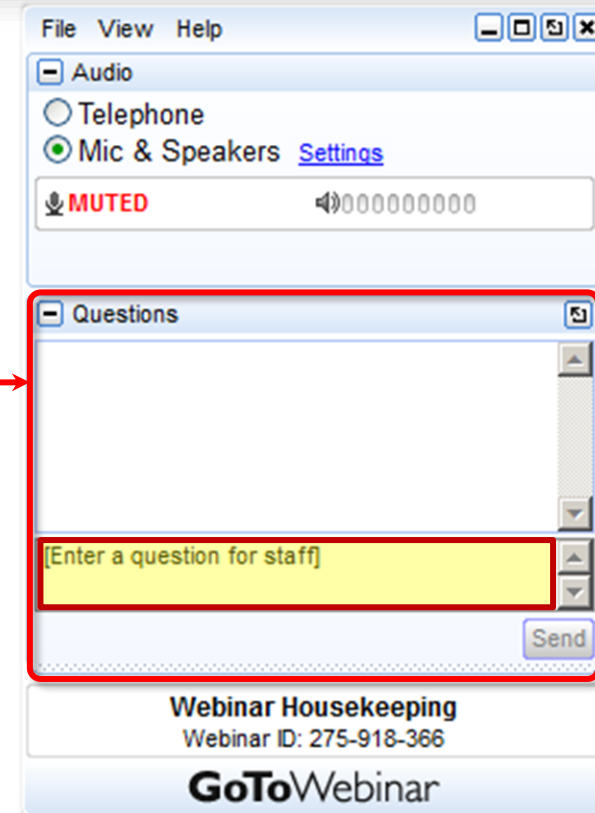
**Michael Pattwell**  
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# Audience Q&A

**Please submit your questions**

Enter your question into the “Questions” pane in the lower right hand corner of your screen.

**You can also submit questions at any time to [CORE@caqh.org](mailto:CORE@caqh.org)**



**Download a copy of today’s presentation slides at [caqh.org/core/events](https://caqh.org/core/events)**

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# Join the Subgroup!



**Next VBP Subgroup Meeting will be Held on  
May 18 from 2-3:30 PM ET**

**Contact [CORE@caqh.org](mailto:CORE@caqh.org) to learn more or join our efforts!**

# Thank you for joining us!



Website: [www.CAQH.org/CORE](http://www.CAQH.org/CORE)

Email: [CORE@CAQH.org](mailto: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.