



**BlueCross BlueShield
Association**

An Association of Independent
Blue Cross and Blue Shield Plans

simplifying healthcare administration
CAQH

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FOR IMMEDIATE RELEASE

**Healthcare Organizations Launch Collaborative Initiative
to Test HIPAA Transactions Against Proposed 5010 Standards**

*CAQH, HIMSS, IHE, and BCBSA Target April 2009 Interoperability Showcase at HIMSS09
Conference for Live 5010 Testing Project Demonstration*

WASHINGTON, DC (January 5, 2009) – Four leading healthcare industry organizations announced today they are collaborating with the Centers for Medicare and Medicaid Services (CMS) on the formation of a 5010 Testing Project to address real-time testing of the new X12 HIPAA 5010 transactions implementation. The organizations include CAQH, the Healthcare Information and Management Systems Society (HIMSS), the Integrating the Healthcare Enterprise (IHE) Initiative, and the Blue Cross and Blue Shield Association (BCBSA).

The groups will demonstrate ways to implement the 5010 HIPAA transaction standards through existing testing tools, best practices and public-private collaborations that are already broadly recognized within the healthcare industry. Specifically, these include CAQH's Committee on Operating Rules for Information Exchange (CORE) Phase I and II rules certification testing scripts, the IHE interoperability framework, and Interoperability Specifications developed by the Healthcare Information Technology Standards Panel (HITSP).

“This testing project will be presented at the 2009 IHE North American Connectathon to demonstrate that current, multi-stakeholder industry collaboration is producing real-world results and having a long-term, positive impact on healthcare capabilities,” said Didi Davis, senior director, IHE for HIMSS.

Successful completion of the project will demonstrate the synergies between 5010 guidelines and existing testing and certification efforts – initiatives that already have begun to support HIPAA 5010 transactions such as the use of patient financials.

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CORE, launched by CAQH, is a nationwide all-payer solution to improve provider access to electronic patient administrative and payer information before or at the time of service using any technology they choose. CORE's Phase I and II rules – which incorporate some of the 5010 requirements and complement existing IHE and HITSP work – are already being used in the marketplace.

CORE certification testing scripts enable appropriate healthcare entities like Blues plans to demonstrate adoption. Using the larger IHE framework, the collaborators can demonstrate the path the industry has set to have interoperability within and between clinical and administrative data.

“This project is a great example of how public and private stakeholders can work together to insure that standards are effective in real-world application before implementation,” said CAQH executive director Robin Thomashauer.

The collaboration has identified four goals for the 5010 Testing Project, including:

- Initiating industry and market momentum for the adoption of the 5010 HIPAA transaction requirements and the complementary CORE rules certification process;
- Providing an avenue to demonstrate current industry capabilities for HIPAA-compliant administrative data exchange with multi-stakeholder participation through the 2009 North American Connect-a-thon and the 2009 HIMSS Interoperability Showcase;
- Highlighting the 5010 testing options in conjunction with the CORE Phase I and II rules testing scripts and testing tools already available to the market; and
- Displaying private-public collaboration, and the critical role that voluntary, private sector-led efforts like HITSP, IHE and CORE play in the national landscape.

“HIMSS is excited to be collaborating with our industry colleagues on such an important topic, and pleased to host the demonstration as part of the HIMSS 2009 Interoperability Showcase,” said H. Stephen Lieber, HIMSS president and CEO.

The organizations are confident the 5010 Testing Project will help the industry better understand what needs to be done to successfully implement the 5010 transactions.

“Ultimately, government and industry gain from exploring opportunities that streamline the overall regulatory process by having industry test and implement new standards in the field, with everyone reaping the benefits of the improved processes,” said Kerry Weems, Acting Administrator of CMS.

On August 22, 2008, CMS issued a proposed rule that would adopt updated versions of the standards for electronic transactions under the authority of the Health Insurance Portability and

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Accountability Act of 1996 (HIPAA). The updated standards would replace the current standards, and would promote the efficiencies needed in electronic transactions.

About Blue Cross Blue Shield Association

The Blue Cross and Blue Shield Association is a national federation of 39 independent, community-based and locally operated Blue Cross and Blue Shield companies that collectively provide healthcare coverage for more than 102 million individuals – nearly one-in-three Americans. For more information on the Blue Cross and Blue Shield Association and its member companies, please visit www.BCBS.com.

About CAQH

CAQH, a nonprofit alliance of health plans and trade associations, is a catalyst for healthcare industry collaboration on initiatives that streamline healthcare administration, resulting in a better care experience for patients and caregivers. CAQH solutions – like CORE - help promote quality interactions between plans, providers and other stakeholders, reduce costs and frustrations associated with healthcare administration and encourage administrative-clinical data integration. More than 100 healthcare industry stakeholders are collaborating on CORE. Participating health plans cover more than 130 million lives or more than 75 percent of the commercially insured plus Medicare and state-based Medicaid beneficiaries. Over 35 health plans, large provider groups and health IT products are Phase I CORE-certified and committed to Phase II certification. Visit www.caqh.org for more information.

About HIMSS

The Healthcare Information and Management Systems Society (HIMSS) is the healthcare industry's membership organization exclusively focused on providing global leadership for the optimal use of healthcare information technology (IT) and management systems for the betterment of healthcare. Founded in 1961 with offices in Chicago, Washington D.C., Brussels, Singapore and other locations across the United States and Europe, HIMSS represents more than 20,000 individual members and over 350 corporate members that collectively represent organizations employing millions of people. HIMSS frames and leads healthcare public policy and industry practices through its advocacy, educational and professional development initiatives designed to promote information and management systems' contributions to ensuring quality patient care. Visit www.himss.org for more information.

About IHE

IHE (www.ihe.net) is a global initiative, now in its ninth year, that creates the framework for passing vital health information seamlessly – from application to application, system to system, and setting to setting – across multiple healthcare enterprises. IHE brings together health information technology stakeholders to implement standards for communicating patient information efficiently throughout and among healthcare enterprises by developing a framework of interoperability. Because of its proven process of collaboration, demonstration and real world implementation of interoperable solutions, IHE is in a unique position to significantly accelerate the process for defining, testing, and implementing standards-based interoperability among electronic health record systems.