

October 1, 2018

Donald Rucker, MD  
National Coordinator for Health IT  
Office of the National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services  
330 C St SW, Floor 7  
Washington, DC 20201

Re: Request for Comment and Review of 2018 Interoperability Standards Advisory (ISA) in  
Advance of the 2019 Reference Edition Publication

Dear Dr. Rucker,

Thank you for the opportunity to provide input for the 2019 Interoperability Standards Advisory (ISA). CAQH CORE appreciates that the ISA includes a description of standards, implementation specifications, operating rules and other utilities that support interoperability. Inclusion of Section V. Administrative Standards and Implementation Specifications in the 2018 ISA was especially welcome, as the convergence of administrative and clinical data is becoming increasingly important in managing both the cost and quality of healthcare.

CAQH CORE is a non-profit, national multi-stakeholder collaborative that streamlines electronic healthcare administrative data exchange and improves health plan-provider interoperability through an integrated model of operating rule development, adoption and maintenance. CAQH CORE Participating Organizations represent more than 130 healthcare providers, health plans, clearinghouses, vendors, government agencies and standards setting organizations. CAQH CORE has been designated by the Secretary of the Department of Health and Human Services (HHS) as the author of federal operating rules for the HIPAA administrative healthcare transactions.

The comments in this letter are presented in three parts and are intended to enhance the quality of information in the ISA and improve usability:

- **Part I** includes specific comments on existing content in Section V of the ISA.
- **Part II** includes specific recommendations to expand content in Section V of the ISA.
- **Part III** addresses specific questions in Section VI of the ISA, including 18-2 and 18-4.

CAQH CORE has also posted these comments to the online resource.

## **Part I. Comments on Existing Content in Section V: Administrative Standards and Implementation Specifications - Operating Rules to Support Administrative Transactions**

- a. “Operating Rules” should be included as one of the structures under “Type,” which presently only includes “Standard” or “Implementation Specification.” Although there are other utilities referenced in the ISA (e.g. Integrating the Healthcare Enterprise (IHE)’s Integration Profiles) that also technically do not meet the definition of either a standard or implementation specification, operating rules are distinct in this regard. The Centers for Medicare and Medicaid Services (CMS) notes, in its [definition of operating rules](#), that they are “the necessary business rules and guidelines for the electronic exchange of information *that are not defined by a standard or its implementation specifications*” (emphasis added).
- b. Operating Rules to Support Eligibility Transactions (Phase I): “Adoption Level” for these operating rules is currently listed as 3 out of 5. CAQH CORE updated its market share data in 2018 and determined that 65 percent of the commercial and publicly insured population in the United States are covered by [Phase I CORE-certified health plans](#). Given the Phase I CAQH CORE Operating Rules are federally mandated and CORE Certification is voluntary, it is reasonable to conclude that more health plans have implemented the rules than have pursued CORE Certification. Therefore, CAQH CORE suggests increasing the industry adoption level of the Phase I CAQH CORE Operating Rules to 4 out of 5.
- c. Operating Rules to Support Eligibility and Claim Status Transactions (Phase II): “Adoption Level” for these operating rules is currently listed as 3 out of 5. CAQH CORE updated its market share data in 2018 and determined that 65 percent of the commercial and publicly insured population in the United States are covered by [Phase II CORE-certified health plans](#). Given the Phase I CAQH CORE Operating Rules are federally mandated and CORE Certification is voluntary, it is reasonable to conclude that more health plans have implemented the rules than have pursued CORE Certification. Therefore, CAQH CORE suggests increasing the industry adoption level of the Phase II CAQH CORE Operating Rules to 4 out of 5.

## **Part II. Recommendations to Expand Content in Section V: Administrative Standards and Implementation Specifications - Operating Rules to Support Administrative Transactions**

- a. The [Phase IV CAQH CORE Operating Rules](#) should be included given the inclusion of other non-mandated standards and implementation guides in the ISA. The Phase IV CAQH CORE Operating Rules, approved September 2015, include:
  - [Phase IV CAQH CORE 450: Health Care Claim \(837\) Infrastructure Rule](#)
  - [Phase IV CAQH CORE 452: Health Care Services Review – Request for Review and Response \(278\) Infrastructure Rule](#)
  - [Phase IV CAQH CORE 454: Benefit Enrollment and Maintenance \(834\) Infrastructure Rule](#)
  - [Phase IV CAQH CORE 456: Payroll Deducted and Other Group Premium Payment for Insurance Products \(820\) Infrastructure Rule](#)
  - [Phase IV CAQH CORE 470: Connectivity Rule](#)

These operating rules build on the foundation established by previous CAQH CORE Operating Rules and expand the Phase I-III CAQH CORE infrastructure requirements to four additional transactions plus upgrade connectivity requirements. On July 6, 2016, the National Committee on Vital and Health Statistics (NCVHS), the statutory public advisory body to the HHS Secretary

on health information policy, [recommended](#) that the Secretary of HHS strongly support voluntary industry adoption and use of the Phase IV CAQH CORE Operating Rules.

- b. CAQH CORE anticipates publication of the Phase V CAQH CORE Prior Authorization Operating Rules in Q2 of 2019. The purpose of these rules is to promote adoption of electronic prior authorizations ultimately resulting in timelier patient care. The new Phase V Rules should be included in the ISA once available.

### **Part III. Response to Section VI: Questions and Requests for Stakeholder Feedback**

#### **18-2. Over the course of 2018, some new functionality has been added to the ISA, with more enhancements expected through 2018 and 2019. Are there additional features or functionality that would enhance the user experience?**

- a. Given the availability of multiple industry standards for a specific function, adoption rates are an important criterion for entities when evaluating potential standards. ONC is urged to consider identifying and utilizing sources to verify the adoption rates included in the ISA. The [CAQH Index®](#) provides an industry-wide resource on annual trends in adoption rates for the administrative transaction standards and implementation specifications.
- b. The online resource for the ISA could be made more user friendly through improved labeling of content such as additional structure options for “type” as previously recommended.

#### **18-4. Are there additional informative or educational resources that can be provided to help stakeholders better understand the ISA, health IT standards, interoperability, etc.?**

CAQH CORE maintains a host of [free implementation tools](#) to support operating rule adoption on its website. Additionally, CAQH CORE offers regular [educational webinars](#) which are archived on our site to drive greater industry awareness of the value of operating rules in collaboration with leading healthcare organizations.

Thank you for considering our recommendations and comments. Should you have questions for CAQH CORE, please contact me at [eweber@caqh.org](mailto:eweber@caqh.org) or 202-517-0435.

Sincerely,

Erin Richter Weber  
Director, CAQH CORE

cc:  
Robin Thomashauer, CAQH Executive Director  
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Robert Bowman, CAQH CORE Director