CAQH CORE Certification Policies
Version CC1.0
May 2020

Revision History for CORE Certification Policies

Version	Revision	Description	Date
1.0.0 – 5.00	Major	Phases I, II, III, IV and V CORE Certification Policies balloted and approved via CAQH CORE Voting Process.	2008 - 2019
CC1.0	Major	Adjustments to support a uniform set of CORE Certification Policies as a result of re-organization of operating rules into rule sets organized by business transaction (e.g., eligibility, claims, etc.) rather than phase (e.g., Phase I, II, etc.) as approved by the CAQH CORE Board in 2019. Adjustments to support recertification as approved by the CAQH CORE Board in 2019.	May 2020

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1. Introduction

This document outlines principles and policies that guide the CORE Certification Program.

1.1. CORE Certification Overview

- Achievement of CORE Certification provides organizations a means to assure, validate and demonstrate that their systems are operating in conformance with the CAQH CORE Operating Rules and their underlying standards.

1.2. CORE Certification Eligibility

- Entities that create, transmit or use the healthcare administrative and financial transactions addressed by the CAQH CORE Operating Rules are eligible to apply for a CORE Certification.
- Entities that do not conduct electronic transactions such as associations, medical societies and the like are not eligible for CORE Certification; instead are eligible to apply for CORE Endorsement. CORE Endorsers will not become certified but will be expected to participate in CAQH CORE outreach, provide feedback and input to CAQH CORE when requested to do so and encourage their members to participate in CAQH CORE.

1.3. CORE Certification Principles

- CORE-certified entities go above and beyond to represent commitment to administrative simplification as CORE Certification addresses mandated and non-mandated operating rules.
- CAQH CORE Operating Rules are organized by business transactions allowing for implementation flexibility and support for ongoing evolution to meet industry needs. Organizations seeking CORE Certification are encouraged to adopt all operating rules that apply to their business and/or product lines.
- CAQH CORE Operating Rules and CORE Certification Test Suites are approved via a formal voting process. CAQH CORE will not offer certification for operating rules that CAQH CORE has not clearly defined and voted upon.
- CORE-certified entities will remain certified for three years. Recertification will be required for an entity to maintain its certification status after three years.
- A parent corporation seeking certification will not be certified unless all subsidiaries of the corporation are conformant with CAQH CORE Operating Rules. Otherwise, each subsidiary of the parent must individually seek certification. For vendors and clearinghouses, CORE Certification will apply only to specific product names (by version) rather than corporate entities.
- CAQH CORE encourages CORE-certified entities to work with their trading partners to achieve CORE Certification as value and return-on-investment from operating rules is realized when they are broadly adopted throughout the entire healthcare system.

2. CORE Certification Process Policy

This policy addresses key steps and underlying assumptions for CORE Certification and Recertification.

2.1. CORE Certification Key Steps

Step 1: Pre-certification Planning and Systems Evaluation

- To prepare for certification, entities seeking CORE Certification should review CAQH CORE Operating Rules, CAQH CORE Analysis and Planning Guides and conduct internal testing as appropriate.

Step 2: Sign the CAQH CORE Pledge

- Entities seeking CORE Certification must sign the appropriate CAQH CORE Pledge and complete CORE Certification Testing within 180 days of submitting the signed CAQH CORE Pledge to CAQH CORE. The CAQH CORE Pledge must be signed by an authorized executive level employee of the entity seeking CORE Certification.

Step 3: Complete CORE Certification Testing

- CORE Certification requires demonstration of successful certification testing by a CAQH CORE-authorized Testing Vendor. Entities seeking certification will work with a CAQH CORE-authorized Testing Vendor to test for conformance with the CAQH CORE Operating Rules.
- CORE Certification Testing will differ by the role an entity plays in any of the transactions addressed by the CAQH CORE Operating Rules. Testing requirements for CORE Certification are stakeholder specific and defined in the CORE Certification Test Suites.
- Upon successful completion of the CORE Certification Testing, the CAQH CORE-authorized Testing Vendor will provide documentation that demonstrates that an entity has demonstrated its ability to conform to the CAQH CORE Operating Rules.

Step 4: Granting the CORE Certification Seal

- Applicants for a CORE Certification Seal will be responsible for ensuring that an authorized person completes and submits the required CAQH CORE Seal Application and CAQH CORE HIPAA Attestation signed by the appropriate executive level person.
- The CAQH CORE Seal Application collects contact information from an applicant and identifies payment information for the CORE Certification Seal fee.
- The CAQH CORE HIPAA Attestation indicates that to the best of that person's knowledge the applicant is HIPAA compliant for security, privacy and the HIPAA Administrative Simplification requirements (or, in the case of a vendor, its product or service supports these transactions).
- CAQH CORE will grant the appropriate CORE Certification Seal after an entity submits all documentation required: CAQH CORE Pledge, certification testing results, CAQH CORE Seal Application, CORE Certification Seal fee, CAQH CORE HIPAA Attestation and any other supplemental materials requested by CAQH CORE.
- CAQH CORE will complete its assessment within 30 business days of receipt of all required documents and fees unless there are extenuating circumstances.
- CAQH CORE will report on its website:
  - List of certified entities, certification status on operating rules and certification date.
  - In the case of vendors and clearinghouses, the name of the CAQH CORE certified product or service and operating rules supported by that product or service, by version, if applicable.
- CAQH CORE will promote CORE-certified entities online and through media publications (e.g. CAQH website, webinars, social media, press releases, and white papers).
- A CORE-certified entity is permitted to market its CORE Certification Seal only if the entity's Seal is valid and current.

2.2. Period For Which CORE Certification Applies

- Once certified, CORE-certified entities must remain conformant with applicable CAQH CORE Operating Rules throughout any system upgrades. When vendors and, if applicable, clearinghouses, 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.
- An entity's CORE Certification Seal will remain valid for 3 years, based off the year the certification was awarded. Entities are required to complete the recertification process in order to renew its CORE Certification Seal.
- A CORE-certified entity may become de-certified and have their CORE Certification Seal revoked if instances of non-conformance are found and not remedied or if there is a 180-day lapse in renewing certification.
- If a CORE-certified entity is acquired by an entity that is not CORE-certified, the newly merged 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.
- If a CORE-certified entity acquires or develops new system(s) that are not CORE-certified, the CORE-certified entity will have 12 months to certify the new system(s); if the CORE-certified entity does not certify the new system(s), it will lose its CORE Certification Seal.

2.3. Recertification Key Steps

Step 1: Recertification Planning and Systems Evaluation

- Recertification is required every there years for an entity to remain CORE-certified. Recertification renewals may occur anytime during the calendar year, based off initial year of certification.
- At a minimum, entities must implement versions of CAQH CORE Operating Rules that were published 24 months prior to the CORE Certification Seal renewal date.
- To prepare for recertification, entities should review CAQH CORE Operating Rules, CAQH CORE Analysis and Planning Guides, and conduct internal testing as appropriate.

Step 2: Application for Recertification

- Entities seeking to maintain their certification status must complete the CAQH CORE Recertification Application Form within the recertification renewal year. After the CAQH CORE Recertification Form is completed, an entity must complete recertification testing within 180 days.
- The CAQH CORE Recertification Application Form communicates an entity's intent to pursue recertification, collects contact information and identifies payment information for renewal of the CORE Certification Seal.

Step 3: Complete Recertification Testing

- Recertification requires demonstration of successful testing by a CAQH CORE-authorized Testing Vendor. Entities seeking recertification will work with a CAQH CORE-authorized Testing Vendor to test for conformance with the CAQH CORE Operating Rules.
- Recertification Testing will differ by the role an entity plays in any of the transactions addressed by the CAQH CORE Operating Rules. Testing requirements for CORE Recertification are defined in the CORE Certification Test Suites.
- Upon successful completion of recertification testing, CAQH CORE-authorized Testing Vendor will provide documentation that demonstrates that an entity has demonstrated its ability to conform to the CAQH CORE Operating Rules.

Step 4: CORE Certification Seal Renewal

- CAQH CORE will grant renewal of the CORE Certification Seal after an entity submits all documentation required: CAQH CORE Recertification Application Form, CORE Recertification Fee, recertification testing results and any other supplemental materials requested by CAQH CORE.

- CAQH CORE will complete its assessment within 30 business days of receipt of all required documents and fees unless there are extenuating circumstances.

2.4. Fees

- Entities seeking CORE Certification will be charged a fee for the CORE Certification Seal (Certification Fee) as determined by CAQH CORE.
- CORE-certified entities renewing their CORE Certification Seals will be charged a fee for recertification (Recertification Fee) as determined by CAQH CORE.
- Entities pursuing CORE Certification on multiple sets of CAQH CORE Operating Rules are eligible for a discount off the total CORE Certification Fee. Discounts do not apply to the Recertification Fee.
- The goal of CAQH CORE is to develop a low-cost certification process in order to support market adoption of the CAQH CORE Operating Rules by both small and large entities.
- Any fee/cost imposed by a CAQH CORE-authorized Testing Vendor will be independent and separate from the Certification Fee and Recertification that CAQH will charge. Fees for certification testing will be established by each CAQH CORE-authorized Testing Vendor; thus, prices will be market driven.

3. CAQH CORE Health Plan IT System Exemption Policy

This policy addresses CORE Certification exemptions that health plans seeking 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 conformant with CAQH CORE Operating Rules. This policy is complementary and does not replace other CAQH CORE policies set forth in this document.

3.1. Required Criteria In Order To Be Granted A Health Plan IT System Exemption

Any health plan seeking a CORE Certification IT System Exemption must meet the following criteria to gain approval for an exemption designation.

3.1.1. Percentage

Percentage of a health plan's transaction volume that is processed by the IT system(s) in question:

- No more than 30 percent of a health plan's *specific* transaction volume can be processed by the IT system(s) to be covered by the exemption.

3.1.2. Timing

Time period for which the IT system(s) in question must be scheduled for migration from a conformant to a non-conformant system:

- Migration must be scheduled for completion no later than 12 months from the date when the health plan is granted CORE Certification.
- If migration is not complete by the agreed-upon date, the health plan could be de-certified.

3.2. Exemption Requirements

- IT System Exemptions will be reviewed and granted on an individual health plan basis.
- IT System Exemption requests that are due to newly acquired entities will be granted only if the above parameters on time periods and percentage of membership are met.
- Reviewing and approving IT System Exemptions will be the responsibility of the CAQH CORE staff.

3.3. Exemption Request And Review Process

3.3.1. Exemption Request

Any health plan seeking an exemption must follow the **CORE Certification Process Policy**, excluding the IT system(s) for which it is seeking the exemption.

- When providing CAQH CORE with the documentation to prove successful CORE Certification Testing and to attest to HIPAA compliance, the health plan must provide CAQH CORE with an authorized 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 a *CAQH CORE Request for Review of Possible Non-Conformance* that are the result of an IT system exemption.
- If possible, the health 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-conformant data will not be available until after the exemption time period expires.
- When the CAQH CORE Health Plan IT System Exemption Request Form along with appropriate documentation is received, CAQH CORE will be responsible for granting or denying IT System Exemptions.
- The 12-month health plan IT System Exemption period will begin on the day that the health plan is granted CORE Certification (a CORE Certification Seal) by CAQH CORE.

3.3.2. Review Process

On or before the last business day of the month in which the exemption ends, the health plan must communicate the status of the migration to CAQH CORE.

- It is the goal of CAQH CORE to build momentum for CORE Certification, and this goal will be taken into consideration when reviewing requests for requested extensions to the 12 month IT System Exemption time frame required.
- If a CORE-certified heath 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 the CAQH CORE Board to remove an entity's CORE Seal or to provide an extension shall be conducted within 20 business days of the last business day of the month in which the exemption ends.
- If de-certified, the health plan will need to reapply for CORE Certification.
- The **CAQH CORE Enforcement Policy** outlines the steps to become recertified after being de-certified. A health plan wanting to become recertified after being de-certified according to the above process will need to be recertified for the set of CAQH CORE Operating Rules which it had originally requested an IT System Exemption.

3.4. Communication Concerning Which Systems Have IT System Exemptions

- All CORE-certified entities will be listed on the CAQH CORE website. In addition, CORE-certified vendor products and services will be listed, including individual product names and versions, if applicable.
- There will be a footnote included for those CORE-certified health plans that have an IT System Exemption. The footnote will indicate that a portion of the health plan's systems are not conformant with CAQH CORE Operating Rules, and detailed information identifying those systems/groups/ products that are under the health plan IT system exemption will be provided, if available.
- The footnote will be removed only when the health plan communicates to CAQH CORE that its exempted system(s) are conformant.

4. CORE Certification Testing Policy

4.1. CAQH CORE Pre-Certification, Self-Testing

To prepare for CORE Certification and Recertification, entities should review the CAQH CORE Operating Rules, CORE Certification Test Suites and conduct internal testing as they deem appropriate.

4.2. CORE Certification and Recertification Testing Process

A CAQH CORE-authorized Testing Vendor performs testing with an entity seeking CORE Certification and Recertification based upon the test scripts specific to the entity's stakeholder type as defined in the CORE Certification Test Suites.

Entities seeking CORE Certification or Recertification 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 CAQH CORE-authorized Testing Vendors to conduct CORE Certification Testing. Individual testing results will not be shared publicly. The CORE Certification Test Suites includes scenario-based testing and expected outcomes.

4.3. Verification Of Testing Results

When the CAQH CORE-authorized Testing Vendor verifies, with documentation, that an entity seeking CORE Certification and Recertification has successfully completed testing, the entity can apply to CAQH CORE to obtain or renew the CORE Certification Seal by submitting documentation to CAQH CORE.

4.4. Testing Results Appeals Process

Any entity undergoing testing with a CORE-authorized Testing Vendor may appeal decisions made by the CORE-authorized Testing Vendor regarding certification and recertification testing.

- Prior to any appeal being submitted, CAQH CORE assumes that efforts have been taken to resolve the issue privately between an entity seeking CORE Certification and the CAQH CORE-authorized Testing Vendor, and such efforts have not succeeded.
- CAQH CORE will have 20 business days to investigate the issue upon receipt of the appeal. If the appeal is deemed valid, CAQH CORE will ask the CAQH CORE-authorized Testing Vendor to re-execute the test scripts in question within 20 business days of request.

4.5. CAQH CORE-authorized Testing Vendors

- 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 vendor must be capable of testing for all CAQH CORE Operating Rules and meet a CAQH CORE-developed set of criteria. A Request for Proposal and approval process will identify authorized companies.
- CAQH CORE will list any testing entity that is a CAQH CORE-authorized Testing Vendor on the CAQH CORE website.

5. CORE Certification Enforcement

5.1. Guidelines for CORE Certification Enforcement

- Entities are encouraged to privately resolve disputes before submitting a formal complaint of non-conformance against a CORE-certified entity.
- Enforcement will be a complaint-driven process that will require documentation (electronic or paper) demonstrating multiple instances of non-conformance.
- The complaint process will be progressive but will last no more than six 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.
- Complainants are permitted to withdraw a complaint at any time during the complaint process.
- CAQH CORE will accept and review any submitted complaint that contains the required documentation.

5.2. CAQH CORE Enforcement Committee

- The CAQH CORE Enforcement Committee will consist of a balance of stakeholder types composed of CORE-certified entities, including health plans, vendors, clearinghouses and providers. No one stakeholder type will be permitted to have a dominant representation
- Members of the CAQH CORE Enforcement Committee will be appointed by the CAQH CORE Board from nominations made by the CAQH CORE Board members.
- CAQH CORE Enforcement Committee member terms will be limited to one year from date of appointment.
- 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.

5.3. Prerequisites For A Request For Review Of Possible Non-Conformance

- Complainants must be a party to the transaction for which they are submitting a complaint. Except for health care providers, complainants must be CORE-certified. Any health care provider that is an end-user of a CORE-certified system/product/service may lodge a complaint against a CORE-certified entity.
- Entities being alleged non-conformant with a set CAQH CORE Operating Rule(s) must be CORE-certified on that specific set.
- Filing a Request for Review of Possible Non-Conformance Form assumes reasonable steps have already been taken by the complainant to try to resolve the issue privately with the entity being alleged non-conformant, and such efforts were not successful.
- 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-conformance review. If an entity is found to be in actual violation of a CAQH CORE Operating Rules, it will be de-certified, and its name removed from the CAQH CORE website if the complaint is not remedied.
- Complainant is permitted to withdraw a complaint any time during the complaint process.

5.4. 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. Complainant will formally file a complaint using the Request for Review of Possible Non-Conformance Form, which outlines the alleged violation, accompanied by proper documentation:

- At least five documented examples of the violation(s) occurring over a 30 day period, demonstrating that the violation was not a one-time occurrence but occurred in multiple instances.
- Each of the five documented examples of violation must demonstrate non-conformance with a specific CAQH CORE Operating Rule. If a complainant believes that an entity is non-conformant

with multiple CAQH CORE Operating Rules, additional sheets can be attached to the form and submitted for each alleged rule violation.

- Complainant must file complaint within 90 days of the most recent conformance violation(s) for which the complaint is being filed.

5.4.1. CAQH CORE Review of Complaint

The CAQH CORE Enforcement Committee, with support from CAQH CORE staff, will review the complaint form for completeness and timeliness, and either verify or dismiss the complaint. CAQH CORE Enforcement Committee's review of the complaint will include:

- Analysis of the information submitted by complainant.
- Confirmation that the alleged non-conformant entity in question is given an opportunity to respond to complaint in writing.

CAQH CORE must respond to the complaint within 20 business days. All organizations involved in the complaint must respond to requests for information from CAQH CORE within 20 business days of the request.

The complaint must be deemed valid or invalid by the CAQH CORE Enforcement Committee within 30 business days after all documentation is received by CAQH CORE and requests for information are received.

The Review Process ends when the complaint is considered invalid and dismissed. If complaint is verified as valid, the Review Process continues.

5.4.2. Valid Complaint Process

Entities found to be out of conformance with a CAQH CORE Operating Rule(s) will be informed by CAQH CORE that they have a defined grace period of 40 business days in order to remedy the problem and successfully re-test for conformance with the rule(s) or be de-certified.

The CAQH CORE Enforcement Committee will be responsible for providing any extension to this grace period, if necessary, through a review of the valid complaint.

- Ten business days after the grace period ends, entities are required to prove they have remedied the problem by presenting documentation to the CAQH CORE Enforcement Committee of at least five instances on five different business days over a span of 10 business days in which there was no issue of conformance with the complainant, in addition to providing documentation of successful retesting.
- The Enforcement Committee will be responsible for granting variances to the 40 business day grace period.

5.4.3. Complaints Not Remedied

Entities not remediating the validated non-conformance within the grace period will be de-certified and its CORE Certification Seal will be revoked.

5.5. De-Certified Entities Interested In Recertification

A de-certified entity may seek recertification. De-certified entities are responsible for all fees associated with recertification, including any fees for a new CORE Certification Seal.

An entity seeking recertification due to non-conformance will need only to conduct certification testing with a CAQH CORE-authorized Testing Vendor for the rule(s) for which it was found to be non-conformant. A recertifying entity must submit documentation to CAQH CORE provided by a CAQH CORE-authorized Testing Vendor that demonstrates the entity's conformance with the rule for which the entity was found to be non-conformant to CAQH CORE.