CAQH CORE Open Mic Session
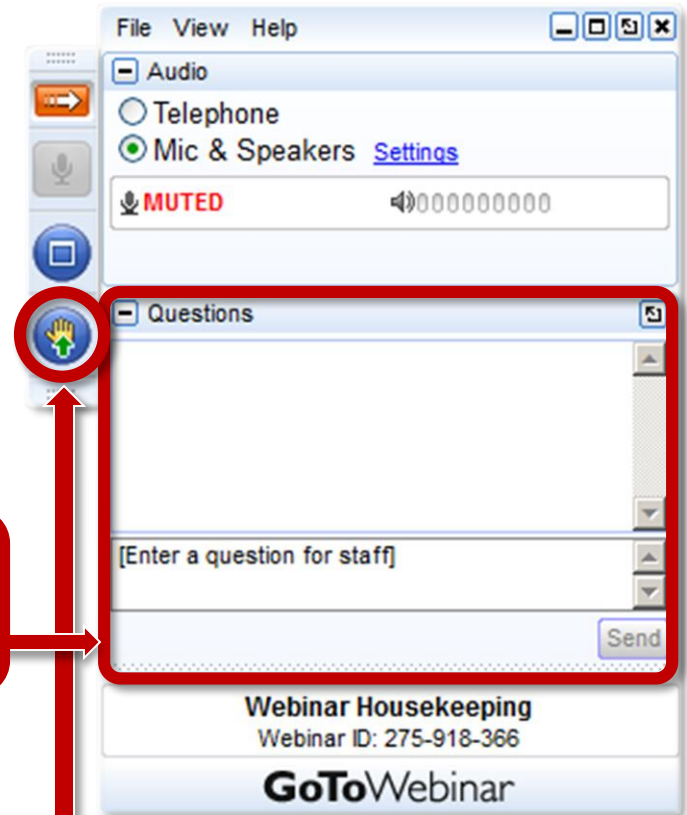
November 19, 2014
2:00 – 3:00pm ET

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Participating in Today's Session

- Download a copy of today's presentation on the CAQH.org website
  - − Navigate to the CORE Education Events page and access a pdf version of today's presentation under the list for today's event

- The phones will be muted upon entry and during the presentation portion of the session

- At any time throughout the session, you may communicate a question via the web
  - – Submit your questions on-line *at any time* by entering them into the **Q&A panel on the right-hand side of the GoToWebinar desktop**
  - – On-line questions will be addressed first

- There will be an opportunity today to submit questions using the telephone
  - – **When directed by the moderator**, **press the "raise hand" button** to join the queue for audio questions

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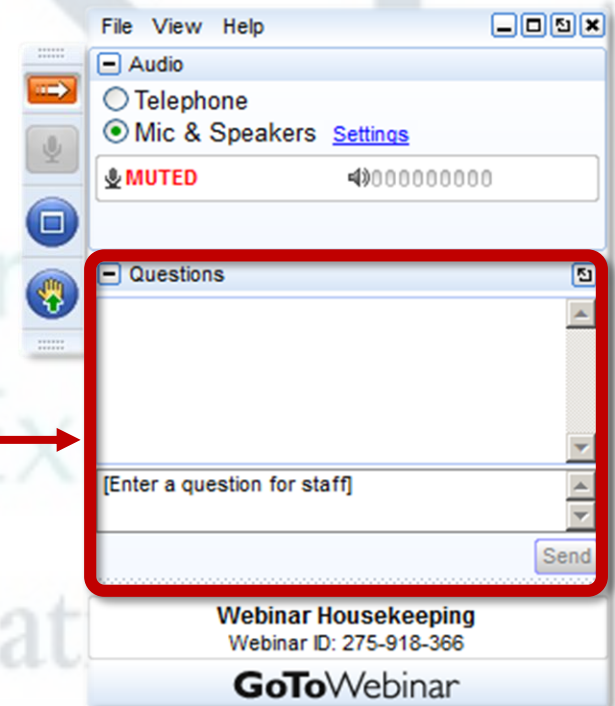for Information Exchange
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Session Topics

- **Welcome Introduction**

- **Q&A Session #1**
  - Voluntary CORE Certification

- **Q&A Session #2**
  - HHS NPRM on Health Plan Certification

- **Q&A Session #3**
  - Phase IV Operating Rules

- **Q&A Session #4**
  - EFT & ERA Operating Rules

- **General Q&A**

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Q&A #1:
Voluntary CORE Certification

Please submit your question:

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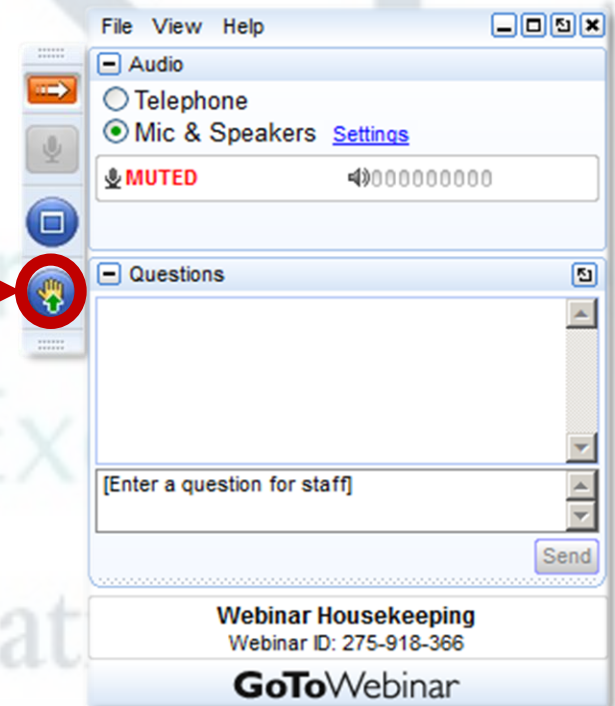

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Q&A #1:
Voluntary CORE Certification

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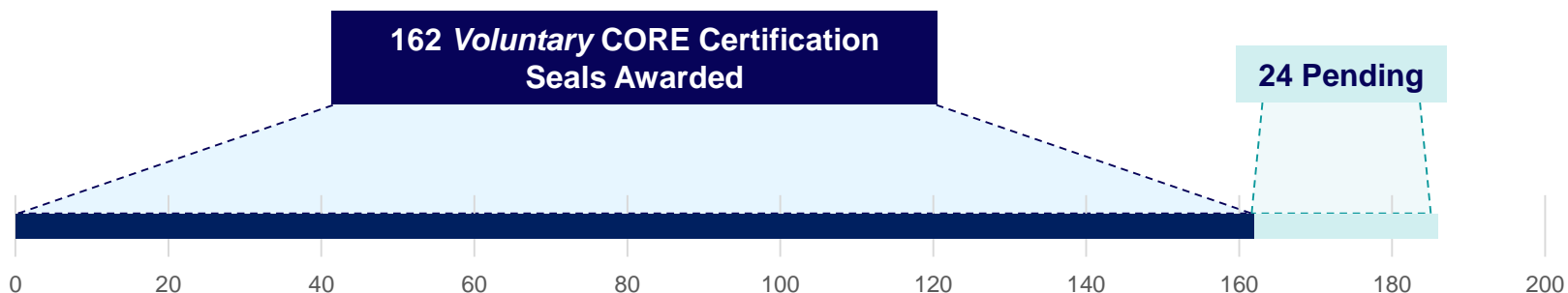
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Voluntary CORE Certification

Voluntary CORE Certification

- CAQH CORE offers *voluntary* CORE Certification to health plans, vendors, clearinghouses, and providers
    - *Voluntary* CORE Certification provides verification that your IT system or product operates in accordance with the federally mandated Operating Rules
    - CORE Certification is stakeholder-specific
        - Each entity completes testing specific to their stakeholder type in order to become CORE Certified
    - **More than 160 CORE Certifications** have been achieved with over 24 Certifications currently pending. Access a list of these organizations HERE

162 *Voluntary* CORE Certification Seals Awarded

24 Pending

| 0 | 20 | 40 | 60 | 80 | 100 | 120 | 140 | 160 | 180 | 200 |

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Voluntary CORE Certification Transactions

Voluntary CORE Certification is available for the following transactions:

	Phase I	Eligibility and Benefits

	Phase II	Claim Status

	Phase III	EFT & ERA

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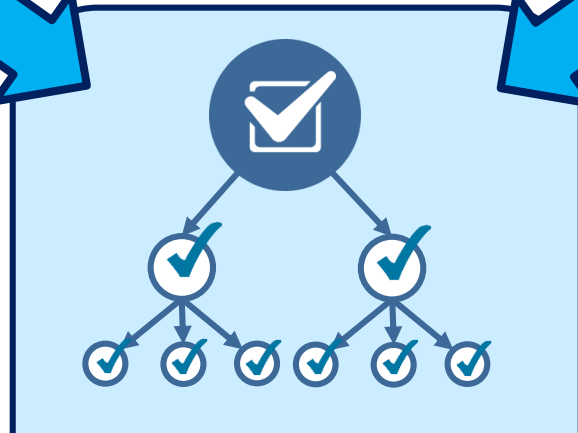A CAQH Initiative

Voluntary CORE Certification:
Benefits

Target Cost Savings:

The CORE Certification Seal says that you have streamlined your billing and administrative processes for maximum ROI.
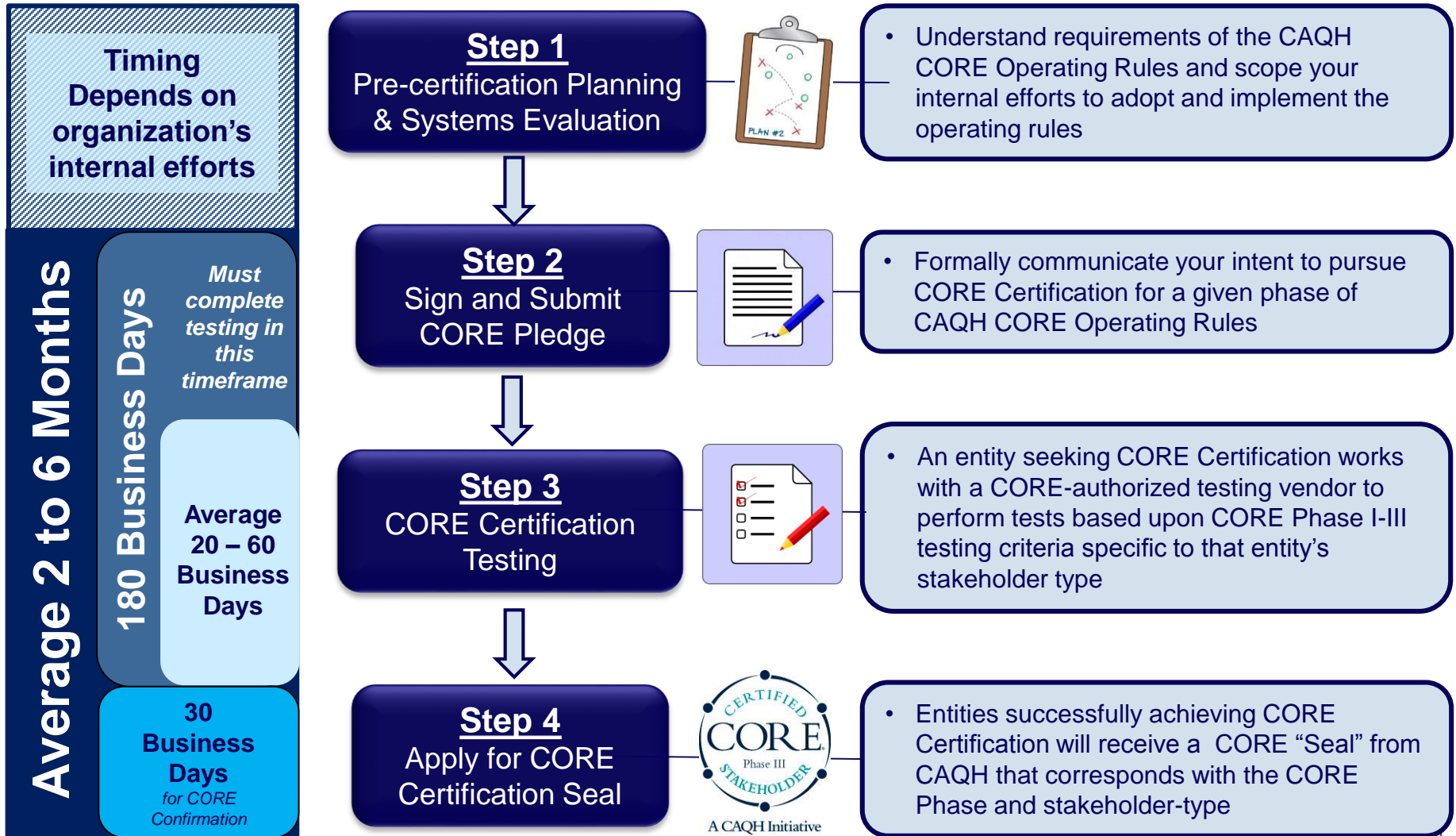
Pay it Forward:

When an organization becomes CORE Certified, it gives their customers the opportunity to leverage the organization's CORE Certification and become CORE Certified as well.

Attract Attention:

CORE Certified organizations and solutions/products are recognized on the CAQH CORE® website and featured in press releases and national webinars.

9

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Voluntary CORE Certification: *A Step-by-Step Process*

Timing Depends on organization's internal efforts

Average 2 to 6 Months

180 Business Days

Must complete testing in this timeframe

Average 20 – 60 Business Days

30 Business Days *for CORE Confirmation*

Step 1
Pre-certification Planning & Systems Evaluation

- Understand requirements of the CAQH CORE Operating Rules and scope your internal efforts to adopt and implement the operating rules

Step 2
Sign and Submit CORE Pledge

- Formally communicate your intent to pursue CORE Certification for a given phase of CAQH CORE Operating Rules

Step 3
CORE Certification Testing

- An entity seeking CORE Certification works with a CORE-authorized testing vendor to perform tests based upon CORE Phase I-III testing criteria specific to that entity's stakeholder type

Step 4
Apply for CORE Certification Seal

- Entities successfully achieving CORE Certification will receive a CORE "Seal" from CAQH that corresponds with the CORE Phase and stakeholder-type

CERTIFIED
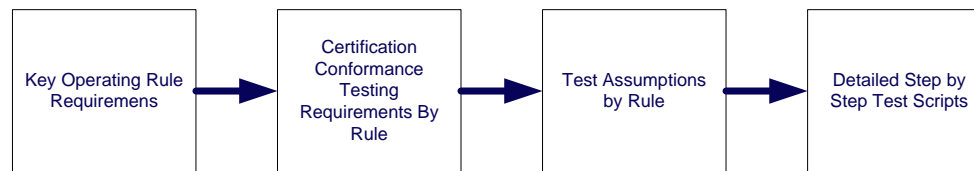**CORE**
Phase III
STAKEHOLDER
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NOTE: If the entity seeking CORE Certification outsources any portion of the applicable transactions to a trading partner, then that trading partner must become CORE Certified for that transaction in order for the seeking entity to complete the CORE Certification process

10

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Phase III CORE EFT & ERA Operating Rules *Voluntary* Certification: About the Master Test Suite

- CORE EFT & ERA Operating Rules Master Test Suite
  - Contains requirements to achieve *voluntary* CORE Certification
  - Must be used by all stakeholders undergoing the *voluntary* CORE Certification process
    - Provides guidance to help stakeholders better understand which EFT and ERA Operating Rules apply to various stakeholders
  - CORE Guiding principles apply to the entire set of rules
  - The Master Test Suite includes scenario-based testing and expected outcomes
  - CORE Certification Testing is not exhaustive and does not use production-level testing (CORE participants determining how to do such in future rules)

Structure of Test Scenarios for All Rules

```
┌──────────────┐   ┌──────────────┐   ┌──────────────┐   ┌──────────────┐
│ Key Operating│──▶│Certification │──▶│     Test     │──▶│ Detailed Step│
│     Rule     │   │  Conformance │   │  Assumptions │   │   by Step    │
│  Requiremens │   │   Testing    │   │    by Rule   │   │ Test Scripts │
│              │   │ Requirements │   │              │   │              │
│              │   │   By Rule    │   │              │   │              │
└──────────────┘   └──────────────┘   └──────────────┘   └──────────────┘
```

See Phase III CORE EFT & ERA Operating Rules Voluntary CORE Certification Master Test Suite :
Each rule requirement is provided in a numbered list.

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Voluntary CORE Certification Testing:
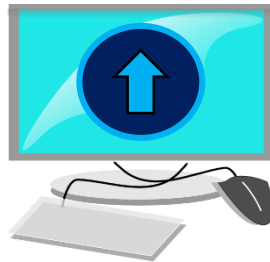## *Types of Test Scripts*

> **CORE Certification Testing is comprised of stakeholder-specific test scripts for each CAQH CORE Operating Rule**
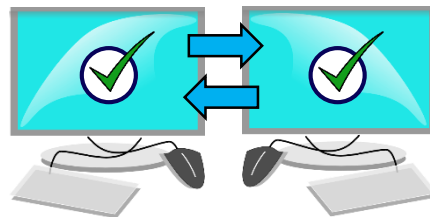
Attestation

Along with other specified documentation, an entity must sign an attestation signifying their current or planned compliance
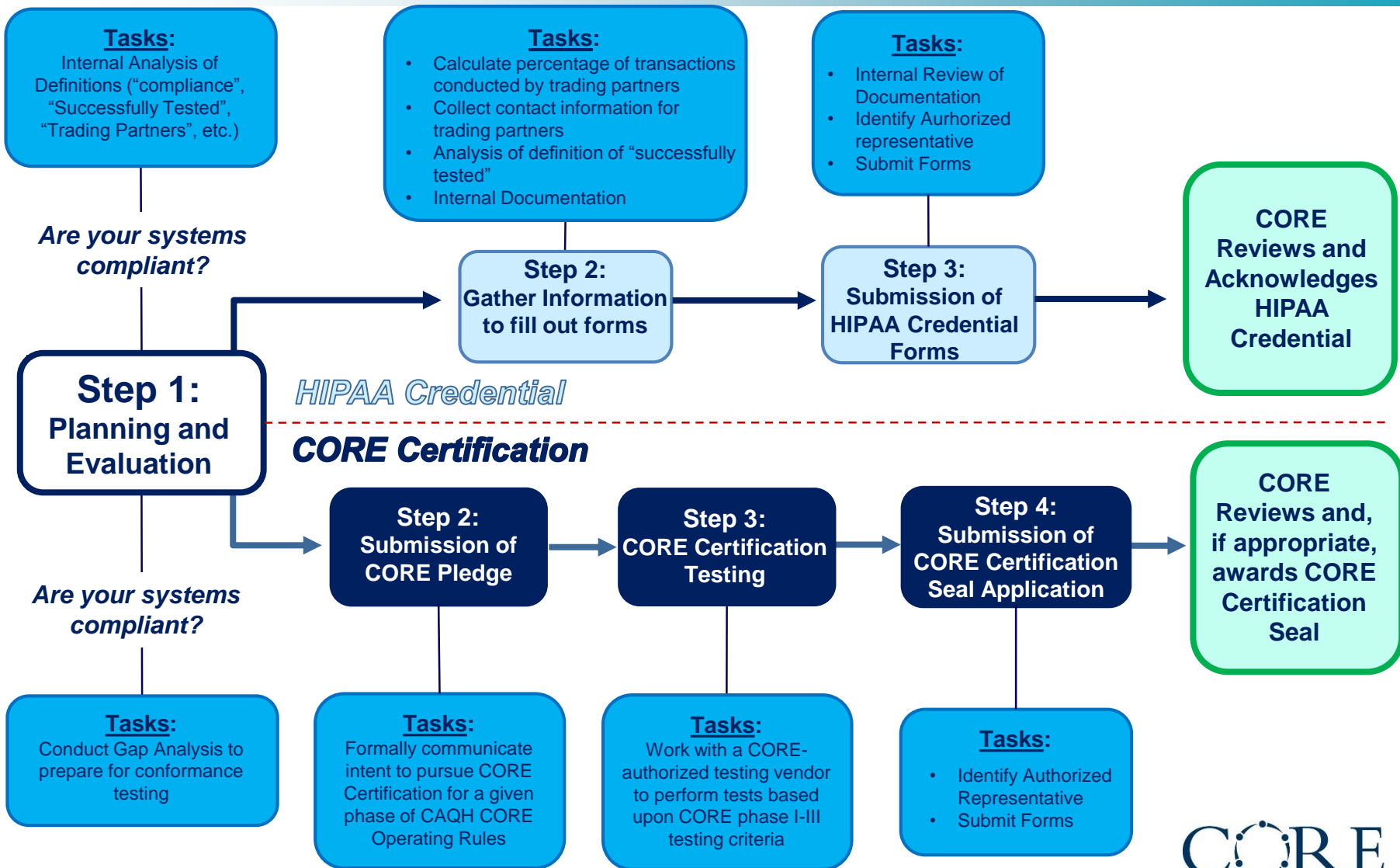
Upload

Upload specified document to the testing site as proof of compliance

System Transaction

Conduct the actual transaction for which you are testing with the CORE-certified testing vendor

12

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Documentation of Compliance:
A Task-by-Task Comparison

Tasks:
Internal Analysis of Definitions ("compliance", "Successfully Tested", "Trading Partners", etc.)

Tasks:
- Calculate percentage of transactions conducted by trading partners
- Collect contact information for trading partners
- Analysis of definition of "successfully tested"
- Internal Documentation

Tasks:
- Internal Review of Documentation
- Identify Aurhorized representative
- Submit Forms

Are your systems compliant?

CORE Reviews and Acknowledges HIPAA Credential

Step 2:
Gather Information to fill out forms

Step 3:
Submission of HIPAA Credential Forms

Step 1:
Planning and Evaluation

HIPAA Credential

CORE Certification

Step 2:
Submission of CORE Pledge

Step 3:
CORE Certification Testing

Step 4:
Submission of CORE Certification Seal Application

CORE Reviews and, if appropriate, awards CORE Certification Seal

Are your systems compliant?

Tasks:
Conduct Gap Analysis to prepare for conformance testing

Tasks:
Formally communicate intent to pursue CORE Certification for a given phase of CAQH CORE Operating Rules

Tasks:
Work with a CORE-authorized testing vendor to perform tests based upon CORE phase I-III testing criteria

Tasks:
- Identify Authorized Representative
- Submit Forms

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13

Importance of Trading Partner Relationships
Roles in Compliance and Certification

Trading Partners (e.g. **Vendors, Clearinghouses, etc.)** that are responsible for any aspect of administrative transactions on behalf of their clients play a crucial role in CAQH CORE Operating Rule compliance

Health Plan   **Payer Vendor**

Provider Vendor   **Provider**
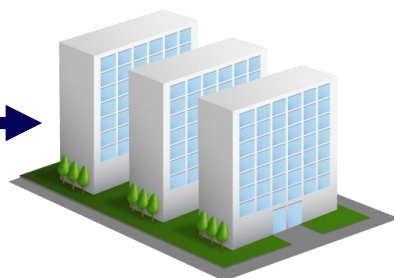
If a Health Plan's Trading Partner is not compliant with the CORE Operating Rules then the ***Health Plan is considered to be non-compliant and subject to HIPAA and/or HHS Penalties***

If a Provider's Trading Partner is not compliant with the CORE Operating Rules then the ***Provider is not achieving end-to-end interoperability and not benefitting from cost savings delivered through administrative simplification***

- **Trading Partners and *Voluntary* CORE Certification**
  - Depending on the services delivered by a vendor, they may need to achieve CORE Certification as a part of their clients' overall CORE Certification process
  - Identifying whether this applies to your trading partner relationship is key

14

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Voluntary CORE Certification
Identifying Trading Partner Responsibility

Health Plan or Healthcare Provider

Do you outsource the processing of the following four transactions to a vendor or vendors?

Need Help?

No Problem!
CAQH CORE **Analysis and Planning Guide** can help find the answer

Yes

No

We only outsource *some aspects of the four transactions*

We outsource processing of *all four of the transactions*

We process all aspects of these transactions in-house

Your vendor(s) will need to have their product (by version) CORE Certified for the each transaction or aspect of transaction for which they are responsible

You can achieve your CORE Certification without coordination with an outside vendor

15

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Q&A #2:
HHS NPRM for Health Plan Certification

Please submit your question:

- **Via the Web**: Enter your question into the Q&A pane in the lower right hand corner of your screen

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Q&A #2:
HHS NPRM for Health Plan Certification

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HHS Health Plan Certification Documentation of Compliance

HIPAA Credential and CORE Certification

Scope: ACA Mandated Operating Rules and Certification Compliance Dates

Mandated Requirements available and should be in use in market

Compliance in Effect as of January 1, 2013
- Eligibility for health plan
- Claim status transactions
  HIPAA covered entities conduct these transactions using the CAQH CORE Operating Rules ✓

Compliance in Effect as of January 1, 2014
- Electronic funds transfer (EFT)
- Health care payment and remittance advice (ERA) ✓
  HIPAA covered entities conduct these transactions using the CAQH CORE Operating Rules

HHS NPRM and deadline adjustment issued 12/31/13

Proposes an adjusted Implementation: **December 2015**

Proposes health plans certify via either CORE certification or HIPAA Credential; applies to Eligibility/ Claim Status/EFT/ERA operating rules and underlying standards
  Applies only to health plans and includes potential penalties for incomplete certification; existing voluntary CORE Certification is for vendors/PMS/large providers, and health plans

CAQH CORE in Process of drafting rules

Implement by **January 1, 2016**
(Draft Rules available in Late 2014)
- Health claims or equivalent encounter information
- Enrollment/disenrollment in a health plan
- Health plan premium payments
- Referral, certification and authorization
- Health claims attachments (HHS Standard not yet mandated)

19

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HHS NPRM on Health Plan Certification
Background

- **Notice of Proposed Rule Making (NPRM)** published in *Federal Register*, January 2, 2014

- Before December 31, 2015, Controlling Health Plans (CHPs) must submit to HHS:
  - Documentation of Compliance, and
  - Number of Covered Lives

NPRM Proposed Documentation of Compliance Options

CORE Phase III Certification Seal

Framework: Conformance Testing
- Involves Testing with Independent Testing Entity
- Part of the established Voluntary CORE Certification Process

OR

HIPAA Credential*

Framework: Attestation
- Requirements outlined in NPRM
- Involves coordination with trading partners
- Draft forms here

20

*May be adjusted pending final rule

HIPAA Credential

Draft HIPAA Credential Forms

Per the NPRM,* *"To obtain the HIPAA Credential, a CHP would have to submit…"*

Proposed Requirements in the NPRM	Corresponding Draft Form & Purpose
"HIPAA Attestation Form…(similar to the form required for the CORE Certification)"	**Title: Draft HIPAA Credential – Attestation of HIPAA Compliance Form** **Purpose:** To enable the entity to demonstrate its good faith intention to certify HIPAA compliance
"An application form (similar to the form required to obtain a CORE Seal)….with signature verifying that all forms …are submitted….indicating that HHS may view the application and associated forms if such a request is made"	**Title: Draft HIPAA Credential - Application Form** **Purpose:** To verify that all forms have been submitted and to acknowledge that HHS may view the application
"An attestation form… in which the CHP confirms that it has successfully tested [operating rules for the three transactions] with trading partners. For each of the three transactions, the CHP must confirm that the number of transactions conducted with those trading partners collectively accounts for at least 30% of the total number of transactions conducted with providers."	**Title: Draft HIPAA Credential – Attestation of Trading Partner Testing Form** **Purpose:** To document that successful testing of transactions has occurred and to indentify trading partners with whom the entity tested

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Draft HIPAA Credential Forms
Industry Feedback and CTSG Tasks

- **Industry Feedback collected on initial draft forms:**

  - **Over 250 comments** were received from both CORE Participants and non-Participants

- **CAQH CORE Certification & Testing Subgroup (CTSG)**, comprised of CORE Participants,* was tasked with adjudicating both the substantive and non-substantive comments on the initial draft forms

- CTSG conducted **Market Assessment** to "case test" the draft forms

  - The Subgroup subsequently made the form simpler, clearer, and better aligned the language with the requirements of the NPRM

- Updated draft forms published in September, 2014

These draft forms are for illustrative purposes only and cannot be used to apply for the HIPAA Credential. These draft forms are subject to change based on the release of an HHS Final Rule.

*For more information on how to become a CORE Participating Organization, please visit our website HERE

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Draft HIPAA Credential Forms
Requirements

Updated HIPAA Credential Draft Form Requirements
Title: Draft HIPAA Credential – Attestation of HIPAA Compliance Form 1. Attestation of Compliance with HIPAA as amended by HITECH and ACA 2. Name and signature of authorized representative 3. CHP Information, HPID
Title: Draft HIPAA Credential - Application Form 1. Name and signature of Authorized Signature 2. CHP Information, HPID
Title: Draft HIPAA Credential – Attestation of Trading Partner Testing Form 1. CHP Information, HPID 2. List of Trading Partners per Transaction with which the CHP has successfully tested 3. Trading Partner Contact Information NPRM: "For each of the [four] transactions, the CHP must confirm that it has **successfully tested** with at least three trading partners, but if the number of transactions conducted with three trading partners does not account for **at least 30 percent of the total number of transactions conducted with providers**, the CHP could confirm that it has successfully tested with up to 25 trading partners." (79 FR 305)

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Q&A #3:
CAQH CORE
Phase IV Operating Rules

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Q&A #3:
CAQH CORE
Phase IV Operating Rules

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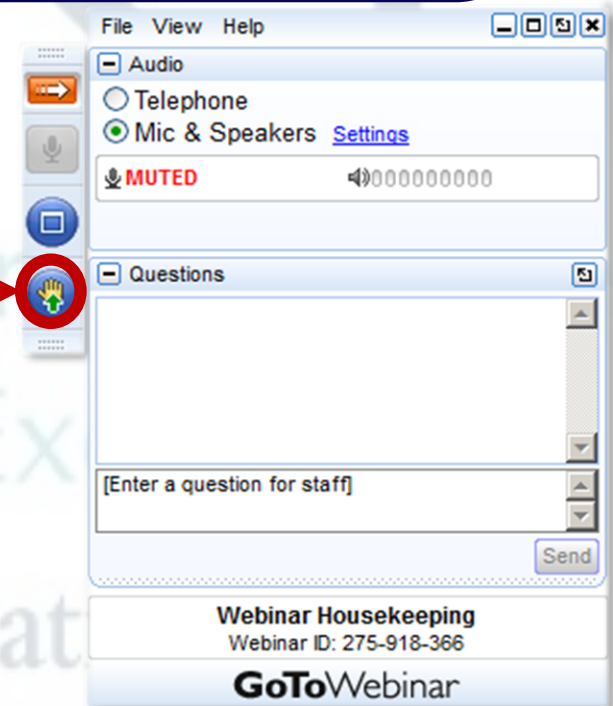
Third Set of ACA Mandated Operating Rules
In Development

> - Health claims or equivalent encounter information
> - Referral certification and authorization
> - *Enrollment and disenrollment in a health plan
> - *Health plan premium payments
> - Health claims attachments

- Goal: Draft of rules by end of 2014; will primarily be infrastructure.

  - Infrastructure rule development underway.
    - Infrastructure requirements will apply across transactions; built on existing draft rules, e.g. real time processing mode and/or batch processing mode required

  - *Both of these transactions are being used in the Insurance Exchanges (HIXs).
    - Firm with Federal and State HIX experience summarized lessons learned, especially regarding challenges / benefits of requirements set by CMS; report to be shared with CORE Participants to verify that findings are consistent with their HIX experience and how it compares to non-HIX

  - Attachment standard(s) not issued by CMS; however, CORE presenting potential vision.
    - Held a series of CORE-only calls to review and verify CORE findings on current volumes, attachment formats, future plans and related ROI, knowledge levels, etc.
    - Research indicates industry neutral standards, e.g., PDF, may have significant benefit and that industry-wide education will be key given current level of knowledge of key standards such as HL7 C-CDA
    - Determining when appropriate timing will be to draft operating rules based on status of standard(s)

27

CAQH CORE Phase IV Operating Rule Development:
Status Update

Transaction	Operating Rule Status	CORE Notes and Details
X12 v5010 278 Referral Certification & Authorization* **X12 v5010 837 P/ I/ D** Claim & Encounter Reporting		• Claims/Prior Authorization Subgroup will consider two draft rules initially drafted in 2009 and updated by CAQH CORE staff to align with the ACA and current CAQH CORE rule structure: • *Draft Phase IV CAQH CORE 278 Infrastructure Rule* • *Draft Phase IV CAQH CORE 837 Infrastructure Rule*
X12 v5010 834 Benefit Enrollment & Maintenance **X12 v5010 820** Health Plan Premium Payment		• CAQH CORE contracted with a firm with Federal and State HIX experience that conducted research on HIX use of the 834 and 820 transactions • CAQH CORE Benefit Enrollment & Maintenance/Health Plan Premium Payment Subgroup will consider infrastructure requirements later in 2014
Claim Attachments		• HHS has not adopted standard for health care claims attachments or indicated what standard(s) it might consider for the transaction • CAQH CORE conducted CORE-only calls; results of polling available

*The **Connectivity & Security Subgroup** is in the final stages of updating the Draft Phase IV CAQH CORE Connectivity Rule which applies to the claims, prior authorization, benefit enrollment & maintenance and health plan premium payment transactions.*

*Specifically, the X12N/005010X217 Health Care Services Review - Request for Review & Response (278)

Third Set of ACA Mandated Operating Rules
CORE Connectivity & Security Subgroup

- Since November 2013, the Connectivity & Security Subgroup began drafting the connectivity and related infrastructure options for Third Set of the ACA-mandated operating rules

  - Over 80 CAQH CORE Participating Organizations from a wide variety of stakeholders; led by Co-chair Dr. S. Luke Webster, *CHRISTUS*

- As part of the Third Set Rule Opportunities, Subgroup is considering how to align with other large scale industry connectivity initiatives given the CORE Guiding Principles for alignment

  - The CSSG recently completed an initial review of the Phase IV Connectivity Rule and subsequently sent out a straw poll (to subgroup members) to vote on their initial recommendations

- ***Join the Discussion***

  - The next Subgroup call will focus on the results of the straw poll mentioned above
    - The call will take place in December 2014 (Date TBD)

  - Subgroup calls are open to all CORE Participating Organizations

  - If you are not a CAQH CORE Participating Organization but would like more information on how to become one, please visit our website HERE
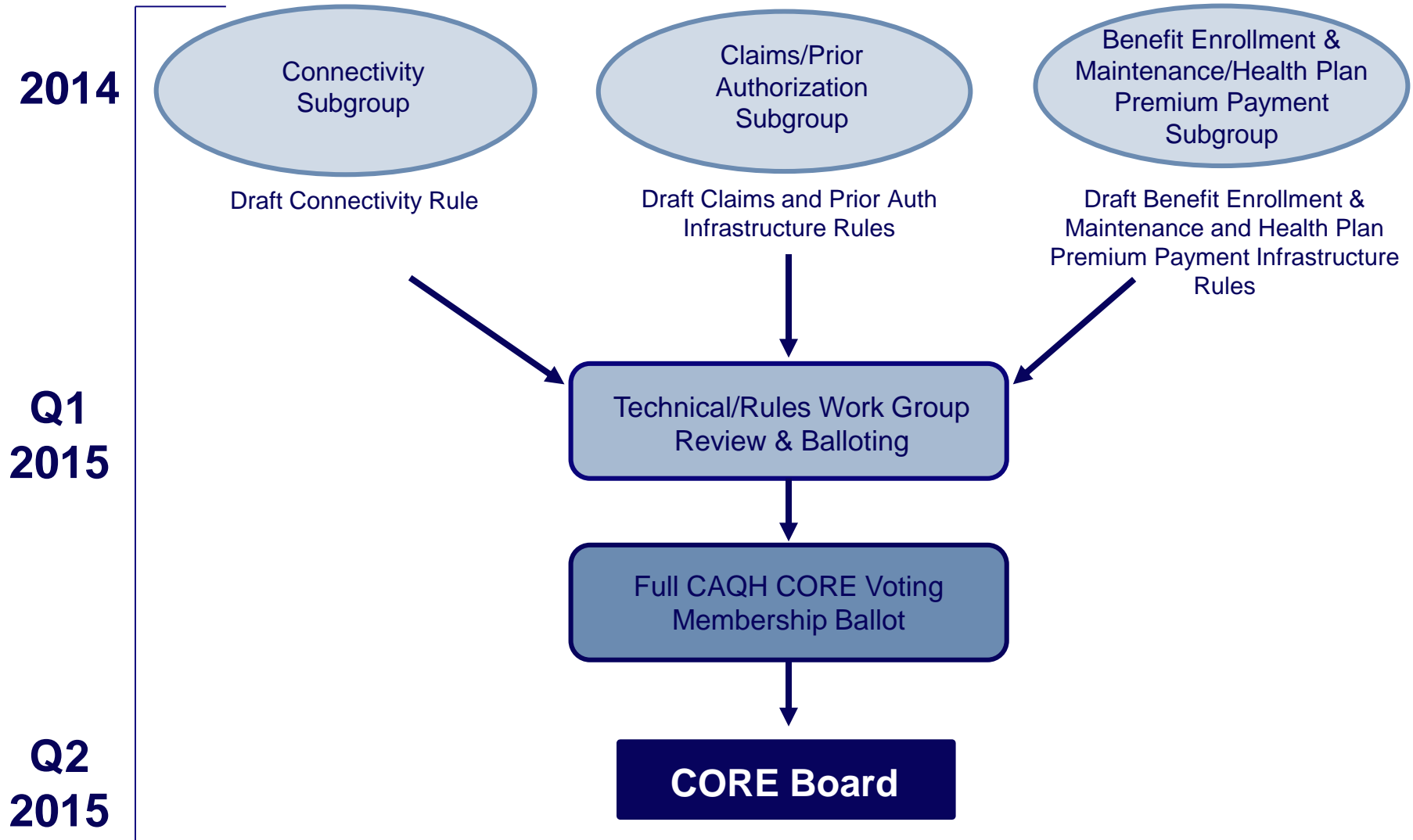
Priorities: Infrastructure Operating Rules

- Based on detailed environmental scan, Subgroup identified high-priority **opportunity areas**; specific **rule options** for each opportunity; and finally, have determined definitive **rule requirements** for each; for example:
  - **Opportunity Area:** *Improve connectivity*
    - <u>Selected Option</u>: Converge on a single envelope standard (SOAP+WSDL) to increase interoperability, plug-and-play capabilities, and align with clinical arena
      - <u>Rule Requirement</u>: The use of SOAP+WSDL envelope method is required to be supported.
      - Reminder: Connectivity is a Safe Harbor so other connectivity methods can be used
  - **Opportunity Area: *Improve message interaction/establish processing mode expectations***
    - <u>Selected Option</u>: Batch required; real-time optional for three of the four transactions regardless of connectivity method used (real time or batch mode)
      - <u>Rule Requirement</u>: An entity's messaging system must have the capability to receive and process large Batch transaction files if the entity supports Batch transactions; they must be received, processed and the appropriate response provided back to the sender within specified time…
      - Establish expectations, roles and responsibilities
      - Requirements for both modes, if both modes are offered

30

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Draft Claims/Prior Authorization Infrastructure Rules:
Status Update

- Prior to the ACA, CAQH CORE developed two *draft* operating rules addressing infrastructure requirements for claims and prior authorization:
  - Draft CAQH CORE Acknowledgements for X12 837 Claims Rule
  - Draft CAQH CORE Health Care Services Review - Request for Review/Response (X12 278) Rule

- Given all the industry activity between 2009 and now including the rollout of the ACA and industry implementation of infrastructure operating rules for three transactions (eligibility, claim status, and electronic remittance advice), CAQH CORE staff has updated the above two draft rules for Claims/Prior Authorization Subgroup consideration

- Updates to the draft infrastructure rules include:
  - Addition of ACA background information
  - Updated to align with current CAQH CORE operating rule structure
  - Broadened to include all applicable CAQH CORE infrastructure requirements
  - Inclusion of explicit processing mode requirements agreed on by the CAQH CORE Connectivity & Security Subgroup
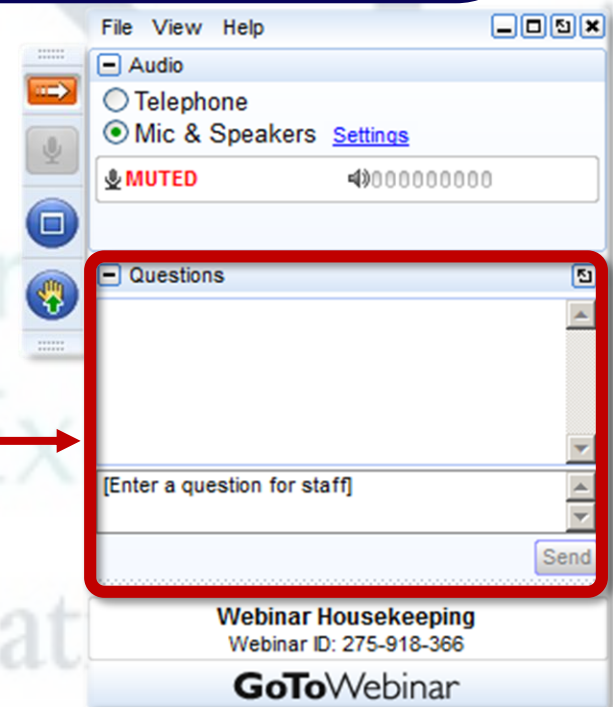
Process for Development of Phase IV CAQH CORE Operating Rules

2014

Connectivity Subgroup

Claims/Prior Authorization Subgroup

Benefit Enrollment & Maintenance/Health Plan Premium Payment Subgroup

Draft Connectivity Rule

Draft Claims and Prior Auth Infrastructure Rules

Draft Benefit Enrollment & Maintenance and Health Plan Premium Payment Infrastructure Rules

Q1 2015

Technical/Rules Work Group Review & Balloting

Full CAQH CORE Voting Membership Ballot

Q2 2015

CORE Board

32

Q&A #4:
CAQH CORE
EFT & ERA Operating Rules

Please submit your question:

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Q&A #4:
CAQH CORE
EFT & ERA Operating Rules

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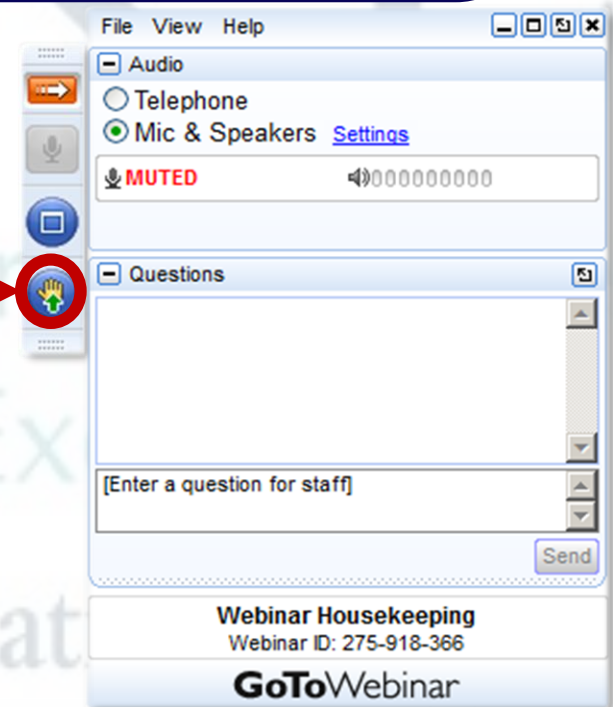
CAQH CORE EFT & ERA
Operating Rules
Available CORE Resources

Implementation Steps for HIPAA Covered Entities
Free Tools and Resources

CAQH CORE has a ***NEW* Implementation Resources webpage** which contains descriptions of and links to all available free tools and resources including those outlined below and many others!

Education is key
Get executive buy-in early

- Read the **CAQH CORE Operating Rules**
- Listen to archive of past **CAQH CORE Education Sessions** or register to attend a future one
- Search the EFT & ERA **FAQs** for clarification on common questions
- Use our **Request Process** to Contact technical experts throughout implementation

Determine Scope of Project

- The **Analysis and Planning Guide** provides guidance to complete systems analysis and planning for implementation. Information attained from the use of this guide informs the impact of implementation, the resources necessary for implementation, as well as, what would be considered an efficient approach to, and timeline for, successful implementation.

Flowchart steps:
- Just Getting Started
- Analysis and Planning
- Systems Design
- Systems Implementation
- Integration & Testing
- Deployment/Maintenance

Engage Trading Partners Early and Often

- **Provider's**: Use the EFT/ERA **Sample Health Plan** and **Sample Financial Institution** Letters as a way to help facilitate the request to receive EFT from your health plans and the request for delivery of the necessary reassociation data elements from your financial institutions

TEST, TEST, TEST!

- Leverage **Voluntary CORE Certification** as a quality check, a way to test with partners, and as a way of communicating compliance to the industry and other trading partners
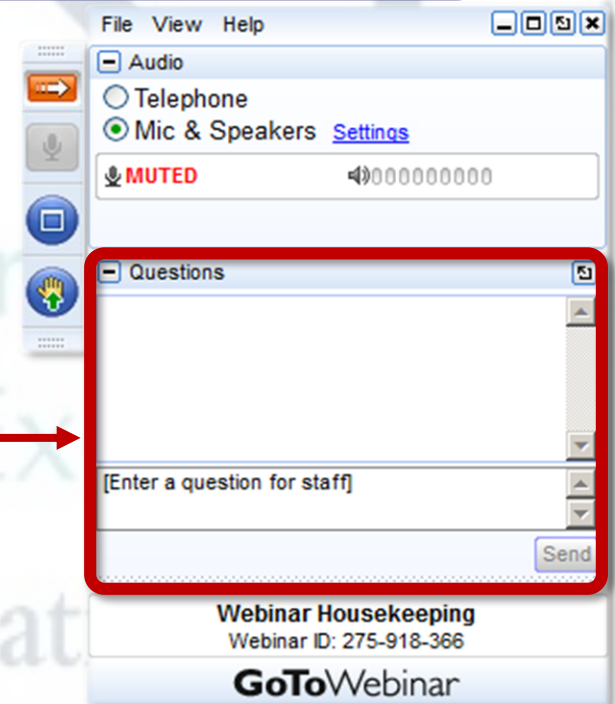
Get Involved with CAQH CORE

- **Join** as a Participant of CAQH CORE in order to give input on rule-writing maintenance by joining a task group and to stay up-to-date on implementation developments

36

Q&A:
Other Topics

Please submit your question:

- **<u>Via the Web</u>**: Enter your question into the Q&A pane in the lower right hand corner of your screen
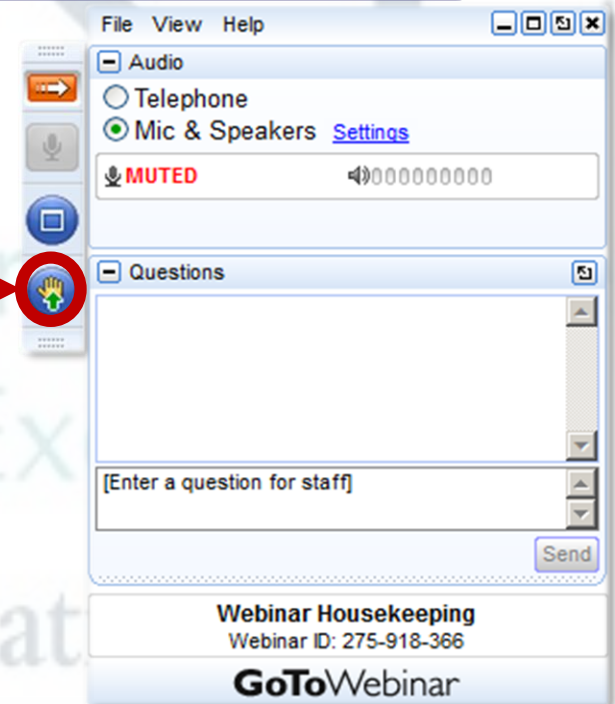

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37

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Q&A:
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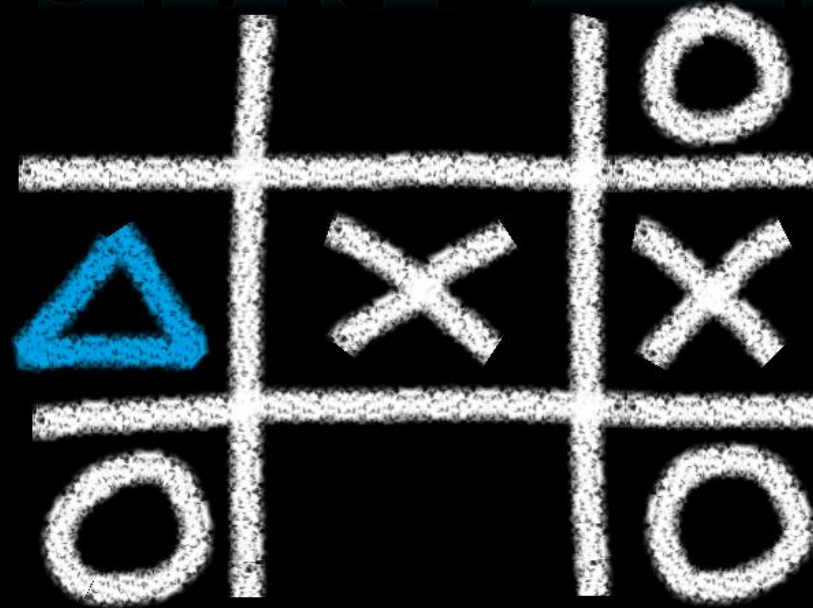
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Thank You for Joining Us!

website: www.CAQH.org

email: CORE@caqh.org

@CAQH

39

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You **Can't Win**

If You **Don't Know The Rules**

APPENDIX

Additional Information and Resources

Available NACHA Resources

- **Healthcare Payments Resources Website**
  - Provides a repository of information on a wide variety of topics for both financial institutions and the healthcare industry. Includes links to many other resources, as well as customized information to help "translate" concepts from one industry to the other (FAQs, reports, presentations).

- **Healthcare EFT Standard Information**
  - Located within the healthcare industry tab of the above website, specific information can be found on the healthcare EFT standard.

- **Healthcare Payments Resource Guide**
  - Publication designed to help financial institutions in implementing healthcare solutions. It give the reader a basic understanding of the complexities of the healthcare industry, identify key terms, review recent healthcare legislation, and discuss potential impacts on the financial services industry.
  - Order from the NACHA eStore "Healthcare Payments" section

- **Revised ACH Primer for Healthcare Payments**
  - A guide to understanding EFT payment processing. Introduces the healthcare industry to the Automated Clearing House (ACH) Network, explains ACH transaction flow and applications, and includes two "next steps checklists," one each for origination and receipt.

- Ongoing Education and Webinars
  - Check the Healthcare Payments Resource Website for "Events and Education"

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Available CMS OESS Resources

- **HIPAA Covered Entity Charts**
  - Use the HIPAA Covered Entity Charts to determine whether your organization is a HIPAA covered entity

- **CMS FAQs**
  - Frequently asked questions about the ACA, operating rules, and other topics

- **Affordable Care Act Updates**
  - Updates on operating rules; compliance, certification, and penalties; and engagement with standards and operating rules

- **CMS eHealth University**
  - **What Administrative Simplification Does For You** – This fact sheet explains the basics behind how Administrative Simplification will help improve health care efficiency and lower costs
  - **Introduction to Administrative Simplification** – This guide gives an overview of Administrative Simplification initiatives and their purposes
  - **Introduction to Administrative Simplification: Operating Rules** – A short video with information on Administrative Simplification operating rules

- Additional Questions
  - Questions regarding HIPAA and ACA compliance can be addressed to:
    - Geanelle Herring, Health Insurance Specialist, Geanelle.Herring@cms.hhs.gov

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Promote Provider Adoption of EFT & ERA Operating Rules
Take Action Now!

Contact Your Health Plans!

- To benefit from new EFT and ERA mandates, ensure your provider organization has requested the transactions from its health plans and EFT & ERA Operating Rule implementation status

- To help facilitate this request, CAQH CORE developed the ***Sample Provider EFT Request Letter***

- Providers can use this sample letter as template email or talking points with health plan contacts to request enrollment in EFT/ERA and benefits of operating rules

- The tool includes background on the benefits EFT, key steps for providers, an actual letter template, and glossary of key terms

Contact Your Banks!

- To maximize the benefits available through the CAQH CORE Reassociation Rule, providers must request delivery of the necessary data for EFT and ERA reassociation

- To help facilitate this request, CAQH CORE developed the ***Sample Provider EFT Reassociation Data Request Letter***

- Providers can use this sample letter as template email or talking points with bank contacts to request delivery of the reassociation data

- The tool includes background on the benefits of the letter, key steps for providers, an actual letter template, and glossary of key terms

44

Relationship between Ongoing HIPAA Enforcement and HHS Health Plan Certification

The complaint-driven HIPAA Enforcement Process is an established and existing program that will be maintained *in addition to* the HHS Health Plan Certification program; the two programs are complementary

	Complaint-Driven HIPAA Enforcement Process	**Proposed HHS Health Plan Certification of Compliance**
Applicable Entities	All HIPAA covered entities	Health plans
Action Required	Implement CAQH CORE Eligibility & Claim Status and EFT & ERA Operating Rules, and applicable Standards	File statement with HHS that demonstrates health plan has obtained a CAQH CORE Certification Seal for Phase III or HIPAA Credential and thus are in compliance with the standards and operating rules
Compliance Date	*First Set* – **January 1, 2013** *Second Set* – **January 1, 2014**	**December 31, 2015** (proposed)
Applicable Penalties	Due to HITECH, penalties for HIPAA non-compliance have increased, now up to **$1.5 million per entity per year**	Fee amount equals **$1 per covered life until certification is complete**; penalties cannot exceed $20 per covered life or $40 per covered life (for deliberate misrepresentation) on an annual basis
Verification of Compliance	***Ongoing*** complaint-driven process to monitor compliance prompted by anyone filing a complaint via CMS's Administrative Simplification Enforcement Tool (ASET) for non-compliance with the standards and/or operating rules	"***Snapshot***" of health plan compliance based on when the health plan obtains CORE Certification/HIPAA Credential and files statement with HHS

Example of complementary nature of HIPAA Enforcement Process and Proposed HHS Health Plan Certification:
An entity could file a complaint for non-compliance against an HHS-certified Health Plan using the HIPAA Enforcement Process if they believe the Health Plan has fallen out of compliance since their certification (e.g. A certified Health Plan acquires another non-compliant Health Plan).

45

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