



**Analysis & Planning Guide for Implementing the  
Phase V CAQH CORE Operating Rules**

June 2019

Version 5.0.0

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## Introduction: Analysis & Planning for Phase V CAQH CORE Operating Rule Implementation

This Phase V CAQH CORE Analysis & Planning Guide is a resource for entities preparing to implement the Phase V CAQH CORE Operating Rules. A solid understanding of the Phase V CAQH CORE Operating Rules, combined with an effective planning effort, is the basis for a successful implementation project.

This document provides guidance for project managers, business analysts, system analysts, architects, and other project staff to complete the first step of a typical systems development life cycle: Systems Analysis & Planning. The purpose of this guide is to enable project managers and other staff to:

- Understand the applicability of the Phase V CAQH CORE Operating Rules requirements to your organization's systems and business processes that support the use of the 005010X217 Health Care Services Review – Request for Review and Response (278) transaction and use of proprietary web portals for prior authorizations.
- Identify and inventory all impacted internal systems, business processes (manual and automated) and functions/processes outsourced to an agent<sup>1</sup> (e.g., Business Associate) that process the transactions, support web portals, or perform other requirements of the Phase V CAQH CORE Operating Rules
- Perform a detailed rule requirement gap analysis to identify system(s) that may require remediation in order to conform to the Phase V CAQH CORE Operating Rule requirements and to identify business processes which may be impacted by the Phase V CAQH CORE Operating Rules (e.g., need for internal testing, project management, additional resources, etc.)

The appendices of this Analysis & Planning Guide include the following:

- [Stakeholder & Business Type Evaluation](#): Use to determine your stakeholder type(s) and understand the role of your agents (Business Associates) that process the transactions and will be affected by the Phase V Operating Rule requirements.
- [Systems Inventory & Impact Assessment Worksheet](#): Use to perform a high-level inventory of all internal systems, business processes (manual and automated) and functions/processes outsourced to an agent that process the transactions, support web portals, and are impacted by the Phase V CAQH CORE Operating Rules.
- [Gap Analysis Worksheet](#): A deep-dive analysis used to determine the level of system(s) remediation necessary for implementing the business requirements of the Phase V CAQH CORE Operating Rules
- [Stakeholder Transaction Flow Diagram](#): An overview where the Phase V CAQH CORE Operating Rule Requirements map to in the prior authorization process.

Additionally, a user-friendly Excel workbook containing all of the analysis & planning forms is available [HERE](#).

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<sup>1</sup> One who agrees and is authorized to act on behalf of another, a principal, to legally bind an individual in particular business transactions with third parties pursuant to an agency relationship. Source: West's Encyclopedia of American Law, edition 2. Copyright 2008 The Gale Group, Inc. All rights reserved. The term "agent" as used in this document describes entities that provide outsourced functions/activities on behalf of HIPAA-covered health plans or providers, (e.g., Business Associate). The full definition of Business Associate can be found in the [Electronic Code of Federal Regulations](#) (Title 45, Subtitle A, Subchapter C, Part 160.103).

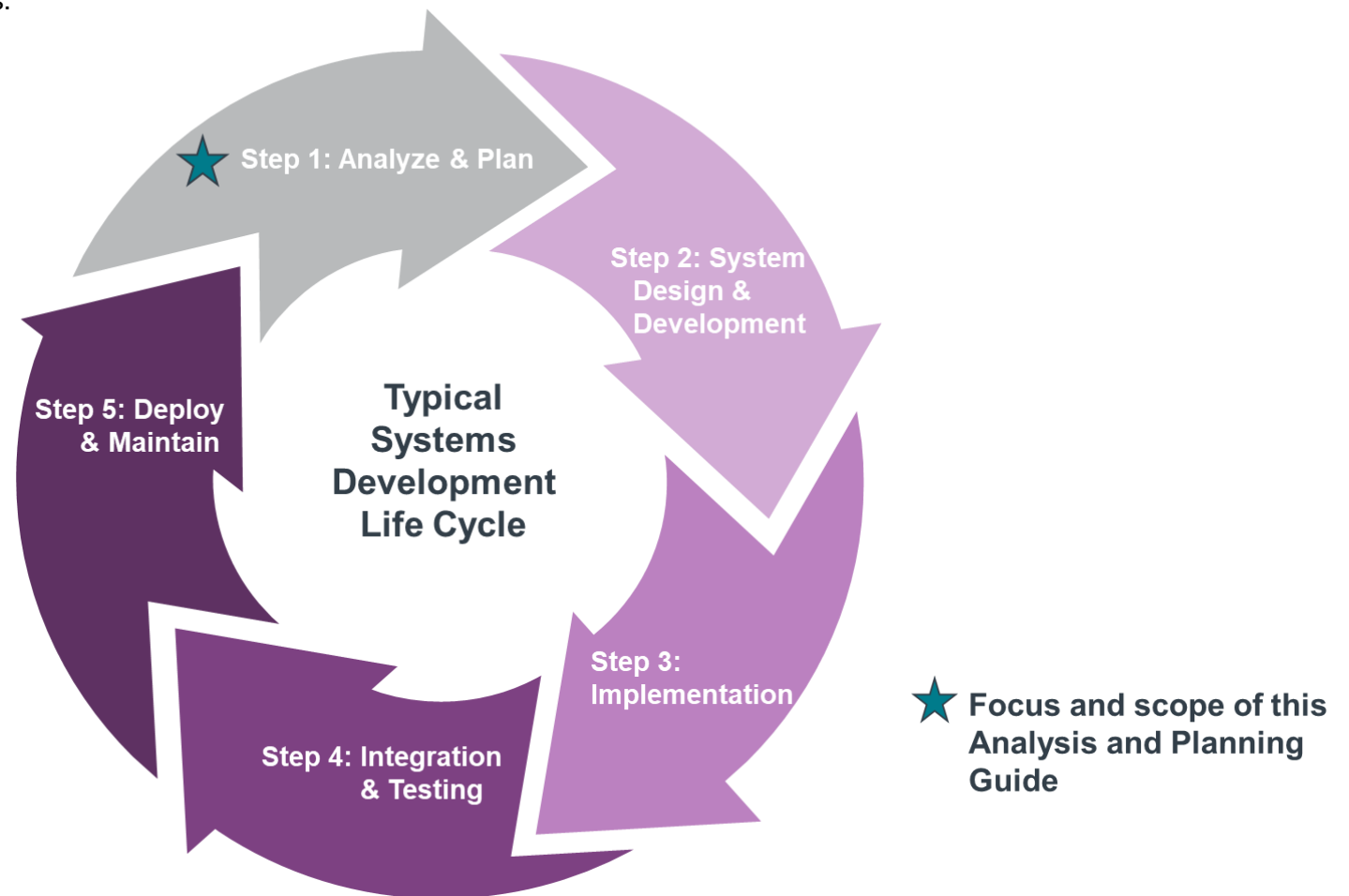
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**NOTE:**

- The Phase V CAQH CORE Operating Rules reference three stakeholder categories: Provider or its agent; Health Plan or its agent; HIPAA-covered entity or its agent. This document references examples of these stakeholder categories to assist with applicability and implementation; these examples include clearinghouses and vendors. Please note that some stakeholder types are not necessarily a HIPAA-covered entity. Some stakeholders (e.g., software or service vendors) may not be directly required to implement the rule requirements but may need to as a result of being an agent of a HIPAA-covered entity.

## Systems Development Life Cycle

The diagram below illustrates a typical systems development life cycle (SDLC) for developing or remediating information systems. SDLC includes five key steps, beginning with analysis and planning through deployment and ongoing maintenance. This Analysis & Planning Guide is scoped to assist your organization in the first step of an SDLC for the implementation of the Phase V CAQH CORE Operating Rules given Step 1 sets the stage for all other steps. Note: The impacted system(s) may include an in-house developed system, commercial off the shelf (COTS)/cloud-based system, or a solution outsourced to a third party. The “system” in certain cases may also be a manual process or even include activities performed on your behalf by one or more agents.



## Analysis & Planning for the Phase V CAQH CORE Operating Rules: Key Tasks

The following table outlines the key tasks necessary to complete Step 1, Analyze & Plan, of a Systems Development Life Cycle. When the analysis and planning is completed, you will have created a high-level systems impact analysis and developed a detailed project plan for adopting the Phase V CAQH CORE Operating Rules Requirements.

| <b>Analysis and Planning: Key Tasks</b>  |  |
|--|--|
| <b>Task</b>  | <b>Activity</b>  |
| <p><b>Task A – Complete Staff Education and Training on the Phase V CAQH CORE Operating Rules</b></p>  | <ul style="list-style-type: none"> <li>• Thoroughly review and understand the <a href="#">Phase V CAQH CORE Operating Rules</a>.</li> <li>• Conduct general education and awareness of the Phase V CAQH CORE Operating Rules for the impacted areas in your organization (see the additional resources section of this document for the tools available to educate staff on the Phase V CAQH CORE Operating Rules).</li> </ul>   |
| <p><b>Task B – Determine Your Organization’s Stakeholder &amp; Business Type(s) (<a href="#">Stakeholder &amp; Business Type Evaluation</a>)</b></p> <p><i>Phase V CAQH CORE Operating Rule requirements are tied to applicable stakeholder type(s): provider, health plan, a HIPAA-covered entity, or their respective agents.</i></p> <p><i>Please note that some stakeholder types that are part of the entities involved in exchanging the Phase V transactions are not necessarily a HIPAA-covered entity. Some stakeholders (software or service vendors) may not be directly required to implement the rule requirements but may need to as a result of being an agent of a HIPAA-covered entity.</i></p> | <ul style="list-style-type: none"> <li>• Determine your stakeholder and business type(s) to understand which Phase V CAQH CORE Operating Rules apply to your organization.</li> <li>• Understand the role of agents that provide services or process the transactions on your behalf.</li> <li>• Consider the following bullets in the sections below based on your stakeholder type(s): <ul style="list-style-type: none"> <li>• If your organization is a <u>health plan</u> that receives X12/005010X217 Health Care Services Review – Request for Review and Response (278) Transaction or prior authorizations via web portals: <ul style="list-style-type: none"> <li>– The majority of the Phase V CAQH CORE Operating Rule requirements will apply to you.</li> <li>– Health plans that outsource a portion or all of the Phase V CAQH CORE Operating Rule requirements to an agent to process may have some unique implementation considerations. Depending on the scenario between the health plan and its agent(s), the health plan may not need to implement some rule requirements directly while the agent will need to implement them on behalf of the health plan. The health plan may have a different agent(s) to consider when implementing the Phase V CAQH CORE Operating Rules.</li> </ul> </li> <li>• If your organization is a <u>provider</u>: <ul style="list-style-type: none"> <li>– You likely are outsourcing some of the Phase V CAQH CORE Operating Rules requirements to an agent. Provider organizations using a clearinghouse, a software vendor, or a third-party billing/collection service to process the 278 transaction with health plans may have some unique implementation considerations, as the clearinghouse/software vendor/billing/collection services is performing some functions on behalf of the provider as an agent.</li> </ul> </li> </ul> </li> <li>• If your organization is a <u>clearinghouse</u>:</li> </ul> |

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| <b>Analysis and Planning: Key Tasks</b>   |  |
|---|--|
| <b>Task</b>   | <b>Activity</b>  |
|   | <ul style="list-style-type: none"> <li>- If a health plan and/or provider outsource(s) certain functions to you to perform on their behalf, you are responsible for implementing all Phase V CAQH CORE Operating Rule requirements which have been outsourced to you. In this scenario, your organization will need to work with your business partners to determine applicable rule requirements.</li> </ul>  |
|   | <ul style="list-style-type: none"> <li>• If your organization is a <u>software or services vendor</u>: <ul style="list-style-type: none"> <li>- You may be responsible for incorporating many of the Phase V CAQH CORE Operating Rule requirements into your services or software as a result of providing software or services solutions to a HIPAA-covered entity even though you are not considered an agent of a HIPAA-covered entity. A review of the Phase V CAQH CORE Certification Test Suite Section 2.2.4 may provide some insight.</li> <li>- Note: If your services or software are provider-facing, you will have a unique set of requirements to implement that are different than health plan-facing services or software.</li> </ul> </li> </ul>   |
| <b>Task C – Conduct a Systems Inventory (<a href="#">Systems Inventory &amp; Impact Assessment Worksheet</a>)</b> | <p><i>Relative to your stakeholder type(s):</i></p> <ul style="list-style-type: none"> <li>• Identify and inventory all impacted internal systems, business processes (manual and automated) and functions/processes outsourced to an agent that processes the transactions.</li> <li>• Determine which functions for each identified impacted system and business process are in-house developed and maintained, commercial-off-the-shelf (COTS)/cloud-based system or outsourced to an agent.</li> <li>• Determine potential options for addressing the Phase V CAQH CORE Operating Rule requirements applicable to your stakeholder type(s) (e.g., remediate an in-house developed system, replace or upgrade any COTS/cloud-based system, or work with the vendor to ensure they meet Phase V CAQH CORE Operating Rule requirements).</li> </ul>   |
| <b>Task D – Conduct Detailed Rule Requirements Gap Analysis (<a href="#">Gap Analysis Worksheet</a>)</b>          | <ul style="list-style-type: none"> <li>• Identify the impacted systems (identified via the <i>Systems Inventory &amp; Impact Assessment Worksheet</i>) responsible for satisfying each requirement of the Phase V CAQH CORE Operating Rules.</li> <li>• Identify and document any gaps between the existing system’s capability and each rule requirement.</li> <li>• Identify and document any business process which may also be impacted by the Phase V CAQH CORE Operating Rule requirements and to what extent the process is impacted. <ul style="list-style-type: none"> <li>- For example, in the case of submitting patient identifying information, a provider must submit patient last name, first name and date-of-birth in Loop ID 2010C Subscriber Name NM1 and DMG segments. A health plan and its agent must remove the specified character strings and punctuation values in Loop ID 2010C</li> </ul> </li> </ul> |

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| <b>Analysis and Planning: Key Tasks</b>          |  |
|--|--|
| <b>Task</b>                                      | <b>Activity</b>  |
|  | Subscriber Name NM1 segment prior to using last name for subscriber matching or verification when the health plan and its agent is using the X12 Basic Character Set and Member identification and last name is submitted in Loop ID 2010C Subscriber name and Last name is used in the search and match logic of the health plan and its agent.   |
| <b>Task E – Develop a Detailed Project Plan</b>  | <ul style="list-style-type: none"> <li>• A detailed project plan typically outlines steps for completion of the following key activities as Steps 2-5 of the System Development Life Cycle: <ul style="list-style-type: none"> <li>- Determine required resources to complete the project (i.e., estimate resources, time, system release schedules, and money).</li> <li>- Develop a detailed Functional Requirements Document.</li> <li>- Create a detailed Systems Design Document describing, in detail, the required functions and capabilities necessary to implement the Phase V CAQH CORE Operating Rules.</li> <li>- Implement necessary system(s) enhancements.</li> <li>- Test impacted systems to ensure conformance to the requirements set forth in the Functional Requirements Document.</li> <li>- Deploy (i.e., implement system(s) into production environment).</li> <li>- Conduct trading partners implementation testing.</li> </ul> </li> </ul>  |
| <b>Other Considerations – CORE Certification</b> | <ul style="list-style-type: none"> <li>• Consider CORE Certification as part of your project plan to test, assure, and demonstrate implementation of the Phase V CAQH CORE Operating Rules. <ul style="list-style-type: none"> <li>- CAQH CORE offers <a href="#">CORE Certification</a> to the four stakeholder types that create, transmit or use the 278 transaction and that may use web portals: health plans, providers, software/services vendors, and clearinghouses.</li> <li>- Key benefits to completing CORE Certification include: <ul style="list-style-type: none"> <li>▪ Certification testing provides an online mechanism for a stakeholder to test its system's ability to exchange prior authorization request/response data and web portal functionality with its trading partners using the Phase V CAQH CORE Operating Rules.</li> <li>▪ Demonstrates via a recognized industry "Seal" your organization's adoption of the Phase V CAQH CORE Operating Rules to the industry.</li> <li>▪ Encourages trading partners to work together on transaction data content needs.</li> <li>▪ Promotes maximum ROI when all stakeholders in the information exchange are known to conform with the Phase V CAQH CORE Operating Rules.</li> </ul> </li> </ul> </li> <li>• More information on the CORE Certification process is available on the CAQH website <a href="#">HERE</a>.</li> </ul> |



## Additional Resources

Beyond the information provided in this CAQH CORE Analysis & Planning Guide, there are additional resources for entities preparing to implement the Phase V CAQH CORE Operating Rules:

- [Phase V CAQH CORE Operating Rules](#).
- [Operating Rules Implementation Resources](#) from CAQH CORE and its partners to help you implement the CAQH CORE Operating Rules.
- [Phase V CAQH CORE Certification Test Suite](#) (developed for CORE Certification but the same concepts, e.g., role of trading partners, apply for general adoption of the CAQH CORE Operating Rules).
- [CAQH CORE FAQs](#).
  - If your question is not answered by the FAQ, email question to [CORE@caqh.org](mailto:CORE@caqh.org) to have it entered into the formal CAQH CORE Request Process.
- Upcoming CAQH CORE [Education Sessions](#) (as well as presentations and recordings from previous sessions).
- [X12 Interpretation Portal](#) Information related to the meaning, use, and interpretation of X12 Standards, Guidelines, and Technical Reports, including implementation guidelines for the transactions can be obtained from X12.

Entities seeking to implement the Phase V CAQH CORE Operating Rules are encouraged to note the following:

- The Phase V CAQH CORE Operating Rules assume that any HIPAA-covered entity implementing the operating rules is compliant with HIPAA; HIPAA compliance is not defined by CAQH CORE.
- The Phase V CAQH CORE Operating Rule requirements are specific to either a HIPAA-covered entity or its respective agent(s). The applicability of a specific Phase V CAQH CORE Operating Rule requirement may vary according to trading partner relationship, contracted services, and other arrangements. If you have specific questions concerning applicability, please [contact CAQH CORE Staff](#).
- CAQH CORE staff is available to assist with questions about understanding the requirements of the Phase V CAQH CORE Operating Rules in regard to your stakeholder type(s); gap analysis and systems remediation are the responsibility of the implementing entities.

# Appendices

## Appendix A: CAQH CORE Stakeholder & Business Type Evaluation

**Purpose:** After becoming educated on the Phase V CAQH CORE Operating Rules, you will need to determine your stakeholder type(s). The *Phase V CAQH CORE Stakeholder & Business Type Evaluation* below will assist you in determining which Phase V CAQH CORE Operating Rules apply to your organization and to generally consider which trading partners you need to work with on planning and implementation. Knowing your stakeholder type(s) will help you complete the *Systems Inventory & Assessment Worksheet*.

**NOTE:** Applicability of a specific rule requirement may vary according to trading partner relationship, contracted services, and other arrangements.<sup>2</sup> Some example business models include:

- Provider direct-to-health plan connection:
  - Health plan implements all applicable requirements of the Phase V CAQH CORE Rules.
  - Provider sends and receives the 278 transaction as required by the Phase V CAQH CORE Rules.
- Provider-to-agent connection:
  - Provider outsources 5010X217 278 Request and Response to an agent (e.g., clearinghouse/financial services organization).
  - Agent (e.g., provider-facing clearinghouse or billing company) acts as a proxy for provider's Phase V CAQH CORE conformance for the contracted services.
- Health plan-to-agent connection:
  - Health plan outsources the receipt, return or elements of 5010X217 278 Request and Response or management of web portal system to an agent (e.g., clearinghouse, business associate, or utilization management organization).
  - Health plan agent acts as a proxy for health plan's Phase V CAQH CORE conformance for the contracted services.
- Single/dual clearinghouse-to-health plan connection:
  - Provider outsources 278 data content to a clearinghouse.
  - Provider-facing clearinghouse acts as a proxy for provider's Phase V CAQH CORE conformance for the contracted service.
  - Health plan outsources 278 data content and web portal functions to a clearinghouse.
  - Health plan-facing clearinghouse acts as a proxy for health plan's Phase V CAQH CORE conformance for the contracted services

**Key Takeaway:** Understand what aspects of your business and/or outsourced functions are impacted by the Phase V CAQH CORE Operating Rules (e.g. products, business lines, etc.).

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<sup>2</sup> The Phase V CAQH CORE Operating Rule requirements are tied to applicable stakeholder type(s): provider, health plan, a HIPAA-covered entity, or their respective agents. This document references examples of these stakeholder categories to assist with applicability and implementation. Please note that some stakeholder types that are part of the entities involved in exchanging the Phase V transactions are not necessarily a HIPAA-covered entity. Some stakeholders (software or service vendors) may not be directly required to implement the rule requirements but may need to as a result of being an agent of a HIPAA-covered entity.

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A user-friendly Excel workbook containing the *Stakeholder & Business Type Evaluation* is available [HERE](#).

| <b>Stakeholder &amp; Business Type Evaluation</b>   |  |                      |
|---|--|----------------------|
| <b>Question</b>   | <b>Points for Consideration</b>  | <b>Your Response</b> |
| 1. What is your stakeholder type(s)? (e.g., health plan, provider, vendor, clearinghouse; see question 3 for more information on other trading partners)  | The <a href="#">Phase V CAQH CORE Certification Test Suite</a> defines four stakeholder types that implement the operating rules: health plan, clearinghouse, provider, and vendor; the applicability of specific Phase V CAQH CORE Operating Rule requirements vary according to stakeholder type. Please reference <a href="#">Section 2</a> of the Phase V CAQH CORE Certification Test Suite for further information.  |                      |
| 2. What role and responsibilities does my organization have for implementing the Phase V CAQH CORE Operating Rules, given our stakeholder type(s)? (e.g. 278 transaction or web portal system for prior authorizations)       | The Phase V CAQH CORE Operating Rules outline the specific roles and responsibilities for each stakeholder type; review Phase V CAQH CORE Operating Rule text for more detail.   |                      |
| 3. Does my organization rely on other organizations (e.g., software vendors, clearinghouses, business associates) to assist with processing the 278 transaction or with web portal system operation for prior authorizations? | <p>The applicability of a specific Phase V CAQH CORE Operating Rule requirement may vary according to trading partner relationship, contracted services, and other arrangements. If your organization relies on a software vendor or a clearinghouse or other business associate to meet any of the Phase V CAQH CORE Operating Rule requirements, you will need to coordinate with that entity as part of your pre-implementation planning and outline applicability of each requirement to the vendor, clearinghouse or business associate. See Section 4 of this document (above) for additional resources.</p> <p>Ensure appropriate business associate agreements are in place with necessary stakeholders.</p> |                      |

## **Appendix B: CAQH CORE Systems Inventory & Impact Assessment Worksheet**

**Purpose:** After you complete the *Stakeholder & Business Type Evaluation*, your next step is to complete the *CAQH CORE Systems Inventory & Impact Assessment Worksheet* which enables you to identify and inventory all impacted systems that process 5010X217 278 Request and Response transaction and any entity and its agent that make available a web portal to a provider to submit a prior authorization request for any healthcare service or referral and corresponding response from the provider.

This assessment worksheet will help you identify your systems impacted by the implementation of the Phase V CAQH CORE Operating Rules, including in-house developed and maintained systems, COTS/cloud-based systems, and those functions outsourced to a third party. While completing this analysis you should also consider potential options for addressing applicable Phase V CAQH CORE Operating Rule requirements (e.g., remediate an in-house developed system, replace or upgrade any COTS/cloud-based system, or work with third-party vendor).

### **Instructions:**

1. In the second column of the worksheet, note if one of your system(s) is impacted by each rule and list the name of the impacted system(s).
  - **NOTE:** The impacted system(s) may include an in-house developed system, COTS/cloud-based system, or a capability outsourced to a third party. The “system” in certain cases may also be a manual process.
2. In the third column, identify potential options for addressing the rule requirements for each impacted system(s).
3. Use the worksheet findings to inform completion of the *Gap Analysis Worksheet* for any identified system impacted by the rule requirements.

**Key Takeaway:** Understand how many of your systems/products are impacted by each Phase V CAQH CORE Operating Rule and understand with which vendors you will need to coordinate.

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A user-friendly Excel workbook containing the *Systems Inventory & Impact Assessment Worksheet* is available [HERE](#).

| <b>CAQH CORE Systems Inventory &amp; Impact Assessment Worksheet</b>                         |  |  |   |
|--|--|--|---|
| <b>Phase V CAQH CORE Operating Rule</b>  | <b>Are One or More Systems/Processes Impacted?</b><br><i>(Yes/No; Name of Impacted System/Process)</i> | <b>Is the System/Process In-House, COTS/Cloud-based, or Outsourced to a Third Party?</b> | <b>Potential Options to Address Rule Requirements</b><br><i>(e.g. remediate an in-house developed system, replace or upgrade any COTS/cloud-based system, work with third party vendor to ensure they meet CAQH CORE Operating Rule requirements, or update manual processes)</i> |
| <a href="#"><u>Prior Authorization (278) Request / Response Data Content Rule v5.0.0</u></a> |  |  |   |
| Prior Authorization (278) Request / Response Data Content Rule v5.0.0                        |  |  |   |
| <a href="#"><u>Prior Authorization Web Portal Rule v5.0.0</u></a>                            |  |  |   |
| Prior Authorization Web Portal Rule v5.0.0   |  |  |   |

## Appendix C: CAQH CORE Gap Analysis Worksheet

**Purpose:** After the *Systems Inventory & Impact Assessment*, the next task is for entities to determine the level of system(s) remediation necessary for adopting the business and technical requirements of the Phase V CAQH CORE Operating Rules using the *CAQH CORE Gap Analysis Worksheet*. Each rule requirement in the *Gap Analysis Worksheet* includes a section reference for the corresponding operating rule for more detail.

### NOTES:

- For more detail on rule requirements, refer to the actual CAQH CORE Operating Rule text, which takes precedence over this worksheet.
- If your entity has identified more than one impacted system you may need to complete a *Gap Analysis Worksheet* for each system.

### Instructions:

1. The *Gap Analysis Worksheet* contains each Phase V CAQH CORE Operating Rule Requirement in the first column by Phase V CAQH CORE Operating Rule. In the second column, enter the system(s) impacted by the Phase V CAQH CORE Operating Rule Requirement. If there is no system impacted by the requirement, enter N/A.
  - **NOTE:** The impacted system(s) may include an in-house developed system, a COTS/cloud-based system, or a capability outsourced to a third party or business associate.
2. In the third column note if the system currently meets the Phase V CAQH CORE Operating Rule Requirement or not.
3. In the fourth column, briefly describe any gap between the Phase V CAQH CORE Operating Rule Requirement and the system under evaluation, if applicable. The high-level findings from the *Systems Inventory & Impact Assessment* will inform the input in this column.
4. In the fifth column estimate the effort required to remediate the impacted system(s). This can include the type of skilled resource required, the number of such resources, and the potential hours required to fill the gap identified.
5. In the sixth column identify and describe any impacted business process. These often include potential training and education of staff, clients, and other users of the system's new capabilities.
6. In the seventh column estimate and describe the effort required to revise the impacted business process. This can include the type of skilled resources required, the number of such resources, and the potential hours required to fill the gap identified.
7. The results of the completed *Gap Analysis Worksheet* will allow for the development of a detailed project plan.

**Key Takeaway:** Understand the level of system(s) remediation necessary for adopting each Phase V CAQH CORE Operating Rule requirement.

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A user-friendly, Excel workbook containing the *Gap Analysis Worksheet* is available [HERE](#).

| Rule Req. #   | CAQH CORE Operating Rule Requirement  | System/Process Impacted<br><i>(Based on results from System Inventory and Impact Analysis Worksheet; if no impact enter 'N/A')</i> | System/Process Currently Meets the Requirement<br><i>(Yes/No)</i> | Gap<br><i>(Briefly describe gap)</i> | Estimated System/Process Remediation Effort<br><i>(Required number, type of skilled resource, person hours required)</i> | Business Processes Impacted<br><i>(Briefly describe)</i> | Business Processes/Documentation Revisions Required & Effort Estimates |
|---|---|--|---|--------------------------------------|--|--|--|
| <b><u>Phase V CAQH CORE Prior Authorization (278) Request / Response Data Content Rule v5.0.0</u></b> |   |  |   |                                      |  |  |  |
| <i>Provider Submission Requirements (§4.1)</i>  |   |  |   |                                      |  |  |  |
| 1   | When the patient is the subscriber, the provider and its agent must submit the Patient Last Name, First Name and Date-of-Birth in Loop ID 2010C Subscriber Name NM1 and DMG segments.   |  |   |                                      |  |  |  |
| 2   | When the patient is the dependent, the provider and its agent must submit the Patient Last Name, First Name and Date-of-Birth in Loop ID 2010C Subscriber Name NM1 and DMG segments and Dependent Last Name, First name and Date of Birth in Loop ID 2010D Dependent Name NM1 and DMG segments. |  |   |                                      |  |  |  |
| <i>Normalizing Last Name Requirements (§4.2.1, §4.2.1.1, §4.2.1.2)</i>                                |   |  |   |                                      |  |  |  |
| 3   | Requires a health plan and its agent to normalize the last name submitted on the 5010X217 278 and internally-stored last name prior to using submitted last name for matching or verification.  |  |   |                                      |  |  |  |
| <i>Consistent and Uniform Use of AAA Error and Action Codes Requirements (§4.2.2)</i>                 |   |  |   |                                      |  |  |  |
| 4   | When the health plan and its agent detects and error in data submitted in the Loops specified the rule, the most specific AAA Error Code AAA03 901 reject Reason Code permitted in the respective loops AAA Segment code set must be returned.  |  |   |                                      |  |  |  |
| <i>Out-of-network Requester, Service Provider or Specialty Entity (§4.2.2.1)</i>                      |   |  |   |                                      |  |  |  |
| 5   | When the requester provider, service provider or specialty entity submitted on the 5010X217 278 Request is determined to be out-of-network in the   |  |   |                                      |  |  |  |

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| Rule Req. #   | CAQH CORE Operating Rule Requirement   | System/Process Impacted<br><i>(Based on results from System Inventory and Impact Analysis Worksheet; if no impact enter 'N/A')</i> | System/Process Currently Meets the Requirement<br><i>(Yes/No)</i> | Gap<br><i>(Briefly describe gap)</i> | Estimated System/Process Remediation Effort<br><i>(Required number, type of skilled resource, person hours required)</i> | Business Processes Impacted<br><i>(Briefly describe)</i> | Business Processes/Documentation Revisions Required & Effort Estimates |
|---|--|--|---|--------------------------------------|--|--|--|
|   | specified Loops, Error Code 35-Out of Network must be returned in AAA03 901 Reject Reason Code Data Element in addition to any other AAA03 901 Reject Reason Code.   |  |   |                                      |  |  |  |
| <i>Requesting Additional Documentation for a Pended Response (§4.2.3.1, §4.2.3.2)</i> |  |  |   |                                      |  |  |  |
| 6   | When the 5010X217 278 Request include one or more Diagnosis code(s) in Loop 2000E Patient Event Level or Procedure or Revenue code(s) in Loop 2000F Service Level can be categorized by the health plan and its agent into one or more of the specified events, and when additional medical information is required, the health plan and its agent must return data element HCR01 306 Action Code=A4 Pended and HCR04 Industry Code 0V or HCR03 Industry Code 0P or HCR03 Industry Code 0U in Loop ID 2000E HCR Health care Services Review Segment to indicate that the review outcome is pended for additional information and either: PWK01 Attachment Report Type Code or a LOINC code AND a PWK code. |  |   |                                      |  |  |  |
| <i>Using Health Care Service Decision Reason Codes (HCSDRC) (§4.2.4)</i>              |  |  |   |                                      |  |  |  |
| 7   | When the health plan and its agent use the HCSDRC in Loop ID 2000E or Loop ID 2000F, if appropriate, one or more additional HCSDRCs should be returned in the HCR Segment in addition to the required code to provide the most comprehensive information back to the provider or submitter.  |  |   |                                      |  |  |  |
| <i>Detection and Display of 278 Response Data Elements (§4.3)</i>                     |  |  |   |                                      |  |  |  |
| 8   | The receiver of a 5010X217 278 Response is required to detect and extract all data elements, data element codes and corresponding code definitions to  |  |   |                                      |  |  |  |



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|--|--|--|---|--------------------------------------|--|--|--|
|  | which this rule applies as returned by the health plan and its agent in the 278 Response must display or otherwise make the data appropriate available to the end user without altering the semantic meaning of the 5010X217 278 Response Content.   |  |   |                                      |  |  |  |
| <b><u>Phase V CAQH CORE Prior Authorization Web Portal Rule v5.0.0</u></b> |  |  |   |                                      |  |  |  |
| <i>System Availability Requirements (§4.1)</i>                             |  |  |   |                                      |  |  |  |
| 1  | A health plan or its agent system availability must be no less than 86% per calendar week.   |  |   |                                      |  |  |  |
| 2  | A health plan or its agent must publish their regularly scheduled system downtime in an appropriate manner.  |  |   |                                      |  |  |  |
| 3  | A health plan or its agent must publish the schedule of non-routine downtime at least one week in advance.   |  |   |                                      |  |  |  |
| 4  | A health plan or its agent must provide information within one hour of realizing downtime will be needed in the event of unscheduled/emergency downtime.   |  |   |                                      |  |  |  |
| 5  | A health plan or its agent must establish and publish its own holiday schedule.  |  |   |                                      |  |  |  |
| <i>Web Form Data Request Field Label Requirement (§4.2.1)</i>              |  |  |   |                                      |  |  |  |
| 6  | The web portal operator must apply the corresponding Loop, segment, and data element name from the 5010X217 278 Request and response to all web form fields using the: IMPLEMENTATION NAME where it exists, or the ALIAS if it is available and identified when the IMPLEMENTATION NAME does not exist or is considered less common. |  |   |                                      |  |  |  |
| <i>Web Form Data Response Field Labels (§4.2.2)</i>                        |  |  |   |                                      |  |  |  |

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| <b>Rule Req. #</b>   | <b>CAQH CORE Operating Rule Requirement</b>   | <b>System/Process Impacted</b><br><i>(Based on results from System Inventory and Impact Analysis Worksheet; if no impact enter 'N/A')</i> | <b>System/Process Currently Meets the Requirement</b><br><i>(Yes/No)</i> | <b>Gap</b><br><i>(Briefly describe gap)</i> | <b>Estimated System/Process Remediation Effort</b><br><i>(Required number, type of skilled resource, person hours required)</i> | <b>Business Processes Impacted</b><br><i>(Briefly describe)</i> | <b>Business Processes/Documentation Revisions Required &amp; Effort Estimates</b> |
|--|---|---|--|---|---|---|---|
| 7  | The web portal operator receiving a 5010X217 278 Response transaction to a previously submitted prior authorization request must apply the corresponding Loop, segment, and data element name from the 5010X217 278 Response transaction to all web form data fields using the: IMPLEMENTATION NAME where it exists, or the ALIAS if it is available and identified when the IMPLEMENTATION NAME does not exist or is considered less common. |   |  |   |   |   |   |
| <i>Use of the X12/005010X217 Health Care Services Review Request for Review and Response (278) Technical Report 3 (§4.3)</i> |   |   |  |   |   |   |   |
| 8  | Data collected from the web form and mapped to the X12/005010X217 Health Care Services Review – Request for Review and Response (278) transaction must comply with the Phase V CAQH CORE Prior Authorization 278 Request/Response Data Content Rule.  |   |  |   |   |   |   |
| <i>Confirmation of Receipt of Web Form Submission (§4.4)</i>   |   |   |  |   |   |   |   |
| 9  | A submission receipt indicating to the provider that the completed prior authorization request form was successfully received, and next steps for the web portal operator.  |   |  |   |   |   |   |

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**Appendix D: Phase V Requirements Mapping Diagram – Prior Authorization Workflow**

