

# **CAQH CORE & Edifecs:**

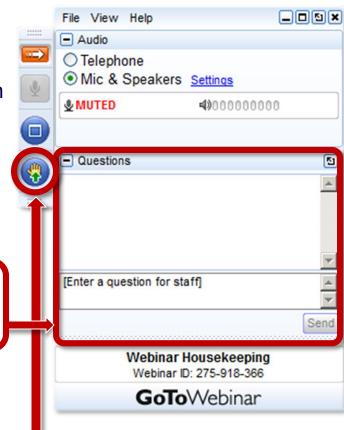
National Webinar on *Voluntary* CORE Certification *Featuring Datavi* 

September 25, 2014 2:00 – 3:30pm ET



## Participating in Today's Session

- Download a copy of today's presentation on the <u>CAQH.org website</u>
  - 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 righthand 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





## **Session Topics**

- Welcome Introduction
- ACA Mandate and HHS Health Plan Certification NPRM
- Draft HIPAA Credential Forms Update
- Voluntary CORE Certification
  - Step by Step Process
  - Testing Considerations
- Achieving Phase III Voluntary CORE Certification
  - Guest Speaker Richard Powell, Datavi
- Voluntary CORE Certification Master Test Suite
- CORE-authorized Testing Site Overview
  - Guest Speaker Vijaya Bhuttar, Edifecs
- Free CORE Implementation Resources and Tools
- Q&A



# ACA Mandate and HHS Health Plan Certification Scope and Updates



## **Scope: ACA Mandated Operating Rules** and Certification Compliance Dates

**Mandated Requirements** available and should 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



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 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)

# Who Must Comply with Standards and Operating Rules? Required of All HIPAA Covered Entities<sup>1</sup>

- ACA Section 1104 mandates that all HIPAA covered entities comply with healthcare operating rules; additional guidance on HIPAA covered entity designations may be found <u>HERE</u>
- HIPAA Administrative Simplification standards, requirements and implementation specifications apply to<sup>2</sup>:
  - Healthcare Providers: Any person or organization who furnishes, bills, or is paid for healthcare in the normal course of business<sup>3</sup>
    - Examples include but are not limited to: Doctors, Clinics, Psychologists, Dentists, Chiropractors, Nursing Homes, and Pharmacies
    - Covered ONLY if they transmit any health information electronically (directly or through a business associate) in connection with a transaction for which HHS has adopted a standard<sup>2</sup>
  - Health Plans (including Self-insured and Group Health Plans, Long-term Care, Medicare, Medicaid, etc.)
  - Healthcare Clearinghouses

<sup>&</sup>lt;sup>1</sup> Covered Entity Charts

<sup>&</sup>lt;sup>2</sup> HIPAA Administrative Simplification: 45 CFR §§ 160.102,

<sup>&</sup>lt;sup>3</sup> HIPAA Administrative Simplification: 45 CFR § 160.103

#### **HHS NPRM on Health Plan Certification**

#### **Background**

- Notice of Proposed Rule Making (NPRM) published in <u>Federal Register</u>,
   January 2, 2014. Comment period ended April 3, 2014 (see comments: <u>www.regulations.gov</u>)
  - Proposed requirement of health plan certification, and reporting number of covered lives, to be completed by December 31, 2015

# NPRM Proposed Documentation of Compliance Options

# CORE Phase III Certification Seal



- Includes Seals for Phases I and II
- Involves Testing with Independent Testing Entity
- Part of the established <u>Voluntary</u>
   CORE Certification Process

#### HIPAA Credential\*



- Requirements outlined in NPRM
- Includes Attestation-based documents
- Process and actual documents are in development by CAQH CORE

OR

# Draft HIPAA Credential Forms Updates



#### **Level-set:**

### Initial Draft Forms Based on NPRM Proposed Requirements

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

## Proposed Requirements in the NPRM

"HIPAA Attestation Form...(similar to the form required for the CORE Certification)"

"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"

"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."

# Corresponding Draft Form & Purpose

Title: <u>Draft HIPAA Credential –</u>
<u>Attestation of HIPAA Compliance</u>
Form

**Purpose:** To enable the entity to demonstrate its good faith intention to certify HIPAA compliance

Title: <u>Draft HIPAA Credential</u> - Application Form

**Purpose:** To verify that all forms have been submitted and to acknowledge that HHS may view the application

Title: <u>Draft HIPAA Credential –</u>
<u>Attestation of Trading Partner</u>
<u>Testing Form</u>

**Purpose:** To document that successful testing of transactions has occurred and to indentify trading partners with whom the entity tested

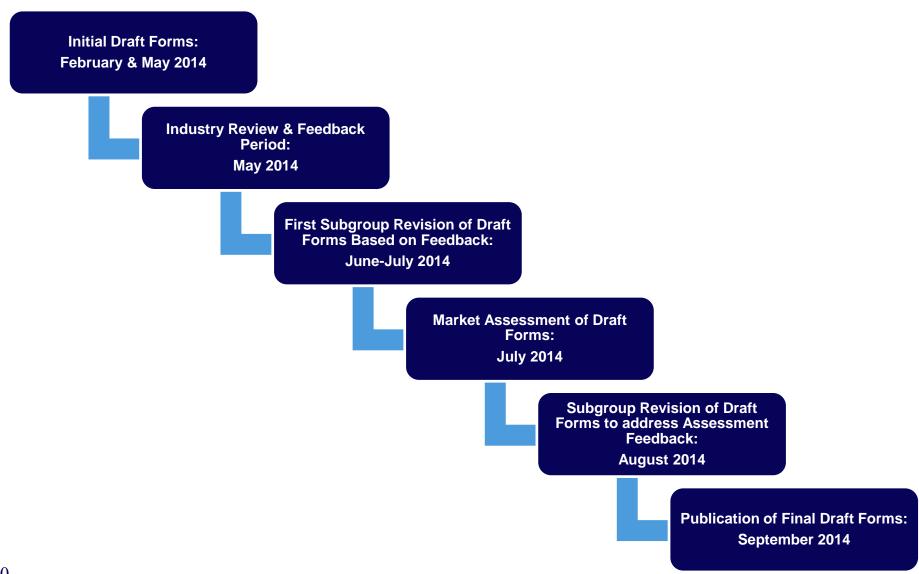
#### **Draft Form Elements**

- Attestation of Compliance with HIPAA as amended by HITECH and ACA
- 2. Name and signature of authorized representative
- 3. CHP HPID
- Applicant Information with CHP HPID
- 2. Contact Information
- 3. Required Documents
- 4. Terms and Conditions
- 5. Fees and Fee Notes
- 6. Authorized Signature
- 1. CHP Information
- 2. Trading Partner Information
- Documentation of Testing Results with Trading Partners
  - a) Percentage of Transactions Successfully Tested
  - b) Vendor/Clearinghouse Used
- 4. CHP Client Information
- 5. Authorized Signature





# Draft HIPAA Credential Forms Process for Development of <u>Final</u> Draft Forms



# Draft HIPAA Credential Forms Background on Industry Feedback

- CAQH CORE Certification & Testing Subgroup, comprised of CORE Participants\*, was tasked with adjudicating both the substantive and nonsubstantive comments on the initial draft forms:
  - Substantive: Significant modifications to instructions, layout/formatting, addition of key data fields & deletion of fields to promote alignment with NPRM provisions
  - Non-Substantive: Minor formatting, changes to address typographical/ grammatical errors, word-smithing, addition of references, etc.
- Background on Industry Feedback collected on initial draft forms:
  - Gathered industry input during one-month public comment period (May 6<sup>th</sup> -June 3<sup>rd)</sup>
  - Total of 264 comments were received from both CORE Participants and non-Participants; 180 were unique (meaning there were a number of duplicative comments)
- A new set of Draft HIPAA Credential Forms (v2.0.1) was created by the Certification & Testing Subgroup based on the Industry Feedback on the initial forms

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# Draft HIPAA Credential Forms Background on Market Assessment

 After creation of Draft HIPAA Credential Forms v2.0.1, the Certification and Testing Subgroup conducted a Market Assessment on the updated Draft forms from Monday, 07/21/14 to Friday, 08/01/14

#### Goal

 To "case test" the draft forms to ensure they accommodate common CHP industry business relationships and market realities

#### Participants

- Volunteer entities were solicited that met list of common industry business relationships and market realities
  - Volunteer entities were required to be stakeholders that could actually submit HIPAA Credential (i.e., CHPs)

#### Structure

- Subgroup Market Assessment consisted of a two-step process:
  - Step 1: Participants completed the three Draft HIPAA Credential Forms v2.0.1 in full, including
    approaching individuals who would be expected to sign the forms
  - **Step 2**: Participants completed the Assessment Feedback Form consisting of nine questions that asked respondents to assess the important aspects of their experience with completing the Draft HIPAA Credential Forms (i.e., rate the clarity of the instructions given on the forms)

#### **Draft HIPAA Credential Forms**

#### Market Assessment Results

#### • Key Take-Aways:

- Feedback primarily suggests that the draft forms are usable and thorough
  - · Few suggested changes to instructions and no requests for additional data fields
- Comments mostly identified gaps to be filled through educational/supporting materials or guidance in the HHS Final Rule

#### Key Findings:

- Majority of respondents rated HIPAA Credential Application and Attestation of HIPAA Compliance "Very Clear"
- Majority of respondents rated Attestation of Trading Partner Testing just "Somewhat Clear" due to uncertainties regarding how 30% metric should be calculated
- Suggestions to improve usability of the forms through automated electronic formats and use of fillable PDF formats
- Comments identified need for supporting/educational materials specific to self-insured plans/CHPs that rely heavily on business associates for transaction processing

#### Next Steps:

- Final Draft HIPAA Credential Forms will be published on the CAQH CORE website at the end of September
- A press release will be sent out to the industry when the Final Draft Forms are available

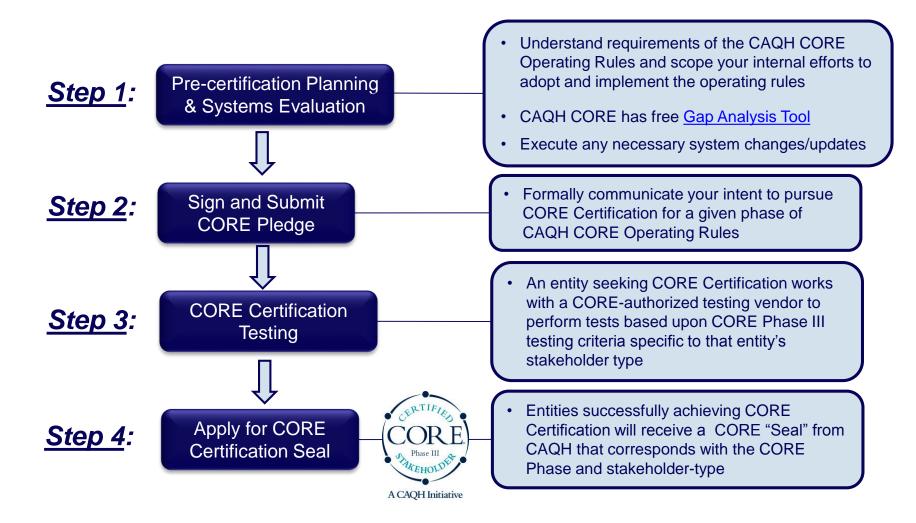
**Voluntary CORE Certification** 

#### Voluntary CORE Certification



- Since its inception, CAQH CORE has offered a 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
  - 150 CORE Certifications have been achieved with 22 Certifications currently pending. Access a list of these organizations <u>HERE</u>
- CORE Certification is available for the following transactions
  - Eligibility and Claim Status (Phase I and Phase II)
  - EFT and ERA (Phase III)
- Key Benefits
  - Provides all organizations across the trading partner network useful, accessible and relevant guidance in meeting obligations under the CAQH CORE Operating Rules
  - Encourages trading partners to work together on data flow and content needs
  - Offers vendors practical means for informing potential and current clients on which of their products – by versions - follow Operating Rules, including Practice Management Systems
  - Achieves maximum ROI because all entities in data exchange follow the Operating Rules; once CORE-certified need to follow Operating Rules with all trading partners
  - Means for voluntary enforcement dialog and steps

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



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

# 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**



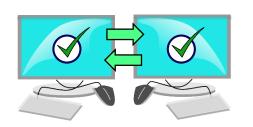
Along with other specified documentation, an entity must sign an attestation signifying their current or planned compliance

## **Upload**



Upload specified document to the testing site as proof of compliance

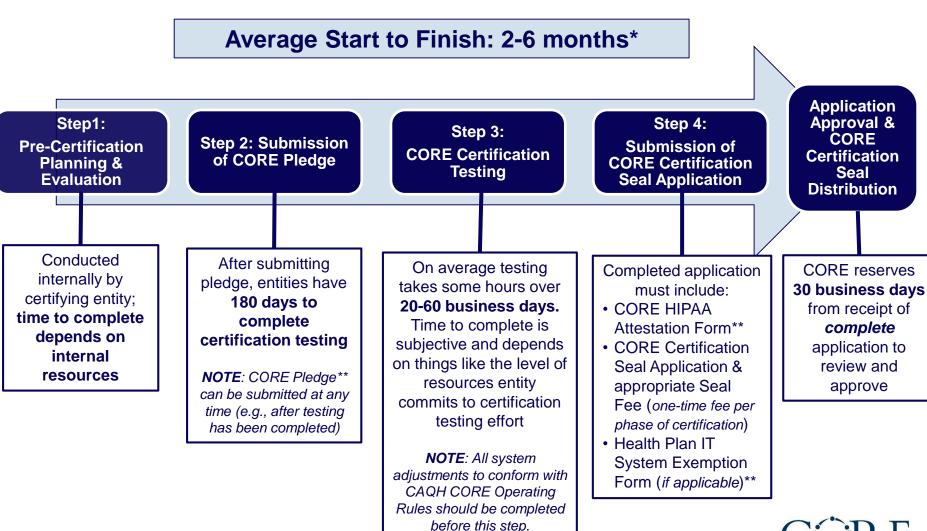
## System Transaction



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



## Voluntary CORE Certification Completion Timeline



<sup>18 \*</sup>Timeframe varies by stakeholder type and by individual organization 2014 CAQH. All rights reserved.

\*\*Must be signed by an authorized executive.

# Voluntary CORE Certification Trading Partner Testing Considerations



# **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

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

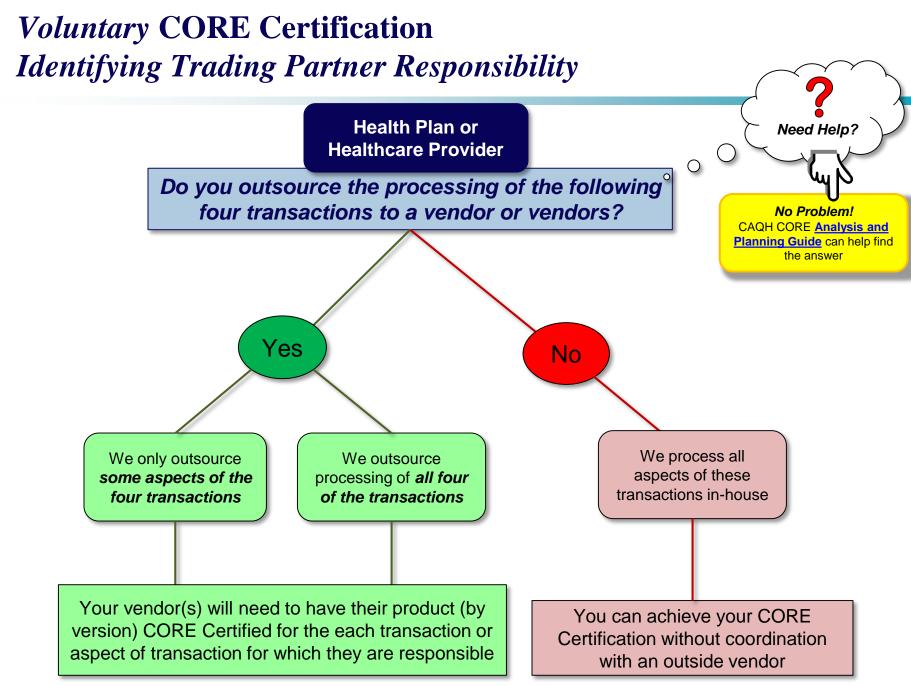
# Provider Vendor Provider

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





### **Polling Question #1:**

#### CORE Certification & Trading Partner Coordination

For which of the following transactions do you outsource responsibilities and, therefore, have needed (if already CORE Certified) or expect the need to coordinate with your vendor(s) as a necessary part of completing the Voluntary CORE Certification Process (check all that apply)?

- 1. Eligibility transaction
- 2. Claim Status transaction
- 3. Electronic Funds Transfer (EFT) transaction
- 4. Electronic Remittance Advice (ERA) transaction
- 5. Not Sure



# Phase III Voluntary CORE Certification Testing Unique Vendor Certification Process

#### **Achieving Phase III CORE Certification**

Health Plan vs. Vendor



Phase I
Certification
Eligibility
Transaction

Phase II
Certification
Eligibility & Claim
Status Transaction

Phase III
Certification
EFT & ERA
Transactions

Health Plan A is CORE Certified for all Phases and accompanying transactions

Health Plan A

A Health Plan or Provider must achieve CORE Certification sequentially, therefore it must become certified for Phases I & II in order to be Certified for Phase III



CORE Certification applies to *entire* organization

Vendor A's **Product B v1.1** is

**CORE** Certified for

Phase III and

applicable

transactions



**Vendor A**EFT/ERA Product B v1.1

Phase I Certification Eligibility Transaction



Phase II
Certification
Eligibility & Claim
Status Transaction



Phase III Certification EFT & ERA Transactions

A Vendor seeking Phase III CORE Certification must only complete Phase III testing that applies to the functions and responsibilities of

CORE Certification applies only to the specific vendor product by version

that vendor's product;

NOTE: If the vendor product conducts transactions found in Phases I & II,

then it is expected that the vendor will achieve CORE Certification for those phases as well



Datavi, LLC Solutions for Health Care Payers, Providers & Patients

## **About Datavi**

Datavi was formed in 2010 to facilitate delivering electronic payments in a manner that was not cost prohibitive to any of the parties involved, provide easy to use portal solutions and flexibility\options.

While Datavi is our corporate name, P3Net® is our software product. P3Net® Portal solutions are tailored to meet the business needs of the Payers, Providers and Patients.

The P3 in P3Net, represents Payers, Providers and Patients. We believe success occurs when these 3 parties can each take an active part in the payment and Remit Advice distribution.

Our P3Net® Provider Portal was certified July 2014. We specialize in payment\remit advice delivery, therefore we only secured Core III certification.

Datavi interacts with trading partners for print services and provider specific 835 delivery needs. Datavi can therefore deploy with a Payor very quickly since they do not need to modify any interfaces. They simply send Datavi the files they were sending to their existing print provider. Datavi processes the electronic transactions and sends what remains to the print vendor to be printed\mailed.

## Datavi's services

#### For the Payor

- Datavi manufactures 835s directly from the print data. Datavi has encountered data quality issues with 835s manufactured by some adjudication platforms that rendered them not usable by the Provider, which we have been able to overcome with our own software.
- Datavi handles the marketing and interactions with the Provider to make them aware of the capabilities we provide, educate them and help them with the transition to Direct Deposit and ERA.
- Manage the financial transactions to Direct Deposit FLEX plan disbursements.

#### For the Provider

- Provider Portal services allows the provider to see payments from all Payors in 1 place, 1 logon, multi Payor. Data is available online for multi years.
- Search tools to make it easier for the Provider to find both current, historic and claim payments for the same patient across the Payors we service.
- View the EOB online, print from online locally, have the EOB faxed to them automatically as Direct Deposits complete, downloadable 835 and for large customers we can handle custom delivery.
  - Custom delivery examples are 835 delivery to the Providers Secure FTP site or access to a Secure FTP site in Datavi where the Provider can pick up the 835 on their schedule.

#### For the Patient

 Patient Portal services allows the patient to see Explanation of Benefits statements for current and historical claims over multi years.

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# Why certify with CORE?

#### Provides Assurance of Compliance to Clients

- Datavi has observed that the provider community is very confused, frustrated and in some cases angry about the payment delivery changes. We believe that through compliance, awareness\education that the provider community will embrace these changes.
- Datavi anticipates that the compliance shows our potential customers, both payors and providers that we are on board and ready to go.
- The payors and providers have peace of mind in knowing the solution they are engaging has been certified independently.

#### Aids in Marketing Process

- Datavi takes an active approach in marketing\awareness with the provider community.
- Using CORE Certification as a marketing tool offers an extra layer of credibility that translates to increased trust in the services provided by Datavi for potential clients.

#### Staff Expertise and Accessibility

- Whenever we ran into issues that were unclear we were easily able to interact with our CORE and Edifecs partners for guidance.
- The CORE team will engage with your organization immediately and we found they were truly there to help us succeed.

# Planning for CORE Phase III Certification

#### Early Adoption of CORE Operating Rules

- Datavi has been following the CAQH CORE planning for quite a long time.
- The Provider facing Web interfaces and forms were deployed with the CORE best practices from the start.

#### Use the Resources Provided to You

- The documentation provided by CORE does a great job in preparing your organization for what you
  will need to do to complete the CORE Phase III Certification journey.
- The CORE analysis and planning guide was extremely helpful in making sure we knew what we needed to perform and why.

#### **Identify Your Team**

- Datavi assigned a Project Manager for the project.
  - The lead was responsible for coordinating the documentation with CAQH CORE and the Datavi Leadership Team.
  - The Project Manager utilized the CORE documentation to make a checklist of action items to verify.
- We recommend assigning a designated Project Manager for large organizations as it was a huge help during the planning process and establishing cross organization communications.

#### Prioritize Project and Educate Staff

- Datavi treated the CORE III Certification like a project, therefore giving it a high priority to staff members. This allowed us to focus on the certification without a lot of stop\start with other projects.
- For your deployment to be successful you will also need to make sure your help desk organization is knowledgeable as related to the standard terms and how they are used when speaking with the provider community.

# **Achieving CORE Phase III Certification**

#### Testing with Edifecs was very straight forward

- While we experiences some technical challenges with our systems, the Edifecs staff was very helpful in sharing what they saw on their side of the transaction.
  - Datavi's challenges were relatively minor, and we found that the CORE and Edifecs teams were knowledgeable and helpful in providing assistance. Don't be afraid to engage them.
- Edifecs played a very important role in the testing process.

Datavi assigned a technical lead to focus on the MIME\MultiPart testing with Edifecs.

- This was the most challenging portion of the testing.
- Datavi was utilizing 2 primary ways to deliver the 835
  - FTP\SFTP
  - Downloadable via our Provider Portal
- The Edifecs organization provided excellent support in helping us debug the connection issues we experienced during testing.

#### Datavi end to end CORE III Certification Timeline

- Submitted the CORE Phase III Pledge Document: April 23 2014
- Completed the EDIFECS Testing: May 30, 2014
- Received CORE Phase III Certification Seal: August 7, 2014

# Datavi's CORE III Testing Challenges

MIME\MultiPart Interface was our primary challenge.

Datavi primarily delivers 835 via our Provider Portal (interactively), and FTP to very large customers.

The MIME\MultiPart interfaces will allow providers or clearinghouses to interact with your system real time to secure 835 transactions.

Datavi's P3Net® did not have the MIME\MultiPart interfaces in place, so we had to develop those. We had some trouble in the interface that Edifecs was testing, these issues were ours and in not related to Edifices.

Edifecs was able to extract the low level errors they were encountering while attempting to utilize the MIME\MultiPart interfaces. That information was critical to our being able to complete the interface builds.

#### Datavi Observations EFT\ERA

Consider the Provider space as being very diverse. For example a large hospital system generally will see or has had a positive experience with going electronic as related to payments and remit advice. Single\small provider offices are at various stages of embracing electronic payments\ remit advice.

Datavi sees that a large number of providers are on board with having direct deposit payment delivery. The vast majority of those organization have NOT embraced the 835 for posting.

Datavi believes that the CAQH CORE initiatives establish base standards which in turn will give the provider community some sense of a familiar look and feel to how they receive payments and remit advice. We also look forward to AMA and ADA helping to make their member communities aware of the benefits of going electronic in the payment and remit space.

The Dental Providers have been caught off guard a bit by electronic payments. Many are now simply reluctant to accept anything besides a check due to bad experiences they have encountered with Virtual Card and Fee Based Direct Deposit. Datavi believes that embracing CORE III and education the Dental Provider space has a lot of upside for Direct Deposit uptake.



P3Net® is a registered trademark of Datavi, LLC.

Please contact sales at: 800-221-0861 or sales@datavionline.com

# Voluntary CORE Certification Testing and the Master Test Suite



## **Voluntary CORE Certification Testing**

#### Step 3:

CORE Certification
Testing

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

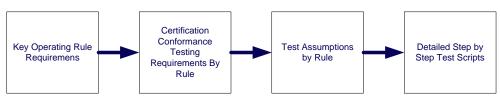
Activities	Key Points
a) Pre-Testing	<ul> <li>Review <u>Testing Policy</u> and <u>Master Test Suite</u></li> <li>Assume all affected internal systems are upgraded as previously defined in Step 1</li> <li>Complete your internal testing of CORE-ready systems</li> <li>Note: This step may be performed prior to submitting CORE Pledge</li> </ul>
b) Testing	<ul> <li>Register and schedule your testing with a CAQH CORE-authorized testing vendor</li> <li>CORE Certification testing is conformance-based and, as such, is not exhaustive</li> <li>The CAQH CORE Test Suite must be used by all stakeholders in order to maintain standard and consistent test results</li> <li>Testing must be successfully completed within 180-days of pledge</li> </ul>
c) Post-Testing	Remediate all systems/software issues identified by testing process and, if necessary, repeat CORE Certification Testing



# 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



1	Phase III CORE 370 EFT & ERA Reassociation (CCD+/835) Rule Version 3.0.0 Test Scenario	14
4.1	Key Rule Requirements	14
4.2	Conformance Testing Requirements	1:
4.3	Test Scripts Assumptions	
4.4	Detailed Step-By-Step Test Scripts	10



#### **About Edifecs**

#### **Talent Strong**

- + 600+ Worldwide
- + **50%** of employees focused on engineering
- + Employee base has quadrupled since 2008
- Executive experience at Microsoft, Apple, McKesson, HP, Oracle, GE, Wellpoint, Blues and other leading healthcare and technology companies

#### **Business Strong**

- + 5-yr (2007-2012) CAGR is 34.5% with a cumulative growth rate of 340%
- + Employee-owned, Debt-free, Profitable.
- Leading healthcare solutions supporting regulatory compliance and healthcare reform
- Powering reform including the Federal Exchange

#### **Customer Strong**

- + 46 Blue plans out of total 64
- + 47 commercial plans
- + **70+** providers
- + **31** State Medicaid programs out of 56
- Partnered with CMS to supporting the Affordable Care Act















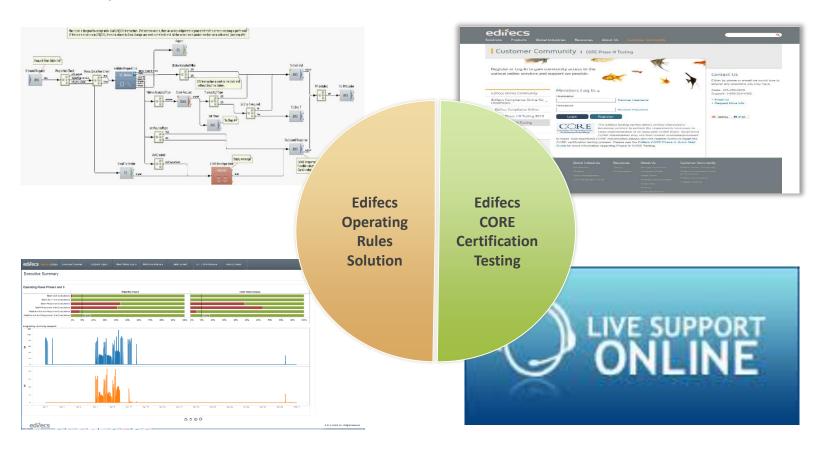
Seattle Business Magazine's Tech Impact Award 100 Fastest Growing Companies in WA Puget Sound Business Journal

Washington's 100 Best Places to Work For Deloitte Technology Fast500 North America Inc. 5000 Fastest- Growing Private Companies in the US Glass Door Employees Choice Best Places to Work 2014

# Edifecs – CORE Operating Rules

#### **Connectivity, Transaction Workflow & Enrichment**

#### **CORE Certification Testing Website**



**Compliance Tracking & Troubleshooting** 

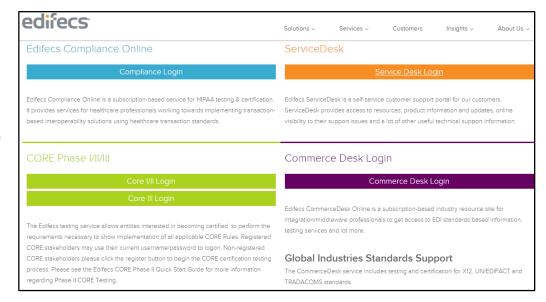
**Online & Live Support** 

Click here for more information on the Edifecs
Operating Rules solution



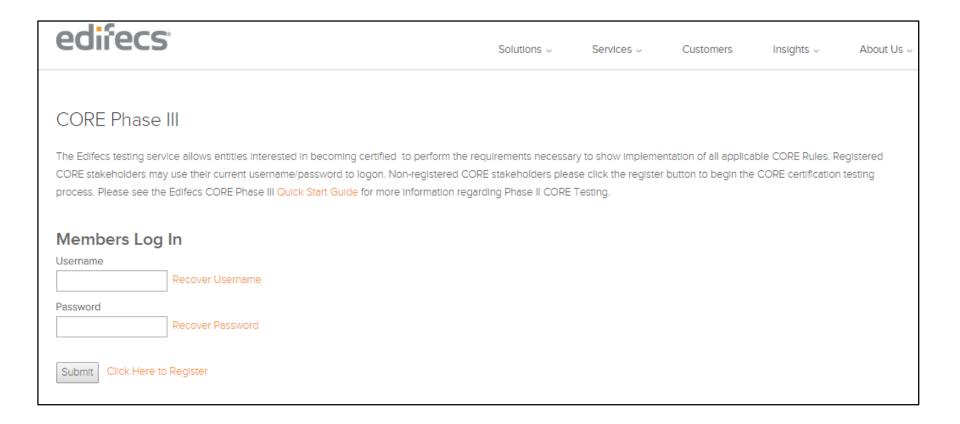
## Edifecs and CAQH CORE Partnership

- Edifecs is the first CAQH CORE authorized Testing vendor for CAQH CORE Operating Rules Phase I, II and III
- The CORE Phase III EFT/ERA Certification Testing Portal is currently open for registrations
- Helping healthcare organizations with voluntary CORE certification testing since 2006
  - Provides free testing service based upon the CORE-approved Phase I , II and III Test Suites
  - Dedicated web portal available 24/7
  - Has on-line and live support for quick issue resolution
- Edifecs has enabled 150 CORE Certifications





# Login Screen for Edifecs Certification Testing



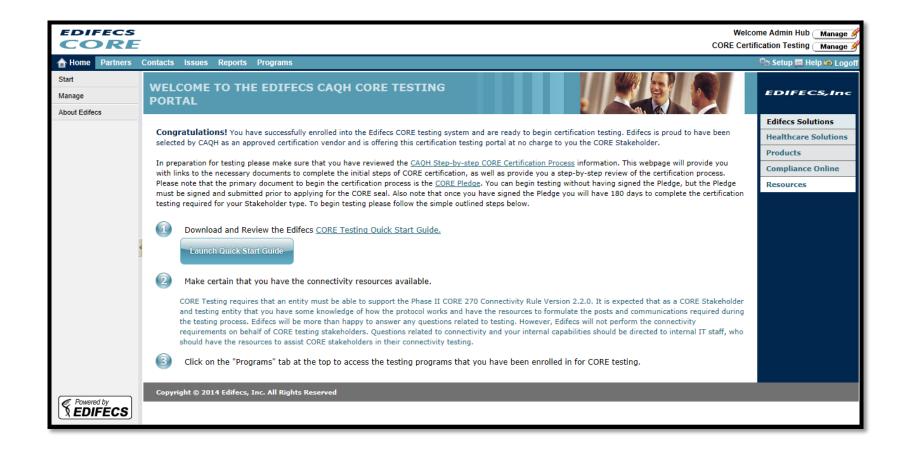


# Registration/Setting up a Test Account

Please fill out the form below, the * denotes a required field.  Name and Identifiers  Name: *  Phone, URL, and Email  Primary Phone:  Primary Phone:  Primary Fax:  Email Address:  Home Page:  Commerce Page:  Billing Address  Billing Address Line 1:  Billing Address Line 2:  City:  Zip/Postal Code:  Shipping Address  Shipping Address Line 1:  Shipping Address Line 2:  City:  Zip/Postal Code:  Country:  Please select a country  Additional Information  CORE Stakeholder Type: *  Provider (Submit Generic Batch Retrival Request for v5010 835 - Information Requestor)	Account Registration Wizard  Enter Organization Information						
Primary Phone: Primary Phone: Primary Fax: Email Address: Home Page: Commerce Page: Billing Address Line 1: Billing Address Line 2: City: Zip/Postal Code: Shipping Address Line 2: City: State/Region: Zip/Postal Code: Additional Information CORE Stakeholder Type:  Provider (Submit Generic Batch Retrival Request for v5010 835 - Information Requestor) Provider Vendor (Submit Generic Batch Retrival Request for v5010 835 - Information Requestor) Core Provider Vendor (Submit Generic Batch Retrival Request for v5010 835 - Information Source) Clearinghouse (Submit Generic Batch Retrival Request for v5010 835 - Information Source) Clearinghouse (Submit Generic Batch Retrival Request for v5010 835 - Information Source) Core Pledge Date:  Identifier Identifier Production Value Test Value Same as production							
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## Overview of the Certification Testing Site





## Best Practices for CORE Testing with Edifecs

Based on the questions that Edifecs support team most frequently receives from the certification testing portal, Edifecs recommends that the portal users:

- Review, understand and analyze the following components of CORE Certification in depth provided by CAQH
  - CORE Testing Policy
  - Operating Rules and their applicability
  - Master test bed data for CORE Testing
  - CORE Test Suite cases
- On the connectivity side making sure that your system follows the requirements specified in the connectivity specification provided by CAQH. The testing entities system must be up to date and compliant with the Operating rules connectivity (Phase I/II/II) prior to testing.

# Polling Question #2: Voluntary CORE Certification

# Would you consider achieving Voluntary CORE Certification as a viable part of your overall CORE Operating Rule Implementation Process?

- 1. Yes
- 2. No
- 3. Maybe
- 4. N/A

# CAQH CORE EFT & ERA Operating Rules Available CORE Resources



# **Implementation Steps for HIPAA Covered Entities Free Tools and Resources**

CAQH CORE has a **NEW** <u>Implementation Resources webpage</u> 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 <u>CAQH CORE Operating</u>
   <u>Rules</u>
- Listen to archive of past <u>CAQH CORE</u> <u>Education Sessions</u> or register to attend a future one
- Search the EFT & ERA <u>FAQs</u> for clarification on common questions
- Use our <u>Request Process</u> 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.

**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
 <u>Certification</u> 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 rulewriting maintenance by joining a
task group and to stay up-to-date on
implementation developments

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# **Get Involved!**

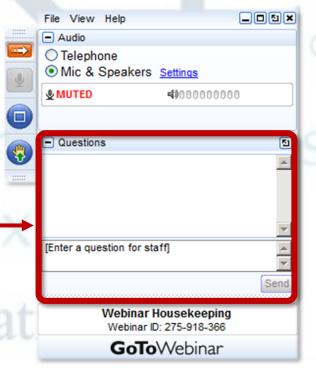
- Any CORE Participating Organization can join any CAQH CORE group
  - If you are a CORE Participating Organization and would like to join one of these group calls, please email <a href="CORE@caqh.org">CORE@caqh.org</a>

CAQH CORE Group	Current Group Focus	Frequency	Next Meeting
CORE Code Combination Task Group (CCTG)	Process improvements and preparation for 2014 Market-based Review	Tuesdays 3:00-4:30pm ET bi-weekly	Tuesday, October 7 <sup>th</sup> 3:00-4:30pm ET
CORE Claims/Prior Authorization Subgroup	Develop infrastructure requirements for the claims and prior authorization transactions	Wednesdays 3:00-4:30pm ET bi-weekly	Wednesday, October 8 <sup>th</sup> 3:00-4:30pm ET
CORE Connectivity and Security Subgroup	Drafting the connectivity and related infrastructure options for Third Set of the ACA-mandated operating rules	Thursdays 2:30-4:00pm ET bi-weekly	Thursday, October 9 <sup>th</sup> 2:30-4:00pm ET
CORE Benefit Enrollment & Maintenance/Health Plan Premium Payment Subgroup	Develop infrastructure requirements for the enrollment/disenrollment and premium payment transactions	TBD	TBD

# Q&A

## Please submit your question:

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

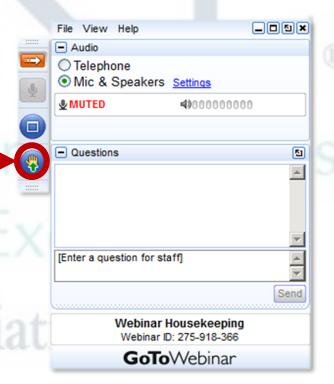


# Q&A

## Please submit your question:

• By Phone or VoIP: When prompted for audio portion of Q&A, please press "Raise Hand" Button to queue up to ask a question

<u>NOTE</u>: In order to ask a question during the audio portion of the Q&A please make sure that you have entered the "Audio PIN" (which is clearly identified on your user interface) by using your telephone keypad.



# Thank You for Joining Us!

website: www.CAQH.org

email: CORE@caqh.org





# **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"



## **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



# 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 <u>Sample Provider EFT</u>
   <u>Request Letter</u>
- 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 <u>Sample Provider EFT</u>
   <u>Reassociation Data Request Letter</u>
- 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

# 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).