



# Call on CAQH CORE X12 v7030 Public Review

**FOR CAQH CORE  
PARTICIPANTS ONLY**

May 31, 2017

3:00 – 4:00 PM ET

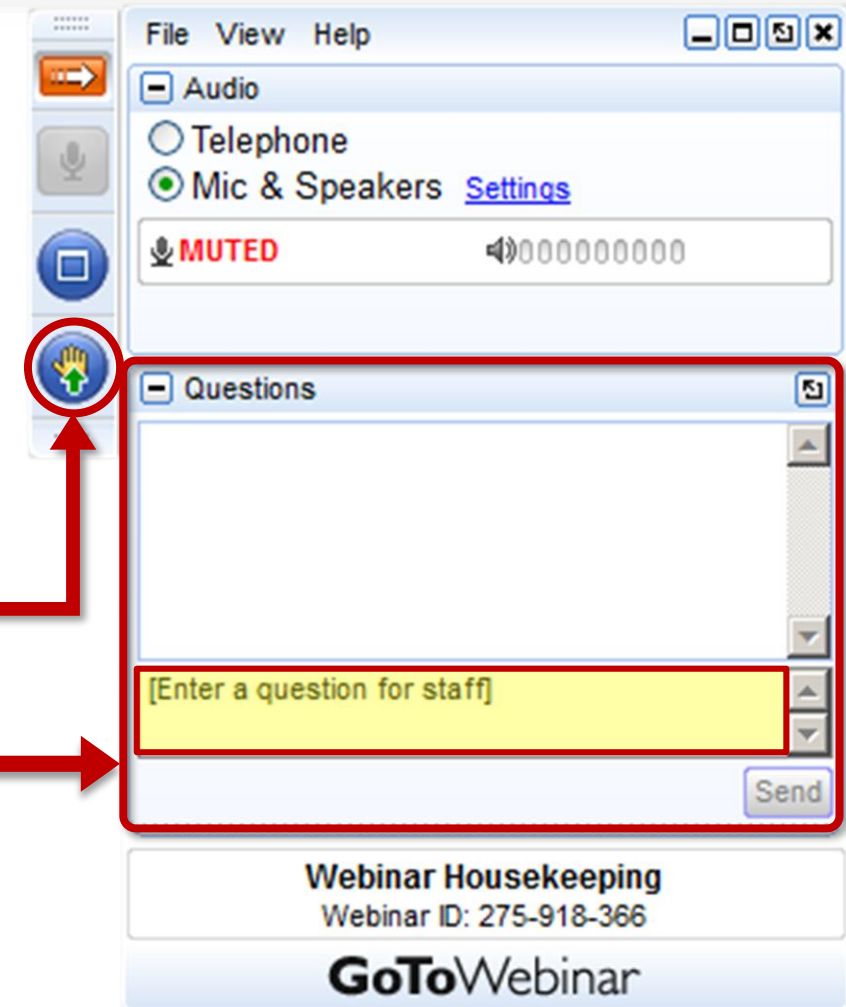
# Logistics

## *Presentation Slides & How to Participate in Today's Session*

- A copy of the slides and the webinar recording will be emailed to all attendees and registrants in the next 1-2 business days.
- The phones will be muted upon entry and during the presentation portion of the session.
- During the dialogue, we will ask for feedback to specific polling questions. After each polling question, we will open the lines for discussion. Attendees can submit questions/comments during the discussion periods one of two ways:

To submit audio questions/comments, press the **“Raise Hand” icon on the GoToWebinar dashboard** and we will open your line.

Submit written questions/comments on-line by entering them into the **Questions panel on the right-hand side of the GoToWebinar dashboard**.



# Session Outline

- X12 v7030 TR3 Public Review Process
  - CAQH CORE Participant Open Mic
- CAQH CORE Public Review of the X12 v7030 TR3s
  - CAQH CORE Participant Open Mic
- Next Steps & Closing

# X12 v7030 TR3 Public Review

**Robert Bowman**  
CAQH CORE Associate Director

# What is X12?

- Chartered by the American National Standards Institute more than 30 years ago.
- Develops and maintains EDI and CICA standards, and XML schemas which drive business processes globally.
- X12 membership includes technologists and business process experts, encompassing health care, insurance, transportation, finance, government, supply chain, and other industries.
- For additional information, visit [www.x12.org](http://www.x12.org).



- X12 has released a public review of the X12 v7030 TR3s.
- v7030 is the next major release of electronic healthcare administrative transaction standards developed by X12.
- X12 has stated its intention to propose the v7030 TR3s be adopted by HHS as the next generation of the X12 standards for the HIPAA transactions.



**Note:** The CAQH CORE role at this point is to share information and collect industry input, and not to make a recommendation regarding moving forward with v7030.



# X12 v7030

## Public Comment Period and Timeline

**CYCLE 1**  
**60 days**  
*September 1, 2016 -  
October 31, 2016*

Enrollment (834)

Premium Payment (820)

**CYCLE 2**  
**60 days**  
*October 1, 2016 –  
November 30, 2016*

Claim Status (276/277)	Claim Acknowledgment (277CA)*
Acknowledgement (999)*	Claim Pending (277P)*

**CYCLE 3**  
**90 days**  
*November 1, 2016 –  
January 30, 2017*

ERA (835)

**CYCLE 4**  
**120 days**  
*February 1, 2017 –  
June 1, 2017*

Professional Claim (837P)	Dental Claim (837D)
Institutional Claim (837I)	Health Care Service: Data Reporting (837R)*

**CYCLES 5, 6, & 7**  
*Postponed - TBD*

Eligibility/Benefit Inquiry (270/271)	Application Reporting for Insurance (824)*
Healthcare Services Review Request - Response (278)	Claim Request for Additional Info (277RFI)*
Claims Attachments (275)*	

\*X12 transaction not federally mandated.  
+Cycle 8 has been eliminated. It included the Health Care Fee Schedule (832)

- X12 uses an online tool for the submission of comments by the industry during the review period allowing for collation and easier summary of all comments submitted
  - Allows for comments to be submitted to specific locations within each TR3.
- X12 modified the review process during Cycle 4 (Claims) by generating .pdf files to compliment the review process and the online tool.
  - The .pdf files have built in expiration dates that coincide with the review period; i.e. for Cycle 4, the .pdf files are available from 02/01/17-06/01/17.
  - Allows for a more holistic review of the entire TR3 set for claims.
  - The .pdf files were not available for TR3s in Cycles 1, 2 & 3.



# X12 v7030 Transactions and Applicable CORE Rule Phase(s)

Cycle/ Duration	Transaction	Applicable CORE Rule Phase(s)
<b>CYCLE 1</b> 60 days (9-1-16 to 10-31-16)	Enrollment (834)	<b>Phase IV</b>
	Premium Payment (820)	<b>Phase IV</b>
<b>CYCLE 2</b> 60 days (10-1-16 to 11-30-16)	Claim Status (276/277)	<b>Phase II</b>
	Acknowledgement (999)*	<b>Phase I - IV</b>
	Claim Acknowledgment (277CA)*	<b>Phase IV</b>
	Claim Pending (277P)*	N/A
<b>CYCLE 3</b> 90 days (11-1-16 to 1-30-17)	ERA (835)	<b>Phase III</b>
<b>CYCLE 4</b> 120 days (2-1-17 to 6-1-17)	Professional Claim (837P)	<b>Phase IV</b>
	Institutional Claim (837I)	<b>Phase IV</b>
	Dental Claim (837D)	<b>Phase IV</b>
	Health Care Service: Data Reporting (837R)*	N/A
<b>CYCLE 5-7</b> (Postponed)	Eligibility/Benefit Inquiry (270/271)	<b>Phases I - II</b>
	Healthcare Services Request (278)	<b>Phase IV</b>
	Claims Attachments (275)*	N/A
	Application Reporting for Insurance (824)*	N/A
	Claim Request for Additional Info (277RFI)*	N/A
<b>CYCLE 8</b> (Eliminated)	Health Care Fee Schedule (832)*	N/A

\*X12 transaction not federally mandated.

# CAQH CORE Plans for Public Review and Next Steps

- CAQH CORE staff are developing a work plan with milestones and deliverables.
- CAQH CORE staff will begin review as soon as the TR3s for Cycles 5, 6 & 7 are released.
  - Engage CAQH CORE Participants as soon as TR3s are published.
  - Schedule a CAQH CORE Participant call to review and discuss findings.
  - Finalize any draft comments that CAQH CORE Participants would like to submit.
- If v7030 TR3s are proposed for adoption under HIPAA by HHS, CAQH CORE will:
  - Complete a thorough, detailed review.
  - Determine if existing operating rules require revision following established procedures and processes.



# **X12 Version 007030 TR3s**

---

**May 31, 2017**

## DISCLAIMER

---

**This presentation is for informational purposes only.**

- This presentation is not intended to represent legal advice.
- The content is point-in-time information, which is subject to revision.
- If you have questions regarding specific information shared during this presentation, please send them to [info@x12.org](mailto:info@x12.org)
- Visit [www.x12.org](http://www.x12.org) for additional details about X12

## INTENT OF PUBLIC REVIEWS

---

- Allows X12 to receive constructive feedback from implementers and other interested parties
- Allows implementers to consider the impact by reviewing revisions in context
- Provide a forum for non-member as well as member comments

## AVAILABLE TOOLS: PURPOSE

---

### Online Reviewing and Commenting:

- Supports notifications and other direct communication to reviewers
- Supports accurate quantification of the number of reviewers
- Ensures consistent information is presented to all reviewers



## AVAILABLE TOOLS

---

### The Reviewer

- Designed to facilitate page-like review
- Simple, easy to use navigation
- Separate from the Commenter

### The Commenter

- Designed to facilitate commenting in context
- Tree-based navigation
- Separate from the Reviewer

## AVAILABLE TOOLS

---

### Downloadable Change Log

- Includes details on what has changed, including where the revision occurred
- Useful as a stand-alone summary of the revisions in the draft
- Printable

## AVAILABLE TOOLS

---

### Public Review Draft PDF

- Secure and downloadable PDFs of the Draft TR3s, watermarked as such and expiring at the end of the respective public review cycle
- Facilitating navigation through the entire TR3
- Separate from the Reviewer and Commenter

## WHAT X12 DOES NEXT

---

- Considers all comments
- Posts responses to all comments
- Conducts an Informational Forum
- May revise the draft
- Obtains final internal approvals
- Publishes the document
- Submits DSMO request to adopt 007030

## Audience Poll #1

**Has your organization submitted or does it plan to submit comments to any of the Public Comment X12 v7030 TR3?**

- Yes
- No
- Unsure

## Audience Poll #2

**Of the yet to be issued v7030 TR3s, what transaction standard is your organization most interested in?**

(Check all that apply.)

- Eligibility/Benefit Inquiry (270/271).
- Health Care Services Review Request & Response (278).
- Claims Attachments (275).
- Application Reporting for Insurance (824).
- Claim Request for Additional Info (277RFI).



## Audience Poll #3

**What tools or resources would assist your organization in making the determination to adopt the X12 v7030 TR3s?**

(Check all that apply.)

- High-level overview of the benefits of the X12 v7030.
- Implementation roadmap.
- Crosswalk between v5010 and v7030.
- All of the above.
- Other (Please specify in the Questions/Comments panel).

# CAQH CORE Participant Open Mic

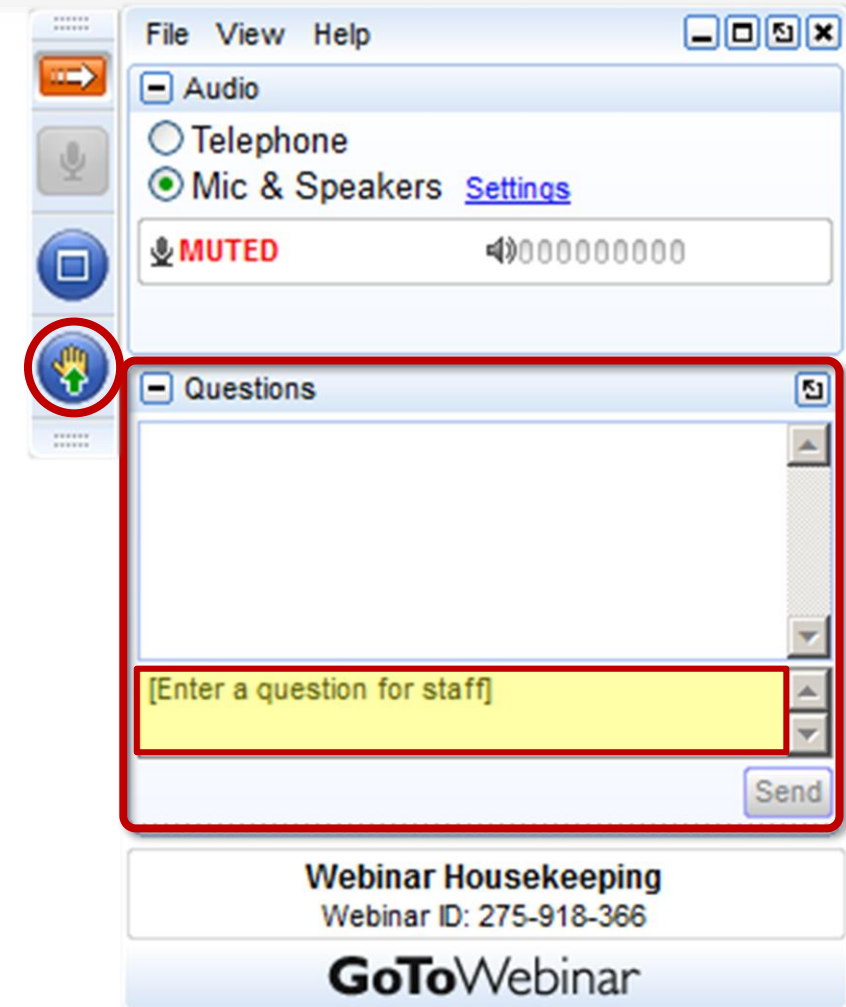
***Please submit your questions and comments:***

- Press the **“Raise Hand” icon on the GoToWebinar dashboard** and we will open your line.

OR

- Submit written questions or comments on-line by entering them into the **Questions panel on the right-hand side of the GoToWebinar dashboard.**

Attendees can also submit questions or comments via email to [core@caqh.org](mailto:core@caqh.org).



# CAQH CORE Public Review of the X12 v7030 TR3s

**Robert Bowman**  
CAQH CORE Associate Director

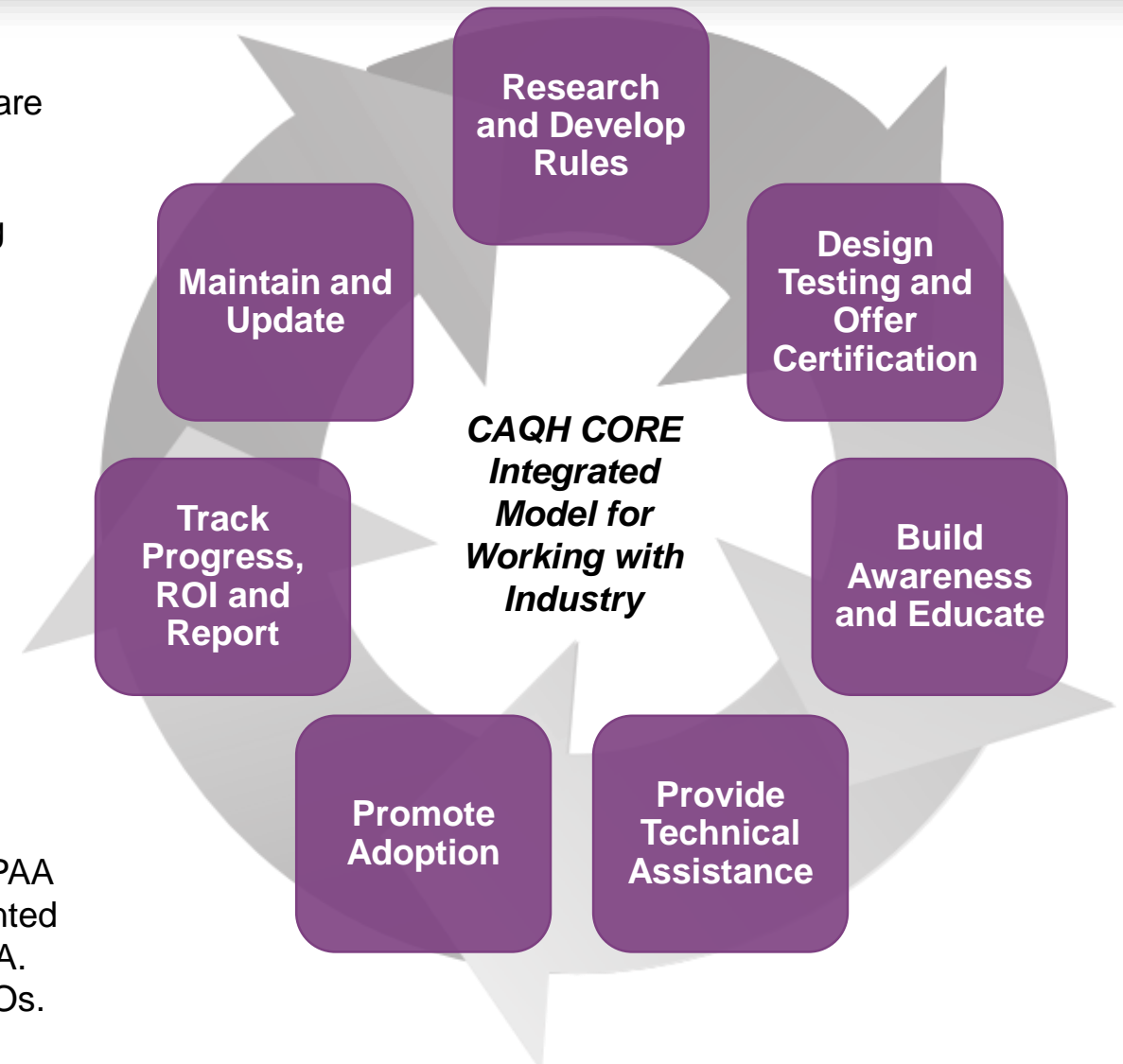
# CAQH CORE Mission and Vision

**MISSION** Drive the creation and adoption of healthcare operating rules that support standards, accelerate interoperability, and align administrative and clinical activities among providers, payers, and consumers.

**VISION** An industry-wide facilitator of a trusted, simple, and sustainable healthcare data exchange that evolves and aligns with market needs.

**DESIGNATION** Established in 2005. Named by Secretary of HHS to be national author for three sets of operating rules mandated by the Affordable Care Act.

**BOARD** Multi-stakeholder. Voting members are HIPAA covered entities, some of which are appointed by associations such as AHA, AMA, MGMA. Advisors are non-HIPAA covered, e.g. SDOs.



# CAQH CORE's Activities Relative to the X12 v7030 Public Review

*Using Existing Strategic Drivers and Guiding Principles*

## CAQH CORE Mission and Vision

Drive the creation and adoption of healthcare operating rules that support standards.

Safeguard activity accelerates interoperability.

Align operating rules for administrative and clinical activities among providers, payers and consumers.

Build a trusted, simple and sustainable healthcare data exchange that evolves and aligns with market needs..

## Value to the Industry

Commitment to ensure maintenance processes are thorough, represent the diverse stakeholders in our industry, and capture real world usage data, to ensure sustainability.

Demonstrate lessons learned, value, and improved efficiencies to ensure return on investment for the industry.

Balance data exchange needs of fee-for-service and evolving payments models.

# CAQH CORE's Activities Relative to the X12 v7030 Public Review

*Focus on Value to the Industry*



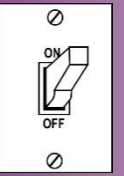
**Value of  
adopting a  
new version**

As required by the CAQH CORE Integrated Model, CAQH CORE staff will assess the impact of the v7030 TR3s to the operating rules to ensure that they meet evolving business needs, build efficiencies, and drive value.



# CAQH CORE's Activities Relative to the v7030 Public Review

## *Focus on Data Content*

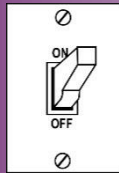


**Review of Data Content:** CAQH CORE staff will summarize draft findings and share substantive feedback with CAQH CORE Participants for their input. The CAQH CORE Operating Rules can address data content, filling gaps that support provider-payer interactions.

It is envisioned that new versions of the X12 TR3s require the data content already supported by the operating rules. Additionally CAQH CORE will review what data content in v7030 could already be delivered by operating rule using the current HIPAA mandated version of the standard.

# CAQH CORE and X12 Standards

An Example of Standards and Operating Rules Working Together



CAQH CORE Operating Rules “click on” data content allowing additional information to be returned to the provider. The operating rules allow the current version of the TR3s to deliver additional benefit to the industry without the adoption of a newer version of the standards.

## Health Care Benefit / Eligibility

271 RESPONSE | 270 REQUEST



Subscriber Last Name	Subscriber First Name	Subscriber Primary Identifier	Subscriber Birth Date	Service Type Code
Dependent Last Name	Dependent First Name	Dependent Middle Name	Dependent Birth Date	



Copay	Remaining Deductible	Coinsurance
-------	----------------------	-------------



# CAQH CORE's Activities Relative to the v7030 Public Review

## *Focus on Maintenance Process*



### Maintenance process

**CAQH CORE Maintenance Processes:** As part of our review of the X12 v7030 TR3s, we will evaluate areas that propose new or different maintenance activities to understand the processes and references and how they will align with each other and existing efforts as CAQH CORE develops and conducts various maintenance processes for the operating rules (from regular updates to revising the CAQH CORE Code Combinations).

CAQH CORE is sensitive to maintenance processes of codes sets, data content, etc. not only as the author of operating rules, but more importantly to the impact such maintenance has on implementers.

### **Identify business drivers of adopting v7030.**

(Check all that apply.)

- Additional data content.
- Easier to maintain Code Sets as more are now external to the TR3 and are owned and maintained by X12 and other organizations (e.g., CARCs, STCs, ICD10, etc.)
- Support evolving business needs; e.g., VBP, Audits.
- Other (Please specify in the Questions/Comments panel).

## Audience Poll #5

**Does your organization have gaps that could be met by the development of data content operating rules for the Eligibility/Benefit Inquiry (270/271) and Healthcare Services Request (278) transactions in v5010?**

(Check all that apply.)

- Eligibility/Benefit Inquiry (270/271).
- Healthcare Services Request (278).
- Both.
- Neither.
- Unsure.

# CAQH CORE Participant Open Mic

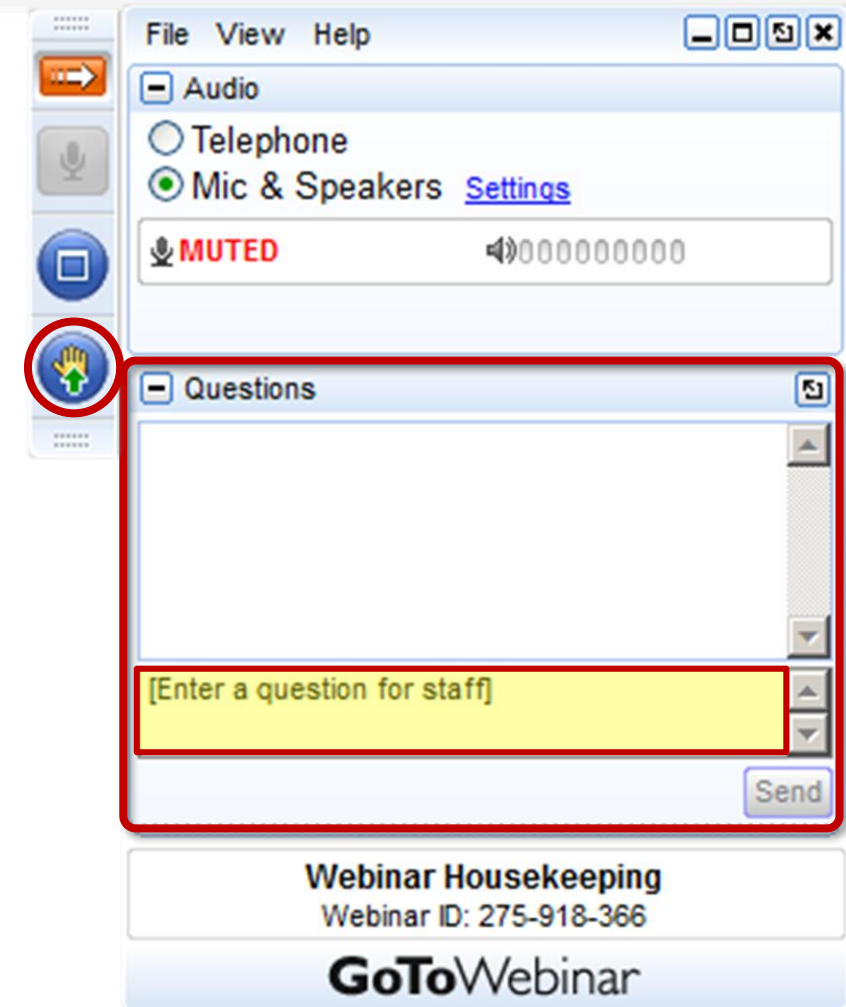
***Please submit your questions and comments:***

- Press the **“Raise Hand” icon on the GoToWebinar dashboard** and we will open your line.

**OR**

- Submit written questions or comments on-line by entering them into the **Questions panel on the right-hand side of the GoToWebinar dashboard.**

Attendees can also submit questions or comments via email to [core@caqh.org](mailto:core@caqh.org).





# Thank you for joining us!



Website: [www.CAQH.org/CORE](http://www.CAQH.org/CORE)

Email: [CORE@CAQH.org](mailto:CORE@CAQH.org)

## **The CAQH CORE Mission**

Drive the creation and adoption of healthcare operating rules that support standards, accelerate interoperability, and align administrative and clinical activities among providers, payers and consumers.

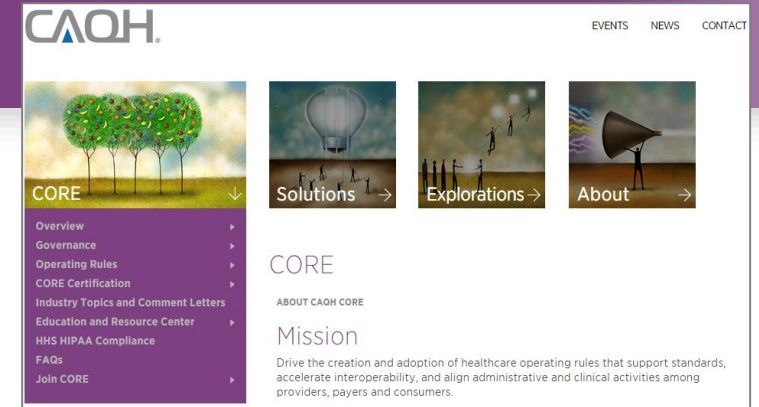
# Appendix

# CAQH CORE Resources

Visit us at the [CAQH CORE Website](https://www.caqh.org/core) or contact us at [CORE@CAQH.org](mailto:CORE@CAQH.org).

## Dedicated webpages:

- ✓ [Code Combination Maintenance](#)
- ✓ [EFT/ERA Enrollment Maintenance](#)
- ✓ [Voluntary CORE Certification](#)
- ✓ [CAQH CORE Operating Rules](#)



## X12 RESOURCES

---

X12 Website: [X12.org](http://X12.org) contains a lot of publicly available information including:

- Links to enter requests for interpretation of standards
- Links to enter requests for changes
- Resources about the standards and the organization who maintains them

## X12 RESOURCES

---

- Public review forums

[forums.x12.org](https://forums.x12.org)

- Questions

Please send an e-mail to [info@x12.org](mailto:info@x12.org)

