Phase I CAQH CORE 100 Eligibility and Benefits Guiding Principles
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This document provides the Phase I CORE guiding principles and underlying assumptions that are associated with all Phase I CORE rules.

**CORE GUIDING PRINCIPLES**

- All CORE Participants and CORE-certified entities will work towards achieving CORE’s mission.
- All stakeholders are key to CORE’s success; no single organization, nor any one segment of the industry, can do it alone.
- CAQH will strive to include participation by all key stakeholders in the CORE rule making process. CORE has established Governing Procedures; under these Procedures, each CORE member that meets CORE voting criteria will have one vote on CORE issues and rules.
- CAQH serves as the facilitator, while CORE participants draft and vote on the rules.
- Participation in CORE does not commit an organization to adopt the resulting CORE Operating Rules.
- Use of and participation in CORE is non-exclusive.
- CORE will not be involved in trading partner relationships, and will not dictate relationships between trading partners.
- To promote interoperability, rules will be built upon HIPAA-adopted standards, and CORE will coordinate with other key industry bodies (for example, X12 and Blue Exchange).
- Where appropriate, CORE will address the emerging interest in XML.
- Whenever possible, CORE has used existing market research and proven rules. CORE Operating Rules reflect lessons learned from other organizations that have addressed similar issues.
- CORE Operating Rules will support the Guiding Principles of HHS’s National Health Information Network (NHIN).
- CAQH research indicated that there will be benefit to the health care industry as a result of adopting eligibility operating rules. CORE will have Measures of Success for Phase I (methodology to measure success and evaluate market impact) and CAQH will report aggregate findings by stakeholder type. Full benefits may not be experienced until Phase II.
- CORE will provide guidance to stakeholders regarding staff implementation and training needs.
- Safeguards will be put in place to make sure that a health plan’s benefit and payment information is shared only with the requested provider and is not available to other participating health plans.
- CORE will not build a switch, database, or central repository of information.
- All CORE recommendations and rules will be vendor neutral.
- All of the Phase 1 CORE Operating Rules are expected to evolve as Phase I is a starting point.
- Rules will not be based on the least common denominator but rather will encourage feasible Phase I progress.
- CORE will promote and encourage voluntary adoption of the rules.
- CORE participants do not support “phishing.”
UNDERLYING ASSUMPTIONS FOR ALL CORE PHASE I RULES

- Phase I CORE Operating Rules apply only to ASC X12 005010X279A1 Eligibility and Benefit Request and Response (270/271) transactions; DDE (Direct Data Entry) transactions and web-based transactions are not part of the Phase I scope.
- All Phase I CORE Operating Rules assume a successful communication connection has been established and that all parties in the transaction routing path are CORE-certified.
- Phase I CORE Operating Rules are a floor, not a ceiling; certified entities can go beyond the Phase I CORE Operating Rules, e.g. provider accumulator information.
- CORE complies with all antitrust provisions of the law.
- Organizations may sign the Pledge at any time after the CORE Operating Rules are developed and approved by the CORE voting members, and may withdraw from the Pledge at any time.
- No individual CORE participant owns the rules or the underlying intellectual property; CAQH CORE owns the rules and intellectual property.
- The CORE Operating Rules will not specify how participants implement any changes to current processes and procedures. CORE will not assume any of the expenses that an organization incurs in making such changes.
- Neither CORE nor participating organizations will be liable if incorrect information is transmitted.
- Complying with CORE Operating Rules does not release any organization adopting the rules from ensuring that it is in compliance with all other applicable rules, regulations and legal requirements.
- All organizations that operate under the CORE Operating Rules are HIPAA-compliant, and organizations intending to operate under the CORE Operating Rules will be asked to attest to this fact. However, CORE will not test for HIPAA compliance.
- CORE Operating Rules address both real-time and batch transactions, with movement towards real-time.
- There will not be changes or amendments to the rules unless approved by a CORE vote.

UNDERLYING PRINCIPLES AND ASSUMPTIONS FOR SPECIFIC RULES

The Pledge

- Signing the Pledge does not automatically allow the organization to participate in the CORE rule making process; to become involved in the CORE rule making process, the organization must be a CORE participant.
- All stakeholders that sign the Pledge and become CORE-certified stay CORE-certified to maintain their name on the CORE Pledge. There will be a web-based listing of entities that have signed the Pledge.

Certification

- There will be a web-based listing of entities that are CORE-certified.

Enforcement

- An organization certified under the CORE Operating Rules will be party to the CORE enforcement process.
- The CORE enforcement process requires all parties involved in the complaint to be CORE-certified, except for providers that are not CORE-certified but are an end-user of a CORE-certified product.
- CORE-certified entities are permitted to work with any entity of their choice, including entities not participating in CORE.