



Phase V CORE Certification Policies v5.0.0

March 2019

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1 INTRODUCTION

This document provides the Phase V CORE Certification Policies and underlying assumptions applicable to all Phase V CAQH CORE Operating Rules.

1.1 PHASE V CORE CERTIFICATION GUIDING PRINCIPLES

- After signing the CAQH CORE Pledge, the entity has 180 days to complete CORE Certification Testing.
- CAQH CORE will not offer certification for operating rules that CAQH CORE has not clearly defined and voted upon.
- CORE Certification Testing will be required of any entity seeking CORE Certification. CAQH CORE will authorize testing vendors to conduct CORE Certification Testing. All CAQH CORE-authorized Testing Vendors will need to be capable of testing for all Phases of CAQH CORE Operating Rules.
- Upon successful completion of CORE Certification Testing and review and approval of applicable reports and forms by CAQH CORE, entities seeking CORE Certification will receive a CORE Certification “Seal” from CAQH CORE.
- Entities seeking Phase V CORE Certification will be required to adopt all Phase V CAQH CORE Operating Rules that apply to their business and will be responsible for all their own company-related testing costs.
- Health plans and providers seeking certification for the Phase V CAQH CORE Operating Rules must first be CORE-certified for Phases I, II, III, and IV of the CAQH CORE Operating Rules. Vendor products and services and clearinghouses must first be CORE Certified for Phases I, II, III, and IV of the CAQH CORE Operating Rules to the extent that their product or services involve eligibility, claim status, EFT and ERA, health care claims, health care services review/request and response, benefit enrollment and maintenance, and premium payment transactions.
- CAQH CORE will not oversee trading partner relationships. CORE-certified entities may work with non-CORE-certified entities if they so desire.
- Role of HIPAA compliance:
 - As part of the application process, entities seeking CORE Certification are required to sign an attestation form attesting they are HIPAA compliant to the best of their knowledge (“[CAQH CORE HIPAA Attestation](#)”) for security, privacy, and all applicable administrative simplification requirements. HIPAA compliance will not be defined by CAQH CORE.
- Role of CAQH CORE-authorized Testing Vendors:
 - CAQH CORE-authorized Testing Vendors will be expected to sign the [CAQH CORE HIPAA Attestation](#) on their own behalf as well, demonstrating that they support standard transactions.
- Who will be certified:
 - CORE Certification Testing will vary based on stakeholder type. Associations, medical societies and the like will not be certified; instead, these entities will receive a CORE “Endorser” Seal after signing the [CAQH CORE Pledge](#). Entities successfully achieving CORE Certification will receive the CORE Certification “Seal” that corresponds with their stakeholder type. There will be five different types of CORE “Seals”:
 - CORE-certified Health Plan
 - CORE-certified Vendor (product specific)
 - CORE-certified Clearinghouse (product specific, if applicable)
 - CORE-certified Provider

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- CORE Endorser (for entities that do not create, use, or transmit the transactions to which Phase V applies)
- A parent corporation seeking certification will not be certified unless all subsidiaries of the corporation are conformant with CAQH CORE Operating Rules. Otherwise, each subsidiary of the parent must individually seek certification. For vendors, CORE Certification will apply only to specific vendor product names (by version) rather than corporate entities.
- Ancillary services are not assumed to be subsidiaries, as a subsidiary is a legal entity of its own that serves as one of the types of key stakeholders that can become certified, e.g., provider, health plan, vendor products or services or clearinghouse.
- If a CORE-certified entity is acquired by an entity that is not CORE-certified, the newly merged company will only be allowed to be CORE-certified if the acquired company is the only business that is applicable to the CAQH CORE Operating Rules. If this is not the case, then the newly merged company will be required to seek certification.
- If a CORE-certified entity acquires or develops new system(s) that are not CORE-certified, the CORE-certified entity will have 12 months to certify the new system(s); if the CORE-certified entity does not certify the new system(s), it will lose its CORE Certification Seal.
- Endorsers will not become certified but will be expected to participate in the CAQH CORE outreach, provide feedback and input to CAQH CORE when requested to do so, and encourage their members to consider participating in CAQH CORE.

2 PHASE V CORE CERTIFICATION POLICY

2.1 FEES

- Entities seeking CORE Certification will be charged two fees: fees related to CORE Certification Testing as determined by the CAQH CORE-authorized Testing Vendors and the fee for the CORE Certification Seal (Certification Fee) as determined by CAQH CORE. The goal of CAQH CORE is to develop a low-cost certification process in order to support market adoption of the CAQH CORE Operating Rules by both small and large entities.

2.2 PERIOD FOR WHICH CORE CERTIFICATION APPLIES

- Once certified, CORE-certified entities must remain conformant with applicable CAQH CORE Operating Rules throughout any system upgrades. When vendors and, if applicable, clearinghouses, release new versions of their products that affect the functionality of CAQH CORE Operating Rules, such versions will need to become CORE-certified in order to maintain the CORE Certification Seal.
- Assuming an entity's CORE Certification is not revoked, CORE Certification will remain valid until a new version of the CAQH CORE Operating Rules is approved in accordance with the [CAQH CORE Governance Model](#).
- Revisions will not be made to the rules more than once (1) per year. Revisions to approved rules, if necessary, will become official 20 business days after enacted by CAQH CORE. (Version is defined as a substantive change to any approved CAQH CORE Operating Rule Phase that requires adoption through the [CAQH CORE Governance Model](#).)

2.3 CAQH CORE-AUTHORIZED TESTING VENDORS

- Existing entities currently providing testing for HIPAA compliance can be "authorized" by CAQH CORE as CAQH CORE-authorized Testing Vendors if they meet certain criteria.
- CAQH CORE-authorized Testing Vendors will test entities using the Phase V CORE Certification Test Suite.
- CAQH CORE will allow any interested entity to apply to CAQH CORE to become a CAQH CORE-authorized Testing Vendor. However, to become a CAQH CORE-authorized Testing Vendor, an interested testing vendor must be capable of testing for all Phase I, Phase II, Phase III, Phase IV and Phase V CAQH CORE Operating Rules and meet a CAQH CORE-developed set of criteria. A Request for Proposal and approval process will identify authorized companies.
- CAQH CORE will list any testing entity that is a CAQH CORE-authorized Testing Vendor on the CAQH CORE website.

2.4 CORE CERTIFICATION KEY STEPS

2.4.1 Step 1: Pre-certification Planning and Systems Evaluation

- To prepare for certification, entities seeking CORE Certification should review rules and conduct internal testing as they deem appropriate.

2.4.2 Step 2: Sign the CAQH CORE Pledge

- Organizations seeking CORE Certification must sign the appropriate CAQH CORE Pledge ([Phase I](#), [Phase II](#), [Phase III](#), [Phase IV](#), or [Phase V](#)) and must complete CORE Certification Testing within 180 days of submitting the signed CAQH CORE Pledge to CAQH CORE. The CAQH CORE Pledge must be signed by an authorized executive level employee of the entity seeking CORE Certification.

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2.4.3 Step 3: Using a CAQH CORE-authorized Testing Vendor

- Entities seeking certification will work with a CAQH CORE-authorized Testing Vendor to test for conformance with the CAQH CORE Operating Rules.
- CORE Certification Testing will differ by the role the entity plays in any of the transactions addressed by the Phase I, Phase II, Phase III, Phase IV and Phase V CAQH CORE Operating Rules.
- Any fee/cost imposed by a CAQH CORE-authorized Testing Vendor will be independent and separate from the CORE Certification Seal Fee that CAQH CORE will charge to obtain the CORE Certification Seal. Fees for certification testing will be established by each CAQH CORE-authorized Testing Vendor; thus, prices will be market-driven.
- A CAQH CORE-authorized Testing Vendor will provide certification testing results documentation to an entity seeking certification only after the entity has demonstrated its ability to conform to the CAQH CORE Operating Rules by successfully completing CORE Certification Testing.

2.4.4 Step 4: Granting the CORE Certification Seal

- CAQH CORE will grant the appropriate CORE Certification Seal after an entity submits all documentation required, including documentation with certification testing results from a CAQH CORE-authorized Testing Vendor demonstrating the entity's conformance to CAQH CORE Operating Rules through successful completion of CORE Certification Testing.
- CAQH CORE will review test results and maintain a record of CORE-certified entities.
- Applicants for a CORE Certification Seal will be responsible for ensuring that an authorized person completes and submits the required [CAQH CORE Seal Application](#), the certification testing results document, and the [CAQH CORE HIPAA Attestation](#) signed by the appropriate executive level person. The CAQH CORE HIPAA Attestation indicates that to the best of that person's knowledge the applicant is HIPAA compliant for security, privacy, and the HIPAA Administrative Simplification requirements (or, in the case of a vendor, its product or service supports these transactions).
- CAQH CORE will notify the applicant of any need for clarification within 20 business days of receipt of the required documents and fees for a Phase V CORE Certification Seal. CAQH CORE will complete its assessment within 30 business days of receipt of all required documents and fees unless there are extenuating circumstances.
- CAQH CORE will inform those who apply for certification of the "certification" queue status at the time of their application submission.
- CAQH CORE will report on its website:
 - List of certified entities.
 - In the case of vendors and clearinghouses, the name of the CAQH CORE certified product or service and the transactions supported by that product or service, by version, if applicable.
- The Phase V CORE Certification Seal fee is a one-time fee, unlike the CAQH CORE Participating Organization fee, which is an annual fee. The Phase V CORE Certification Seal indicates that an entity/product is Phase V CORE-certified. The fee for a CAQH CORE Participating Organization, which allows entities to participate in the CAQH CORE rule writing and voting process, is separate from the CORE Certification Seal Fee. CAQH CORE Participating Organizations may voluntarily decide whether to become CORE-certified entities.
- An entity's Phase V CORE Certification will be effective until a new version of the CAQH CORE Operating Rules is made available, provided an organization has no complaints filed against it. Vendors and, if applicable clearinghouses, are also required to seek new CORE Certification when a new version of a previously CORE-certified product or service is released.

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- If an entity withdraws its name from its Phase V CAQH CORE Pledge, it automatically loses its CORE Certification.
- When new phases of CAQH CORE Operating Rules are approved according to the [CAQH CORE Governance Model](#), a CORE-certified entity is not required to re-certified for any CAQH CORE Operating Rules Phase for which it is already certified.
- A CORE-certified entity is permitted to market its CORE Certification Seal only if the entity's Seal is valid and current.
- CAQH CORE will be responsible for providing the official Phase V CORE Seal (after conformance is proven).

2.5 CIRCUMSTANCES THAT REQUIRE AN ENTITY TO RE-CERTIFY

Re-certification will be required if an entity's CORE Certification Seal is revoked as a result of a validated complaint of non-conformance.

2.5.1 Re-Certification Requirements

Re-certification will be required when CAQH CORE Operating Rules are modified.

- CAQH CORE Operating Rules will become official 20 business days after being approved according to the [CAQH CORE Governance Model](#); however, adoption of the CAQH CORE Operating Rules is not required by an entity until 180 days after signing the CAQH CORE Pledge (notwithstanding any federal mandates on the same CAQH CORE Operating Rules). A similar timeframe will apply for an entity's adoption for revisions.
- CAQH CORE reserves the right to revise CAQH CORE Operating Rules.
- Minor modifications that would improve a CAQH CORE Operating Rule will not require re-certification.
- Except for vendors and entities that have lost their CORE Certification Seals due to validated instance(s) of non-conformance, re-certification will be required only after CAQH CORE approves major modifications, changes or deletions to CAQH CORE Operating Rules as per the [CAQH CORE Governance Model](#).

3 PHASE V CAQH CORE HEALTH PLAN IT SYSTEM EXEMPTION POLICY

This policy addresses CORE Certification exemptions that health plans seeking CORE Certification may request when the health plan has a scheduled migration of an existing IT system(s) if the remainder of the health plan's IT systems are conformant with CAQH CORE Operating Rules. This policy is complementary and does not replace other CAQH CORE policies set forth in this document.

3.1 REQUIRED CRITERIA IN ORDER TO BE GRANTED A HEALTH PLAN IT SYSTEM EXEMPTION

Any health plan seeking a CORE Certification IT System Exemption must meet the following criteria to gain approval for an exemption designation.

3.1.1 Percentage

Percentage of a health plan's transaction volume that is processed by the IT system(s) in question:

- No more than 30 percent of a health plan's *specific* transaction volume can be processed by the IT system(s) to be covered by the exemption.

3.1.2 Timing

Time period for which the IT system(s) in question must be scheduled for migration from a conformant to a non-conformant system:

- Migration must be scheduled for completion no later than 12 months from the date when the health plan is granted CORE Certification.
- If migration is not complete by the agreed-upon date, the health plan could be de-certified.

3.2 EXEMPTION REQUIREMENTS

- IT System Exemptions will be reviewed and granted on an individual health plan basis.
- IT System Exemption requests that are due to newly acquired entities will be granted only if the above parameters on time periods and percentage of membership are met.
- Reviewing and approving IT System Exemptions will be the responsibility of the CAQH CORE staff.

3.3 EXEMPTION REQUEST AND REVIEW PROCESS

3.3.1 Exemption Request

Any health plan seeking an exemption must follow the [Phase V CORE Certification Policy](#), excluding the IT system(s) for which it is seeking the exemption.

- When providing CAQH CORE with the documentation to prove successful CORE Certification Testing and to attest to HIPAA compliance, the health plan must provide CAQH CORE with an authorized executive-level attestation stating that the health plan meets the agreed-upon IT system exemption criteria and has the ability to identify those transactions to which the exemption applies. As a result, CAQH CORE will be able to accurately respond to a *CAQH CORE Request for Review of Possible Non-Conformance* that are the result of an IT system exemption.
- If possible, the health plan will communicate to CAQH CORE in a way that is most meaningful to the market/providers the systems/groups/products for which CAQH CORE-conformant data will not be available until after the exemption time period expires.
- When the proper [Phase V CAQH CORE Health Plan IT System Exemption Request Form](#) along with appropriate documentation is received, CAQH CORE will be responsible for granting or denying IT System Exemptions.

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- The 12-month health plan IT System Exemption period will begin on the day that the health plan is granted Phase V CORE Certification (a CORE Certification Seal) by CAQH CORE.

3.3.2 Review Process

On or before the last business day of the month in which the exemption ends, the health plan must communicate the status of the migration to CAQH CORE.

- It is the goal of CAQH CORE to build momentum for CORE Certification, and this goal will be taken into consideration when reviewing requests for requested extensions to the 12-month IT System Exemption time frame required.
- If a CAQH CORE-certified health plan with an exemption communicates to CAQH CORE that the IT system migration was not completed in the agreed-upon timeframe, the CAQH CORE Board will determine how to address the issue.
- Decisions by the CAQH CORE Board to remove an entity's CORE Seal or to provide an extension shall be conducted within 20 business days of the last business day of the month in which the exemption ends.
- If de-certified, the health plan will need to re-apply for CORE Certification.
- The [Phase V CAQH CORE Enforcement Policy](#) outlines the steps to become re-certified after being de-certified. A health plan wanting to become re-certified after being de-certified according to the above process will need to be re-certified for the Phase of CAQH CORE Operating Rules which it had originally requested an IT System Exemption.

3.4 COMMUNICATION CONCERNING WHICH SYSTEMS HAVE IT SYSTEM EXEMPTIONS

- All CORE-certified entities will be listed on the CAQH CORE website. In addition, Phase V CORE-certified vendor products and services will be listed, including individual product names and versions, if applicable.
- There will be a footnote included for those Phase V CORE-certified health plans that have an IT System Exemption. The footnote will indicate that a portion of the health plan's systems are not conformant with CAQH CORE Operating Rules, and detailed information identifying those systems/groups/products that are under the health plan IT system exemption will be provided, if available.
- The footnote will be removed only when the health plan communicates to CAQH CORE that its exempted system(s) are conformant.

4 PHASE V CORE CERTIFICATION TESTING POLICY

4.1 CAQH CORE PRE-CERTIFICATION, SELF-TESTING

To prepare for Phase V CORE Certification, entities should review the Phase V CAQH CORE Operating Rules and conduct internal testing as they deem appropriate.

4.2 CORE CERTIFICATION TESTING PROCESS

A CAQH CORE-authorized Testing Vendor performs testing with an entity seeking CORE Certification based upon the test scripts specific to the entity's stakeholder type in the Phase V CAQH CORE Certification Test Suite.

Entities seeking Phase V CORE Certification can work with the CAQH CORE-authorized Testing Vendor of their choice to test and/or use a testing website developed by one or more of the CAQH CORE-authorized Testing Vendors to conduct their Phase V CORE Certification Testing. If the CAQH CORE-authorized Testing Vendor takes a website approach, individual testing results would not be shared publicly. The Phase V CAQH CORE Certification Test Suite includes scenario-based testing and expected outcomes.

4.3 VERIFICATION OF TESTING RESULTS

When the CORE-authorized Testing Vendor verifies, with documentation, that an entity seeking Phase V CORE Certification has successfully completed testing, the entity can apply to CAQH CORE to obtain the CORE Certification Seal by submitting documentation to CAQH CORE.

4.4 CORE CERTIFICATION TESTING APPEALS PROCESS

Any entity that is seeking Phase V CORE Certification and is undergoing certification testing with a CORE-authorized Testing Vendor may appeal decisions made by the CORE-authorized Testing Vendor regarding certification testing.

- Prior to any appeal being submitted, CAQH CORE assumes that efforts have been taken to resolve the issue privately between an entity seeking CORE Certification and the CAQH CORE-authorized Testing Vendor, and such efforts have not succeeded.
- CAQH CORE will have 20 business days to investigate the issue upon receipt of the appeal. If the appeal is deemed valid, CAQH CORE will ask the CAQH CORE-authorized Testing Vendor to re-execute the test scripts in question within 20 business days of request.

5 PHASE V CAQH CORE ENFORCEMENT POLICY

5.1 GUIDING PRINCIPLES

- Entities are encouraged to privately resolve disputes before submitting a formal complaint of non-conformance against a CORE-certified entity.
- Enforcement will be a complaint-driven process that will require documentation (electronic or paper) demonstrating multiple instances of non-conformance.
- Complainants must be a party to the transaction for which they are submitting a complaint. Except for health care providers, complainants must be CORE-certified. Any health care provider that is an end-user of a CORE-certified system/product/service may lodge a complaint against a CORE-certified entity.
- The details of a specific complaint remain private. Names or other identifying information will not be publicly released. This information will only be used and disclosed by CAQH CORE for its non-conformance review. If an entity or a vendor's product/service is found to be in actual violation of a CAQH CORE Operating Rule(s), it will be de-certified, and its name removed from list of CORE-certified entities on the CAQH CORE website if the complaint is not remedied per the Phase V CAQH CORE Enforcement Policy described below.
- The complaint process will be progressive but will last no more than six (6) months between filing of complaint and resolution. Extensions may be granted on a case-by-case basis due to mitigating factors decided upon by the CAQH CORE Enforcement Committee.
- The CAQH CORE Enforcement Committee will consist of a balance of stakeholder types composed of CORE-certified entities, including health plans, vendors, clearinghouses, and providers). No one stakeholder type will be permitted to have a dominant representation.
- Complainants are permitted to withdraw a complaint at any time during the complaint process.
- Personal health information (PHI) must not be submitted without appropriate consent.
- CAQH CORE will accept and review any submitted complaint that contains the required documentation.

5.2 CAQH CORE ENFORCEMENT COMMITTEE

- Members of the CAQH CORE Enforcement Committee will be appointed by the CAQH CORE Board from nominations made by the CAQH CORE Board members and/or CAQH CORE Participating Organizations.
- CAQH CORE Enforcement Committee member terms will be limited to one year from date of appointment.
- If a member of the CAQH CORE Enforcement Committee is party to a complaint, then he/she will recuse him/herself for the duration of the resolution of the complaint.

5.3 PREREQUISITES FOR A REQUEST FOR REVIEW OF POSSIBLE NON-CONFORMANCE

- Complainants must be a party to the transaction for which they are submitting a complaint. Except for health care providers, complainants must be CORE-certified. Any health care provider that is an end-user of a CORE-certified system/product/service may lodge a complaint against a CORE-certified entity.
- Entities being alleged non-conformant with a Phase V CAQH CORE Operating Rule(s) must be Phase V CORE-certified.
- Filing a [Phase V CAQH CORE Request for Review of Possible Non-Conformance Form](#) assumes reasonable steps have already been taken by the complainant to try to resolve the issue privately with the entity being alleged non-conformant, and such efforts were not successful.
- At least five documented examples of the violation(s) over a 30-day period must be provided submitted

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with [Phase V CAQH CORE Request for Review of Possible Non-Conformance Form](#).

- The complaint must be submitted within 90 days of the most recent conformance violation(s) for which it is being filed.
- The details of a specific complaint remain private. Names or other identifying information will not be publicly released. This information will only be used and disclosed by CAQH CORE for its non-conformance review. If an entity is found to be in actual violation of a CAQH CORE Operating Rules, it will be de-certified, and its name removed from the CAQH CORE website if the complaint is not remedied.
- Complainant is permitted to withdraw a complaint any time during the complaint process.

5.4 COMPLAINT FILING

Every effort must be made to resolve problems before a complaint is filed. Conformance language for each rule should assist entities with what is required of CORE-certified entities. Complainant will formally file a complaint using the [Phase V CAQH CORE Request for Review of Possible Non-Conformance Form](#), which outlines the alleged violation, accompanied by proper documentation:

- At least five documented examples of the violation(s) occurring over a 30-day period, demonstrating that the violation was not a one-time occurrence but occurred in multiple instances.
- Each of the five documented examples of violation must demonstrate non-conformance with a specific CAQH CORE Operating Rule. If a complainant believes that an entity is non-conformant with multiple CAQH CORE Operating Rules, additional sheets can be attached to the form and submitted for each alleged rule violation.
- Complainant must file complaint within 90 days of the most recent conformance violation(s) for which the complaint is being filed.

5.4.1 CAQH CORE Review of Complaint

The CAQH CORE Enforcement Committee, with support from CAQH CORE staff, will review the complaint form for completeness and timeliness, and either verify or dismiss the complaint. CAQH CORE Enforcement Committee's review of the complaint will include:

- Analysis of the information submitted by complainant.
- Confirmation that the alleged non-conformant entity in question is given an opportunity to respond to complaint in writing.

CAQH CORE must respond to the complaint within 20 business days. All organizations involved in the complaint must respond to requests for information from CAQH CORE within 20 business days of the request.

The complaint must be deemed valid or invalid by the CAQH CORE Enforcement Committee within 30 business days after all documentation is received by CAQH CORE and requests for information are received.

The Review Process ends when the complaint is considered invalid and dismissed. If complaint is verified as valid, the Review Process continues.

5.4.2 Valid Complaint Process

Entities found to be out of conformance with a Phase V CAQH CORE Operating Rule(s) will be informed by CAQH CORE that they have a defined grace period of 40 business days in order to remedy the problem and successfully re-test for conformance with the rule(s) or be de-certified.

- A CAQH CORE Enforcement Committee composed of individuals not party to the complaint will be responsible for providing any extension to this grace period, if necessary, through a review of the valid complaint.

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- Ten business days after the grace period ends, entities are required to prove they have remedied the problem by presenting documentation to the CAQH CORE Enforcement Committee of at least five instances on five different business days over a span of 10 business days in which there was no issue of conformance with the complainant, in addition to providing documentation of successful re-testing.
- The Enforcement Committee will be responsible for granting variances to the 40-business day grace period.

5.4.3 Complaints not Remedied

Entities not remediating the validated non-conformance within the grace period will be de-certified and its CORE Certification Seal will be revoked.

5.5 DE-CERTIFIED ENTITIES INTERESTED IN RE-CERTIFICATION

A de-certified entity may seek re-certification. De-certified entities are responsible for all fees associated with re-certification, including any fees for a new CORE Certification Seal.

- An entity seeking re-certification due to non-conformance will need only to conduct certification testing with a CAQH CORE-authorized Testing Vendor for the rule(s) for which it was found to be non-conformant. A re-certifying entity must submit documentation to CAQH CORE provided by a CAQH CORE-authorized Testing Vendor that demonstrates the entity's conformance with the rule for which the entity was found to be non-conformant to CAQH CORE.