

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Phase IV Response Time Task Group (PIV TG)
Straw Poll Results: *Draft Phase IV CAQH CORE 278 Infrastructure Rule Update***

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1. Overview

1.1 Straw Poll Purpose

The purpose of the Straw Poll was to collect feedback from the CAQH CORE Phase IV Response Time Task Group (PIV TG) on the potential enhancements to the [Phase IV CAQH CORE 452 Health Care Services Review – Request for Review and Response \(278\) Infrastructure Rule](#) (Phase IV CAQH CORE 278 Infrastructure Rule).

1.2 Additional Background

The PIV TG launched in Q2 2019 to consider three potential enhancements to the Phase IV CAQH CORE 278 Infrastructure Rule that build on the foundational infrastructure requirements for prior authorization (PA) established by this rule to improve timely delivery of patient care.

On its 05/15/19 call, members of the PIV TG reviewed and discussed the potential draft enhancements to the Phase IV CAQH CORE 278 Infrastructure Rule in preparation to complete an Impact Assessment Workbook that evaluated the impact the draft enhancements would have on individual organizations.

On its 06/12/19 call, the PIV TG reviewed the results of the Impact Assessment Workbook and discussed ways to address key gaps identified by the group in preparation for the upcoming Straw Poll on the updated scope and requirements of the Phase IV 278 Infrastructure Rule.

1.3 Format of Straw Poll

The Phase IV Task Group Straw Poll consisted of 3 sections:

- **Section 1: Questions on Scope – Applicable to All Requirements**
- **Section 2: Questions on Potential Draft Phase IV Health Plan Response Time Requirements**
- **Section 3: Questions on Potential Draft Phase IV Provider Response Time Requirements**

In Section 1, respondents were asked to select “Yes” or “No” to indicate whether or not their organization supported each item as being in scope for the potential Phase IV Response Time Enhancements. Respondents were asked to list any additional items not included in the out of scope section that should be out of scope for the potential requirements.

Section 2 of the Straw Poll asked respondents to indicate their support or non-support for pursuing each of the two potential Draft Phase IV Health Plan Response Time Requirements under Task Group consideration. For each enhancement, regardless of support, respondents were then asked to select the timeframe requirement their organization would support pursuing (e.g. 2 business days, 3 business days, etc.). Follow-up questions

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pertaining to the potential Health Plan Response Time Requirements asked participants if they support adding additional language to the requirement for clarity.

Section 3 of the Straw Poll asked the PIV TG to indicate their support or non-support for the potential Phase IV Provider Response Time Requirement. Regardless of support, respondents were then asked to select the timeframe requirement their organization would support pursuing (e.g. 2 business days, 3 business days, etc.).

Respondents were also asked to indicate their support for a potential new Phase IV Time Out Requirement as proposed on the Task Group's 06/12/19 call. Regardless of support, respondents were then asked to select the timeframe requirement their organization would support pursuing (e.g. 15 business days, 30 business days, etc.).

2. Summary of Straw Poll Respondents

Responses were received from **19** respondents representing **68%** of PIV TG participating organizations.

Number of Task Group Participating Entities	28
Total Number of Individual Responses	19 (68% of TG Entities)
Number of Provider / Provider Association / Provider Vendor Responses	6 (31% of respondents)
Number of Health Plan / Health Plan Association / Health Plan Vendor Responses	8 (42% of respondents)
Number of Dual-Facing Vendor Responses	2 (11% of respondents)
Number of Government Responses	2 (11% of respondents)
Number of 'Other' Responses (Includes Standards Organizations)	1 (5% of respondents)

3. Percent Support for Potential Enhancements

As shown Table 1 below, all three potential enhancements to the Phase IV 278 Infrastructure Rule received at least **80% support** on the straw poll. The addition of the peer to peer medical review language received **82% support**, while the New Provider 'Time Out' Requirement received **72% Support**.

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Table 1. Support to Pursue Proposed Scope Items and Each Potential Enhancement

Question #	Phase IV Task Group Straw Poll on Draft Phase IV Response Time Requirements	"Y" (Support)	"N" (Non-Support)	Abstain #
Questions about Scope: Applicable to All Potential Enhancements				
1a	In-Scope: 5010X217 278 Request/Response Transaction for Medical Services Exchanged Between Trading Partners	18 (95%)	1 (10%)	0
1b	In-Scope: Prospective/Concurrent Reviews of PA Requests	16 (89%)	2 (17%)	1
1c	In-Scope: Non-Emergent / Non-Urgent PA Requests for Medical Services	18 (95%)	1 (10%)	0
Questions about Potential Draft Phase IV Health Plan Response Time Requirements				
3	Adjusted Draft Phase IV Health Plan Response Time Requirement #1	15 (88%)	2 (12%)	2
4	Addition of Peer to Peer Medical Review Language	14 (82%)	3 (18%)	2
6	New Draft Phase IV Health Plan Response Time Requirement #2	13 (87%)	2 (13%)	4
Questions about Potential Draft Phase IV Provider Response Time Requirements				
8	New Draft Phase IV Provider Response Time Requirement #1	12 (80%)	3 (20%)	4
10	Addition of New 'Time Out' Enhancement	13 (72%)	5 (28%)	1

Table 2. Support for Specific Timeframe Requirements for Potential Enhancements

Question #	Phase IV Task Group Straw Poll on Draft Phase IV Response Time Requirements	2 Business Days	3 Business Days	4 Business Days	5 Business Days	Other
Questions about Potential Draft Phase IV Health Plan Response Time Requirements						
5	Time Requirement for Adjusted Draft Phase IV Health Plan Response Time Requirement #1	6 (43%)	4 (29%)	1 (7%)	3 (21%)	4 ¹
7	Time Requirement for New Draft Phase IV Health Plan Response Time Requirement #2	7 (50%)	4 (29%)	0 (0%)	3 (21%)	5 ²
Question about Potential Draft Phase IV Provider Response Time Requirements						
9	Time Requirement for New Draft Phase IV Provider Response Time Requirement #1	6 (40%)	4 (27%)	1 (6%)	4 (27%)	4 ³

¹ Responses received include: one business day, 15 business days, 48 hours and N/A.

² Responses received include: one business day, "real time" and three responses of N/A.

³ Responses received include: seven business days and three responses of N/A.

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Table 3. Support for Specific Timeframe for Potential New Provider ‘Time Out’ Requirement

Question #	Phase IV Task Group Straw Poll on Draft Phase IV Response Time Requirements	15 Business Days	30 Business Days	45 Business Days	Other
Question about Potential Draft Phase IV Health Plan Response Time Requirements					
11	Timeframe for New ‘Time Out’ Requirement	4 (33%)	5 (42%)	3 (25%)	7 ⁴

4. Summary of Comments Received, By Each Section of the Straw Poll

For each question on the Straw Poll, respondents were given the opportunity to provide comments on their organization’s position. Three categories of comments were received:

1. **Non-substantive Comments** – Pertain to typographical/grammatical errors, wordsmithing, clarifying language, addition of references; do not impact rule requirements. **NOTE:** Non-substantive comments do not require Task Group discussion, CAQH CORE staff will make these adjustments, as necessary.
2. **Points of Clarification** – Pertain to areas where more explanation for the Task Group is required; *may* require adjustments to rule but do not change rule requirements.
3. **Substantive Comments** – May impact rule requirements; some comments require Task Group discussion on potential adjustments to the draft requirements.

Comments were received from **14/19** entities, comprising **74%** of total respondents.

The tables below summarize the comments received on the Straw Poll. For the substantive comments, the table includes recommendations to address the comments in **bold**.

4.1 Comments Received on Scope of the Phase IV 278 Infrastructure Rule Update

Table 1 below summarizes comments received on the Straw Poll pertaining to the scope of the Phase IV 278 Infrastructure Rule update, along with CAQH CORE staff responses.

⁴ Responses received include: two responses of 10 business days, 15 calendar days, 90 business days and three responses of N/A.

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Table 1. Comments Received on Scope of the Phase IV 278 Infrastructure Rule Update

#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
Points of Clarification			
1	Section 1: Scope	Two entities recommended clarifying the definitions of the terms “ <i>prospective review</i> ” and “ <i>concurrent review</i> ” in regard to PA requests. One entity suggested that <i>concurrent review</i> be defined as <i>concurrent outpatient review</i> as they believe that inpatient reviews should always be considered urgent requests.	Adjust for clarity. CAQH CORE Staff will adjust the draft rule update for clarity.
2	Section 1: In Scope – Additional Scope Items to be Added	One entity commented that health plans should include specific data requests with supporting guidelines when pending a PA request for a specific service. They stated that including this level of specificity for the required additional information rather than a generic ‘need more data’ response from the health plan would help expedite the return of the data to the health plan from the provider.	Do not adjust. The clock for the proposed provider requirement does not start until the health plan communicates exactly what additional information/documentation is needed to complete the pending PA request. Additionally, the Phase V 278 Request/Response Data Content Rule requires health plans to use the most appropriate PWK codes and/or LOINC code when requesting additional data or documentation to support the pending PA Request. Specifying data content is out of scope for this Phase IV Update.
Substantive Comments			
1.	Section 1: In Scope – Additional Scope Items to be Added	Two entities suggested additional items be added to the proposed scope. One entity noted that the proposed enhancements to the Phase IV Update are primarily restricted to apply to the 5010X217 278 when it is being conducted in batch mode. They further explained that many providers who receive a pending 278 request often use the 278X215 inquiry transaction to obtain the final determination. Therefore, the entity suggested that the 278X215 should be in-scope for the	Do not adjust. The Phase IV 278 Infrastructure Rule addresses the use and conduct of the 5010X217 278 as the HIPAA-mandated transaction for prior authorizations. The conduct and use of the 5010X215 278 is under consideration for future Operating Rules, particularly regarding the work

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
		<p>Phase IV Update so that providers can inquire as to the status of a final determination decision when using this 278X215 transaction in real time rather than waiting for the health plan to return the finalized 278X217 Response.</p> <p>One entity stated that urgent, emergent and appeal PA use cases should be in-scope for the Phase IV Update and the corresponding timeframes should mirror the <i>Utilization Management Reform Principles</i> released by the AMA in January 2017 to reflect industry best practices.</p>	<p>currently being done under the CAQH CORE Attachments Initiative.</p> <p>Regardless of whether the initial PA inquiry is made via real time or batch, a fully finalized 278 Response transaction should be made available to the inquiring provider when the final determination is completed by the health plan – it should not require the use of a non-HIPAA mandated transaction to complete the notification process to the provider. The Phase IV Connectivity Rules define batch and real time processing modes and schemas for both the 5010X217 278 and the 5010X215 278.</p> <p>Additionally, urgent, emergent and appeal PA use cases follow different workflows than the typical PA used for non-urgent/non-emergent PAs because they are often done retrospectively. The Phase IV Operating Rules are specific to the conduct of the 278 transaction.</p>
Non-Substantive Comments			
1.	Section 1: In Scope – Prospective/Concurrent Reviews	One entity stated that clearinghouses can't respond as to whether prospective/concurrent reviews should be in scope for the requirement.	N/A
2.	Section 1: Scope	Three entities expressed their support for the scope of the requirements and expanded upon why they support each item as being in-scope.	N/A

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4.2 Comments Received on the Potential Draft Phase IV Health Plan Response Time Requirements

The table below summarizes comments received on the Potential Draft Phase IV Health Plan Response Time Requirements #1 and #2 including comments on specific timeframe requirements and additional language added for clarification, with CAQH CORE staff recommendations to address substantive comments in **bold**. The draft requirement language included in the Straw Poll is provided below for reference:

1. **Adjusted: Draft Health Plan Response Time Requirement #1: Health Plan Sends Final Determination to Provider (Approval/Denial)**
*Once a health plan or its agent receives a complete prior authorization request with all information and documentation necessary, including completed peer to peer medical reviews, if applicable, to determine patient coverage and medical necessity, the health plan or its agent must return a 5010X217 278 Response containing a prior authorization approval or denial. Maximum response time for availability of 5010X217 278 Responses when processing 5010X217 278 Requests submitted in Batch Processing Mode by 9:00pm Eastern Time of a business day by a provider or on a provider’s behalf by a clearinghouse/switch must be no later than 7:00 am Eastern Time the [XX - **Determined by PIV TG**] business day following submission.*

2. **New: Draft Health Plan Response Time Requirement #2: Health Plan Request for Additional Information/Documentation**
*A health plan may pend a 5010X217 278 Request due to a need for additional information/documentation from the provider or its agent. Maximum response time when processing 5010X217 278 Requests submitted in Batch Processing Mode by 9:00 pm Eastern Time of a business day by a provider or on a provider’s behalf by a clearinghouse/switch for availability of 5010X217 278 Response specifying what additional information/documentation is needed to reach a final determination must be no later than 7:00 am Eastern Time the [XX - **Determined by PIV TG**] business day following submission.*

Table 2. Comments Received on the Potential Draft Phase IV Health Plan Response Time Requirements #1 and #2

#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
Points of Clarification			
1.	Section 2: Adjusted Health Plan Response Time Requirement #1 – Specific Timeframe	One entity stated that whatever timeframe requirement the Task Group agrees to, if there is a request for additional information/documentation from the provider then the timeframe to return the final determination should increase by one business day.	Do not adjust. The clock for the Adjusted Health Plan Response Time Requirement #1 does not start until all necessary information/documentation needed to complete the PA request is submitted. Therefore, all health plans would adhere to the same response timeframe, whether additional information/documentation was requested, since the clock for the requirement only begins once the

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
			plan has all information needed to make a final determination.
2.	Section 2: Addition of Peer Review Language	<p>Four entities suggested adding clarifying timeframe language to the proposed peer review language.</p> <p>Two of these entities believe that as written, scheduling and completing peer to peer medical reviews within the agreed upon timeframe will be difficult and one entity stated that the current language provides a loophole that would allow health plans to delay scheduling and completion of peer to peer reviews.</p> <p>One entity suggested that the language should include a requirement that health plans must provide each healthcare provider with complete, specific information/instructions on how to schedule and complete a peer review.</p>	<p>Do not adjust.</p> <p>The timeframe for scheduling and completing a peer to peer review is outside the scope of the proposed adjustments to the Phase IV 278 Infrastructure Rule. The proposed adjustments only establish a requirement for the timeframe for when a health plan must respond to the provider with the final determination once the peer to peer review is complete.</p> <p>CAQH CORE will provide additional guidance on this topic as part of its ongoing PA education initiative, specifically that it is best practice for health plans to include detailed instructions on how to complete the peer review process in their companion guides, billing manuals, etc.</p>
3.	Section 2: New Health Plan Response Time Requirement #2 – Specific Timeframe	<p>One entity noted that many clinicians may only have a set number of office days, multiple sites to visit, etc. which would make it difficult to adhere to the even the most lenient proposed timeframe requirement (5 business days).</p>	<p>Do not adjust.</p> <p>The New Health Plan Response Time Requirement #2 only applies to the period of time health plans have to return a pended 278 PA Response to the provider along with communicating what additional information/documentation is needed. Thus, clinician availability should not typically be necessary in order to return a 278 and communicate what information was missing from the original 278 PA Inquiry.</p> <p>Additionally, the proposed enhancement allows health plans to meet the timeframe requirement in 90% of cases during each calendar month, giving</p>

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
			health plans flexibility in instances where delays in communication may occur.
Substantive Comments			
1.	Section 2: Adjusted Health Plan Response Time Requirement #1	One entity noted that to meet any shorter turnaround time than their current state requirement would be costly, require budgetary changes, and would incentivize the use of the standard 278 transaction over other manual means of PA submission. Due to the budgetary constraints on obtaining new resources, the entity suggested that government agencies should be exempt for the timeframe requirements.	<p>Task Group Feedback Needed.</p> <p>The intent of the revisions to the Phase IV 278 Infrastructure Rule is to bring consistency to the industry so that both healthcare providers and health plans can have shared expectations, build more efficient and automated systems and reduce the burden of manual processes to improve the timely care to patients.</p> <p>At this time, the Phase IV Operating Rules, including any updates made to the existing Phase IV 278 Infrastructure Rule, are voluntary for industry adoption. If the Phase IV Rules were to become mandated in the future, there would be an implementation period for the industry to mitigate systems and business processes to meet the requirements.</p>
2.	Section 2: Adjusted Health Plan Response Time Requirement #1 – Specific Timeframe	<p>Three entities recommended timeframes for the Adjusted Health Plan Response Time Requirement #1 other than those listed in the Phase IV Task Group Straw Poll (these included 48 hours, 15 business days, and N/A)</p> <p>Two entities suggested that the timeframe for final determination should be one business day or less since the requirement is only triggered when the health plan is in receipt of all necessary information to complete the pended PA.</p>	<p>Task Group Feedback Needed.</p> <p>In addition to strengthening the Phase IV 278 Infrastructure Rule, one goal of the Phase IV Update is to move the industry forward in its adoption of electronic transactions by applying a national approach for greater uniformity and consistency across state and standard organization requirements. By developing a national requirement, we as an industry have the opportunity to move the needle on the adoption of electronic transactions and enable shorter time to</p>

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
		<p>One entity noted that the NCQA requirements already allows 15 days for non-urgent requests.</p> <p>One entity recommended that the timeframe for final determination should be 48 hours to align with the AMA's <i>Guiding Principle #15</i>. They further explain that because healthcare is a 24/7 business, the requirement should be stated in hours rather than business days.</p>	<p>final adjudication and more timely delivery of patient care.</p> <p>Given 72% of the TG selected either 2 or 3 business days on the Straw Poll for the Adjusted Health Plan Response Time Requirement #1, CAQH CORE Staff and Co-chairs recommend both options be included on the next straw poll.</p> <p>Finally, in order to remain consistent with prior CAQH CORE Operating Rules adopted under the ACA, CAQH CORE Staff and Co-Chairs recommend using the term business days rather than hours in the update.</p>
3.	Section 2: New Health Plan Response Time Requirement #2 – Specific Timeframe	<p>Two entities recommended timeframes for the New Health Plan Response Time Requirement #2 other than those listed in the Phase IV Task Group Straw Poll.</p> <p>One entity suggested that the timeframe for health plans to communicate to the provider that a PA has been pended and what specific information is needed to complete the PA request should be one business day or less.</p> <p>One entity stated that any information that a plan needs to complete a PA request should be delivered to the requesting provider in real time. They further noted that if it is known that a peer review would be necessary, that information should be submitted to the provider by the plan when the PA is requested with an indication of the process the provider needs to follow to complete the peer review.</p>	<p>Task Group Feedback Needed.</p> <p>Given 79% of the TG selected either 2 or 3 business days on the Straw Poll for the New Health Plan Response Time Requirement #2, CAQH CORE Staff recommends both options be included on the next straw poll.</p> <p>While real time adjudication of PA requests is ideal, many health plans are not able to respond to a PA request with a final determination or able to identify the necessary documentation for completion of the PA in real time. Therefore, the Phase IV 278 Infrastructure Rule has time requirements for both Batch and Real Time 278 Responses.</p>
Non-Substantive Comments			
1.	Section 2: Adjusted Health Plan Response Time Requirement #1	Six entities expressed their support for the Adjusted Health Plan Response Time Requirement #1, as written.	N/A

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
		Three of these entities gave explanations for their organization's timeframe selection.	
2.	Section 2: Addition of Peer Review Language	Three organizations voiced their support for the addition of the peer review language to the Adjusted Health Plan Response Time Requirement #1.	N/A
3.	Section 2: New Health Plan Response Time Requirement #2	Six entities expressed their support for the New Health Plan Response Time Requirement #2, as written. Three of these entities gave explanations for their organization's timeframe selection.	N/A
4.	Section 2: New Health Plan Response Time Requirement #2	One entity commented that a pended response from the health plan should be required rather than optional in order to improve consistency and expectations.	N/A

4.3 Comments Received on the Potential New Draft Phase IV Provider Response Time Requirements

The table below summarizes comments received on the Potential New Draft Phase IV Provider Response Time Requirement #1 and New Draft Phase IV Provider 'Time Out' Requirement, including comments on specific timeframe requirements, with CAQH CORE staff recommendations to address substantive comments in **bold**. The draft requirement language included in the Straw Poll is provided below for reference:

1. New Draft Phase IV Provider Response Time Requirement #1: Provider Submits Additional Information/Documentation

Once a provider or its agent has received the 5010X217 278 Response specifying what additional information/documentation is needed to complete the pended prior authorization request by 9:00 pm Eastern Time of a business day, the provider or its agent must return the information/documentation to the health plan or its agent no later than 7:00 am Eastern Time [XX - Determined by PIV TG] business days following receipt of the 5010X217 278 Response.

2. New Draft Phase IV Provider "Time Out" Requirement: Health Plan Denies PA after Non-Response from Provider

If a provider or its agent does not respond to a request for additional information/documentation from the health plan or its agent within [XX - Determined by PIV TG] business days following receipt of the 5010X217 278 Request, the health plan can deny the prior authorization request.

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Table 3. Comments Received on the Potential New Draft Phase IV Provider Response Time Requirements

#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
Points of Clarification			
1.	Section 3: New Provider Response Time Requirement – Specific Timeframe	One entity asked for clarification on the definition of business days. Specifically, if requests for documentation received after business hours would result in one less day available to submit the additional documentation.	<p>The Phase IV 278 Infrastructure Rule defines a business day as the 24 hours commencing with 12:00am (Midnight or 0000 hours) of each designated day through 11:59 pm (2359 hours) of that same designated day. The actual calendar day(s) constituting business days are defined by and at the discretion of each HIPAA-covered entity or its agent. This same definition is included in the update.</p> <p>Therefore, the clock for the first full business day would commence at Midnight (or 0000 hours) on the day after the PA Request was received.</p>
Substantive Comments			
1.	Section 3: New Provider Response Time Requirement	<p>Two entities suggested that the New Provider Response Time Requirement be removed from the Phase IV 278 Infrastructure Rule Update because providers have incentive to provide the requested information to the payer as soon as possible. One entity voiced their support for the requirement but noted that providers may need extra time to successfully return all necessary information to the health plan.</p> <p>Additionally, because the 278 cannot be used to send additional information and there is not attachments standard, the timeframe and mechanisms for providing this information could vary widely.</p>	<p>Task Group Feedback Needed.</p> <p>The results of the Phase IV Straw Poll indicate high support for the inclusion of the proposed New Provider Response Time Requirement #1, with 80% of respondents voting to pursue the requirement.</p> <p>Due to the lack of an attachments standard limiting the scope of this requirement, CAQH CORE Staff recommends forwarding the proposed requirement to the upcoming Attachments Subgroup for review and development, rather than placing the requirement out of scope entirely for rule development.</p>
2.	Section 3: New Provider Response Time	One entity suggested that the timeframe for providers to return all necessary information needed to complete the	Task Group Feedback Needed.

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
	Requirement – Specific Timeframe	pending PA to the health plan should be a minimum of seven business days.	Given 67% of respondents supported 2 or 3 business days, CAQH CORE Staff and Co-Chairs recommend both options be included on the next straw poll, should the Task Group choose to proceed with developing the New Provider Response Time Requirement #1.
3.	Section 3: New ‘Time Out’ Requirement – Specific Timeframe	One entity recommended adjusting the proposed New Time Out Requirement to state, “...within xx business days following the return of a pending 278 Response, when the finalized 278 Response is returned or made available for pick-up by the provider.”	<p>Adjust.</p> <p>CAQH CORE Staff recommends adjusting the current language to the following:</p> <p><i>“If a provider or its agent does not respond to a request for additional information/documentation from the health plan or its agent within XX business days following the return of a pending 278 Response, when the finalized 278 Response is returned or made available for pick-up by the provider receipt of the 5010217 278 request, the health plan can deny the prior authorization request.”</i></p>
4.	Section 3: New ‘Time Out’ Requirement – Specific Timeframe	One entity commented that the New ‘Time Out’ Requirement should not be included in the rule because providers have no incentive to delay the PA process and health plans generally already have internal processes to close out PAs after a certain period of non-response.	<p>Task Group Feedback Needed.</p> <p>Given the high level of Task Group respondents (more than 70%) in support of pursuing the proposed ‘Time Out’ Requirement, CAQH CORE Staff and Co-chairs recommend continuing to develop the requirement for consideration on the upcoming Straw Poll, where Task Group participants will have another opportunity to indicate their support or non-support for the proposed requirement.</p>
5.	Section 3: New ‘Time Out’ Requirement – Specific Timeframe	Four entities recommended timeframes for the New ‘Time Out’ Requirement that were not included in the options listed on the Straw Poll.	Given that 75% of respondents supported 15 or 30 business day as the time requirement for the New ‘Time Out’ Enhancement, CAQH CORE Staff and Co-chairs recommend including both options for

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#	Section/Question	Summary of Comments (Paraphrased, not verbatim)	CAQH CORE Response
		<p>Two of these entities commented that the provider timeframe to return all necessary information needed to complete a pending PA before the request is 'timed-out' and denied should be 10 business days because if the transactions are being conducted electronically, it is feasible for providers to submit a response within two work weeks.</p> <p>Similarly, one entity stated that the timeframe should be 15 calendar days because 15 business days is too long.</p> <p>Finally, one entity suggested that the timeframe should be a minimum of 90 business days.</p>	<p>the draft rule requirement under consideration on the upcoming Straw Poll. Task Group participants will have another opportunity to indicate their support or non-support for the proposed 'Time Out' Requirement timeframe and provide additional comments on the Straw Poll.</p>
Non-Substantive Comments			
1.	Section 3: New Provider Response Time Requirement	<p>Two entities expressed their support for the new Provider Response Time Requirement #1, as written.</p> <p>One entity stated their non-support, noting that their organization is completely dependent on outside factors when obtaining documentation.</p>	N/A
2.	Section 3: New 'Time Out' Requirement	<p>Six entities expressed support for the 'Time Out' Requirement, as written.</p> <p>One entity clarified that they already have a business process in place to meet the timeframe requirement of 15 business days.</p> <p>One entity explained that 45 business days should be enough time for a provider to complete a PA request for additional information.</p>	N/A

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5. Next Steps

- CAQH CORE Staff and Co-chairs will:
 - Implement adjustments to *DRAFT Phase IV CAQH CORE 278 Infrastructure Rule Update* based on Phase IV Task Group discussion and comments.
 - Send Straw Poll #2 and the *DRAFT Phase IV CAQH CORE 278 Infrastructure Rule Update* to Phase IV Task Group by **Monday 07/15/19**.
- CAQH CORE Phase IV Task Group participants will:
 - Complete CAQH CORE PIV TG Straw Poll #2 on the *DRAFT Phase IV CAQH CORE 278 Infrastructure Rule Update* by **Wednesday 07/24/19, end of day**.
 - Attend the final Phase IV Task Group call on **Wednesday 08/07/19, 2:30 – 4:00pm ET**.

For PIV TG Discussion Only

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Phase IV Response Time Task Group (PIV TG)
Straw Poll Results: *Draft Phase IV CAQH CORE 278 Infrastructure Rule Update***

6. Appendix

Appendix A: Percent Support, by Section and Question – Stakeholder Breakdown

Rule Section		"Y" (Support)	"N" (Non-Support)	Abstain #
Section 1: Questions on Scope – Applicable to All Potential Requirements				
1	In-Scope: 5010X217 278 Request/Response Transaction for Medical Services Exchanged Between Trading Partners	18 (95%)	1 (5%)	0
	Provider/Provider Association/Provider Vendor	6 (100%)	0 (0%)	0
	Health Plan/Health Plan Association/Health Plan Vendor	8 (100%)	0 (0%)	0
	Dual-Facing Vendor	2 (100%)	0 (0%)	0
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0
2	In-Scope: Prospective/Concurrent Reviews of PA Requests	16 (89%)	2 (11%)	1
	Provider/Provider Association/Provider Vendor	6 (100%)	0 (0%)	0
	Health Plan/Health Plan Association/Health Plan Vendor	7 (88%)	1 (12%)	0
	Dual-Facing Vendor	1 (100%)	0 (0%)	1
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0
3	In-Scope: Non-Emergent / Non-Urgent PA Requests for Medical Services	18 (95%)	1 (5%)	0
	Provider/Provider Association/Provider Vendor	6 (100%)	0 (0%)	0
	Health Plan/Health Plan Association/Health Plan Vendor	8 (100%)	0 (0%)	0
	Dual-Facing Vendor	2 (100%)	0 (0%)	0
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0
Section 2: Questions on Potential Draft Phase IV Health Plan Response Time Requirements				
4	Support Health Plan Response Time Requirement #1	15 (88%)	2 (12%)	2
	Provider/Provider Association/Provider Vendor	5 (100%)	0 (0%)	1
	Health Plan/Health Plan Association/Health Plan Vendor	6 (86%)	1 (12%)	1
	Dual-Facing Vendor	2 (100%)	0 (0%)	0
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0

**CAQH Committee on Operating Rules for Information Exchange (CORE)
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Rule Section		"Y" (Support)	"N" (Non-Support)	Abstain #
5	Support Adding Peer-Review Language to Health Plan Response Time Requirement #1	14 (82%)	3 (18%)	2
	Provider/Provider Association/Provider Vendor	5 (100%)	0 (0%)	1
	Health Plan/Health Plan Association/Health Plan Vendor	6 (86%)	1 (12%)	1
	Dual-Facing Vendor	1 (50%)	1 (50%)	0
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0
6	Support Health Plan Response Time Requirement #2	13 (87%)	2 (13%)	4
	Provider/Provider Association/Provider Vendor	4 (100%)	0 (0%)	2
	Health Plan/Health Plan Association/Health Plan Vendor	5 (83%)	1 (17%)	2
	Dual-Facing Vendor	2 (100%)	0 (0%)	0
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0
Section 3: Questions on Potential Draft Phase IV Provider Response Time Requirements				
7	Support Provider Response Time Requirement #1	12 (80%)	3 (20%)	4
	Provider/Provider Association/Provider Vendor	3 (60%)	2 (40%)	1
	Health Plan/Health Plan Association/Health Plan Vendor	6 (100%)	0 (0%)	2
	Dual-Facing Vendor	1 (50%)	1 (50%)	0
	Government	1 (100%)	0 (0%)	1
	Other	1 (100%)	0 (0%)	0
8	Support Provider 'Time Out' Requirement	13 (72%)	5 (28%)	1
	Provider/Provider Association/Provider Vendor	2 (33%)	4 (67%)	0
	Health Plan/Health Plan Association/Health Plan Vendor	8 (100%)	0 (0%)	0
	Dual-Facing Vendor	1 (100%)	0 (0%)	1
	Government	1 (50%)	1 (50%)	0
	Other	1 (100%)	0 (0%)	0