

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

Table of Contents

1. Overview	2
1.1 <i>Review Work Group Background</i>	2
1.2 <i>Ballot Purpose & Overview</i>	2
2. Review Work Group Ballot Result	3
2.1 <i>Table 1: Summary of Respondents, by Stakeholder Breakdown</i>	3
2.2 <i>Table 2: Summary of Responses on the RWG Ballot</i>	4
2.3 <i>Table 3: Summary of Responses on the Draft CAQH CORE Attachments (275/278) Prior Authorization Rule Package, by Stakeholder Type</i>	4
2.4 <i>Table 4: Summary of Responses on the Draft CAQH CORE Attachments (275/837) Health Care Claims Rule Package, by Stakeholder Type</i>	5
2.5 <i>Table 5: Summary of Responses on the Draft CAQH CORE Eligibility & Benefits Data Content Rule Update, by Stakeholder Type</i>	5
2.6 <i>Table 6: Summary of Responses on the Updates to CAQH CORE Infrastructure Operating Rules – System Availability, by Stakeholder Type</i>	6
3. Summary of Comments Received from RWG Ballot	7
3.1 <i>Table 7: Non-Substantive Comments Received on Draft CAQH CORE Attachments Operating Rule Package</i>	8
3.2 <i>Table 9: Non-Substantive Comments Received on Draft CAQH CORE Eligibility & Benefits Data Content Rule Update</i>	11
3.3 <i>Table 10: Non - Substantive Comments Received on Updates to CAQH CORE Infrastructure Operating Rule Requirements – System Availability</i>	13

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

1. Overview

1.1 Review Work Group Background

The Review Work Group (RWG) launched in August 2021 to review, refine, and approve *Draft CAQH CORE Attachments Operating Rules* for prior authorization and claims, updated *CAQH CORE Eligibility & Benefits Data Content Rule*, and identify areas of support to update the existing *CAQH CORE Infrastructure Operating Rules*.

The RWG completed two straw polls that measured the level of support for each of the four items being balloted. The straw polls provided insight into the RWG Participating Organizations' level of support and informed the refinement of each rule, rule requirement, and test scenario under consideration. Adjustments were made in accordance with the RWG straw poll findings and discussions.

The official RWG Ballot was sent to the RWG on 11/22/21 and closed 12/17/21. Results were sent to the RWG via email on 12/28/21. This document contains the results of the Ballot, as well as a summary of the comments submitted by responding organizations.

1.2 Ballot Purpose & Overview

The purpose of the RWG Ballot was to allow each RWG Participating Organization to indicate whether they support the draft rule requirements being balloted. The draft items under consideration are listed in the order they appeared on the ballot:

- 1. NEW: Draft CAQH CORE Attachments (275/278) Prior Authorization Rule Package**
 - *Draft CAQH CORE Attachments (275/278) Prior Authorization Infrastructure Rule*
 - *Draft CAQH CORE Attachments (275/278) Prior Authorization Data Content Rule*
 - *Draft CAQH CORE Attachments (275/278) Prior Authorization Certification Test Scenarios*
- 2. NEW: Draft CAQH CORE Attachments (275/837) Health Care Claims Rule Package**
 - *Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule*
 - *Draft CAQH CORE Attachments (275/837) Health Care Claims Data Content Rule*
 - *Draft CAQH CORE Attachments (275/837) Health Care Claims Certification Test Scenarios*
- 3. UPDATED: Draft CAQH CORE Eligibility & Benefits Data Content Rule**
- 4. UPDATED: CAQH CORE Infrastructure Operating Rule Requirements – System Availability**

CAQH CORE RWG approval is required before the Final CAQH CORE Vote. Since each of the items under consideration met the required quorum and approval levels (See Tables 1 and 2 below), the results of the RWG Ballot are being shared with RWG Participating Organizations via email now that the RWG Ballot submission period is closed.

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

2. Review Work Group Ballot Result

Per the [CAQH CORE Voting Process](#), the following must occur at the Work Group level for approval of a new or updated Draft CAQH CORE Operating Rule and associated CORE Certification Test Scenarios.

1. **Quorum Required for Ballot:** 60% of the Work Group
2. **Approval Required for Ballot:** Simple majority vote (50%)

2.1 Table 1: Summary of Respondents, by Stakeholder Breakdown

The Ballot received feedback from **75%** of RWG participating organizations, comprising 33 unique organizations, meeting the required quorum.

Number of RWG Participating Entities	44
Total Number of Individual Responses	33 (75% of RWG Entities)
Number of Provider / Provider Association Responses	6 (18% of respondents)
Number of Health Plan / Health Plan Association Responses	12 (36% of respondents)
Number of Vendor / Clearinghouse Responses	7 (22% of respondents)
Number of Government Responses	2 (6% of respondents)
'Other' (includes SDOs) Responses	6 (18% of respondents)

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

2.2 Table 2: Summary of Responses on the RWG Ballot

The Draft CAQH CORE Attachments (275/278) Prior Authorization Rule Package, Draft CAQH CORE Attachments (275/837) Health Care Claims Rule Package, Draft CAQH CORE Eligibility & Benefits Data Content Rule Update, and Updated CAQH CORE Infrastructure Operating Rule Requirements – System Availability were approved, as all items received greater than the 50% necessary support.

	Support (%)	Do Not Support (%)	Abstain
1. Draft CAQH CORE Attachments (275/278) Prior Authorization Rule Package	24 (86%)	4 (14%)	5
2. Draft CAQH CORE Attachments (275/837) Health Care Claims Rule Package	24 (83%)	5 (17%)	4
3. Draft CAQH CORE Eligibility & Benefits Data Content Rule Update	27 (87%)	4 (13%)	2
4. Updates to CAQH CORE Infrastructure Operating Rules – System Availability	25 (83%)	5 (17%)	3

NOTE: Abstentions are not included in the percentage calculations for Support/Do Not Support

2.3 Table 3: Summary of Responses on the Draft CAQH CORE Attachments (275/278) Prior Authorization Rule Package, by Stakeholder Type

	Provider/ Provider Association	Health Plan/ Health Plan Association	Vendor/ Clearinghouse	Government	Other
Number of “Support” Responses (%)	5 (100%)	9 (82%)	6 (86%)	0 (0%)	4 (100%)
Number of “Do Not Support” Responses (%)	0 (0%)	2 (18%)	1 (14%)	1 (100%)	0 (0%)
Number of “Abstain” Responses	1	1	0	1	2
Total Number of Responses	6	12	7	2	6

NOTE: Abstentions are not included in the percentage calculations for Support/Do Not Support

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

2.4 Table 4: Summary of Responses on the Draft CAQH CORE Attachments (275/837) Health Care Claims Rule Package, by Stakeholder Type

	Provider/ Provider Association	Health Plan/Health Plan Association	Vendor/ Clearinghouse	Government	Other
Number of “Support” Responses (%)	5 (100%)	9 (75%)	6 (86%)	1 (100%)	3 (75%)
Number of “Do Not Support” Responses (%)	0 (0%)	3 (25%)	1 (14%)	0 (0%)	1 (25%)
Number of “Abstain” Responses	1	0	0	1	2
Total Number of Responses	6	12	7	2	6

NOTE: Abstentions are not included in the percentage calculations for Support/Do Not Support

2.5 Table 5: Summary of Responses on the Draft CAQH CORE Eligibility & Benefits Data Content Rule Update, by Stakeholder Type

	Provider/Provider Association	Health Plan/Health Plan Association	Vendor/ Clearinghouse	Government	Other
Number of “Support” Responses (%)	6 (100%)	9 (75%)	7 (100%)	1 (50%)	4 (100%)
Number of “Do Not Support” Responses (%)	0 (0%)	3 (25%)	0 (0%)	1 (50%)	0 (0%)
Number of “Abstain” Responses	0	0	0	0	2
Total Number of Responses	6	12	7	2	6

NOTE: Abstentions are not included in the percentage calculations for Support/Do Not Support

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

2.6 Table 6: Summary of Responses on the Updates to CAQH CORE Infrastructure Operating Rules – System Availability, by Stakeholder Type

	Provider/Provider Association	Health Plan/Health Plan Association	Vendor/Clearinghouse	Government	Other
Number of “Support” Responses (%)	6 (100%)	9 (75%)	6 (86%)	2 (100%)	2 (67%)
Number of “Do Not Support” Responses (%)	0 (0%)	3 (25%)	1 (14%)	0 (0%)	1 (33%)
Number of “Abstain” Responses	0	0	0	0	3
Total Number of Responses	6	12	7	2	6

NOTE: Abstentions are not included in the percentage calculations for Support/Do Not Support

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

3. Summary of Comments Received from RWG Ballot

The following tables contain all RWG Ballot comments received for the items under consideration, presented by Section or Subsection. **Table 7** contains comments received for *Draft CAQH CORE Attachments Operating Rule Packages*, **Table 8** contains comments received for *Draft CAQH CORE Eligibility & Benefit Data Content Rule Update*, and **Table 9** contains comments received for updates to the *CAQH CORE Infrastructure Operating Rules – System Availability Requirements*.

Classification of Comments

- **Substantive Comments** – Comments from organizations that are not in support of specific rule requirements, and that are requesting major substantive adjustments. **NOTE:** There were no substantive comments submitted.
- **Points of Clarification** – Pertain to areas where more education is required. **NOTE:** There were no point of clarification comments submitted. Additionally, FAQs for each of the items balloted will be written and available on the CAQH CORE website to assist with implementation following approval at the Final CAQH CORE Vote. Additionally, CAQH CORE Participants may contact CAQH CORE staff with immediate questions.
- **Non-substantive Comments** – Pertain to typographical/grammatical errors, wordsmithing, clarifying language, addition of references; do not impact rule requirements.

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

3.1 Table 7: Non-Substantive Comments Received on the *Draft CAQH CORE Attachments Operating Rule Package*

Table 7 summarizes non-substantive comments submitted by RWG Ballot respondents pertaining to the *Draft CAQH CORE Attachments Operating Rules* with RWG co-chair and staff response, when applicable.

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
Comments Received on the Draft CAQH CORE Attachments (275/278) Prior Authorization Infrastructure Rule			
1.	All Sections	One entity provided comments pertaining to the CAQH CORE Prior Authorization & Referrals (278) Infrastructure Rule vPA3.0 . They stated that 48 hours is too short a period to perform manual prior authorization reviews and that requiring a response by 7:00am ET the second business day does not conform to the 48-hour response time requirement.	N/A
2.	All Sections; All Attachments Rules	One entity explained that their organization does not support electronic attachments. NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule.	N/A
3.	All Sections; All Attachments Rules	One entity explained that they do not support the draft attachments rules because there is not a HIPAA adopted transaction for electronic attachments. NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule.	N/A
4.	All Sections; All Attachments Rules	One entity commented that their organization supports current and new attachment 275/278 standards. NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule.	N/A

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
5.	All Sections; All Attachments Rules	<p>One entity stated that “Operating Rules” should be specific transactions named and adopted in regulation and that they do not support the term “Operating Rules” for transactions that are not mandated under regulation.</p> <p>They explained that the Federal Unified Agenda indicated that an attachment NPRM is slated for January 2022 and their organization will only vote to support Operating Rules once attachment standards are named and adopted. Any rules considered ahead of regulation would need to be modified to align with final rule regulation.</p>	<p>Do not Adjust. CAQH CORE Staff continues to monitor industry progress to establish an attachments standard and has a detailed maintenance process to update CAQH CORE Operating Rules when new versions and standards are made available, and these draft rules would be updated, as necessary.</p> <p>In the interim, CAQH CORE is responsible for engaging the healthcare industry in developing consistent business processes for patients, providers, and health plans to streamline the business of healthcare. In anticipation of an attachments NPRM and in its designation as the HHS Operating Rule Author, CAQH CORE plans to honor its commitment by producing guidance materials, educational content, and implementable operating rules to move the needle of industry adoption of electronic attachments.</p>
6.	2.1 Problem Space	<p>One entity suggested adding language to state the delays in exchanging attachments lead to care delays, specifically for prior authorizations.</p>	<p>Agree. Adjust for clarity.</p>
7.	2.2 Business Justification & Focus of Rule	<p>One entity asked what was meant by ‘Applies to Attachments Sent without the X12 v6020X316 275’.</p> <p>NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule.</p>	<p>Do not Adjust. Attachments sent without the X12 v6020X316 275 are attachments sent using via API, FHIR, PDF, etc. This is further clarified in Section 3 of the draft rule.</p>
8.	4.3 System Availability	<p>Two entities commented on the update to the System Availability requirements.</p> <ul style="list-style-type: none"> - One of these stated that a roadmap to establish requirements for greater than 95% system availability should be developed. - Another noted that they do not support the increased system downtime, explaining that it does not impact providers and they haven’t received complaints. NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule. 	<p>Do not adjust.</p>

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
9.	4.6 File Size	One entity recommended implementing a maximum file size requirement in addition to a minimum. NOTE: This comment also was received for the Draft CAQH CORE Attachments (275/837) Health Care Claims Infrastructure Rule.	Do not adjust. The Draft CAQH CORE Attachments Operating Rules – File Size Requirement establishes a floor, not a ceiling, in terms of what entities must support. While entities are required to be able to accept up to 64MB, they may accept larger file sizes.
Comments Received on the Draft Attachments (275/278) Prior Authorization Data Content Rule			
10.	4.1 & 5.1 Reassociation Requirements	One entity recommended adjusting the section title to 'Requirements to Support Reassociation'.	Agree. Adjust for clarity. This change will also be made in the Draft CAQH CORE Attachments (275/837) Health Care Claims Data Content Rule for consistency.
11.	4.1.2 Requesting Electronic Submission of an X12 275 Attachment	One entity suggested adding language to clarify that the rule does not mean health plans may require that additional documentation must be submitted electronically but requires health plans to electronically notify providers that additional documentation is needed.	Do not adjust. Section 3 Scope states that providers are not required to return an X12 275 transaction.
12.	6.1 Appendix	One entity recommended removing the data element numbers from Table 6.1 X12 TR3 Data Element and Reference Identification Mapping (e.g., PWK06 "66") as they are extraneous.	Agree. Adjust for clarity.
Comments Received on the Draft Attachments (275/837) Health Care Claims Infrastructure Rule			
13.	Ballot Format	One entity noted a typo on the RWG Ballot.	Agree. Adjusted for clarity prior to Ballot close.
17.	All Sections	One entity asked that CAQH CORE reopen consideration of the attachments rules in the event that an attachment standard is named.	N/A
20.	4.6 File Size	One entity noted that footnote 11 and Section 4.6.3 Use of Multiple LX Loops on an X12 275 Transaction when Sending Multiple Attachments for a Single Claim are contradictory. They explained that Section 4.6.3 requires the receiver to accept multiple LX Loops per X12 275 for one claim submissions and each loop can contain up to 64MB of data. The footnote explains that receivers are not required to accept more than 64MB per X12 275.	Do not adjust. Section 4.6.1 and footnote 11 explain that the 64MB maximum applies to the entire content of the BDS segment of the X12 v6020 275 transaction. Section 4.6.3 states that receivers must be able to accept multiple attachments in the X12 v6020 275 transaction. However, they do not need to be able to support greater than the 64MB maximum for the transaction, despite the number of attachments sent. CAQH CORE will include an FAQ on this topic for additional industry education.
Comments Received on the Draft Attachments (275/837) Health Care Claims Data Content Rule			
21.	2.2 Business Justification & Focus of Rule	One entity noted that line 111 is missing the reference to the PWK02 data elements for 'Code EL'.	Agree. Adjust for clarity.

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
22.	4.1.1.1 Common Reference Data Used to Reassociate a 275 with a Claim	One entity recommended removing 'Claim #' from the list of common reference data used to reassociate X12 275 attachments with X12 837 Claims submissions. They explained that it places an undue burden on the provider and will lead to lower percentages of attachments being submitted electronically and a higher denial rate on claims.	Do not adjust. The list of common reference data is neither exhaustive nor prohibitive. Providers are not required to submit claim # information.
23.	6.1 Appendix	One entity commented that 'Patient Control ID' is a field included in the 275 and in the 277RFI named 'Providers Assigned Claim Identifier' but the table states that it is N/A.	Do not adjust.

3.2 Table 8: Non-substantive Comments Received on Draft CAQH CORE Eligibility & Benefits Data Content Rule

Table 8 summarizes non-substantive comments submitted by RWG Ballot respondents pertaining to *Draft CAQH CORE Eligibility & Benefits Data Content Rule Update* and RWG co-chair and staff response, when applicable.

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
1.	1.2 Scope	One entity suggested that the definition for 'Authorization/Certification' be consistent with other industry definitions.	Do not adjust. Given 87% of RWG Participants supported the Draft CAQH CORE Eligibility & Benefits Data Content Rule, as written, RWG Co-chairs and CORE Staff do not recommend adjusting the definition for 'Authorization/Certification'.
2.	1.2 Scope	One entity noted that they support current and new 270/271 standards.	N/A
3.	1.3 Service Type Codes	One entity commented on their non-support for the draft rule updates because they do not support reporting tier information when an eligibility may be done for multiple providers and because using the inquiring provider information may be inaccurate for other providers.	Do not adjust. Given 87% of RWG Participants supported the Draft CAQH CORE Eligibility & Benefits Data Content Rule, as written, RWG Co-chairs and CORE Staff do not recommend adjusting requirements for specifying maximum and remaining coverage benefits for the 10 CORE-required remaining coverage benefit service types. Additionally, EBTG Participants engaged in consensus-building via calls, feedback forms, and straw polls and received high levels of support to align this rule requirement at the Service Type Code level.
4.	1.3 Service Type Codes	One entity noted that they would not be able to get to the granular level for all STCs that are required for Certification/Authorization.	N/A
5.	1.3 Service Type Codes	One entity suggested that Line 358 had a mistake, and it should be "an EB" instead of "as EB."	Agree. Adjust for clarity.

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

6.	1.4 Procedure Codes	Two entities commented that 'Surgery' is too generic for a procedure category and recommended listing specific surgery procedure codes.	<p>Do not adjust. Given 87% of RWG Participants supported the Draft CAQH CORE Eligibility & Benefits Data Content Rule, as written, RWG Co-chairs and CORE Staff do not recommend adjusting the Service Categories required to be supported.</p> <p>Additionally, the Eligibility & Benefit Task Group (EBTG) Participants engaged in consensus-building via calls, feedback forms, and straw polls and received high levels of support to include this limited set of categories of service that health plans should be required to return coverage and benefit information on an X12 v5010 271 Response when a procedure code is received on v5010 270 Inquiry. As a reminder, these requirements are not mandated under HIPAA.</p>
7.	1.4 Procedure Codes	One entity commented that some STCs are diagnoses, not categories. They also noted that other STCs are too vague, which will require significant dialogue between the payer, provider, and member.	<p>Do not adjust. EBTG Participants engaged in consensus-building via calls, feedback forms, and straw polls and received high levels of support for the include this limited set of categories of service that health plans should be required to return coverage and benefit information on an X12 v5010 271 Response when a procedure code is received on v5010 270 Inquiry. As a reminder, these requirements are not mandated under HIPAA.</p>
8.	1.4 Procedure Codes	One entity explained their non-support for §1.4.2.3, stating that procedure codes alone do not provide sufficient information for the payer to return accurate information. They also noted that their system requires Procedure, Modifier, and Diagnosis Codes to determine coverage, claim payment, and prior authorization so a Procedure Code is not sufficient to supply enough information for a health plan to respond. Finally, they stated that their organization would need to implement a new system to align coverage, utilization, next available, and remaining benefits using Procedure Codes.	N/A
9.	1.4 Procedure Codes	One entity said their organization does not support returning Procedure Codes on an X12 271 Response.	N/A
10.	1.5 Tiered Benefits	One entity noted that basic provider network status is highly relevant to multiple areas of the rule, and they strongly encourage CORE to pursue rule requirements to ensure payers include whether a provider is in- or out-of-network in the X12 271 Response.	N/A
11.	1.5 Tiered Benefits	One entity explained that their organization does not have the capability of identifying 'Provider Tier'.	N/A

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Review Work Group (RWG)
RWG Ballot Results**

3.3 Table 10: Non - Substantive Comments Received on Updates to CAQH CORE Infrastructure Operating Rule Requirements – System Availability

Table 10 summarizes non-substantive comments submitted by RWG Ballot respondents pertaining to *Updates to CAQH CORE Infrastructure Operating Rule Requirements – System Availability* and RWG co-chair and staff response, when applicable.

#	Section	Summary of Comment(s)	RWG Co-Chair and CAQH CORE Staff Response
1.	System Availability Requirements	One entity recommended waiting to update the system availability requirements until X12 v80-- to make any adjustments to the system availability requirements.	Do not adjust. The intent of the CAQH CORE Infrastructure Rule Update is to align requirements to evolving business needs and technology that may have matured in the years since initial development of the requirements. Additionally, CAQH CORE has a detailed maintenance process to update CAQH CORE Operating Rules when new versions and standards are made available and when HHS designates them for mandate. CAQH CORE plans to consider updates to the CAQH CORE Infrastructure Rules on a regular basis to continue to ensure alignment with technological advancements in the industry.
2.	System Availability Requirements	One entity commented that it would be difficult to meet a system availability requirement of 90%, even with the additional quarterly downtime, because of the interconnectedness of systems. They suggested separate response time requirements for Batch and Real Time because in the Batch scenario, the endpoint can be up to accept an X12 278 while all downstream systems are down and still meet an increased response time requirement without negatively affecting the provider.	Do not adjust. CAQH CORE plans to consider updates to the CAQH CORE Infrastructure Rules on a regular basis moving forward and recommend this suggestion be researched and considered during the next infrastructure requirement update review period. CAQH CORE will conduct an environmental scan to obtain additional data to share for future work group review.
3.	System Availability Requirements	Two entities noted that an increase in system availability is a burden on payers. <ul style="list-style-type: none"> - One of these further explained that none of their providers have complained about their current levels of downtime. 	N/A
4.	System Availability Requirements	One respondent supported the proposed increase in system availability and commented that a roadmap to 99% system availability would be helpful.	N/A
5.	System Availability Requirements	One entity expressed their support for current and new system availability requirements for each transaction.	N/A