



CAQH CORE and X12 Webinar Series

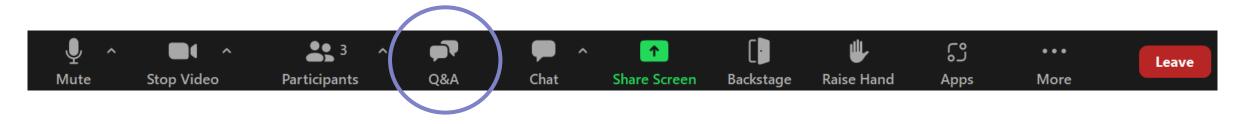
Dive into the X12 835 Transaction & Operating Rules

June 27, 2024

Bob Bowman, CAQH Michelle Barry, Availity Pat Wijtyk, X12

Webinar Logistics

- Today's session is being recorded.
 - All attendees and registrants will receive a link to the recording after the webinar.
- Your microphones will be muted during the webinar.
- Throughout the session, you may communicate a question via the panel at the bottom of your screen:





Agenda

- X12 Overview
- CORE Overview
- Discussion
 - 835 and EFT Enrollment
 - Provider Level Adjustments Referring to Claims
 - Transaction Balancing
 - 835 and EFT Reassociation
 - Use of CARCs and RARCs Not in a Business Scenario
 - Accessing X12 Guides
 - X12 Resources and Tools
- Questions
- Call to Action



Thank You to Our Speakers

Michelle Barry

Director

Availity

Pat Wijtyk

Team Manager

Cognizant

Bob Bowman

Principal, Interoperability and Standards

CAQH CORE





DISCLAIMER

- → This presentation is for informational purposes only
- \rightarrow The content is point-in-time information, subject to revision
- → If you have questions regarding specific information shared during this presentation, please send them to info@x12.org
- → Visit <u>www.x12.org</u> for additional details about X12



X12 MISSION

X12 is an ANSI-accredited, consensus-based, non-profit organization focusing on the development, implementation, and ongoing use of interoperable electronic data interchange standards

X12 GOALS

- → Be a developer of stable and trusted products that support effective data exchange
- → Be open-minded with vision and insight related to exchanging transactions in both current and developing technologies
- → Be an enthusiastic collaborator with industry groups, government entities, and businesses
- → Maintain a financial model that distributes costs and ensures the fiscal health of the organization



CORE Overview

Bob Bowman Principal, Interoperability and Standards

CORE: Who We Are

Committee on Operating Rules for Information Exchange

FEDERALLY DESIGNATED BY HHS*

opportunity by switching to fully automated transactions

CORE is a trusted and independent operating rule author. In addition to mandated operating rules, CORE offers operating rule sets for voluntary adoption.

CORE Operating

Rules Mandated

Under HIPAA

*Department of Health and Human Services

REDUCING BURDEN

\$18.3B **Cost savings**

The 2023 CAQH Index® estimated that 22% of money spent on administrative transactions could be saved by fulling transitioning to electronic transactions. CORE Operating Rules help facilitate and streamline electronic adoption.

ENSURING REPRESENTATION

> 100+ Multistakeholder **Participating Organizations**

From small provider organizations, to national health plans, CORE has the unique ability to bring diverse industry stakeholders to the table to tackle complex administrative problems together.



CORE Operating Rules Support Key Revenue Cycle Functions

ACA Operating Rule Definition: The "necessary business rules and guidelines for the electronic exchange of information that are not defined by a standard or its implementation specifications."



Eligibility & Benefits*

Attributed Patient Roster

Prior Authorization & Referrals

Health Care Claims

Claim Status*

*Rule Set Contains Federally Mandated Operating Rules

Payment & Remittance*

Benefit Enrollment

Premium Payment





Discussion

835 and EFT Enrollment



Provide Level Adjustments Referring to Claims



Transaction Balancing



835 and EFT Reassociation



Use of CARCs and RARCs Not in a Business Scenario



Accessing X12 Guides

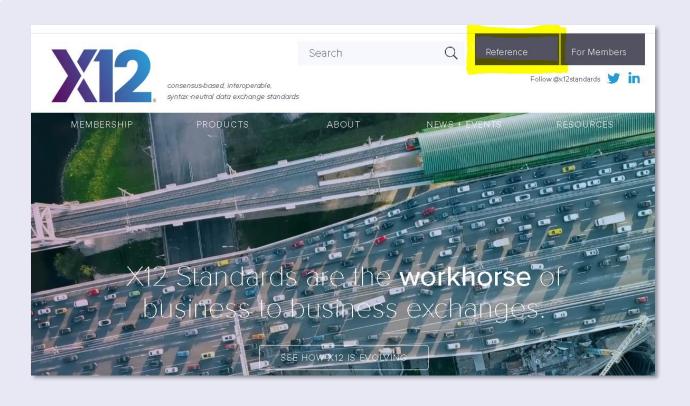


X12 Resources and Tools



X12 / CAQH CORE / April 8, 2021

X12.ORG CODE LISTS







Questions



Call to Action

Call to Action

E-mail CORE@CAQH.ORG to Get Involved!



Become a CORE Participant

Collaborate with decision makers that comprise 75% of the industry to drive creation of operating rules and accelerate interoperability.



Become CORE Certified

Demonstrate conformance and commitment to streamlining administrative data exchange.



Be an Advocate

Work with CORE to measure the impact of operating rules and corresponding standards on organizations' efficiency metrics.



WHAT CAN YOU DO

- → Become an X12 Member
- → Participate in X12 Standing Meetings
- → <u>Submit requests</u> for functionality your organization needs



X12 IS LISTENING

- → X12 is being more intentional about collecting input and feedback
- → Frequent surveys are issued to members, members and non-members, non-members, implementers, or other combinations of stakeholders
- → Utilize a permanent online feedback form, making it easy for anyone to provide X12 with ideas or comments: X12.org/feedback

Thank you for joining us, reach out to learn more!





SUPPORT@X12.ORG





Appendix

Infrastructure Operating Rules Definition and Overview



Infrastructure Operating Rules

Infrastructure rules apply across transactions – establishing basic expectations on how the US data exchange "system" works; e.g., ability to track response times across all trading partners.

Note: Infrastructure rules can be used with any version of a standard.



Rule Requirements

Each set of CAQH CORE Operating Rules includes an infrastructure rule with requirements including processing mode, response time, system availability, connectivity, acknowledgements, and companion guides, by transaction.





Infrastructure Rules:

CORE Payment & Remittance (835) Infrastructure Rule CORE EFT/ERA (CCD+/835) Reassociation Rules CORE EFT/ERA Data Enrollment Rules

Bob Bowman Principal, Interoperability and Standards

Payment & Remittance Infrastructure Operating Rules



CORE Payment & Remittance (835) Infrastructure Rule	CORE EFT/ERA (CCD+/835) Reassociation Rules	CORE EFT/ERA Data Enrollment Rules
 Includes CORE Master Companion Guide Requires use of CORE Connectivity Details batch acknowledgment requirements 	 Ensure provider receipt of CORE-required minimum ACH CCD+ Data Elements required for EFT and ERA reassociation as well as elapsed time between sending and receipt. Determines requirements for resolving late/missing EFT/ERA transactions 	 Identifies a maximum set of standard data elements for EFT enrollment Requires health plan to offer electronic EFT enrollment Requires providers to specify preference for how payments should be made

CORE Payment & Remittance Operating Rules are federally mandated, except for rule requirements pertaining to Acknowledgements.



CORE EFT & ERA Enrollment Data Rules

2024 Updated Rule Requirements

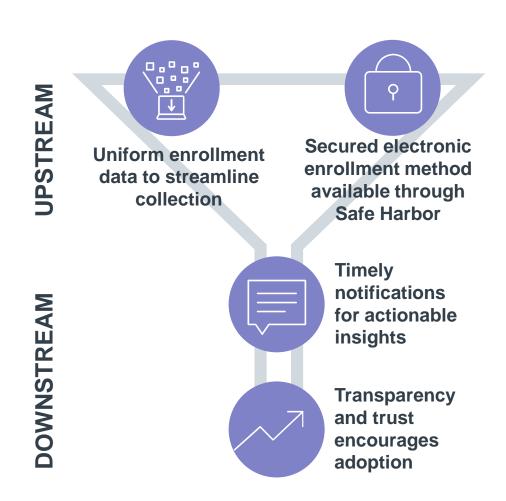
Data Set Enhancements:

• Externalization of enrollment data sets for flexibility and alignment with current and emerging business needs.

Updated Rule Requirements:

- Support for bulk enrollment.
- Addition of fraud detection measures to safeguard enrollment data.
- Establishes notification and timeframe requirements.
- Requires disclosure of applicable EFT fees.
- Provision of opt-in/out instructions for alternative payments.

Updated requirements are not currently mandated, however they are available for voluntary adoption.







Data Content Rules:

CORE Payment & Remittance Uniform Use of CARCs and RARCs (835) Rule

Bob Bowman Principal, Interoperability and Standards

CORE Payment & Remittance Uniform Use of CARCs and RARCs (835) Rule

The CORE Payment & Remittance Uniform Use of CARCs & RARCs (835) Rule includes a maximum set of code combinations to be used for high-volume Business Scenarios.

Created four COREdefined Business Scenarios, which represent some of the most confusing and highvolume scenarios that are exchanged between health plans and providers. Defined the maximum set of CORE-required Code Combinations for the four CORE-defined Business Scenarios based on extensive data. Established maintenance process which requires the list of CORE-required Code Combinations to be revisited at least three times annually.

CORE Payment & Remittance Operating Rules are federally mandated, except for rule requirements pertaining to Acknowledgements.



CORE Code Combinations Maintenance

Code Combinations Task Group

Compliance-based Reviews

Occur 3x per year.

Include only adjustments to align updates to published code lists.

The Summer Compliance-based Review Cycle is launching the **week of July 15**

Market-based Reviews

Occur every other year.

Consider only adjustments to address evolving industry business needs. HIPAA-covered entities submit potential adjustments for Task Group consideration.

CORE will launch its annual MBR the <u>week of</u>
<u>August 26</u>

The **CORE Code Combinations Task Group**, responsible for maintaining the CORE-required Code Combinations, is open to all CORE Participants. Individuals with knowledge of the related business process and workflow of the usage of the CARCs and RARCs are encouraged to join.

