

The National Committee on Vital and Health Statistics The Public Advisory Body to the Secretary of Health and Human Services





Sub-Committee on Standards NCVHS Meeting Materials – June, 2016

OUTLINE

- Operating Rules
- CAQH CORE Process
- Currently Adopted Operating Rules
- Proposed Operating Rules

What are Operating Rules?

- A 'fourth' level of standardization of health care administrative transactions (Standards – Code Sets – Identifiers – Operating Rules)
- ORs are, in essence, Business Rules that supplement the other standards, and that define business elements in the execution of the administrative transactions
- > There are generally two types of Operating Rules
 - Infrastructure' Operating Rules: for example, system availability, response times
 - Business Process Operating Rules: for example, response actions based on specified situations

Section 1104 of the Patient Protection and Affordable Care Act (ACA) requires the Secretary of DHHS to

- Adopt operating rules for the electronic exchange and use of health information for financial and administrative transactions.
- > Appoint a nonprofit entity to develop the operating rules

Section 1173(g)(2) of the Act requires the ORAE to:

- > Focus on administrative simplification.
- Demonstrate a multi-stakeholder & consensus-based process for developing operating rules.
- Have a public set of guiding principles that ensure the operating rules and process are open and transparent.
- Build on the HIPAA transaction standards.
- > Allow for public review & updates of its operating rules.

The Council for Affordable Quality Healthcare's (CAQH) Committee on Operating Rules for Information Exchange (CORE) met the specified requirements and NCVHS recommended that it be the ORAE.

CAQH CORE Participants Vet Operating Rules:

- Subgroups Gather Information for Draft Rule Language/Requirements
- Work Group of Experts Approval
- Full CAQH CORE Voting Membership Approval
- CAQH CORE Board Approval

Current Adopted Operating Rules

- Health Plan Eligibility/Benefit Inquiry/Response
- Claim Status
- Electronic Remittance Advice
- Electronic Fund Transfer
- **Proposed Operating Rules**
- Health Plan Enrollment/Disenrollment
- Premium Payment
- Prior Authorization
- Health Care Claim or Equivalent Encounter Information

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