



CAQH CORE Operating Rule: Connectivity NCVHS Subcommittee on Standards Hearing August 26, 2020

Robert Tennant
Director, HIT Policy
Medical Group Management Association



- MGMA is the premier association for professionals who lead medical practices.
- With a membership of more than 58,000 medical practice administrators, executives, and leaders, MGMA represents more than 12,500 organizations of all sizes, types, structures, and specialties that deliver almost half of the healthcare in the United States.

Connectivity Rule

MGMA®

Moving to a New Connectivity Rule: The Value Proposition

- CAQH CORE is proposing a new Connectivity Rule for the HIPAA-mandated 270/271, 276, 835, and 278 transactions.
- With the existing CORE Connectivity Rules federally mandated in 2013, the industry has largely and successfully implemented connectivity rules.
- Building off existing infrastructure for real time and batch processing in place for the 270/271, 276, and 835 transactions, implementation of the 278 rule will be streamlined.

Connectivity Rule: Positives

Benefits of updating the federally mandated connectivity requirements from vC1.1.0 and vC2.2.0:

- **Enhanced Interoperability and Efficiency:** By defining technical requirements for the exchange of the transactions between trading partners so entities can be assured of a common connectivity method—creating a safe harbor.
- **Enhanced Security:** Requires use of updated security protocols.
- **Improved Messaging and Error Reporting:** Enhances the communication of errors with updated error codes.
- **Improved Commonality:** Mandating an updated version could assist in ensuring a common connectivity method for the exchange of the 270/271, 276, 835, and 278 transactions-reducing the need to support multiple connectivity methods.

Connectivity Rule: Implementation

- Practices themselves will likely not be required to implement the technical portions of this Rule.
- Practices will be heavily dependent on their EHR and PM vendors to implement new system functionalities required to support system changes to optimize organization data/information integration.
- We expect some challenges to overcome from smaller EHR vendors and other trading partners related to implementing the proposed operating rules.

Connectivity Rule: Should it be Delayed?

- CAQH CORE is currently working on an updated set of Connectivity operating rules with the potential of completion by the end of 2020.
- If feasible, and if it does not result in a significant delay in a federal mandate for the other operating rules, we recommend NCVHS explore waiting until CAQH CORE finalizes and approves this new version before including it in a set of federal mandates.

Connectivity Rule: Implementation Timeframe

- All covered entities, regardless of their size or type, should be given 24 months to comply with this federal mandate-the same amount of time provided covered entities for implementing the operating rules for the 270/271, 276, 835, and EFT transactions.

Summary

- MGMA is supportive of federally mandating an updated connectivity rule. We believe adoption of an updated connectivity operating rule will improve the security and functionality of current electronic transactions environment.
- Development of a revised Connectivity version is currently underway at CORE. We Updating the CAQH CORE Connectivity Rule to this updated version, if feasible, will further improve security and simplify interoperability across administrative transactions.



Thank You!

MGMA®