

CAQH Committee on Operating Rules for Information Exchange (CORE)

User Quick Start Guide

For the

Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System



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INTRODUCTION

This Guide is to be used in connection with Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System. It is meant to serve as an instruction document for the design and general utility of this system and is not a step-by-step CAQH CORE CERTIFICATION guide.

The Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification System is used by entities seeking infrastructure-based Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification for the Health Care Claim (837- Institutional/Professional/Dental), Request for Review and Response/Prior Authorization (278), Benefit Enrollment & Maintenance (834) and Premium Payment (820) transactions respectively.

Section I – CAQH CORE Self-Registration Walkthrough

Prior to beginning certification testing with the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System, a CAQH CORE Stakeholder should:

1. Visit the [Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals](#) CAQH CORE Operating Rule webpages
 2. Review the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Infrastructure Rules, CAQH CORE Pledge, HIPAA Attestation Form, and the Seal Application.
 3. Review the [Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Policies](#) and the [Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals](#) CAQH CORE Certification Test Suites
 4. Become familiar with the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Step-By-Step Process available [here](#).
 5. Sign and Submit the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge (or CORE Recertification Seal Application Form if Recertifying). Completing this step is not required in order to begin testing, but is required in order to receive certification. See the subsection below entitled, “CAQH CORE Pledge Date, What and How?” for more information on the CAQH CORE Pledge.
1. Identify your local network resources that will assist in the testing including IT people to help with the communications. For more information see the section below entitled, Section III. “Where do I go for Connectivity Information?”

Once you have completed the above five steps you will be ready to embark on the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing. Edifecs is providing the certification testing services free of charge to CAQH CORE Stakeholders, because we support the initiative of CAQH CORE, and because we believe in offering CAQH CORE Stakeholders the best testing service at the cheapest price.

Subsection I.a – Where do I begin?

If you have navigated to the [Edifecs Login page](#), you will notice the "Log In" section where members can login to access the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System.

Please select the appropriate testing service from the radio button and click on **Register** if you are first time visitor.

This selection will open the Account Registration Wizard. From the wizard's first page, you will click on the [Next] button to continue to move through the wizard. Clicking on the check box next to the text, "I have read the agreement and agree to its terms", will enable the [Next] button, which can be clicked to move on to the next wizard screen.

Subsection I.b – Contact vs. Organization what does it mean?

The next wizard screen is the contact information. This is your user information. Here you will create the username and password that you will use to access the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System for your company. This will make you the administrative user for your organization, and other contacts and users can be added if you are going to have more than one person performing the certification testing. If you need to add additional users to your organization's profile, please visit the section below entitled, "What if there is more than one of us testing?"

Screenshot #A below is the actual Contact/User registration screen you will encounter during the CAQH CORE self-registration. The required fields are highlighted with a red asterisk (*). The Name elements, First and Last, are the name of the user, or your own given name. The email address is where you want the notifications and account approval sent to. Please use an address that you check often and ensure that e-mails from Info.CoreCertification@edifecs.com are not blocked by your systems security filters.

The username and password fields are where you will assign your own username and password. The password must be at least eight characters in length. (**Note:** Edifecs staff will not have access to your password, so please make sure to use a password that you can remember.)

After you have finished entering your information in the Account Registration Wizard, your registration will be reviewed by a system administrator. Please allow at least 24 hours for the approval. Upon approval, you will receive a registration approval email and be able to log into the system.

Screenshot #A

Account Registration Wizard

Create User Identification Name and Password
Register your account and contact information. The * denotes a required field.

Name, Title and Email

First Name:* M.I. Last Name:*

Title:

Email Address:*

Confirm Email Address: *

Preferred Email Type:

Phone and Fax

Business Phone: Ext.:

Cell Phone:

Home Phone:

Business Fax:

Business Address

Address Line 1:

Address Line 2:

City: State:

Zip: Country:

User Name, Password & Security Question

User Name:*

Password:* Confirm Password:*

Choose a password that is at least eight(8) characters long.

Security Question:

Your Answer:

If you forget your password you'll need to confirm this information. To protect your account, make sure "Your Answer" is memorable for you but hard for others to guess!

The next wizard screen is the organization for which you are doing the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing. This is the actual entity that has signed or will sign the CAQH CORE Pledge (or CORE Recertification Seal Application Form), and for which the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Seal Application will be submitted.

The required fields on this screen are the Organization Name, CORE Stakeholder Type, and Batch Support information. The Organization Name should be the full legal name of the company seeking the Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals CAQH CORE Certification Seal.

Screenshot #B

Account Registration Wizard

Enter Organization Information
Please fill out the form below, the * denotes a required field.

Name and Identifiers
Name: *

Phone, URL, and Email

 Primary Phone: Extension:
 Primary Fax:
 Email Address:
 Home Page:
 Commerce Page:

Billing Address
 Billing Address Line 1:
 Billing Address Line 2:
 City: State/Region:
 Zip/Postal Code: Country:

Shipping Address
 Shipping Address Line 1:
 Shipping Address Line 2:
 City: State/Region:
 Zip/Postal Code: Country:

Additional Information
 CAQH CORE Pledge Date:
 CORE Stakeholder Type (Please select the CORE stakeholder type you represent. If you have questions about which stakeholder type you are, please contact CORE at CORE@CAQH.org): *
 -- None --
 Provider
 Health Plan
 Provider Vendor (Vendors with Provider facing Products)
 Health Plan Vendor (Vendors with Health Plan facing Products)
 Clearing House (Clearing House with Health Plan facing Products Only)
 Clearing House (Clearing House with Provider facing Products Only)
 Clearing House (Clearing House with Both Provider and Health Plan facing Products)

Subsection I.c – Which CAQH CORE Stakeholder am I?

Although there are only four Stakeholder-specific CAQH CORE Certification Seals that can be received (i.e., Provider, Health Plan, Vendor, Clearinghouse), there are seven CORE Stakeholder types listed to choose from. This is because entities such as clearinghouses are listed up to three times so that they can properly identify which type of clearinghouse they are. The following is a brief description of all the Stakeholder types to assist in selecting the appropriate type for your organization. (**Note:** The programs you are assigned to test under, by Edifecs, are reflective of your Stakeholder choice.)

- **Provider** – Providers are any person or organization who furnishes, bills, or is paid for medical or health services in the normal course of business. This includes physicians, physician groups, hospitals, and Accountable Care Organizations.
- **Vendor** – A Vendor is an organization offering commercially-available software products or services that enables a provider, a health plan or a clearinghouse to carry out HIPAA-required functions. A vendor may be performing the testing in order to certify their own information systems for these various capabilities.
 - **Provider Vendor** – A Provider Vendor is an organization which provides commercially-available software solutions for practice management, patient accounting, etc., to a health care provider or its business associate. A provider vendor may also be an organization to which a provider outsources some or all of its financial functions.
 - **Health Plan Vendor** – A Health Plan Vendor is an organization which provides commercially-available software solutions for adjudication, claim processing, claim data warehousing, etc., for a health plan or its business associate.
- **Health Plan** – A Health Plan is an individual or group plan that provides, or pays the cost of, medical care.
- **Clearinghouse** – A Clearinghouse is a public or private entity that processes or facilitates administrative transactions between Providers and Health Plans. A Clearinghouse can serve several roles in the revenue cycle process, and they are given three options here as a CORE Stakeholder to identify which services they perform.
 - **Clearinghouse (Health Plan product only)** – There are clearinghouses which act as a front end for Health Plans and support, 837 Institutional/Professional/Dental, 278, 834 and 820 standards.
 - **Clearinghouse (Provider product only)** – There are clearinghouses which act as a front end for Providers and support 837 Institutional/Professional/Dental and 278 standards.
 - **Clearinghouse (Both Health plan and Provider Products)** – There are clearinghouses which act as a front end for both Providers and Health

Plans and support 837 Institutional/Professional/Dental, 278, 834 and 820 standards.

Subsection I.d – What is Batch vs. Real Time?

As part of your Organization profile, you are required to specify whether you need to process transactions in Real Time only, Batch only or Both Real Time and Batch.

CAQH CORE has developed several rules related to these different processing modes. Some of the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Infrastructure Rules have requirements specific to Batch, Real Time and both Real Time and Batch for the CORE Stakeholders.

For the 278 transaction both Real Time and Batch processing mode testing will be available in the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Testing System, and Stakeholders can choose to test both in the CAQH CORE portal.

However, while in practice Stakeholders can choose to implement Real Time for the 837, 834, and 820 transactions as specified in the respective Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Infrastructure Rules, only Batch processing mode testing will be conducted for these transactions in the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Testing System, because the infrastructure rules only require batch to be supported for these transactions.

Subsection I.e – Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge Date, What and How?

The Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge Date is available for population on the Organization profile. This is an optional field as CORE Stakeholders can begin testing with the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Testing System without having submitted the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge (or CORE Recertification Seal Application Form if Recertifying). However, a complete Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Seal Application includes a signed Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge and in order to complete the testing system, you will have to provide the date a Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge was signed and submitted to CAQH.

The Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization &

Referrals CAQH CORE Pledge is important as it documents that your company supports the CAQH

CORE initiative and that it will be compliant with the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE Operating Rules. This Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge Date is also important as it begins a 180-business day window in which you must complete the Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals (Infrastructure Only) C A Q H CORE Certification Testing. Be aware that if your 180 business days have expired when you submit your Healthcare Claims/ Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE Seal Application a new Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals CAQH CORE Pledge will be required in order to complete the application. You will not need to retest with the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Testing System.

There are two methods for adding the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge (or CORE Recertification Seal Application Form if Recertifying) Date to your Organization profile. Method one is during the self-registration process. Method two is to edit your organization profile at a later time to add the date.

METHOD ONE: To Add the Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals CAQH CORE Pledge (or CORE Recertification Seal Application Form) Date on the Organization Profile

1. Press the question mark next to the Healthcare Claims/Benefit Enrollment/ Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge Date text field.

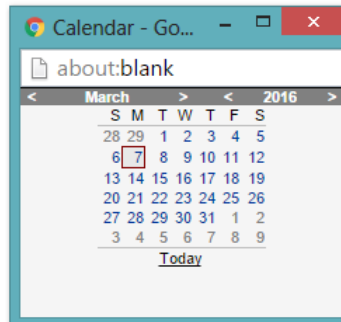
Screenshot #C



This will open up a calendar control where the date that you signed the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge can be selected. The month and year can be changed by selecting the less than “<” and greater than “>” next to the displayed month or year. When the appropriate month and year are displayed, click the day that you signed and submitted

the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge or CORE Recertification Seal Application Form. The calendar closes and the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge Date displays the selected date.

Screenshot #D

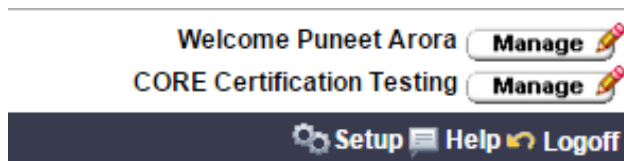


METHOD TWO: To edit your Organization Profile and add or update the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge or Recertification Seal Application Form Date

If you are the administrator (the individual who originally filled in the registration information) for your organization, you can edit the Organization profile at any time to add or change the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge or Recertification Seal Application Form Date.

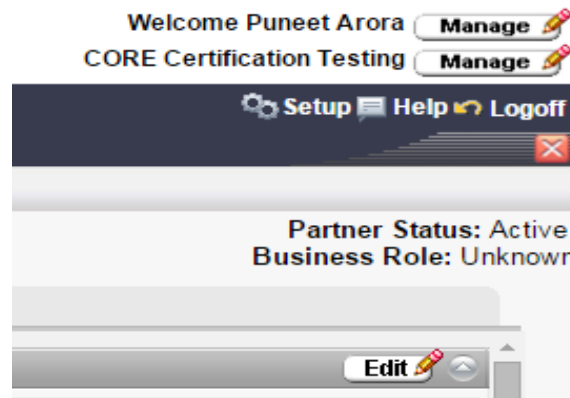
1. Click the **[Manage]** button next to your organization name on the top right of the screen as shown below. This will take you to the Organization Information page which displays some of the information you provided during self- registration.

Screenshot #E



2. Click the **[Edit]** button on the bottom right of the screen as shown below. This will take you to the same Organization profile shown in Screenshot #F. In this screen you can edit the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge or Recertification Seal Application Form Date using the three steps illustrated above. Pressing **[Save and Close]** at the bottom of the information will save your Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge or Recertification Seal Application Form Date to your profile. You can verify that it's been saved by reviewing the information on the Organization Information screen.

3.

Screenshot #F

Subsection I.f – Self-Registration Final Steps

After completing the Organization Profile and selecting the **[Next]** button you will be taken to the Word Verification screen. The system wants to verify that you are an individual filling out the information rather than some computer system designed to automate registration. It will ask you to verify a word that it will display. The word to be verified will be case sensitive.

Select **[Next]** and **[Finish]** to complete the wizard. This will return you to the login screen and inform you that your account has been created. You will receive an email which will welcome you to the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System, and that your account is ready, **pending approval**. In order to make certain that all CAQH CORE Stakeholders are given access to the appropriate testing programs, Edifecs Support will be approving all of the account registrations before you will be able to sign in to the system.

Subsection I.g – From Account Approval to Testing

Account set up and approval is the last phase of Self-Registration. There will be a period of time between when registration is completed and an account is approved and ready for testing. It is expected that Edifecs Support will respond to self-registration requests within **two** business days.

Edifecs defines the business day as 9AM to 5PM Pacific Time. Edifecs Support is available from 5AM to 5PM Pacific, so the approval of an account may take place before the 9AM Pacific Time deadline. You will receive an email notification after your registration is approved.

Edifecs Support will enroll the user into the requested testing programs, and approve their account as quickly as possible to allow users to have access to the testing system. (**Note:** You will NOT be able to immediately create an account and login. You will have to wait for the approval email to arrive before logging into the system.)

Section II – Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE Certification Testing, the Process

Once logged in to the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System you will be able to access the various testing programs and tasks associated with demonstrating implementation of all applicable Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE Operating Rules. The programs have been designed to work in the numerical order of the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE Operating Rules and to satisfy all of the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification test scripts as listed and described in [Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals](#) CAQH CORE Certification Test Suites.

Once you have received your account approval email, you can login by going to the Edifecs' CORE Certification Testing “Home” page [here](#) and entering the username and password.

Upon logging in, you will be taken to the Edifecs CORE “Welcome” page. The Welcome page contains information on how to complete the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing process as well as links to the CAQH CORE web pages relative to the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Infrastructure Rules.

The tab bar across the top gives you options for navigation. Click the **Home** tab to open the Welcome Page – the page you are currently viewing at the time of login. Click the **Programs** tab to view the list of Healthcare Claims/Benefit Enrollment/Premium Payment/ Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH

CORE Certification Testing programs in which you have been enrolled. Click the **CORE Certification Help** tab for documentation

regarding Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification.

There are two Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing programs in which you might be enrolled depending upon your stakeholder type. More than one program may apply to your organization. The programs are as follows:

- Test Suite for Health Plan and Health Plan-Facing Stakeholders
- Test Suite for Providers and Provider- Facing Stakeholders

Subsection II.a – Accessing the Programs and Tasks

Accessing the individual programs and tasks is as simple as clicking on the listed links. On the Programs tab, access a program by clicking its name in your program list. This will open a list of tasks that need to be completed in order to perform the certification testing for that particular program. (**Note:** If you are registered for a single program, then your Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing is complete at the time you complete all of the tasks in the program. If you are registered for more than one program, you will only complete the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing when you have completed all the tasks in all the programs in which you are enrolled.)

When you access a program, it will bring you to a program "My Program Dashboard" page which will provide more information about the specific program. The "My Program Dashboard" page will also give you more information on how to use each of the buttons on the left side of the screen to interact with the various components of the system.

To work on a program, click a program, then start with the first task on the list and work down. The tasks are designed to be accomplished in order, but if you find that some tasks can be readily completed and others require assistance be aware that some tasks may be completed out of order.

(**Tip:** The columns on the screen are expandable. For instance, if you can't see the entire task name, click and drag the top column, like you would in Excel, and widen the

column so that you can see the entire task or program name.)

Subsection II.b – How do I complete certain task types?

All of the tasks are structured similarly. The task name is descriptive of what the task is trying to accomplish. The Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Infrastructure Rules and test script (from the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Certification Test Suite) to which the task applies is included in parentheses after the task name. Although there are several different tasks in each program, most can be grouped into a few task types.

Although named differently and requiring different information, if you understand how the basic task type is to be completed, then the task directions should be sufficient to help you complete the task. If you are unclear or need additional help, refer to “Section II.d What if I have questions” below.

Subsection II.b.i – Upload Tasks

Upload tasks ask that you attach a file to complete a Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Rule Section 4.8 Companion Guide requirements. This task asks you to upload a sample page of your 278-companion guide. For example, this means that you take a page of your companion guide, create one document (DOC, JPEG, PNG, GIF, BMP, PDF, TIF, XLS, TXT, CSV or XML.) and attach it to the task.

Once attached to the task, you will mark this and the other Upload type tasks as “**Complete.**” This will put the task in a “Pending” status to be reviewed by Edifecs Support. Please see subsection C below entitled “Task Validation, what is it” for more information on what a pending task means.

Once the task has been validated Edifecs Support will either mark the task as “Complete” or “Not Started”. If they mark the task as “Not Started”, they will put notes in the task to identify what was wrong or incomplete with the task.

Subsection II.b.ii – Connectivity Tasks

There are a number of tasks which will ask you to communicate with the system using

the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only) CAQH CORE vC3.1.0 Connectivity Rule method.

Please see the Section III below entitled “Where do I go for Connectivity information”

for more information related to Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Connectivity requirements.

These tasks will give you URL and other information necessary to submit or receive files and will expect you to respond to the information you received. Read the task instructions carefully as they will provide you with detailed information on how to complete the task. Edifecs will not perform the tasks for you. These tasks are auto validated, which means that once the task is complete it will either report as “Completed” or “Failed”.

Subsection II.b.iii – Other Type Tasks

There are other tasks which require you to confirm that you have signed the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Pledge (or submitted the Recertification Seal Application Form if Recertifying), downloaded the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (Infrastructure Only)CAQH CORE Operating Rules, and generally respond to questions. These tasks are most easily completed by thoroughly reading the task instructions and following them. There are a limited number of these types of tasks, and all of them provide great detail in how to complete them.

Subsection II.c – Task Validation, What is it?

Tasks that go into a “**Pending**” status or tasks where you mark “**Partner Steps Complete**” are tasks which require an Edifecs review of the information that you have uploaded. This happens with every Upload type task, as well as some of the other types of tasks. Once you have uploaded the information, Edifecs Support will review the log files, screen shots, and other information that you have uploaded to the tasks. Due to the volume of uploaded tasks, Edifecs Support may take up to 24 hours to validate a screen shot, log file or other uploaded information. This usually means that you should have a “Completed” or “Not Started” task status by the same time the following business

day.

Edifecs Support will put notes into the task in the case that there is an error which needs to be corrected before resubmission. Notes can be found at the bottom of the task screen, near the **[Save and Close]** button. You can view the notes by clicking on the link.

Subsection II.d – What if I have questions?

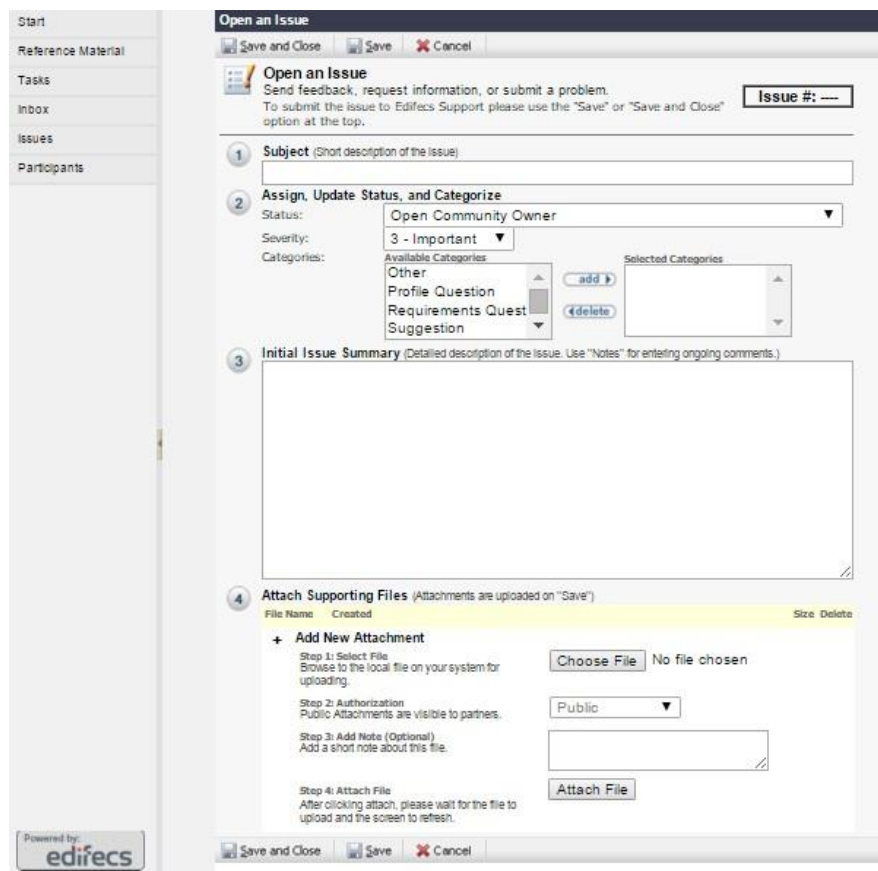
Any questions that you have related to the Edifecs Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing System can be addressed via several methods. We recommend that you first select the **[FAQs]** button on the left-hand side of the screen. This will take you to the most Frequently Asked Questions, and will hopefully be a primary resource for answering the questions you might have.

You may also submit an issue to the Edifecs support staff. Selecting the **[Add Issue]** button under **[Edifecs Support]** on left navigation bar, and then selecting the **[Add New]** at the top of the screen will take you to a form where you can enter your question and any additional information that you may feel is relevant to your concern. The **[Add Issue]** button is also located at the top of the screen in some instances (e.g., when an individual task is open). An issue will be submitted/logged by selecting the **Save** or **Save and Close** button located at the top or bottom of the Open an Issue question form.

If no response is received to a logged issue by the end of the next business day, send an e-mail to Info.CoreCertification@edifecs.com or call Edifecs Support at 425-435-2900 ext. 2453.

The Open an Issue question form which the **[Add Issue]** button opens is shown on the next page:

Screenshot #G



Open an Issue
Send feedback, request information, or submit a problem.
To submit the issue to Edifecs Support please use the "Save" or "Save and Close" option at the top.

1 Subject (Short description of the issue)

2 Assign, Update Status, and Categorize
 Status: Open Community Owner
 Severity: 3 - Important
 Categories: Available Categories: Other, Profile Question, Requirements Quest, Suggestion. Selected Categories: (empty)

3 Initial Issue Summary (Detailed description of the issue. Use "Notes" for entering ongoing comments.)

4 Attach Supporting Files (Attachments are uploaded on "Save")

File Name	Created	Size	Delete
+ Add New Attachment			
Step 1: Select File Browse to the local file on your system for uploading.		Choose File	No file chosen
Step 2: Authorization Public Attachments are visible to partners.		Public	
Step 3: Add Note (Optional) Add a short note about this file.			
Step 4: Attach File After clicking attach, please wait for the file to upload and the screen to refresh.		Attach File	

The **Subject** of the question is the base question in limited words. More explanation can be added using the **Issue Summary** section. You can change the severity of the issue, although we recommend leaving the severity as it is, unless there is a major issue that requires as quick a review by Edifecs Support.

If you have any attachments, such as screen shots etc. to add to further explain the issue or question, attach the file using the **[Attach File]** button. Once an issue or question has been posted, Edifecs Support will be notified and you will receive an email when your issue has been addressed or modified.

Subsection II.e – How do I get a hold of Edifecs Support

If there are questions or issues which need to be addressed by Edifecs Support directly, please contact Edifecs Support at Info.CoreCertification@edifecs.com. Someone will be available from 8AM to 8PM Eastern Time, and they will address emails as quickly as possible. When possible we ask CAQH CORE Stakeholders to review the FAQs and Question/Issue submission forms first, to keep Support operating in a smooth and efficient manner.

Questions related to logging into the system, or self-registration should be directed to Edifecs Support at the above listed email.

Section III – Where do I go for Connectivity information?

Please contact your IT team and/or network administrators for information related to your specific Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Connectivity implementation. (**Note:** Edifecs will not perform the connectivity tasks on behalf of C A Q H CORE Stakeholders. Edifecs operates as a client or server as necessary to test CAQH CORE Stakeholders, but does not have educational information or resources to answer questions about your connectivity implementation. If a Health Plan or Clearinghouse is having difficulty with the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals CAQH CORE Connectivity response tasks using the server setup, those questions should be addressed to Edifecs Support via the Issue/Question form or via email to Info.CoreCertification@edifecs.com)

Section IV – What if more than one of us is testing?

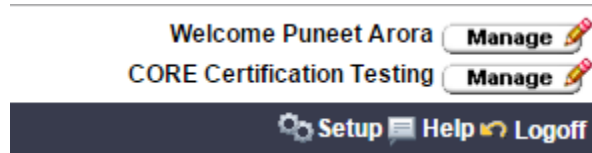
There might be the occasion where more than one user at an organization will want to conduct the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing. In this case, one user will self-register using the steps described in Section I above. Following their registration approval, that user then acts as organization administrator and can then add other users to the system. These additional users are also able to perform CAQH CORE CERTIFICATION tasks on behalf of that organization.

To add more users to your organization's profile:

1. Click the second **[Manage]** button on the top right of the screen as shown

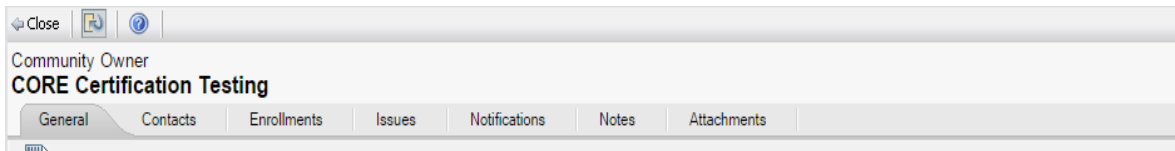
below:

Screenshot #H



2. Clicking the **[Manage]** button takes you to the Organization Information page, which lists some of the information you provided at self- registration. There will be a tab list across the top of the screen which will take you to other pieces of information specific to your organization. Click the **[Contacts]** tab. The Contacts tab contains the list of contacts (users) that have been added to your organization.

Screenshot #I



1. There is an **[Add]** button on the right. Click this button to open the Add Contact Wizard, which will allow you to add more users to your organization's profile.

Screenshot #J



2. In the wizard the first two screens can be passed through by pressing **[Next]**. The third screen will look very similar to the one shown on Screen Shot #A (page no. 5), and have the same required fields of First Name, Last Name, and Email Address. The fourth screen gives you the option of assigning a user name and password. Press **[Next]** to navigate through the screens.

3. You will be taken to a **Send Invitation** screen, which will send out an email to the contact (user) that you have added to let them know that they have access to the system. This email can be skipped, by unselecting the **Send Invitation** check box, shown at the top of the screen.
4. Press **[Next]** and **[Finish]** to complete the addition of a contact (user) for your organization. This process can be repeated as many times as necessary depending on how many people will be performing the Healthcare Claims/Benefit Enrollment/Premium Payment/Prior Authorization & Referrals (CAQH CORE Infrastructure Rules) CAQH CORE Certification Testing for your organization.