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1 Straw Poll Background

This document provides the results of the *CAQH CORE Code Combinations Task Group Initial Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations v3.6.2 October 2020*. The Straw Poll addressed potential Compliance-based Adjustments to the *CORE Code Combinations v3.6.2 October 2020* to ensure alignment with the publication of updates to the CARC and RARC lists on 11/01/20.

The Task Group Initial Straw Poll was sent to Task Group Participants on Monday, 11/09/20 with a completion deadline of 5 pm ET on Wednesday, 11/20/20. *Doc #1: Draft Impact Analysis: Potential Compliance-based Adjustments to the CORE Code Combinations v3.6.2 October 2020* was sent to the Task Group as references to assist in completing the straw poll.

The results of this CBR will be published by Monday, 02/01/21 as the *CORE-required Code Combinations v3.6.3 February 2021* and will supersede all previous versions of the *CORE Code Combinations*.

2 Straw Poll Format

The *Task Group Initial Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations v3.6.2 October 2020* was divided into two sections which addressed:

- Section 1: *Potential Compliance-based Adjustments for CARCs Added to the Published List*
- Section 2: *Potential Compliance-based Adjustments for RARCs Added to the Published List*

For each newly added CARC or RARC that met the evaluation criteria for addition to the *CORE Code Combinations*, respondents were asked to list any additional codes (i.e., RARCs or CORE-required CARCs respectively) that they recommended associating with the CARC or RARC in the *CORE Code Combinations*. Additionally, for all questions, respondents were given the option to comment on their organization's position.

Table 1: Summary of Recommended Compliance-based Adjustments to CORE Code Combinations v3.6.2 October 2020 by Type of Code List Adjustment

Type of Code List Adjustments	Total Published Code List Adjustments	Recommended Potential Impact on CORE Code Combinations
Code List Deactivations in November 2020	<ul style="list-style-type: none"> • 0 CARCs deactivated • 0 RARCs deactivated 	<ul style="list-style-type: none"> • N/A • N/A
Code List Description Modifications in November 2020	<ul style="list-style-type: none"> • 0 CARC description modified • 0 RARC descriptions modified 	<ul style="list-style-type: none"> • N/A • N/A
Code List Additions in November 2020	<ul style="list-style-type: none"> • 3 CARCs added • 5 RARCs added 	<ul style="list-style-type: none"> • The new CARCs potentially meet the CORE Code Combinations Evaluation Criteria and can be considered for addition • Three of the new RARCs potentially meet the CORE Code Combinations Evaluation Criteria and can be considered for addition.

3 Summary of Respondents

Responses to the Task Group straw poll were received from **67%** of the active CAQH CORE Code Combinations Task Group participating organizations and **5** key industry stakeholder types.

Table 2: Responses from Task Group Participating Entities by Number and Entity Type

Number of Active* Task Group Participating Entities	24
Total Number of Individual Organizational Responses	16 (67%)
Number of Health Plan/Health Plan Association Responses	7 (44% of respondents)
Number of Provider/Provider Association Responses	2 (13% of respondents)
Number of Vendor/Clearinghouse Responses	2 (13% of respondents)
Number of Government Responses (Medicaids, etc.)	2 (13% of respondents)
Number of Other Stakeholder Type Responses (SDO/Regional Entities, etc.)	3 (19% of respondents)

*NOTE: Active participants attended the majority of Task Group calls and responded to a majority of Task Group Straw Polls for the last 5 Compliance-based Reviews.

4 Summary of Results – Section 1: Potential Compliance-based Adjustments for CARCs Added to the Published List

Section 1 of the initial straw poll asked respondents to indicate their organization’s support for adding 10 code combinations using new CARCs 302, P30 and P31 to CORE-defined Business Scenario #1 (*Information Required – Missing/Invalid/Incomplete Documentation*) and CORE-defined Business Scenario # 3 (*Billed Service Not Covered by Health Plan*). As seen in Table 4 below, all 10 code combinations received high support (≥ 65%), as such CAQH CORE staff and co-chairs recommend adding each combination to the *CORE Code Combinations*.

The straw poll also asked respondents to submit any additional RARCs that their organization supported associating with each new CARC in the *CORE Code Combinations*. The submitted RARCs are addressed in [Appendix A](#) of this document. The initial straw poll also noted that, should the Task Group support addition of the new CARC code combination, CAGCs would be included in accordance with the associated CARC’s CORE-defined Business Scenario per [CORE Code Combinations Evaluation Criterion #17](#). Respondents were asked to provide any comments their organization had regarding association of the CAGCs with the new CARCs 302, P30 and P31, no such comments were submitted.

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Code Combinations Task Group**
Results: *Task Group Initial Straw Poll on Potential Compliance-based to the CORE Code Combinations v3.6.2 October 2020*

Table 3: Support for Adding Code Combinations with New CARCs 302, P30 and P31

CARC #	CARC Description	RARC #	RARC Description	% Support	# Abstains	Key Comment Issues (Based on Submitted Comments/Analysis)	Co-Chair & CAQH CORE Staff Recommendation	Task Group Decision
Potential CORE-defined Business Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation								
P30	Payment denied for exacerbation when supporting documentation was not complete. To be used for Property and Casualty only.			90%	6	• N/A	Add to CORE Code Combinations	
		M127	Missing patient medical record for this service.	89%	7	• N/A	Add to CORE Code Combinations	
		N163	Medical record does not support code billed per the code definition.	67%	7	• One respondent felt that as RARC N163 suggests a coding error and not necessarily missing information it is inconsistent with CARC P30. Furthermore, the combination does not specify necessary action.	Add to CORE Code Combinations	
		N709	Incomplete/invalid notes.	89%	7	• N/A	Add to CORE Code Combinations	
		N710	Missing notes.	89%	7	• N/A	Add to CORE Code Combinations	
Potential CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan								
302	Precertification/notification/authorization/pre-treatment time limit has expired.			93%	1	• One respondent not in support of the addition of CARC 302 felt that CARCs 197 ¹ and 198 ² are sufficient for use in CORE-defined Business Scenario #3. The respondent felt that CARC 302 could apply to CORE-defined Business Scenario #2 as it would clarify that the provider needs to take action to renew an existing prior authorization.	Add to CORE Code Combinations	
		N54	Claim information is inconsistent with pre-certified/authorized services.	80%	1	• Two respondents not in support of addition commented that the RARC definition does not expand upon the RARC and that the code combination scenario is already described in CORE-defined Business Scenario #3 using CARC 198 combinations. • Two respondents not in support noted that the CARC description mentions an expired prior authorization while the RARC description describes inconsistent information in the prior authorization which may send a conflicting message to the provider.	Add to CORE Code Combinations	

¹ The definition of CARC 197 is "Precertification/authorization/notification/pre-treatment absent."

² The definition of CARC 198 is "Precertification/notification/authorization/pre-treatment exceeded."

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CARC #	CARC Description	RARC #	RARC Description	% Support	# Abstains	Key Comment Issues (Based on Submitted Comments/Analysis)	Co-Chair & CAQH CORE Staff Recommendation	Task Group Decision
		N351	Service date outside of the approved treatment plan service dates.	87%	1	<ul style="list-style-type: none"> One respondent not in support felt that as the CARC description references an expired prior authorization while the RARC references a treatment plan, the two are unrelated. 	Add to CORE Code Combinations	
P31	Payment denied for exacerbation when treatment exceeds time allowed. To be used for Property and Casualty only.			89%	7	<ul style="list-style-type: none"> N/A 	Add to CORE Code Combinations	
		N351	Service date outside of the approved treatment plan service dates.	78%	7	<ul style="list-style-type: none"> N/A 	Add to CORE Code Combinations	

5 Summary of Results – Section 2: Potential Compliance-based Adjustments for RARCs Added to the Published List

New RARCs N834 and N835

Section 2 of the initial straw poll indicated that new RARCs N834 and N835 were not recommended for addition to the *CORE Code Combinations* as the appropriate CORE-required CARCs had not been identified. The straw poll asked respondents to submit any CORE-required CARCs that their organization supported associating with each new RARC in the *CORE Code Combinations*. No CORE-required CARCs were submitted. (Three non-CORE-required CARCs were submitted).

New RARC N836

Section 2 of the initial straw poll also asked respondents to indicate their organization’s support for adding 1 code combination using new RARC N836 to CORE-defined Business Scenario #1 (*Additional Information Required – Missing/Invalid/Incomplete Documentation*). As seen in Table 4 below, the code combination received high support (≥ 65%) for addition, as such CAQH CORE staff and co-chairs recommend adding the combination to the *CORE Code Combinations*.

The straw poll also asked respondents to submit any additional CORE-required CARCs that their organization supported associating with the new RARC in the *CORE Code Combinations*. The submitted CORE-required CARCs are addressed in [Appendix A](#) of this document. The initial straw poll also noted that, should the Task Group support addition of the new RARC code combination, CAGCs would be included in accordance with the associated CARC’s CORE-defined Business Scenario per [CORE Code Combinations Evaluation Criterion #17](#). Respondents were asked to provide any comments their organization had regarding association of the CAGCs Co and PI with the CARC 252/RARC N836 code combination, no such comments were submitted.

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Code Combinations Task Group**
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Table 4: Support for Adding New RARCs N836

CARC #	CARC Description	RARC #	RARC Description	% Support	# Abstains	Key Comment Issues (Based on Submitted Comments/Analysis)	Co-Chair & CAQH CORE Staff Recommendation	Task Group Decision
CORE-defined Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation								
252	An attachment/other documentation is required to adjudicate this claim/service. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT).	N836	Provider W9 or Payee Registration not on file.	87%	1	<ul style="list-style-type: none"> One respondent not in supported noted that the CARC 252 description indicates a denial related information on the claim. However, RARC N836 is not claim based therefore the code combination does not match. 	Add to the <i>CORE Code Combinations</i>	

6 Next Steps

A follow-up straw poll for the November 2020 Compliance-based Review will be distributed to the Task Group on Monday, 12/14/20. The follow-up straw poll will include the “write-in” CORE-required CARCs submitted on the initial straw poll in response to potential Compliance-based Adjustments and any code combination adjustments the Task Group agrees to re-poll.

Prior to distribution of the follow-up straw poll, Task Group Participants will be asked to submit any rationale they have in support of/not in support of the code combination adjustments to be included on the follow-up straw poll. These comments will be distributed with the follow-up straw poll for consideration by the respondents. Comments must be submitted to CAQH CORE by **5 pm ET, Wednesday, 12/09/20** to be distributed with the follow-up straw poll. CAQH CORE will distribute a template form on Thursday, 12/03/20 that participants can use to submit rationale.

The CAQH CORE Code Combinations Task Group will meet on Tuesday, 01/12/21 to review the results of the follow-up straw poll and reach agreement on the final Compliance-based Adjustments to the *CORE Code Combinations v3.6.2 October 2020*. The updated *CORE Code Combinations v3.6.3 February 2021*, reflecting Task Group-approved adjustments, will be published to the CAQH CORE website by Monday, 02/01/21.

Appendix A: Summary of Results - Codes Submitted in Response to Potential Compliance-based Adjustments

A.1. RARCs Submitted for Association with Straw-pollled CARCs

The initial straw poll also asked respondents to submit any additional RARCs their organization supported associating with new CARCs 302, P30 and P31. 10 code combinations were submitted.

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Table A.1: RARCs Submitted for Association with Straw-pollled CARCs

CARC #	CARC Description	RARC #	RARC Description	# (%) Submitters	Key Submitter Comments
Potential CORE-defined Business Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation					
P30	Payment denied for exacerbation when supporting documentation was not complete. To be used for Property and Casualty only.	N206	The supporting documentation does not match the information sent on the claim.	1 (6%)	• N/A
		N224	Incomplete/invalid documentation of benefit to the patient during initial treatment period.	1 (6%)	• N/A
		N683	Missing/Incomplete/Invalid prior treatment documentation.	1 (6%)	• N/A
Potential CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan					
302	Precertification/notification/authorization/pre-treatment time limit has expired.	N170	A new/revised/renewed certificate of medical necessity is needed.	1 (6%)	• N/A
		N206	The supporting documentation does not match the information sent on the claim.	1 (6%)	• N/A
		N362	The number of Days or Units of Service exceeds our acceptable maximum.	1 (6%)	• N/A
		N435	Exceeds number/frequency approved /allowed within time period without support documentation.	1 (6%)	• N/A
P31	Payment denied for exacerbation when treatment exceeds time allowed. To be used for Property and Casualty only.	N370	Billing exceeds the rental months covered/approved by the payer.	1 (6%)	• N/A
		N435	Exceeds number/frequency approved /allowed within time period without support documentation.	1 (6%)	• N/A
		N640	Exceeds number/frequency approved/allowed within time period.	1 (6%)	• N/A

A.2. CORE-required CARCs Submitted for Association with Straw-pollled RARCs

The initial straw poll also asked respondents to submit any additional CORE-required CARCs their organization supported associating with new RARCs N834, N835 and N836. Three non- CORE-required CARCs (CARCs 219, A1, and P13) were submitted as such they will not be included in the Follow-up Straw Poll.

Appendix B: Summary of Results – By Stakeholder Type

Table A.2: Support for Adding New CARCs 302, P30 and P31 by Stakeholder Type

CARC #	CARC Description	RARC #	RARC Description	% Total Support	% Support Health Plans	% Support Providers	% Support Other
Potential CORE-defined Business Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation							
P30	Payment denied for exacerbation when supporting documentation was not			90%	100%	100%	80%
		M127	Missing patient medical record for this service.	89%	100%	100%	75%

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CARC #	CARC Description	RARC #	RARC Description	% Total Support	% Support Health Plans	% Support Providers	% Support Other
	complete. To be used for Property and Casualty only.	N163	Medical record does not support code billed per the code definition.	67%	100%	0%	50%
		N709	Incomplete/invalid notes.	89%	100%	100%	75%
		N710	Missing notes.	89%	100%	100%	75%
Potential CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan							
302	Precertification/notification/authorization/pre-treatment time limit has expired.			93%	100%	50%	100%
		N54	Claim information is inconsistent with pre-certified/authorized services.	80%	100%	0%	83%
		N351	Service date outside of the approved treatment plan service dates.	87%	100%	0%	100%
P31	Payment denied for exacerbation when treatment exceeds time allowed. To be used for Property and Casualty only.			89%	100%	N/A	80%
		N351	Service date outside of the approved treatment plan service dates.	78%	100%	0%	75%

Table A.3: Support for Adding New RARC N836 by Stakeholder Type

CARC #	CARC Description	RARC #	RARC Description	% Total Support	% Support Health Plans	% Support Providers	% Support Other
Potential CORE-defined Business Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation							
252	An attachment/other documentation is required to adjudicate this claim/service. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT)	N836	Provider W9 or Payee Registration not on file.	87%	100%	100%	67%