

**CAQH Committee on Operating Rules for Information Exchange (CORE)Code
Combinations Task Group
Results: Task Group Initial Straw Poll on Potential Compliance-based and Market-based Adjustments to the CORE Code Combinations
v3.6.5 October 2021**

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1 Straw Poll Background

On its 11/30/21 call, the CAQH CORE Code Combinations Task Group reviewed the results of the *Task Group Initial Straw Poll on Potential Compliance-based and Market-based Adjustments to the CORE-required Code Combinations for CORE-defined Business Scenarios v3.6.5 October 2021*. Based on the Initial Straw Poll results and Task Group consensus reached on the call, the Task Group approved a subset of the potential Compliance-based and Market-based Adjustments to the [CORE-required Code Combinations v3.6.5 October 2021](#) (see the Decisions Document for the 11/30/21 Task Group call, attached to the Follow-up Straw Poll email). All approved new code combinations meet the [CAQH CORE Code Combination Evaluation Criteria](#).

On the call, the Task Group also agreed to conduct a Compliance-based Review (CBR) and Market-based Review (MBR) Follow-up Straw Poll to obtain participant feedback on:

- **2** code combinations that received high support (≥65%) on the CBR/MBR Initial Straw Poll for addition to CORE-defined Business Scenario #3 but had strong opposition from some Task Group Participants

Follow-up Straw Poll Format

The Task Group Follow-up Straw Poll on Potential Compliance-based and Market-based Adjustments to the *CORE-required Code Combinations for CORE-defined Business Scenarios v3.6.5 October 2021* contains one section:

- **Section 1: Code Combinations for Inclusion in November 2021 CBR/MBR Follow-up Straw Poll**
 - Section 1 asks respondents, after considering Task Group rationale in support/not in support of addition, to indicate their organization’s support/non-support for 2 potential code combinations

Table 1: Code Combinations included on the November 2021 Follow-up Straw Poll

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan				
96	Non-covered charge(s). 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.) Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	N857	This claim has been adjusted/reversed. Refund any collected copayment to the member.	CO, <u>PI</u> or PR
242	Services not provided by network/primary care providers.	N600	Adjusted based on the applicable fee schedule for the region in which the service was rendered.	CO, <u>PI</u> or PR

2 Summary of Respondents

Responses to the Task Group straw poll were received from **86%** of the active CAQH CORE Code Combinations Task Group participating organizations and 5 keyindustry stakeholder types.

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

Number of Active* Task Group Participating Entities	28
Total Number of Individual Organizational Responses	24 (86%)
Number of Health Plan/Health Plan Association Responses	8 (33% of respondents)
Number of Provider/Provider Association Responses	3 (13% of respondents)
Number of Vendor/Clearinghouse Responses	3 (13% of respondents)
Number of Government Responses (Medicaids, etc.)	2 (8% of respondents)
Number of Other Stakeholder Type Responses (SDO/Regional Entities, etc.)	8 (33% 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.

3 Summary of Results – Code Combinations Included on November 2021 CBR/MBR Follow-up Straw Poll

Section 1 of the follow-up straw poll asked respondents to indicate their organization’s support for adding two new code combinations to the *CORE Code Combinations*. As seen in Table 3 below, code combinations CARC 96/RARC N857 and CARC 242/RARC N600 both received low support ($\leq 65\%$). As such, CAQH CORE staff and co-chairs do not recommend adding CARC 96/RARC N857 and CARC 242/RARC N600 to the *CORE Code Combinations*.

Table 3: Support to Add Combinations

CARC #	CARC Description	RARC #	RARC Description	% Support	# Abstains	Key Comment Issues (Based on Submitted	Co-Chair & CAQH CORE Staff Recommendation	Task Group Decision
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						Comments/ Analysis)	ion	
Potential CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan								
96	Non-covered charge(s). 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.) Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	N857	This claim has been adjusted/reversed. Refund any collected copayment to the member.	35%	8	<ul style="list-style-type: none"> Two respondents commented that the combination does not belong in BS3 and the combination will cause confusion for providers. Another respondent commented that they would be unable to support this combination. Use of RARC N857 with CARC 96 would make sense only if there was a requirement that another RARC be included that provides additional explanation of the non-covered benefit. 	Do NOT to the CORE Code Combinations	
242	Payment declined for exacerbation when treatment exceeds time allowed. To be used for Property and Casualty only.	N600	Adjusted based on the applicable fee schedule for the region in which the service was rendered.	33%	10	<ul style="list-style-type: none"> One respondent commented that this combination provides no meaningful detail as to why the service is not covered; this combination does not meet the 	Do NOT add to the CORE Code Combinations	

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						<p>CORE business scenario.</p> <ul style="list-style-type: none"> • Another respondent commented that the meaning and intent of this combination is unclear. Further, RARC N600 is inconsistent with BS #3 - to say that a claim was adjusted implies an approval. 		
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4 Next Steps

Once the CAQH CORE Code Combination Task Group agrees to Compliance-based and Market-based Adjustments to the *CORE Code Combinations v3.6.5 October 2021*, the updated *CORE Code Combinations v3.7.0 February 2022* will be published to the CAQH CORE website on 02/01/22 for industry implementation.

5 Appendix A: Summary of Results – By Stakeholder Type

Table A.1: Support for Adding Code Combinations by Stakeholder Type

CARC #	CARC Description	RARC #	RARC Description	% Total Support	% Support Health Plans	% Support Providers	% Support Other
96	Non-covered charge(s). 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.) Usage: Refer to the 835 Healthcare Policy	N857	This claim has been adjusted/reversed. Refund any collected copayment to the member.	35%	50%	33%	20%

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	Identification Segment (loop 2110 Service Payment Information REF), if present.						
242	Payment declined for exacerbation when treatment exceeds time allowed. To be used for Property and Casualty only.	N600	Adjusted based on the applicable fee schedule for the region in which the service was rendered.	33%	63%	0%	0%