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1. Introduction to Follow-up Straw Poll Results

This document provides the results of the *CAQH CORE Code Combinations Task Group Follow-up Straw Poll on Potential Compliance-based Adjustments and Market-based Adjustments to the CORE Code Combinations v3.7.4 June 2023*. More information about the potential compliance-based and market-based adjustments considered by the task group can be found [here](#).

2. Respondent Breakdown

15 organizations responded to the CCTG FSP, representing 60% of the Task Group’s active membership. The breakdown of respondents by stakeholder type is shown Table 1.

Table 1: Responses from Task Group Participating Entities by Number and Entity Type

Number of Active* Task Group Participating Entities	25
Total Number of Individual Organizational Responses	15 (60%)
Number of Health Plan/Health Plan Association Responses	5 (33%)
Number of Provider/Provider Association Responses	2 (13%)
Number of Vendor/Clearinghouse Responses	2 (13%)
Number of Government Responses (State Medicaid Agencies, etc.)	2 (13%)
Number of Other Stakeholder Type Responses (SDO/Regional Entities, etc.)	4 (27%)

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

3. Overview of Results for CBR/MBR Follow-up Straw Poll

The CBR/MBR Follow-up Straw Poll included code combinations re-pollled from the CBR/MBR Initial Straw Poll and combinations written-in by CCTG Participants. Both categories represent existing CARCs to be paired with the newly added RARC N887, described below.

RARC N887: *Providers not participating in the Medicare Advantage Plan have the right to appeal if the plan has partially or fully denied payment or if the provider believes the plan has not paid the services at the expected Medicare reimbursable rate or type of level/service. Providers may file their appeal in writing within 60 calendar days after the date of the remittance advice. For the plan to review the appeal, the plan will need a completed signed Waiver of Liability Statement. To obtain a Waiver of Liability form, please contact your Medicare Advantage Plan.*

Once we receive the completed forms, we will give you a decision on your appeal within 60 calendar days.

Support for each code combination considered is shown in **Table 2 and 3**. Code combinations receiving >65% are recommended by CAQH CORE staff and the CCTG Co-chairs for addition to the CORE Code Combinations, whereas those combinations receiving <65% support are not. None of the polled code combinations received enough support to be recommended for addition. Detailed descriptions are in the Appendix. A breakdown of support by stakeholder type is available in the [Appendix](#).

**CAQH Committee on Operating Rules for Information Exchange (CORE) Code Combinations Task Group
Results: Task Group Follow-up Straw Poll on Potential Compliance-based and Market-based Adjustments to the CORE Code Combinations
v3.7.4 June 2023**

Table 2: Code Combination Write-Ins included on the August 2023 Follow-up Straw Poll: Addition of RARC N887

Breakdowns of responses by stakeholder types are in the APPENDIX.

Line	Support %	Business Scenario	CARC	CAGC	Key Comments in Support of Addition	Key Comments Not in Support of Addition	Co-chair and CORE Staff Recommendation
1	27%	2	284 <i>Precertification/authorization/notification/pre-treatment number may be valid but does not apply to the billed services.</i>	CO or PI	N/A	Organizations questioned the impetus for the creation of RARC N887, most believing it is more appropriate as an alert RARC because it does not provide additional support or context for the adjustment being reported. One dissenting organization stated they will submit a request to have RARC N887 changed to an Alert RARC.	Do NOT Add to the CORE Code Combinations
2	27%		296 <i>Precertification/authorization/notification/pre-treatment number may be valid but does not apply to the provider.</i>		N/A		Do NOT Add to the CORE Code Combinations
3	42%	3	50 <i>These are non-covered services because this is not deemed a 'medical necessity' by the payer. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.</i>	CO, PI, or PR	N/A	N/A	Do NOT Add to the CORE Code Combinations
4	42%		51 <i>These are non-covered services because this is a pre-existing condition. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations
5	33%		53 <i>Services by an immediate relative or member of the same household are not covered.</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations
6	42%		95 <i>Plan procedure not followed</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations
7	42%		111 <i>Not covered unless the provider accepts assignment.</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations
8	33%		119 <i>Benefit maximum for this time period or occurrence has been reached.</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations
9	33%		149 <i>Lifetime benefit maximum has been reached for this service/benefit category.</i>		N/A	N/A	Do NOT Add to the CORE Code Combinations

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Table 2: Continued

<i>Line</i>	<i>Support %</i>	<i>Business Scenario</i>	<i>CARC</i>	<i>CAGC</i>	<i>Key Comments in Support of Addition</i>	<i>Key Comments Not in Support of Addition</i>	<i>Co-chair and CORE Staff Recommendation</i>
10	33%	3	150 <i>Payer deems the information submitted does not support this level of service.</i>	CO, PI, or PR	N/A	N/A	<i>Do NOT Add to the CORE Code Combinations</i>
11	33%		166 <i>These services were submitted after this payer's responsibility for processing claims under this plan ended.</i>		N/A	N/A	<i>Do NOT Add to the CORE Code Combinations</i>
12	33%		242 <i>Service not provided by network/primary care providers.</i>		N/A	N/A	<i>Do NOT Add to the CORE Code Combinations</i>
13	33%		243 <i>Service not authorized by network/primary care providers.</i>		N/A	N/A	<i>Do NOT Add to the CORE Code Combinations</i>
14	42%		299 <i>The billing provider is not eligible to receive payment for the service billed.</i>		N/A	N/A	<i>Do NOT Add to the CORE Code Combinations</i>

Table 3: Code Combination for Re-polling in August 2023 Follow-up Straw Poll Polled CBR Code Combinations: Addition of RARC N887

Breakdowns of responses by stakeholder types are in the APPENDIX.

<i>Line</i>	<i>Support %</i>	<i>Business Scenario</i>	<i>CARC</i>	<i>CAGC</i>	<i>Key Comments in Support of Addition</i>	<i>Key Comments Not in Support of Addition</i>	<i>Co-chair and CORE Staff Recommendation</i>
1	25%	3	96 <i>Non-covered charges</i>	CO, PI, or PR	<i>One organization expressed their support for the addition of this combination.</i>	<i>Organizations once again expressed that N887 should be an Alert RARC and that the right to appeal should not be linked to specific CARCs, citing the need for appeals to be available to all claim denials and reductions. An organization stated that CAGCs CO and PI would be more appropriate for this combination. PR may lead to the member being billed instead of an appeal being undertaken.</i>	<i>Do NOT Add to the CORE Code Combinations</i>

4. Next Steps

Once the CORE Code Combination Task Group agrees to Compliance and Market-based Adjustments to the *CORE Code Combinations v3.7.4 June 2023*, the updated *CORE Code Combination v4.0.0 October 2023* will be published to the CAQH CORE website on 10/02/2023 for industry implementation.

5. Appendix

Table 4: Support for Proposed Additions by Stakeholder Type

Proposed Code Combo	% Support	% Health Plans	% Providers	% Other
CARC 284/RARC N887	27%	67%	0%	33%
CARC 296/RARC N887	27%	67%	0%	33%
CARC 50/RARC N887	41.5%	60%	0%	40%
CARC 51/RARC N887	41.5%	60%	0%	40%
CARC 53/RARC N887	33%	75%	0%	25%
CARC 95/RARC N887	41.5%	60%	0%	40%
CARC 111/RARC N887	41.5%	60%	0%	40%
CARC 119/RARC N887	33%	75%	0%	25%
CARC 149/RARC N887	33%	75%	0%	25%
CARC 150/RARC N887	33%	75%	0%	25%
CARC 166/RARC N887	33%	75%	0%	25%
CARC 242/RARC N887	33%	75%	0%	25%
CARC 243/RARC N887	41.5%	75%	0%	25%
CARC 299/RARC N887	36%	75%	0%	25%
CARC 96/RARC N887	25%	100%	0%	0%