

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Code Combinations Task Group
Impact Analysis: Potential Compliance-based Adjustments to the *CORE Code Combinations v3.8.0 October 2023*
For Discussion Only**

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Code Combinations Task Group Compliance-Based Review Impact Analysis

1 Background

Per the [CAQH CORE Code Combinations Maintenance Process](#), the *CORE-required Code Combinations for CORE-defined Business Scenarios (CORE Code Combinations)* must be maintained to ensure alignment with the current, published [CARC](#) and [RARC](#) lists maintained by the respective Code Maintenance Committees¹. Two types of adjustments are conducted:

- **Compliance-based Adjustments:** Published updates including deactivations, modifications and additions to the CARC and RARC lists by the code authors must be reviewed to ensure ongoing alignment between the *CORE Code Combinations* and the published code lists²; compliance-based reviews (CBRs) occur three times per year per the *CORE Code Combinations Maintenance Process*.
- **Market-based Adjustments:** Refinement of existing *CORE Code Combinations* and/or industry identification of the need for additional CORE-defined Business Scenarios and associated code combinations; Market-based Reviews (MBRs) occur once every two years per the *CORE Code Combinations Maintenance Process*.

With the publication of updated CARC and RARC lists on 11/01/23, the Task Group must complete a compliance-based review (CBR). In addition, the Task Group must review the adjudication of an Emergency Code Combination Addition (ECCA) Request. This impact analysis outlines the CBR of the *CORE Code Combinations v3.8.0 October 2023* and includes recommendations for compliance-based adjustments to the *CORE Code Combinations* for consideration by the Task Group. It also provides information on an ECCA request, and the action taken on it.

This impact analysis was created by CORE staff and consultants and approved by the Task Group co-chairs based on the most recently published codes and provides context on potential new adjustments. Please review this document carefully when considering your support/non-support of these adjustments. If changes result from this November 2023 CBR, they will be published on 02/01/2024 as the *CORE Code Combinations v3.8.1 February 2024* and will supersede all previous versions of the *CORE Code Combinations*.

1.1 Scope of Potential Compliance-Based Adjustments to *CORE Code Combinations v3.8.0 October 2023*

Three types of CARC and RARC list updates can impact the *CORE Code Combinations*: deactivations, modifications, and additions. Table 1 summarizes the 11/01/2023 adjustments to the published CARC and RARC lists to be considered by the Task Group.

¹ Claim Adjustment Status Code Maintenance Committee and Remittance Advice Remark Code Committee (<http://www.wpc-edi.com/reference/>).

² "Published code list" refers to the master CARC or RARC list as published.

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Summary of Qualifying Compliance-based Adjustments to CORE Code Combinations v3.8.0 October 2023 by Type of Code List Adjustment

Type of Code List Adjustments	Total Published Code List Adjustments	Recommended Potential Impact on CAQH CORE Code Combinations
Code List Deactivations in November 2023	<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 2023	<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 2023	<ul style="list-style-type: none"> • 1 CARC added • 4 RARCs added 	<ul style="list-style-type: none"> • The new CARC meets the CORE Code Combinations Evaluation Criteria and can be considered for addition. • Three of the new RARCs meet the CORE Code Combinations Evaluation Criteria and can be considered for addition.

2 November 2023 CBR Initial Straw Poll

2.1 CARC Additions

In the latest update to the published code lists, the CARC authors added the following CARC to the published list:

Table 2. CARCs Added in November 2023 Update

CARC #	CARC Description
306	Type of bill is inconsistent with the patient status. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

2.1.1 CARC 306

New CARC 306 meets the [CORE Code Combinations Evaluation Criteria](#) and can be considered for addition to the CORE Code Combinations.

2.1.2 CARC 306 Recommendations: Include CARC 306

The CORE Staff and Task Group Co-chairs recommend the CARC be added to CORE-defined Scenario #2: Missing/Invalid/Incomplete Data from Submitted Claim. CORE Staff and Task Group Co-chairs do not recommend the CARC be used in combination with any RARCs as the CARC description does not need additional clarification.

NOTE: The CARC description indicates that the sender does not have sufficient information to determine whether an inconsistency is due to the type of bill code being invalid or to the patient status code being invalid. The use of RARCs MA30 (Missing/incomplete/invalid type of bill) or MA43 (Missing/incomplete/invalid patient status) in combination with CARC 306 has therefore NOT been recommended. These RARC codes are currently included in the CORE Code Combinations in combination with CARC 16 (Claim/service lacks information or has submission/billing error(s)); however, the Task Group November 2023 CBR

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Initial Straw Poll asks Task Group members to submit any RARC(s) which add additional specificity consistent with the definition of the CARC and the associated CORE-defined Business Scenario description. Any RARCs submitted will be included in the Follow-up Straw Poll for consideration by the Task Group.

Table 3. Summary of CARC 306 Recommended for Addition to the CORE-required Code Combinations

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
CORE-defined Business Scenario 2: Missing/Invalid/Incomplete Data from Submitted Claim				
306	Type of bill is inconsistent with the patient status. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	N/A	N/A	CO or PI

2.2 RARC Additions

In the latest update to the published code lists, the RARC authors added the following RARCs to the published list:

Table 4. RARCs Added in November 2023 Update

RARC #	RARC Description
N889	Alert: This claim was originally processed in real-time, and we sent a real-time 835 response.
N890	Electronic Visit Verification Data Element Requirements were not met.
N891	The maximum allowable payment for this service/procedure was paid by the primary insurance. No further payment due.
N892	The claim does not meet the criteria for acceptable use of the Delay Reason Code.

2.2.1 RARC N889

RARC N889 is an “Alert RARC”, which does not meet the [CORE Code Combinations Evaluation Criteria](#). As such, it is not included in the Task Group November 2023 CBR Initial Straw Poll.

2.2.2 RARC N890

New RARC N890 potentially meets the [CORE Code Combinations Evaluation Criteria](#) and can be considered for addition to the *CORE Code Combinations*. Recommendations for inclusion are in section 2.2.3.

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2.2.3 RARC N890 Recommendations: Include RARC N890 with CARCs 16, 95, 96 & 252

The request which resulted in the creation of RARC N890 indicated that it should be used in combination with CARCs 16, 95 or 96. The *CORE Code Combinations* currently include other RARCs related to Electronic Visit Verification (EVV) data issues in combination with these CARCs, therefore CORE Staff and Task Group Co-chairs recommend CARC 16/RARC N890 be added to CORE-defined Business Scenario #2: Missing/Invalid/Incomplete Data from Submitted Claim and CARC 95/RARC N890, and CARC 96/RARC N8890, be added to Business Scenario #3: Billed Service Not Covered by Health Plan to the *CORE Code Combinations*.

In addition, CAQH CORE Staff and Task Group Co-chairs recommend the code combination of CARC 252 with RARC N890 be considered for addition to the CORE Code Combinations in CORE-defined Business Scenario #1: Additional Information Required – Missing/Invalid/Incomplete Documentation.

The November 2023 CBR Initial Straw Poll asks Task Group members if they agree with the inclusion of RARC N890 with CARCs 16, 95, 96, and 252 in the previously indicated CORE-defined Business Scenarios in the *CORE Code Combinations*.

Table 5. Summary of RARC N890 Recommended for Addition to the CORE-required Code Combinations

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
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).	N890	Electronic Visit Verification Data Element Requirements were not met	CO or PI
CORE-defined Business Scenario 2: Missing/Invalid/Incomplete Data from Submitted Claim				
16	Claim/service lacks information or has submission/billing error(s). Usage: Do not use this code for claims attachment(s)/other documentation. 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.) Refer to the	N890	Electronic Visit Verification Data Element Requirements were not met	CO or PI

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	835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.			
CORE-defined Business Scenario 3: Billed Service Not Covered by Health Plan				
95	Plan procedures not followed.			CO, PI, or PR
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.	N890	Electronic Visit Verification Data Element Requirements were not met.	CO, PI, or PR

2.2.4 RARC N891

New RARC N891 potentially meets the [CORE Code Combinations Evaluation Criteria](#) and can be considered for addition to the *CORE Code Combinations*. Recommendations for inclusion are in section 2.2.5.

2.2.5 RARC N891 Recommendations: Include RARC N891 with CARCs 22 & 96

The request which resulted in the creation of RARC N891 indicated that it should be used in combination with CARCs 22 or 96 to communicate zero-dollar liability scenario(s) where no reimbursement is due to the provider as no patient responsibility has been reported. CAQH CORE Staff and Task Group Co-chairs recommend these code combinations be added to the *CORE Code Combinations*.

The November 2023 CBR Initial Straw Poll asks Task Group members if they agree with the inclusion of RARC N891 with CARCs 22 and 96 to CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan in the *CORE Code Combinations*.

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Table 6. Summary of RARC N890 Recommended for Addition to the CORE-required Code Combinations

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
CORE-defined Business Scenario 3: Billed Service Not Covered by Health Plan				
22	This care may be covered by another payer per coordination of benefits.			CO, PI, or PR
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.	N891	The maximum allowable payment for this service/procedure was paid by the primary insurance. No further payment due.	CO, PI, or PR

2.2.6 RARC N892

New RARC N892 potentially meets the [CORE Code Combinations Evaluation Criteria](#) and can be considered for addition to the *CORE Code Combinations*. Recommendations for inclusion are in section 2.2.7.

2.2.7 RARC N892 Recommendations: Include RARC N892 with CARCs 16, 29

The request which resulted in the creation of RARC N892 indicated that it should be used in combination with CARCs 16 or 29 to communicate that timely filing has been approved to be extended by the payer for a specific reason, but the claim contains a Delay Reason Code not consistent with the delay reason approved. CORE Staff and Task Group Co-chairs recommend these code combinations be added to the *CORE Code Combinations*.

The November 2023 CBR Initial Straw Poll asks Task Group members if they agree with the inclusion of RARC N892 with CARC 16 in CORE-defined Business Scenario #2: Missing/Invalid/Incomplete Data from Submitted Claim and CARC 29 in CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan the *CORE Code Combinations*.

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Table 7. Summary of RARC N891 Recommended for Addition to the CAQH CORE-required Code Combinations

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
CORE-defined Business Scenario 2: Missing/Invalid/Incomplete Data from Submitted Claim				
16	Claim/service lacks information or has submission/billing error(s). Usage: Do not use this code for claims attachment(s)/other documentation. 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.) Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	N892	The claim does not meet the criteria for acceptable use of the Delay Reason Code.	CO or PI
CORE-defined Business Scenario 3: Billed Service Not Covered by Health Plan				
29	The time limit for filing has expired.	N892	The claim does not meet the criteria for acceptable use of the Delay Reason Code.	CO, PI, or PR

3 Emergency Code Combination Addition Request

3.1 Emergency Code Combination Addition Request: Addition of RARC N24 to Existing CARC 299

The Code Combination Task Group received an Emergency Code Combination Addition Request (ECCA) for the addition of RARC N24 to the existing CARC 299, along with the CAGCs of CO and PI, under Business Scenario #3. The submitter stated that the request meets requirements 1, 3, 4, and 5 of the ECCA criteria. More information on the ECCA criteria was distributed with the November 2023 CBR Launch Email.

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3.1.1 Addition of RARC N24 to Existing CARC 299 Recommendations: Do Not Add RARC N24 to Existing CARC 299

The CORE Code Combinations Task Group Staff and Co-chairs voted to reject the Emergency Code Combination Addition. This request does not meet criteria 1, 3, or 4. Note: a request must meet criteria 1 or 2 to be considered and criterion 3-5 provide additional requirements only if 1 or 2 are met.

- **Failure to meet criteria 1:** Though a regulation that potentially triggers this request was indicated, it is not new. The cited regulation went into effect on January 2nd, 1999, and was updated on October 2nd, 2013. Given this timing, no urgent timing or compliance restraint was demonstrated. Therefore, the request does not meet Criteria #1 and does not qualify as an emergency addition.
- **Failure to meeting criteria 3 and 4:** The requested code combination does not meet requirements to be included in Business Scenario #3. CORE-defined Business Scenario #3 contains code combinations that communicate a billed service is not covered by the health plan. The submitted scenario communicates that the service is covered by the health plan, but payment is withheld due to a provider not being enrolled in EFT. This scenario does not align with CORE-defined Business Scenario #3, nor does it fit into the other CORE-defined Business Scenarios. Health plans may generate their own business scenarios when the minimum set of CORE-defined Business Scenarios do not match what information must be communicated. This allowance is stated in Section 4.1.1 of the [CAQH CORE Payment & Remittance \(835\) Uniform Use of CARCs and RARCs Rule Version PR.1.1 August 2022](#). In other words, the submitted combination of CARC 299/RARC N24 can be used by the health plan to meet their operational needs.
- CORE refrains on commenting on **submitted criteria 5** because staff and co-chairs are unable to evaluate whether this request can wait until the next Compliance-based Review; however, CORE reiterates the ability of the requester to use this code combination at any time to meet their operational requirements.
- **Final Determination – Disapproved:** Requester informed to submit during the next MBR for broader industry consideration.

Table 8. Summary of the Addition of RARC N24 to Existing CARC 299 Not Recommended for Addition to the CORE-required Code Combinations

CARC #	CARC Description	RARC #	RARC Description	ASC X12 CAGC
CORE-defined Business Scenario 3: Billed Service Not Covered by Health Plan				
299	The billing provider is not eligible to receive payment for the service billed.	N24	Missing/incomplete/invalid Electronic Funds Transfer (EFT) banking information.	CO or PI

4 Next Steps

Listed below are the key next steps for the CORE Code Combinations Task Group regarding the November 2023 CBR Review:

1. Complete a Task Group Initial Straw Poll of potential Compliance-based Adjustments to the CORE Code Combinations v3.8.0 October 2023
2. Task Group discussion of the Initial Straw Poll results and agreement on Adjustments to the CORE Code Combinations v3.8.0 October 2023.
3. Complete a Task Group Follow-up Straw Poll on potential Compliance-based Adjustments to the CORE Code Combinations v3.8.0 October 2023 identified via the Initial Straw Poll and Task Group discussion. Prior to distribution of the Follow-up Straw Poll, Task Group Participants will be asked to

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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. Comments will be distributed with the follow-up straw poll for consideration by the respondents.

4. Review results of Follow-up Straw Poll and reach agreement on final Compliance-based Adjustments to the *CORE Code Combinations v3.8.0 October 2023*.
5. Goal: Per CAQH CORE policy, if adjustments are made to the *CORE Code Combinations v3.8.0 October 2023*, publish the *CORE Code Combinations v3.8.1 February 2024* on the CAQH CORE website by 02/01/2024 to ensure compliance is met.