# CAQH Committee on Operating Rules for Information Exchange (CORE) Code Combinations Task Group Results: Task Group Initial Straw Poll on Potential Compliance-based Adjustments to the CORE Code Combinations v3.9.1 June 2025 For Discussion Only

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#### 1 Initial Straw Poll Results

This document provides the results of the July 2025 CBR Initial Straw Poll for Potential Adjustments to the *CORE Code Combinations* and CORE-required Error Code Combinations. More information about the potential Compliance-based Adjustments considered by the Task Group can be found here.

#### 2 Respondent Breakdown

17 organizations responded to the CCTG ISP, representing 63% of the Task Group's active membership. The breakdown of respondents by stakeholder type is shown in **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	17 (68%)		
Health Plan/Health Plan Association Responses	5 (29%)		
Provider/Provider Association Responses	3 (18%)		
Vendor/Clearinghouse Responses	4 (24%)		
Government Responses (State Medicaid Agencies, etc.)	2 (12%)		
Other Stakeholder Type Responses (SDO/Regional Entities, etc.)	3 (18%)		

<sup>\*</sup>NOTE: Active participants attend most Task Group calls and responded to most Task Group Straw Polls for the last 5 Compliance-based Reviews or are new to the group as of 3/1/2025.

### 3 Overview of Results for CBR Initial Straw Poll Section 1: Potential Compliance-based Adjustments to the Published List of CORE-required Code Combinations for CORE-defined Business Scenarios (CARCs and RARCs)

#### 3.1 Polled CBR Code Combinations

The July 2025 CBR ISP polled four new code combinations for addition to CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan. The polled code combinations presented newly added RARC N912 for pairing with existing CARCs 96, 170, 272, and B1.

**Table 2** shows support and anonymized comments received for each polled code combination in July 2025 CBR ISP. Three polled code combinations received >65% support from the Task Group and are recommended by CORE staff and CCTG Co-chairs for **addition** into the *CORE Code Combinations*. **Table 3** shows one polled code combination received <65% support from the task group and is **NOT recommended** by CORE staff and CCTG co-chairs for addition into the *CORE Code Combinations*. Additional details about each code combination's support broken out by stakeholder type are shown in the Appendix.

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#### 3.2 CBR Code Combinations Polled for ADDITION to the CORE Code Combinations

Table 2: Polled CBR Code Combinations Receiving >65% Support for ADDITION to the CORE Code Combinations

Proposed for ADDITION to the CORE Code Combinations. Breakdowns of responses by stakeholder types are in the APPENDIX.

Line	Support %	Business Scenario	CARC	RARC	CAGC	Comments For	Comments Against
1	100% Recommendation: ADD to CORE Code Combinations 5 abstentions	3	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.	N912 Our records indicate that this beneficiary did not elect hospice.	CO, PI, or PR	N/A	N/A
2	92% Recommendation: ADD to CORE Code Combinations 5 abstentions	3	B1 Non-covered visits.	N912 Our records indicate that this beneficiary did not elect hospice.	CO, PI, or PR	N/A	One organization expressed concerns about CARC B1s specificity, adding that current usage of CARC B1 does not align with this recommended combination.
3	67% Recommendation: ADD to CORE Code Combinations 5 abstentions	3	170 Payment is denied when performed/billed by this type of provider. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	N912 Our records indicate that this beneficiary did not elect hospice.	CO, PI, or PR	N/A	N/A

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#### 3.3 CBR Code Combinations Polled recommended NOT FOR ADDITION to the CORE Code Combinations

Table 3: Polled CBR Code Combinations Receiving <65% Support for addition to the CORE Code Combinations

Proposed NOT to be recommended for addition to the CORE Code Combinations. Breakdowns of responses by stakeholder types are in the APPENDIX.

Line	Support %	Business Scenario	CARC	RARC	CAGC	Comments For	Comments Against
1	62% Recommendation: NOT ADD to CORE Code Combinations 4 abstentions	3	272 Coverage/program guidelines were not met.	N912 Our records indicate that this beneficiary did not elect hospice.	CO, PI, or PR	N/A	One organization expressed concerns about CARC 272's specificity, adding that current usage of CARC 272 does not align with this recommended combination.

#### 3.4 Overview of Straw Poll Write-Ins

Two respondents wrote in potential Code Combinations to be considered for addition to the *CORE Code Combinations*. The proposals pair newly added RARC N912 with existing CARC B12, newly added RARC N915 with existing CARC 96, and newly added RARC N916 with exisiting CARC 299 in CORE-defined Business Scenario #3: Billed Service Not Covered by Health Plan. The write-in code combinations are briefly described in **Table 5**. In accordance with <u>CORE Code Combinations Evaluation Criterion #17</u>, CAGCs align with the indicated CARC in the associated CORE-defined Business Scenario.

#### 3.5 Write-in Code Combinations

Table 4 details the written-in proposals to pair newly added RARCs with existing CARCs into CORE-defined Business Scenario #3.

Table 4: Write-in CARCs to be Combined with Newly Published RARCs

Line	Business Scenario #	CARC	RARC	CAGC
1	3	B12 Services not documented in patient's medical records.	N912 Our records indicate that this beneficiary did not elect hospice.	CO, PI, or PR
2 3		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.	N915 Predetermination of services is not allowed under the member's plan.	CO, PI, or PR
3	3	299 The billing provider is not eligible to receive payment for the service billed.	N916  The third party will render payment to the provider, and they will reimburse you for covered services.	CO, PI, or PR

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CCTG Participants will have the opportunity to submit a rationale in support of or not in support of the addition of this proposed code combinations. Support will be polled in the CCTG July 2025 CBR Follow-up Straw Poll (FSP). Timelines and instructions can be found in the CCTG July 2025 Timeline.

#### **4 Next Steps**

- Results of the ISP will be discussed during the CCTG meeting on Tuesday, August 5 at 3:00 pm ET.
- A rationale submission period for CCTG to express support or non-support of written-in Code Combinations will be distributed to the CCTG on August 7, 2025 and remain open until August 15, 2025.
- The CCTG July 2025 CBR FSP will be distributed to participants on August 25, 2025 and remain open until September 5, 2025. The next CCTG meeting will be held on September 16, 2025 at 3:00 pm ET.
- Approved adjustments to the CORE Code Combinations will be included in CORE Code Combinations v3.9.2 October 2025, which will be published by October 1, 2025.

#### 5 Appendix

Table 5: Support for Proposed CBR Adjustments by Stakeholder Type

Proposed Code Combination	% Support	% Health Plans	% Providers	% Vendors or Clearinghouses	% Government	% Other (Includes Standards Orgs)			
Potential Compliance-I	Potential Compliance-based Adjustments to the Published List of CORE-required Code Combinations for CORE-defined Business Scenarios (CARCs and RARCs)								
CARC 96 / RARC N912	100%	100%	100%	100%	100%	100%			
CARC B1 / RARC N912	92%	100%	100%	67%	100%	100%			
CARC 170 / RARC N912	67%	100%	100%	67%	0%	0%			
CARC 272 / RARC N912	62%	100%	100%	67%	0%	0%			