

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Claim Status Data Content Subgroup (CSSG)
Call #2: Standardizing Code Combinations Through Business Scenarios
April 3, 2025**

Co-Chairs: Kristin Thonsgaard, *Optum* and Tyler Scheid, *AMA*

Agenda Item	Discussion Item or Action Required
1. Kaitlin Powers, CORE, welcomed participants and reviewed the Antitrust Guidelines.	<u>Discussion</u>
2. Ms. Powers provided a level set of the call. <ul style="list-style-type: none"> Reviewed the purpose, scope, and goals of the CSSG. Reviewed the CSSG's timeline, noting a date change for Call #6 from September 11 to September 4. 	<u>Discussion</u>
3. The CSSG co-chair introduced themselves: Tyler Scheid, Lead Policy Analyst, AMA, and Kristin Thonsgaard, Manager, Optum.	<u>Discussion</u>
4. Kristin Thonsgaard, Optum, reviewed the scope of the first rule development opportunity area, standardizing code combinations through business scenarios. <ul style="list-style-type: none"> Reviewed the issues to be addressed and applicability: <ul style="list-style-type: none"> What the Rule Applies To: The rule standardizes the use of Claim Status Category Code (CSCC) and Claim Status Code (CSC) combinations in the X12 005010X212 277 Health Care Claim Status Response to define ubiquitous business cases and establish actionable next steps for information sources and receivers. Applicable Code Sources: 507 Health Care Claim Status Category Codes and 508 Health Care Claim Status Codes Applicable Loops, Segments, and Data Elements: 2200B-STC01-01, 2200B-STC01-02, 2200B-STC10-01, 2200B-STC10-02, 2200B-STC11-01, 2200B-STC11-02, 2200C-STC01-01, 2200C-STC01-02, 2200C-STC10-01, 2200C-STC10-02, 2200C-STC11-01, 2200C-STC11-02, 2200D-STC01-01, 2200D-STC01-02, 2200D-STC10-01, 2200D-STC10-02, 2200D-STC11-01, 2200D-STC11-02, 2220D-STC01-01, 2220D-STC01-02, 2220D-STC10-01, 2220D-STC10-02, 2220D-STC11-01, 2220D-STC11-02 Who It Impacts: Health plans, providers, clearinghouses, and vendors processing claim status transactions. What It Does Not Apply To: X12 005010X214 277 Health Care Claim Acknowledgment, X12 005010X213 277 Health Care Claim Request for Additional Information, and X12 005010X364 277 Data Reporting Acknowledgment Reviewed industry challenges with current claim status reporting and why standardization is important. 	<u>Discussion</u>
5. Robert Bowman, CAQH, presented five business scenarios and examples of code combinations for each scenario. <ul style="list-style-type: none"> Introduced five CORE-defined Business Scenarios: <ul style="list-style-type: none"> Claim Finalized—Payment will be made: Provider submits a claim, the claim is accepted into the adjudication system, and the payer confirms that payment is approved. Claim Finalized—No payment will be made: Provider submits a claim, the claim is accepted into the adjudication system, the claim has been processed, but the payer determines no payment is due. Claim Denied—No payment will be made: Provider submits a claim, the claim is accepted into the adjudication system, and payer confirms that payment is not approved; e.g., due to missing information or non-covered services. Claim Pending: Provider submits a claim, the claim is accepted into the adjudication system, and the payer pends the claim for review; e.g., due to medical necessity, prior authorization, or additional validation. Errors: Provider submits a claim, the claim is accepted into the adjudication system, and the payer pends the claim for review; e.g., due to medical necessity, prior authorization, or additional validation. Provided example code combinations for each business scenario and a real-world 	<u>Discussion</u>

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Claim Status Data Content Subgroup (CSSG)
Call #2: Standardizing Code Combinations Through Business Scenarios
April 3, 2025**

Agenda Item	Discussion Item or Action Required
example of how the standardized business scenario and code combination could make claim status information more specific and actionable.	
6. Tyler Scheid, AMA, provided an overview of Code Combinations Maintenance Process. <ul style="list-style-type: none"> Reviewed the CORE Code Combinations Task Group's industry collaboration, code combination maintenance process for the CORE Uniform Use of CARCs and RARCs Operating Rule and the CORE Claim Acknowledgement Data Content Rule, and its industry impact. 	<u>Discussion</u>
7. Tanner Fuchs reviewed the CSSG's next steps. <ul style="list-style-type: none"> CSSG Straw Poll #1 will be distributed to participants on Monday, April 7. One response per organization is due by Friday, April 25. <ul style="list-style-type: none"> Matt McCandless, Epic, inquired whether organizations can propose alternative business scenarios in the straw poll. Mr. Bowman clarified that the straw poll will include a question for feedback on these scenarios. CSSG Call #2 will be held on Thursday, May 22 from 3:00-3:45 pm ET. 	<u>Action Required</u> <ul style="list-style-type: none"> Agreed to next steps.

CORE Contact Information		
Robert Bowman Principal, Interoperability and Standards, CAQH rbowman@caqh.org	Kaitlin Powers Manager, CORE kpowers@cahq.org	Tanner Fuchs Senior Associate, CORE tfuchs@caqh.org

CORE Claim Status Subgroup Roster

Name	Organization
Rose Hodges	Aetna
Mark Rabuffo	Aetna
Rebekah Fiehn	American Dental Association
Andrea Preisler	American Hospital Association
Emma Andelson	American Medical Association
Celine Lefebvre	American Medical Association
Heather McComas	American Medical Association
Rob Otten	American Medical Association
Tyler Scheid	American Medical Association
Muhamed Cesko	athenahealth
Leah Barber	Availity
Gail Kocher	Blue Cross Blue Shield Association
Sal Zarate	Blue Cross Blue Shield of North Carolina
Jamie Osborne	Children's Healthcare of Atlanta
Rob Sikorski	DaVita
Robin Strange	DaVita
leslie allanson	Elevance Health
James Habermann	Epic
Matt McCandless	Epic
Geoff Palka	Epic
Christopher Gracon	HEALTHeNET
Cari Adams	Humana
Patricia Edmondson	Humana

**CAQH Committee on Operating Rules for Information Exchange (CORE)
Claim Status Data Content Subgroup (CSSG)
Call #2: Standardizing Code Combinations Through Business Scenarios
April 3, 2025**

Name	Organization
William Barba	Kaiser Permanente
David Tran	Kaiser Permanente
Gheisha-Ly Rosario Diaz	Labcorp
Betsy Dunlap	Mayo Clinic
Rebecca Fortek	Mayo Clinic
Christan Hegland	Mayo Clinic
Travis Nixa	Mayo Clinic
Kelsey Rolling	Mayo Clinic
Joel Banazek	NAHAM
Juliet Sullivan	NAHAM
Holly Arlofski	Optum
Odianosen Ayewoh	Optum
Alka Mukker	Optum
Tara Rose	Optum
Kristin Thonsgaard	Optum
Anna Tymczak	Optum
Marie Becan	PeaceHealth
Shannon Kennedy	Sekhmet Advisors
Jack Pregeant	SSI
Diana Fuller	State of Michigan Medicaid
George Hurgeton	Stedi, Inc.
Nick Radov	Stedi, Inc.
Tracey Tillman	The SSI Group
Nick Caddell	The SSI Group, LLC.
Terri Cook	UnitedHealthcare
Holly Gilligan	UnitedHealthcare
Kiran Kalluri	UnitedHealthcare
Sonya May	UnitedHealthcare
Nancy Spector	WEDI
Robert Tennant	WEDI