CAQH CORE Error Code Combinations Evaluation Criteria
Updated as of 06/01/2025

1. Definition of CSCC must be consistent with the associated CORE-defined Claim Rejection Business Scenario description.
   - Note: If ambiguity arises, the appropriate CORE-defined Claim Rejection Business Scenario will be determined by Task Group Participants.
2. Each CSCC must be used with only one CORE-defined Claim Rejection Business Scenario.
3. Any CSC paired with a CSCC must be consistent with the CSCC and CORE-defined Claim Rejection Business Scenario description.
4. No CSC will be added to CORE-defined Claim Rejection Business Scenarios without a corresponding CSCC.
5. The same CSC can be used with multiple CSCCs and Business Scenarios.
6. A CSCC containing a Deactivation Date must be removed from CORE-required Error Code Combinations.
7. A CSC containing a Deactivation Date must be removed from CORE-required Error Code Combinations.
8. A CORE-required Error Code Combination containing a modified CSCC will only be retained if the modified definition is consistent with the CORE-defined Business Scenario.
9. A CORE-required Error Code Combination containing a modified CSCC paired with a CSC will only be retained if the modified definition is consistent with the associated CSCC and CORE-defined Claim Rejection Business Scenario.
10. All CORE-required Error Code Combinations must align with applicable standards and published code lists.
11. Ensure error code combination precisely and accurately reflects the reason for the health plan rejection.
12. Ensure error code combination clearly defines what action, if any, is needed by the provider.
13. Ensure the error code combination is unique in its message (i.e., avoid duplication within the Claim Rejection Business Scenario Business Scenario).
14. An existing error code combination should be removed when it is redundant or similar but less clear than a new error code combination.
15. Ensure associated CSC adds additional specificity and is not redundant to CSCC.