TO: All Providers

RE: Implementation of ACA 1104 Uniform Use of CARCs, RARCs and CAGCs on the X12 835 Health Care Claim Payment/Advice

This bulletin serves to inform all providers that on November 1, 2014 the Department of Social Services (DSS) and HP will be updating the Claim Adjustment Reason Codes (CARCs), Remittance Advice Reason Codes (RARCs), and Claim Adjustment Group Codes (CAGCs) reject code combinations on the X12 835 Health Care Claim Payment/Advice in order to comply with Phase III - Council of Affordable Quality Healthcare (CAQH) Committee for Operating Rules for Information Exchange (CORE) Electronic Remittance Advice (ERA) Operating Rules.

CAQH CORE 360

Rule 360 specifies the combination of codes that can be included on the v5010 X12 835 data for certain Business Scenarios. HIPAA legislation dictated the use of a common set of codes to communicate claims processing information to the submitter of the claim. HIPAA code sets include the uniform use of Claim Adjustment Reason Codes (CARCs), Remittance Advice Reason Codes (RARCs), and Claim Adjustment Group Codes (CAGCs) reject code combinations by all payers, based upon four CORE defined Business Scenarios. Please refer to Provider Bulletin 2014-51 "Implementation of ACA 1104 Phase III Operating Rules - EFT and ERA Changes (Non-RX claims)" for CORE defined Business Scenarios.

X12 835 Health Care Claim Payment/ Advice

The 5010 X12 835 Health Care Claim Payment/Advice will be updated on November 1, 2014 with the new combinations of CARCs, RARCs, and CAGCs reject code combinations.

Providers should contact their trading partner or clearing house and inform them of the updates to the X12 835 Health Care Claim Payment/Advice. The first X12 835 with these changes will occur after the November 7, 2014 claim cycle dated November 13, 2014. Please refer to the Medical Assistance Program Explanation of Benefits (EOB) Crosswalk on the Web Site www.ctdssmap.com for all updates.

Medical Assistance Program Explanation of Benefits (EOB) Crosswalk

On October 1, 2014, the Medical Assistance Program EOB Crosswalk will be updated and split into two documents, one for pharmacy claims and one for non-pharmacy claims. The new crosswalk will be available on the Web site www.ctdssmap.com under Publications then scroll down to "Claim Processing Information", select either the "Medical Assistance Program EOB Crosswalk - Pharmacy Claims" link or "Medical Assistance Program EOB Crosswalk - Non-Pharmacy Claims" link. The crosswalk will contain the EOB, EOB Description, Business Scenario, the CAGC, CARC, Remark Code, and RARCs with a description of each code. The new crosswalks will be updated weekly, providers should refer to this document periodically.

The EOBs can be found on the Remittance Advice (RA) PDF on the secure Web site www.ctdssmap.com under "Trade Files" then choose "Download" from the drop down menu. Select "Remit. Advice (RA) - PDF" from the "Transaction Type" on the File Download Search screen.

Questions? Need assistance? Call the HP Provider Assistance Center Mon. – Fri. 8:00 a.m. – 5:00 p.m.
Toll free 1-800-842-8440 or write to HP, PO Box 2991, Hartford, CT 06104
Program information is available at www.ctdssmap.com