interChange Provider Important Message

Attention Providers - Updates to 835 Electronic Remittance Advice (ERA)

The following Explanation of Benefit (EOB) codes will have changes to their Claim Adjustment Reason Code (CARC) and/or Remittance Advice Remark Code (RARC), effective for January 2, 2020:

EOB code 3327 "Confirmed Visit Not Found"								
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
197	Precertification/ authorization/ notification/ pre-treatment absent.			⮕	16	Claim/ service lacks information or has submission/ billing error(s).	N821	Electronic Visit Verification System visit not found.

EOB code 3328 "Confirmed Visit Units are Exhausted"			EOB code 0047 "Confirmed Visit Units are Exceeded"					
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
198	Confirmed Visit Units Are Exceeded.	N54	Claim information is inconsistent with pre-certified/ authorized services	⮕	16	Claim/ service lacks information or has submission/ billing error(s).	N820	Electronic Visit Verification System units do not meet requirements of visit.

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EOB code 841 "UNITS OF MEASURE REQUIRED FOR NDC"								
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
16	Claim/ service lacks information or has submission/ billing error(s).	M123	Missing/ incomplete/ invalid name, strength, or dosage of the drug furnished.	➡	16	Claim/ service lacks information or has submission/ billing error(s).	N816	Missing/ Incomplete/ Invalid NDC Unit of Measure.

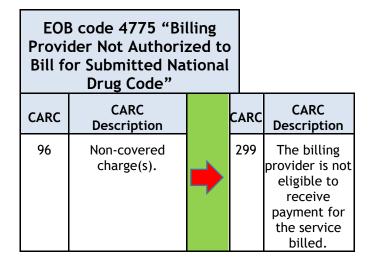| EOB code 842 "NDC Units Missing or Invalid"								
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
16	Claim/ service lacks information or has submission/ billing error(s).	M349	The administration method and drug must be reported to adjudicate this service.	➡	16	Claim/ service lacks information or has submission/ billing error(s).	N815	Missing/ Incomplete/ Invalid NDC Unit Count.

EOB code 1001 "Billing Provider Ineligible on Date(s) of Service"								
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
170	Payment is denied when performed/billed by this type of provider.	N95	This provider type/provider specialty may not bill this service.	➡	299	The billing provider is not eligible to receive payment for the service billed.	N767	The Medicaid state requires provider to be enrolled in the member's Medicaid state program prior to any claim benefits being processed.

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EOB code 0251 "First Modifier is Invalid"		EOB code 0252 "Second Modifier is Invalid"			EOB code 0253 "Third Modifier is Invalid"		EOB code 4245 "Fourth Modifier is Invalid"	
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
182	Payment adjusted because the procedure modifier was invalid on the date of service. Claim/service lacks information or has submission/billing error(s).	N517	Resubmit a new claim with the requested information.	➡	16	Claim/ service lacks information or has submission/ billing error(s).	N823	Incomplete/ Invalid HCPCS modifier(s).

EOB code 4149 "Billing provider not authorized to bill for submitted procedure code"		EOB code 4151 "Billing provider not authorized to bill for submitted service for client"			EOB code 4140 "The service submitted is not covered under the client's benefit plan"			
CARC	CARC Description	RARC	RARC Description		CARC	CARC Description	RARC	RARC Description
96	Non-covered charge(s).	N95	This provider type/provider specialty may not bill this service.	➡	299	The billing provider is not eligible to receive payment for the service billed.	N95	This provider type/ provider specialty may not bill this service

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EOB code 4775 "Billing Provider Not Authorized to Bill for Submitted National Drug Code"				
CARC	CARC Description		CARC	CARC Description
96	Non-covered charge(s).	→	299	The billing provider is not eligible to receive payment for the service billed.

The existing Connecticut Medical Assistance Program (CMAP) EOB Crosswalk located on the www.ctdssmap.com Web site under Publications > Claim Processing Information > **Medical Assistance Program EOB Crosswalk Pharmacy and Non-Pharmacy** has been updated to reflect these changes.

Updates to CORE Code Combinations, including additions, deletions and modifications, occur three times per year and can be accessed by clicking the link below:

http://www.caqh.org/core/ongoing-maintenance-core-code-combinations-caqh-core-360-rule

Providers are asked to update their auto post systems accordingly.

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