



Provider Inquiry Assistance

Remittance Advice Remark Code (RARC) and Claim Adjustment Reason Code (CARC) Update – JA6336

Related CR Release Date: January 30, 2009

Date Job Aid Revised: March 2, 2009

Effective Date: April 1, 2009

Implementation Date: April 6, 2009

Key Words MM6336, CR6336, R1674CP, RARC, CARC

Contractors Affected

- Part A/B Medicare Administrative Contractors (A/B MACs)
- Medicare Carriers
- Fiscal Intermediaries (FIs)
- Durable Medical Equipment MACs (DME MACs)
- Regional Home Health Intermediaries (RHHIs)

Provider Types Affected

Physicians, providers, and suppliers who submit claims to Medicare Carriers, FIs, RHHIs, A/B MACs, DME MACs for services provided to Medicare beneficiaries



Change Request (CR) 6336 updates RARCs and CARCs. For providers that use the Medicare Remit Easy Print software from their Medicare contractor, they may need to download the updated version when it is available on April 6, 2009.

X12N 835 Health Care CARCs

Provider Needs to Know...

- The lists of new, modified, and deactivated CARCs may be found on page 3 of MLN Matters article MM6336 at <http://cms.hhs.gov/MLNMattersArticles/downloads/MM6336.pdf> on the Centers for Medicare & Medicaid Services (CMS) website.
- The CARC list is maintained by a national Code Maintenance committee that meets when X12 meets for their trimester meetings (occurring in January/February, June, and

September/October) to make decisions about additions, modifications, and retirement of existing reason codes.

X12N 835 Health Care RARCs

- The RARC list is maintained by the CMS and used by all payers. Additions, deactivations, and modifications to it may be initiated by any health care organization.
- The RARC list is updated 3 times a year (in early March, July, and November) although the committee meets every month.
- New RARCs can be found in the table on page 4 of MM6336.
- There are no modified or deactivated RARC codes in CR6336.

Note: The RARC and CARC code list are updated at the same time and posted at <http://www.wpc-edi.com/Codes> on the Internet.

- CMS has also developed a tool to help providers search for a specific category of remark code. That tool is available at <http://www.cmsremarkcodes.info> on the Internet.
- This website does not replace the Washington Publishing Company (WPC) site at <http://www.wpc-edi.com/Codes>. If there are any discrepancies in what is posted on the CMS website and the WPC website, providers should consider the WPC to be correct.

Background

- The Group and the reason and remark code sets must be used to report payment adjustments in remittance advice transactions.
- Remark codes must also be used when appropriate to report additional explanation for any adjustment or to provide general policy information.
- The reason codes are also used in some coordination-of-benefits transactions.

Operational Impact

N/A

Reference Materials

The related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6336.pdf> on the CMS website.

The official instruction (CR6336) issued regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1674CP.pdf> on the CMS website.

For additional information about Remittance Advice, providers should refer to *Understanding the Remittance Advice (RA): A Guide for Medicare Providers, Physicians, Suppliers, and Billers* at http://www.cms.hhs.gov/MLNProducts/downloads/RA_Guide_Full_03-22-06.pdf on the CMS website.
