



Provider Inquiry Assistance

Claim Adjustment Reason Code (CARC), Remittance Advice Remark Code (RARC), and Medicare Remit Easy Print (MREP) Update – JA6453

Related CR Release Date: May 15, 2009

Date Job Aid Revised: June 10, 2009

Effective Date: July 1, 2009

Implementation Date: July 6, 2009

Key Words MM6453, CR6453, R1734CP, Adjustment, Remittance, CARC, RARC, MREP

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

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



Change Request (CR) 6453 announces the latest update of RARCs and CARCs, effective July 1, 2009.

Provider Needs to Know...

- The lists at the end of the Additional Information section of MLN Matters® MM6453 summarize the latest changes to the CARC and RARC, as announced in CR6453.
- This list includes:
 - New, modified, and deactivated CARC codes, and
 - New, modified, and deactivated RARC codes.
- As a reminder, CR6336 noted that CARC 17 is being replaced with 2 new CARCs:
 - CARC 226: Information requested from the Billing/Rendering Provider was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or

NCPDP Reject Reason Code.); and

- CARC 227: Information requested from the patient/insured/responsible party was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.).
- The CARC and RARC lists are posted at <http://www.wpc-edi.com/Codes> on the Washington Publishing Company (WPC) website.
- The Centers for Medicare & Medicaid Services (CMS) tool to help the search for a specific category of Remark Code is available at <http://www.cmsremarkcodes.info> on the Internet.
- Should there be any discrepancies in what is posted at the CMS website and the WPC website, providers should consider the WPC site to be correct.

Background

- The reason and remark code sets are used to report payment adjustments in remittance advice transactions. The reason codes are also used in some coordination-of-benefits transactions.
- The RARC list is maintained by CMS, and used by all payers. Additions, deactivations, and modifications to it may be initiated by any health care organization.
- 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.
- The RARC list and the CARC list are updated 3 times a year – in early March, July, and November.

Operational Impact

N/A

Reference Materials

The related MLN Matters® article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6453.pdf> on the CMS website.

The official instruction (CR6453) issued regarding this change may be found at <http://www.cms.hhs.gov/Transmittals/downloads/R1734CP.pdf> on the CMS website.

MLN Matters® article MM6336 can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6336.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.
