What's new in Version 8060 X12 Implementation Guides

Insurance Industry Specific Remark Code List

Remark codes, present in the Claim Adjustment Information and Service Adjustment Information Segments (835: 2100 and 2110 loop RAS segment, 837: 2320 and 2430 Loop RAS segment), as well as the LQ segments (835-2100 and 2110 loops) supplement the information provided by the Claim Adjustment Reason Code (CARC) to further clarify the reason for the adjustment.

Remark codes can be from three different code lists:

1. Remittance Advice Remark Codes – Maintained by CMS
2. NCPDP Reject Codes – Maintained by NCPDP
3. The IISRC is a new external code list and provides a set of specific remark codes related to certain industry segments e.g., the dental industry or Property & Casualty – Maintained by X12

Remark codes present in the RAS segment provide additional reasons for the adjustment and are directly related to the CARC. Up to five remark codes can be reported for each CARC. Remark codes not directly related to a CARC are reported in the LQ Segment in the claim and service loops. Claim level LQ segment replaces the MIA/MOA segments for reporting remark codes.

How can this benefit you?

IISRC provides more descriptive remark code information for specific industry segments. Claim level LQ standardizes reporting of remark codes not related to a specific CARC. Improved member and provider satisfaction. Incentivize 835 adoption.

Reduces cost: Manual claim rework ● Decrease in provider A/R days and write-offs ● Managing appeal process ● System processing ● Operational costs e.g., phone calls, service tickets

How can this impact you?

Payer and Business Associate business processes: Additional remark code list to use in mapping and validation ● Update database structure ● Online display of ERA needs to match the 835 content ● Internal education e.g., EDI and help desk.

Practice Management System (PMS): Update software to receive increased number of remarks and new remark list ● Update display and reporting of increased number of codes ● Update automated processes based on the CARCs and remarks, Internal education e.g., client facing staff ● External education to customers

Provider business processes: Work with PMS to update software for increased number of remarks and new remark list ● Review and update reports containing CARCs and remarks ● Internal education

Clearinghouse: Additional remark code list to use in mapping and validation ● Update database structure ● Online display of ERA needs to match the 835 content ● Internal education e.g., EDI and help desk

Refer to X12's 008060X322 Health Care Claim Payment/Advice (835) for additional information on the IISRC and LQ segment.