Provider Bulletin

News and Information



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Reminder: How to Handle Denials with a CARC and RARC Combination Containing LCD Denials

If a provider receives a denial with a Claim Adjustment Reason Code (CARC) and Remittance Advice Remark Code (RARC) combination that contains a Local Coverage Determination (LCD), this denial is based on National Government Services Local Coverage Determination (NGS LCD) criteria. UCare enforces these criteria. Guidance can be found within the Medical Policies section of the <u>National Government Services website</u>.

Examples of CARC/RARC combinations containing LCD denials:

- CARC: 11 The diagnosis is inconsistent with the procedure and RARC: N115 This decision was based on a Local Coverage Determination (LCD). An LCD provides a guide to assist in determining whether a particular item or service is covered.
- CARC: 167 This (these) diagnosis(es) is (are) not covered and RARC: N115 This decision was based on a Local Coverage Determination (LCD). An LCD provides a guide to assist in determining whether a particular item or service is covered.
- CARC: 96 Non-covered charge(s) and RARC: N115 This decision was based on a Local Coverage Determination (LCD). An LCD provides a guide to assist in determining whether a particular item or service is covered.

If a provider receives a denial with a CARC/RARC combination that contain a National Coverage Determination (NCD), this denial is based on NCD criteria. UCare enforces these criteria. Guidance can be found on the <u>CMS</u> website.

An example of a CARC/RARC combination containing NCD denial:

• CARC: 4 – The procedure code is inconsistent with the modifier used and RARC: N386 – This decision was based on National Coverage Determination (NCD). An NCD provides a coverage determination as to whether a particular item or service is covered.

