

Edit	Edit Definition	Claim Adj Reason Code	Claim Adj Reason Code Definition	RARC	RARC's Definition
<p>The following eMedNY edits will be mapped to the listed HIPAA codes in August 2007. The HIPAA codes, consisting of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC), will appear in the 835 transaction for providers who receive an electronic remittance advice.</p>					
01207	CARE AT HOME RATE DOES NOT MATCH RECIPIENTS PROGRAM	A1	Claim/Service denied.	N216	Patient is not enrolled in this portion of our benefit package
<p>The following edit mappings were effective in July 2007.</p>					
00674	INVALID ADJUST CODE FOR STATE TSN ADJUSTMENT/VOID	A1	Claim/Service denied.	N377	Payment adjusted based on a processed replacement claim.
00695	NON-PAY RECIPIENT BILLED	A1	Claim/Service denied.	N52	Patient not enrolled in the billing provider's managed care plan on the date of service.
01079	CATEGORY OF SERVICE REQUIRES MEDICARE	A1	Claim/Service denied.	N36	Claim must meet primary payer's processing requirements before we can consider payment.
00025	SPECIAL CONSIDERATION INDICATOR INVALID	A1	Claim/Service denied.	N354	Incomplete/invalid invoice
00240	OVER TWO YEAR OLD CLAIM HELD FOR FUTURE ADJUDICATION	133	The disposition of this claim/service is pending further review.	N182	This claim/service must be billed according to the schedule for this plan.
00397	AMOUNT IS 10% OR LS AMT ON PROCEDURE FILE	133	The disposition of this claim/service is pending further review.	N14	Payment based on a contractual amount or agreement, fee schedule, or maximum allowable amount
01141	PROVIDER EXCEPTION IND REQUIRES PEND (DOH)	133	The disposition of this claim/service is pending further review.	N191	The provider must update insurance information directly with payer.

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01283	UPPER DOLLAR LIMIT EXCEEDED	A1	Claim/Service denied.	N14	Payment based on a contractual amount or agreement, fee schedule, or maximum allowable amount.
01288	CLAIM FOR SAME SERVICE PREVIOUSLY REVIEWED AND DENIED	A1	Claim/Service denied.	N185	Do not resubmit this claim/service.