



### **Attention all Providers receiving Electronic Remit Transactions (835)**

Molina is now employing the CAQH CORE-required Claim Adjustment Reason Code (CARC) and Remittance Advice Remark Code (RARC) code combinations in the X12 5010 835 transactions. Use of the HIPAA CARC and RARC code combinations are required as part of Section 1104 of the Affordable Care Act. A crosswalk report of the HIPAA code sets to the Louisiana Medicaid proprietary error codes is available to assist providers with the interpretation of the new code combinations. The January 2014 version of the crosswalk report RF-0-77 is available by clicking [here](#) and the RF-0-77R is available by clicking [here](#). The first report is in Medicaid Error Code order and the second report is in HIPAA (CARC) Error Code order.

Ongoing, the monthly RF-0-77 and RF-0-77R reports will continue to be available on the Forms/Files/User Manuals link under the headings of HIPAA/LA Medicaid Error Code Crosswalk and LA Medicaid/HIPAA Error Code Crosswalk. These reports are posted monthly and updated with any changes made during each month.

For a complete description of HIPAA Error Codes (Claim Adjustment Reason Codes-CARCs and Remittance Advice Remark Codes-RARCs) please go to [www.wpc-edi.com](http://www.wpc-edi.com) under the link Code Lists.