

## WellCare Accepts Secondary Claims Electronically

WellCare encourages providers to submit Coordination of Benefits (COB) claims electronically. This data is essential for adjudicating claims correctly. COB claims can be processed more efficiently by directly submitting from:

- A provider who has received a remittance advice from the previous payer (provider-to-payer COB)
- The previous payer (Payer-to-payer COB)

### Tips for submitting Coordination of Benefits claims:

In order to submit COB claims, your practice management system, data entry portal, or your clearinghouse must be able to:

- Create or forward claims in full HIPAA standard format (837) or in a format that contains equivalent information and includes necessary COB fields.
  - Include electronic payment information received from the primary payer's HIPAA standard electronic remittance advice (ERA); or
  - Include electronic payment information by converting the primary payer's paper Explanation of Benefits (EOB) into HIPAA standard coding used in an ERA.

### 837I/837P Coordination of Benefits (COB) and Adjudication Information – Member Out of Pocket (MOOP)

All submitters that adjudicate claims for the Plan HMO or have COB information from other payers are required to send in all the COB and Adjudication Loops as per the Coordination of Benefits 1.4.1 section within the 837 Institutional and Professional (TR3) Implementation Guides.

Providers and Vendors must have the 837 Institutional or Professional (TR3) Implementation Guide to create the Loops below correctly.

The required Loops and Segments that are needed to be sent for a compliant COB are as follows:

- Other Subscriber Information (2320) Loop
- Other Subscriber Name (2330A) Loop
- Line Adjudication Information (2430) Loop
- For Out-of-Pocket amounts, utilize 2430 Loop for Patient Responsibility.
  - This includes Coinsurance, Co-pays and Deductibles – (Please refer to Code Set 139 for the correct Claim Adjustment Reason Code)

### Professional 837 COB Balancing Claim Level-(837P 5010 IG -1.4.4.1-)

There are two different ways the claim information must balance. They are as follows:

#### 1) Claim Charge Amounts

The total claim charge amount reported in Loop ID-2300 CLM02 must balance to the sum of all service line charge amounts reported in Loop ID-2400 SV102.

#### 2) Claim Payment Amounts

Balancing of claim payment information is done payer by payer. For a given payer, the sum of all line level payment amounts (Loop ID-2430 SVD02) less any claim level adjustment amounts (Loop ID-2320 CAS adjustments) must balance to the claim level payment amount (Loop ID-2320 AMT02).

Expressed as a Loop ID-2320 AMT02 payer payment} =  
{sum of Loop ID-2430 SVD02 payment amounts} minus {sum of Loop ID-2320 CAS  
adjustment amounts}.

### Line Level Payment Amounts

Line level payment information is reported in Loop ID-2430 SVD02. In order to perform the balancing function, the receiver must know which payer the line payment belongs to. This is accomplished using the identifier reported in Loop ID-2430 SVD01. This identifier must match the identifier of the corresponding payer identifier reported in Loop ID-2330B NM109.

### Adjustment Calculations

Adjustments are reported in the CAS segments of Loop ID-2320 (claim level) and Loop ID-2430 (line level). In this context, Adjustment Amounts are the sum of CAS03, CAS06, CAS09, CAS12, CAS15, and CAS18. Adjustment amounts within the CAS segment **DECREASE** the payment amount when the adjustment amount is **POSITIVE**, and **INCREASE** the payment amount when the adjustment amount is **NEGATIVE**.

### Claim Level Payment Amount

At the claim level, the payer's total claim payment is reported within the Loop ID-2320 Coordination of Benefits (COB) Payer Paid Amount AMT segment with a D qualifier in AMT01. The associated payer is defined within the Loop ID-2330B child loop.

### Example:

Claim Charge – 100.00  
Claim Payment – 80.00  
Claim Adjustment – 5.00  
Line 1 Charge – 80.00  
Line 1 Payment – 70.00  
Line 1 Adjustment – 10.00  
Line 2 Charge – 20.00  
Line 2 Payment – 15.00  
Line 2 Adjustment – 5.00  
Claim Payment = (Line 1 Payment + Line 2 Payment) – Claim Adjustment  
80.00 = (70.00 + 15.00) - 5.00

### Professional 837 COB Balancing Line Level(837P 5010IG -1.4.4.2-)

Line Adjudication Information (Loop ID-2430) is reported when the payer identified in Loop ID-2330B has adjudicated the claim and service line payments and/or adjustments have been applied. Line level balancing occurs independently for each individual Line Adjudication Information loop.

In order to balance, the sum of the line level adjustment amounts and line level payments in each Line Adjudication Information loop must balance to the provider's charge for that line (Loop ID-2400 SV102). The Line Adjudication Information loop can repeat up to 25 times for each line item. The calculation for each 2430 loop is as follows: {sum of Loop ID-2430 CAS Service Line Adjustments} plus {Loop ID-2430 SVD02 Service Line Paid Amount} = {Loop ID-2400 SV102 Line Item Charge Amount}

### Example:

Line 1 Charge – 80.00  
Line 1 Payment – 70.00  
Line 1 Adjustment – 10.00

Line 2 Charge – 20.00  
Line 2 Payment – 15.00  
Line 2 Adjustment – 5.00  
(Line 1 Adjustments) + (Line 1 Payment) = Line Item 1 Charge  
10.00 + 70.00 = 80.00  
(Line 2 Adjustments) + (Line 2 Payment) = Line Item 2 Charge  
5.00 + 15.00 = 20.00

**Institutional 837 COB Balancing**  
**Claim Level(837I IG -1.4.4.1)**

There are two different ways the claim information must balance. They are as follows:

**1) Claim Charge Amounts**

The total claim charge amount reported in Loop ID-2300 CLM02 must balance to the sum of all service line charge amounts reported in Loop ID-2400 SV203.

**2) Claim Payment Amounts**

Balancing of claim payment information is done by payer at the claim level. The payer's total claim payment is reported within the Loop ID-2320 Coordination of Benefits (COB) Payer Paid Amount AMT segment with a D qualifier in AMT01. The associated payer is defined within the Loop ID-2330B child loop.

**Example:**

Claim Charge – 100.00  
Claim Payment – 80.00  
Claim Adjustment – 5.00  
Line 1 Charge – 80.00  
Line 1 Payment – 70.00  
Line 1 Adjustment – 10.00  
Line 2 Charge – 20.00  
Line 2 Payment – 15.00  
Line 2 Adjustment – 5.00  
Claim Payment = (Line 1 Payment + Line 2 Payment) – Claim Adjustment  
80.00 = (70.00 + 15.00) - 5.00

**Institutional 837 COB Balancing**  
**Line Level(837I IG -1.4.4.2-)**

Line Adjudication Information (Loop ID-2430) is  
Line 1 Charge – 80.00  
Line 1 Payment – 70.00  
Line 1 Adjustment – 10.00  
Line 2 Charge – 20.00  
Line 2 Payment – 15.00  
Line 2 Adjustment – 5.00  
(Line 1 Adjustments) + (Line 1 Payment) = Line Item 1 Charge  
10.00 + 70.00 = 80.00  
(Line 2 Adjustments) + (Line 2 Payment) = Line Item 2 Charge  
5.00 + 15.00 = 20.00

**Resource Guides:** 5010 Professional and Institutional 837 Implementation Guides are available from the Washington Publishing Company. Coordination of Benefits Section 1.4 is located on pages 3–26 in both 837 Institutional and Professional Guides (May 2006).

COB Balancing Claim Level and Line Sections are located:

- 837 Professional IG – Claim Level pages 299–304 and Line Level pages 484–489



- 837 Institutional IG – Claim Level pages 358–363 and Line Level pages 480–485

For claims filing and EDI-related issues, please send an email to WellCare's EDI Department at [EDI-Master@wellcare.com](mailto:EDI-Master@wellcare.com).

**Professional 837 Example (837P)**

ISA\*00\* 00\* \*ZZ\*ZIR83707 \*ZZ\*ZADMCA79

\*150402\*1516\*^\*00501\*000012071\*1\*P\*~

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ST\*837\*2791\*005010X222A1~

BHT\*0019\*00\*5178687\*20150402\*151600\*CH~

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PER\*IC\*EDI Operations\*TE\*8774947633\*EX\*7\*EM\*PRODUCTION@ZIRMED.COM~

NM1\*40\*2\*RELAY HEALTH WELLCARE\*\*\*\*\*46\*ZADMCA79~

HL\*1\*\*20\*1~

PRV\*BI\*PXC\*207L00000X~

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N3\*1111 HAPPY LANE~

N4\*TAMPA\*FL\*336340000~

REF\*EI\*123456789~

PER\*IC\*HAPPY ANESTHESIOLOGISTS\*TE\*8474573800~

NM1\*87\*2~

N3\*PO BOX 631~

N4\*TAMPA\*FL\*336340000~

HL\*2\*1\*22\*0~

SBR\*T\*18\*\*\*\*\*MC~

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N3\*125 S. HAPPY LANE~

N4\*TAMPA\*FL\*33634~

DMG\*D8\*19400319\*F~

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REF\*D9\*1414097092~

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HI\*BK:8208~

NM1\*DN\*1\*DOE\*JOHN\*\*\*\*XX\*12

REF\*G2\*W259483~

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PRV\*PE\*PXC\*207L00000X~

REF\*G2\*W254982~

NM1\*77\*2\*HAPPY TRAILS MEMORIAL HOSPITAL\*\*\*\*\*XX\*1234567890~

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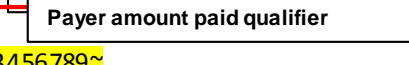
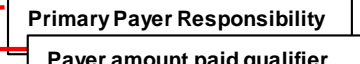
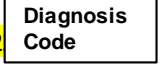
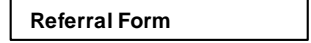
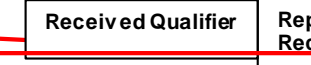
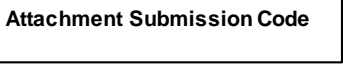
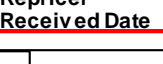
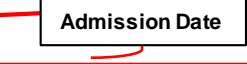
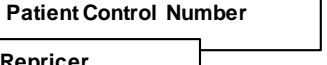
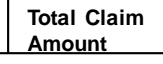
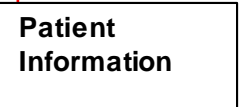
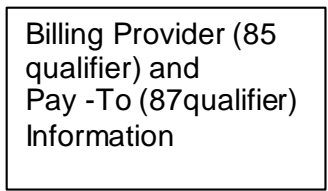
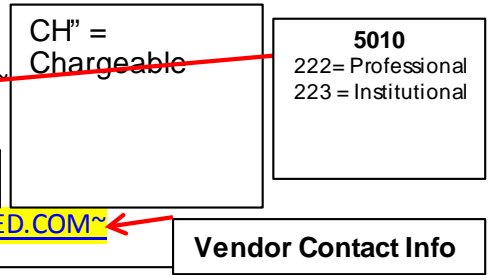
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N4\*TAMPA\*FL\*33634~



NM1\*PR\*2\*ADVOCATE\*\*\*\*\*PI\*ADMCA811~  
 SBR\*S\*18\*\*\*\*\*77~  
 AMT\*D\*0~  
 OI\*\*\*Y\*\*\*Y~

Payer Name

NM1\*IL\*1\*DOE \*JANE \*\*\*\*\*MI\*123456789~  
 N3\*125 S. HAPPY LANE~  
 N4\*TAMPA\*FL\*33634~  
 NM1\*PR\*2\*MEDICAID\*\*\*\*\*PI\*MEDICAID~

LX\*1~  
 SV1\*HC:01210:P3.....ANES FOR OPEN PROCEDURES INVOLVING HIP JOIN

Professional Service Line

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 REF\*6R\*1414097092Z1~

Date-Service Date

SVD\*ADMCA811\*438.35\*HC:01210\*\*18~  
 CAS\*CO\*253\*8.95\*\*45\*1927.7~

Line Adjudication Information with Payer ID

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Contractual obligations qualifier, Adj. Reason, and Amt. of Adj.

Line Adjudication Date

CAS\*OA\*22\*2375~  
 DTP\*573\*D8\*20150317~

Line Adjudication Information with Payer ID

Other Adj. (OA) and Amt. of Adj.  
 Line Adjudication Date

LX\*2~  
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Professional Service Line

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 REF\*6R\*1414097092Z2~

Date-Service Date

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Line Adjudication Information with Payer ID

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Contractual Obligations Qualifier, Adj. Reason, and Amt. of Adj.

Line Adjudication Date

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Line Adjudication Information with Payer ID

Other Adj. (OA) and Amt. of Adj.

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Line Adjudication Date

**Institutional 837 Example (837I)**

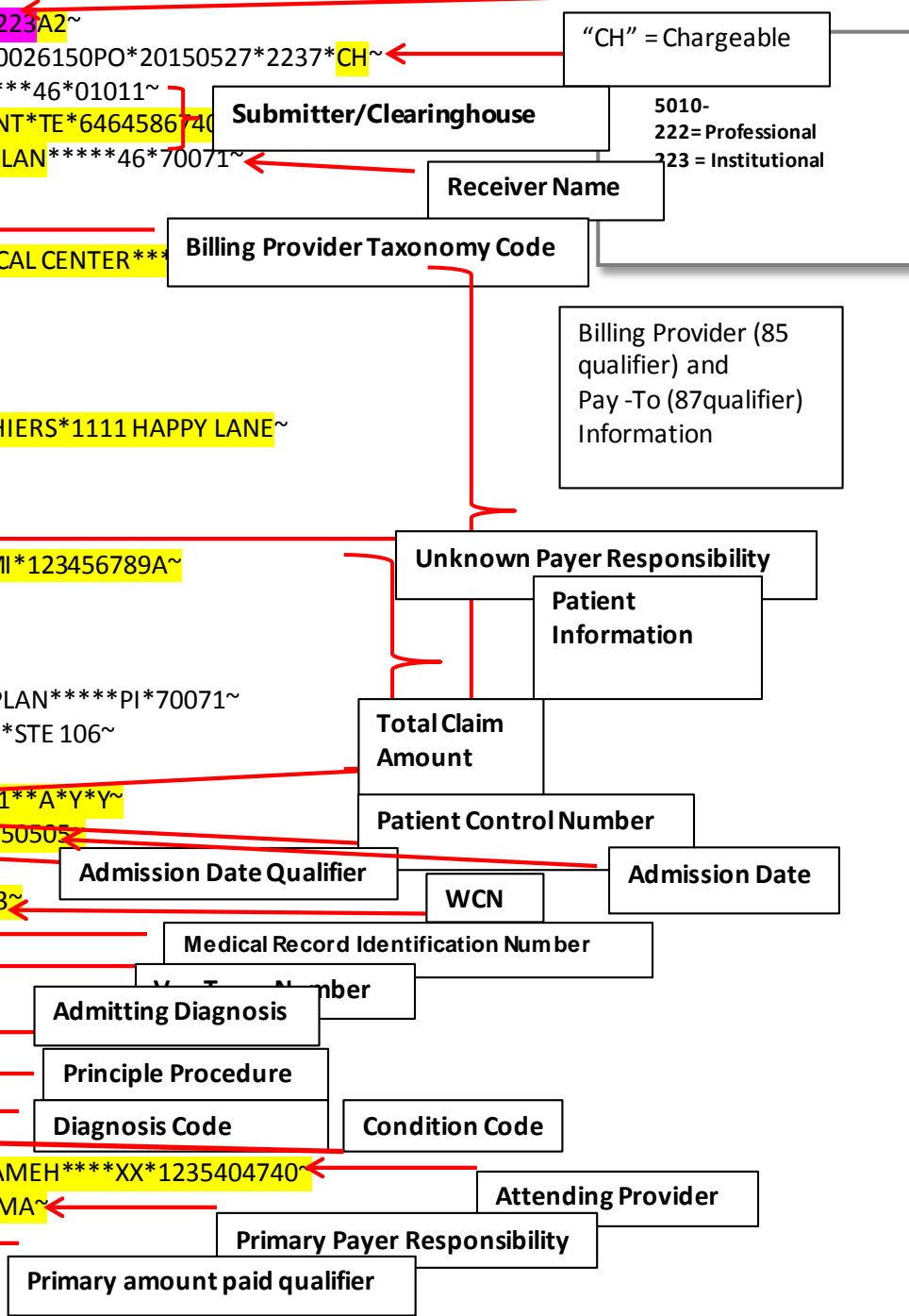
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 REF\*EI\*123456789~  
 NM1\*87\*2~  
 N3\*ATTN MANAGER OF CASHIERS\*1111 HAPPY LANE~  
 N4\* TAMPA\*FL\*336340000~  
 HL\*11\*7\*22\*0~

SBR\*U\*18\*\*\*\*\*MC~  
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 N3\*94-450 MOKUOLA STREET\*STE 106~  
 N4\*WAIPAHA\*HI\*96797~  
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 REF\*D9\*10116491~  
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 HI\*PR:78097~  
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 SBR\*P\*18\*\*MEDICARE\*\*\*\*\*MA~  
 AMT\*D\*565.21~  
 OI\*\*\*Y\*\*\*Y



MOA\*.39\*\*MA44\*N742\*MA18\*N89~  
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 N3\*125 S. HAPPY LANE~  
 N4\*TAMPA\*FL\*33634~  
 NM1\*PR\*2\*MEDICARE\*\*\*\*\*PI\*01011~  
 N3\*900 42ND ST S~  
 N4\*FARGO\*ND\*58103~  
 REF\*F8\*21513401033607HIA~  
 SBR\*U\*21\*\*\*\*\*MC~  
 OI\*\*\*Y\*\*\*Y~

Primary Payer Name and Address

Other Payer Claim Control Number

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 N3\*125 S. HAPPY LANE~  
 N4\*TAMPA\*FL\*33634~  
 NM1\*PR\*2\*HAWAII MEDICAID\*\*\*\*\*PI\*70055~  
 N3\*601 KAMOKILA BLVD\*ROOM 518~  
 N4\*KAPOLEI\*HI\*96707~  
 LX\*1~

Institutional Service Line

Provider Control Number

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 SVD\*01011\*0\*\*0258\*1~  
 CAS\*CO\*97\*3~  
 DTP\*573\*D8\*20150527~  
 LX\*2~

Contractual Obligations  
 Qualifier, Adj. Reason, and  
 Amt. of Adj.

Line Adjudication Date

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 REF\*6R\*2101164913-6031829-3~  
 SVD\*01011\*0\*HC:G0434\*0301\*1~  
 CAS\*CO\*97\*468~  
 DTP\*573\*D8\*20150527~  
 LX\*3~

Line Adjudication  
 Information with Payer ID

Contractual Obligations  
 Qualifier, Adj. Reason, and Amt.  
 of Adj.

Line Adjudication Date

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 SVD\*01011\*0\*HC:80053\*0301\*1~  
 CAS\*CO\*97\*89~  
 DTP\*573\*D8\*20150527~  
 LX\*4~

Contractual Obligations  
 Qualifier, Adj. Reason, and Amt.  
 of Adj.

Line Adjudication Date

SV2\*0305\*HC:85025\*58\*UN\*1~  
 REF\*6R\*2101164914-6031829-4~  
 SVD\*01011\*0\*HC:85025\*0305\*1~  
 CAS\*CO\*97\*58~  
 DTP\*573\*D8\*20150527~  
 LX\*5~

Contractual Obligations  
 Qualifier, Adj. Reason, and Amt.  
 of Adj.

Line Adjudication

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 CAS\*CO\*45\*149.82\*\*253\*1.97~  
 CAS\*PR\*2\*24.64~  
 DTP\*573\*D8\*20150527LX\*6~

Contractual Obligations  
 Qualifier, Adj. Reason, and Amt.  
 of Adj.

Patient Responsibility and Amount

Line Adjudication Date



SV2\*0450\*HC:96361\*155\*UN\*1~

REF\*6R\*2101164916-6031829-6~

SVD\*01011\*29.07\*HC:96361\*0450\*1~

CAS\*CO\*45\*117.92\*\*253\*.59~

CAS\*PR\*2\*7.42~

DTP\*573\*D8\*20150527~

LX\*7~

Contractual Obligations  
Qualifier, Adj. Reason, and Amt.  
of Adj.

Patient Responsibility and Amount

Line Adjudication Date

SV2\*0450\*HC:99285:25\*2045\*UN\*1~

REF\*6R\*2101164917-6031829-7~

SVD\*01011\*439.57\*HC:99285:25\*0450\*1~

CAS\*CO\*45\*1484.32\*\*253\*8.97~

CAS\*PR\*2\*112.14~

DTP\*573\*D8\*20150527~

LX\*8~

Contractual Obligations  
Qualifier, Adj. Reason, and Amt.  
of Adj.

Patient Responsibility and Amount

Line Adjudication Date

SV2\*0730\*HC:93005\*242\*UN\*1~

REF\*6R\*2101164918-6031829-8~

SVD\*01011\*0\*HC:93005\*0730\*1~

CAS\*CO\*97\*242~

DTP\*573\*D8\*20150527~

SE\*2536\*000000007~GE\*8\*100004441~

IEA\*1\*151470346~

Contractual Obligations  
Qualifier, Adj. Reason, and Amt.  
of Adj.

Line Adjudication Date

## 837 Professional IGs CAS – Claim Level Adjustments

ASC X12N • INSURANCE SUBCOMMITTEE  
TECHNICAL REPORT • TYPE 3

006010X222 • 837 • 2320 • CAS  
CLAIM LEVEL ADJUSTMENTS

### SEGMENT DETAIL

## CAS - CLAIM LEVEL ADJUSTMENTS

**X12 Segment Name:** Claims Adjustment

**X12 Purpose:** To supply adjustment reason codes and amounts as needed for an entire claim or for a particular service within the claim being paid

- X12 Syntax:**
1. **L050607**  
If CAS05 is present, then at least one of CAS06 or CAS07 are required.
  2. **C0605**  
If CAS06 is present, then CAS05 is required.
  3. **C0705**  
If CAS07 is present, then CAS05 is required.
  4. **L080910**  
If CAS08 is present, then at least one of CAS09 or CAS10 are required.
  5. **C0908**  
If CAS09 is present, then CAS08 is required.
  6. **C1008**  
If CAS10 is present, then CAS08 is required.
  7. **L111213**  
If CAS11 is present, then at least one of CAS12 or CAS13 are required.
  8. **C1211**  
If CAS12 is present, then CAS11 is required.
  9. **C1311**  
If CAS13 is present, then CAS11 is required.
  10. **L141516**  
If CAS14 is present, then at least one of CAS15 or CAS16 are required.
  11. **C1514**  
If CAS15 is present, then CAS14 is required.
  12. **C1614**  
If CAS16 is present, then CAS14 is required.
  13. **L171819**  
If CAS17 is present, then at least one of CAS18 or CAS19 are required.
  14. **C1817**  
If CAS18 is present, then CAS17 is required.
  15. **C1917**  
If CAS19 is present, then CAS17 is required.

**X12 Comments:** 1. Adjustment information is intended to help the provider balance the remittance information. Adjustment amounts should fully explain the difference between submitted charges and the amount paid.

**Loop:** 2320 — OTHER SUBSCRIBER INFORMATION

**Segment Repeat:** 5

**Usage:** SITUATIONAL

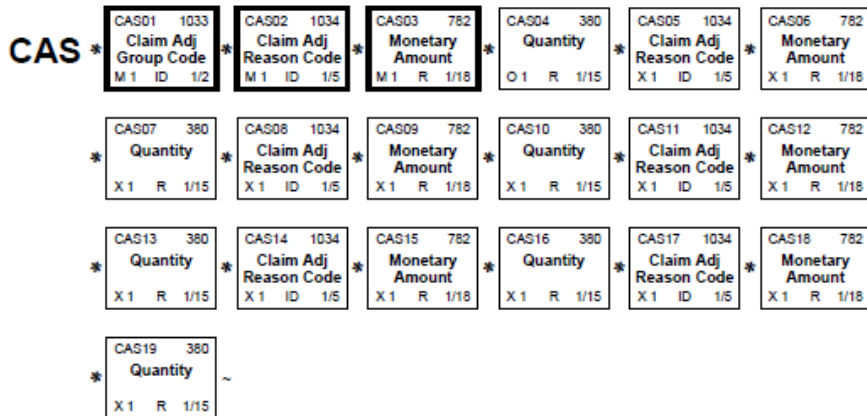
WPC © 2006

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- Situational Rule:** Required when the claim has been adjudicated by the payer identified in this loop, and the claim has claim level adjustment information. If not required by this implementation guide, do not send.
- TR3 Notes:**
1. Submitters must use this CAS segment to report prior payers' claim level adjustments that cause the amount paid to differ from the amount originally charged.
  2. Only one Group Code is allowed per CAS. If it is necessary to send more than one Group Code at the claim level, repeat the CAS segment.
  3. Codes and associated amounts must come from either paper remittance advice or 835s (Electronic Remittance Advice) received on the claim. When the information originates from a paper remittance advice that does not use the standard Claim Adjustment Reason Codes, the paper values must be converted to standard Claim Adjustment Reason Codes.
  4. A single CAS segment contains six repetitions of the "adjustment trio" composed of adjustment reason code, adjustment amount, and adjustment quantity. These six adjustment trios are used to report up to six adjustments related to a particular Claim Adjustment Group Code (CAS01). The first non-zero adjustment is reported in the first adjustment trio (CAS02-CAS04). If there is a second non-zero adjustment, it is reported in the second adjustment trio (CAS05-CAS07), and so on through the sixth adjustment trio (CAS17-CAS19).
- TR3 Example:** CAS\*PR\*1#7.93~
- TR3 Example:** CAS\*OA\*93#15.06~

**DIAGRAM**



**ELEMENT DETAIL**

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES												
REQUIRED	CAS01	1033	Claim Adjustment Group Code Code identifying the general category of payment adjustment	M 1 ID 1/2												
			<table border="1"> <thead> <tr> <th>CODE</th> <th>DEFINITION</th> </tr> </thead> <tbody> <tr> <td>CO</td> <td>Contractual Obligations</td> </tr> <tr> <td>CR</td> <td>Correction and Reversals</td> </tr> <tr> <td>OA</td> <td>Other adjustments</td> </tr> <tr> <td>PI</td> <td>Payor Initiated Reductions</td> </tr> <tr> <td>PR</td> <td>Patient Responsibility</td> </tr> </tbody> </table>	CODE	DEFINITION	CO	Contractual Obligations	CR	Correction and Reversals	OA	Other adjustments	PI	Payor Initiated Reductions	PR	Patient Responsibility	
CODE	DEFINITION															
CO	Contractual Obligations															
CR	Correction and Reversals															
OA	Other adjustments															
PI	Payor Initiated Reductions															
PR	Patient Responsibility															
REQUIRED	CAS02	1034	Claim Adjustment Reason Code Code identifying the detailed reason the adjustment was made	M 1 ID 1/5												
			<p>IMPLEMENTATION NAME: Adjustment Reason Code</p> <p>CODE SOURCE 139: Claim Adjustment Reason Code</p> <p>See CODE SOURCE 139: Claim Adjustment Reason Code</p>													
REQUIRED	CAS03	782	Monetary Amount Monetary amount	M 1 R 1/18												
			<p>SEMANTIC: CAS03 is the amount of adjustment.</p> <p>IMPLEMENTATION NAME: Adjustment Amount</p>													
SITUATIONAL	CAS04	380	Quantity Numeric value of quantity	O 1 R 1/15												
			<p>SEMANTIC: CAS04 is the units of service being adjusted.</p> <p>SITUATIONAL RULE: <i>Required when the number of service units has been adjusted. If not required by this implementation guide, do not send.</i></p> <p>IMPLEMENTATION NAME: Adjustment Quantity</p>													
SITUATIONAL	CAS05	1034	Claim Adjustment Reason Code Code identifying the detailed reason the adjustment was made	X 1 ID 1/5												
			<p>SYNTAX: L050607, C0605, C0705</p> <p>SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i></p> <p>IMPLEMENTATION NAME: Adjustment Reason Code</p> <p>CODE SOURCE 139: Claim Adjustment Reason Code</p>													
SITUATIONAL	CAS06	782	Monetary Amount Monetary amount	X 1 R 1/18												
			<p>SYNTAX: L050607, C0605</p> <p>SEMANTIC: CAS06 is the amount of the adjustment.</p> <p>SITUATIONAL RULE: <i>Required when CAS05 is present. If not required by this implementation guide, do not send.</i></p> <p>IMPLEMENTATION NAME: Adjustment Amount</p>													

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<b>SITUATIONAL</b>	CAS07	380	<b>Quantity</b> Numeric value of quantity <i>SYNTAX:</i> L050807, C0705 <i>SEMANTIC:</i> CAS07 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CAS05 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME: Adjustment Quantity</i>	X 1 R	1/15
<b>SITUATIONAL</b>	CAS08	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made <i>SYNTAX:</i> L080910, C0908, C1008 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME: Adjustment Reason Code</i>  <i>CODE SOURCE 139: Claim Adjustment Reason Code</i>	X 1 ID	1/5
<b>SITUATIONAL</b>	CAS09	782	<b>Monetary Amount</b> Monetary amount <i>SYNTAX:</i> L080910, C0908 <i>SEMANTIC:</i> CAS09 is the amount of the adjustment. <i>SITUATIONAL RULE: Required when CAS08 is present. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME: Adjustment Amount</i>	X 1 R	1/18
<b>SITUATIONAL</b>	CAS10	380	<b>Quantity</b> Numeric value of quantity <i>SYNTAX:</i> L080910, C1008 <i>SEMANTIC:</i> CAS10 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CAS08 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME: Adjustment Quantity</i>	X 1 R	1/15
<b>SITUATIONAL</b>	CAS11	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made <i>SYNTAX:</i> L111213, C1211, C1311 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME: Adjustment Reason Code</i>  <i>CODE SOURCE 139: Claim Adjustment Reason Code</i>	X 1 ID	1/5

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<b>SITUATIONAL</b>	CAS12	782	<b>Monetary Amount</b> Monetary amount  SYNTAX: L111213, C1211 SEMANTIC: CAS12 is the amount of the adjustment. <b>SITUATIONAL RULE: Required when CAS11 is present. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Amount	X 1	R	1/18
<b>SITUATIONAL</b>	CAS13	380	<b>Quantity</b> Numeric value of quantity  SYNTAX: L111213, C1311 SEMANTIC: CAS13 is the units of service being adjusted. <b>SITUATIONAL RULE: Required when CAS11 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Quantity	X 1	R	1/15
<b>SITUATIONAL</b>	CAS14	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made  SYNTAX: L141516, C1514, C1614 <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Reason Code  CODE SOURCE 139: Claim Adjustment Reason Code	X 1	ID	1/5
<b>SITUATIONAL</b>	CAS15	782	<b>Monetary Amount</b> Monetary amount  SYNTAX: L141516, C1514 SEMANTIC: CAS15 is the amount of the adjustment. <b>SITUATIONAL RULE: Required when CAS14 is present. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Amount	X 1	R	1/18
<b>SITUATIONAL</b>	CAS16	380	<b>Quantity</b> Numeric value of quantity  SYNTAX: L141516, C1614 SEMANTIC: CAS16 is the units of service being adjusted. <b>SITUATIONAL RULE: Required when CAS14 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Quantity	X 1	R	1/15

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<b>SITUATIONAL</b>	<b>CAS17</b>	<b>1034</b>	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made  SYNTAX: L171819, C1817, C1917  <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Reason Code</b>  CODE SOURCE 139: Claim Adjustment Reason Code	<b>X 1</b>	<b>ID</b>	<b>1/5</b>
<b>SITUATIONAL</b>	<b>CAS18</b>	<b>782</b>	<b>Monetary Amount</b> Monetary amount  SYNTAX: L171819, C1817  SEMANTIC: CAS18 is the amount of the adjustment.  <b>SITUATIONAL RULE: Required when CAS17 is present. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Amount</b>	<b>X 1</b>	<b>R</b>	<b>1/18</b>
<b>SITUATIONAL</b>	<b>CAS19</b>	<b>380</b>	<b>Quantity</b> Numeric value of quantity  SYNTAX: L171819, C1917  SEMANTIC: CAS19 is the units of service being adjusted.  <b>SITUATIONAL RULE: Required when CAS17 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Quantity</b>	<b>X 1</b>	<b>R</b>	<b>1/15</b>

## 837 Professional IGs CAS - Line Adjustment

005010X222 • 837 • 2430 • CAS  
LINE ADJUSTMENT

ASC X12N • INSURANCE SUBCOMMITTEE  
TECHNICAL REPORT • TYPE 3

**SEGMENT DETAIL**

### CAS - LINE ADJUSTMENT

**X12 Segment Name:** Claims Adjustment

**X12 Purpose:** To supply adjustment reason codes and amounts as needed for an entire claim or for a particular service within the claim being paid

- X12 Syntax:**
1. L050607  
If CAS05 is present, then at least one of CAS06 or CAS07 are required.
  2. C0605  
If CAS06 is present, then CAS05 is required.
  3. C0705  
If CAS07 is present, then CAS05 is required.
  4. L080910  
If CAS08 is present, then at least one of CAS09 or CAS10 are required.
  5. C0908  
If CAS09 is present, then CAS08 is required.
  6. C1008  
If CAS10 is present, then CAS08 is required.
  7. L111213  
If CAS11 is present, then at least one of CAS12 or CAS13 are required.
  8. C1211  
If CAS12 is present, then CAS11 is required.
  9. C1311  
If CAS13 is present, then CAS11 is required.
  10. L141516  
If CAS14 is present, then at least one of CAS15 or CAS16 are required.
  11. C1514  
If CAS15 is present, then CAS14 is required.
  12. C1614  
If CAS16 is present, then CAS14 is required.
  13. L171819  
If CAS17 is present, then at least one of CAS18 or CAS19 are required.
  14. C1817  
If CAS18 is present, then CAS17 is required.
  15. C1917  
If CAS19 is present, then CAS17 is required.

**X12 Comments:** 1. Adjustment information is intended to help the provider balance the remittance information. Adjustment amounts should fully explain the difference between submitted charges and the amount paid.

**Loop:** 2430 — LINE ADJUDICATION INFORMATION

**Segment Repeat:** 5

**Usage:** SITUATIONAL

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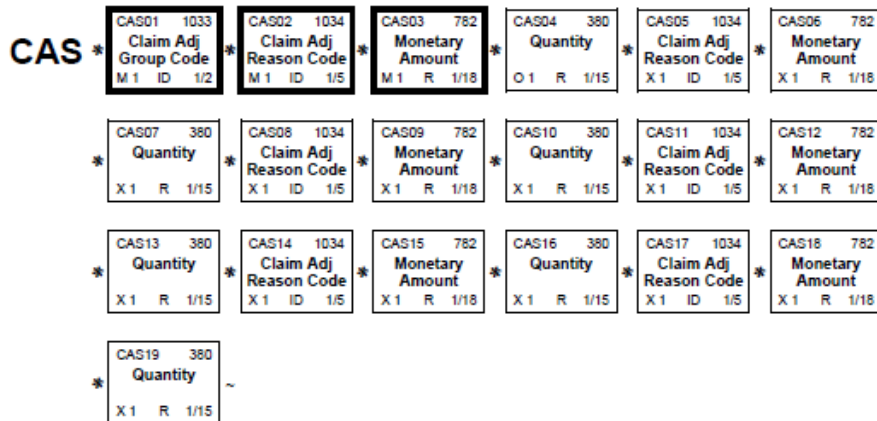
**Situational Rule:** Required when the payer identified in Loop 2330B made line level adjustments which caused the amount paid to differ from the amount originally charged. If not required by this implementation guide, do not send.

**TR3 Notes:** 1. A single CAS segment contains six repetitions of the “adjustment trio” composed of adjustment reason code, adjustment amount, and adjustment quantity. These six adjustment trios are used to report up to six adjustments related to a particular Claim Adjustment Group Code (CAS01). The first non-zero adjustment is reported in the first adjustment trio (CAS02-CAS04). If there is a second non-zero adjustment, it is reported in the second adjustment trio (CAS05-CAS07), and so on through the sixth adjustment trio (CAS17-CAS19).

**TR3 Example:** CAS\*PR#1#7.93~

**TR3 Example:** CAS\*OA#93#15.06~

**DIAGRAM**



**ELEMENT DETAIL**

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES
REQUIRED	CAS01	1033	Claim Adjustment Group Code Code identifying the general category of payment adjustment	M 1 ID 1/2
			CODE	DEFINITION
			CO	Contractual Obligations
			CR	Correction and Reversals
			OA	Other adjustments
			PI	Payor Initiated Reductions
			PR	Patient Responsibility

<b>REQUIRED</b>	CAS02	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	<b>M 1 ID</b>	<b>1/5</b>
<b>IMPLEMENTATION NAME: Adjustment Reason Code</b>					
CODE SOURCE 139: Claim Adjustment Reason Code					
<b>REQUIRED</b>	CAS03	782	<b>Monetary Amount</b> Monetary amount	<b>M 1 R</b>	<b>1/18</b>
SEMANTIC: CAS03 is the amount of adjustment.					
<b>IMPLEMENTATION NAME: Adjustment Amount</b>					
<b>SITUATIONAL</b>	CAS04	380	<b>Quantity</b> Numeric value of quantity	<b>O 1 R</b>	<b>1/15</b>
SEMANTIC: CAS04 is the units of service being adjusted.					
<b>SITUATIONAL RULE: Required when the number of service units has been adjusted. If not required by this implementation guide, do not send.</b>					
<b>IMPLEMENTATION NAME: Adjustment Quantity</b>					
<b>SITUATIONAL</b>	CAS05	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	<b>X 1 ID</b>	<b>1/5</b>
SYNTAX: L050607, C0605, C0705					
<b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b>					
<b>IMPLEMENTATION NAME: Adjustment Reason Code</b>					
CODE SOURCE 139: Claim Adjustment Reason Code					
See CODE SOURCE 139: Claim Adjustment Reason Code					
<b>SITUATIONAL</b>	CAS06	782	<b>Monetary Amount</b> Monetary amount	<b>X 1 R</b>	<b>1/18</b>
SYNTAX: L050607, C0605					
SEMANTIC: CAS06 is the amount of the adjustment.					
<b>SITUATIONAL RULE: Required when CAS05 is present. If not required by this implementation guide, do not send.</b>					
<b>IMPLEMENTATION NAME: Adjustment Amount</b>					
<b>SITUATIONAL</b>	CAS07	380	<b>Quantity</b> Numeric value of quantity	<b>X 1 R</b>	<b>1/15</b>
SYNTAX: L050607, C0705					
SEMANTIC: CAS07 is the units of service being adjusted.					
<b>SITUATIONAL RULE: Required when CAS05 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b>					
<b>IMPLEMENTATION NAME: Adjustment Quantity</b>					

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<b>SITUATIONAL</b>	CAS08	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made  SYNTAX: L080910, C0908, C1008  <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Reason Code</b>  CODE SOURCE 139: Claim Adjustment Reason Code  <b>See CODE SOURCE 139: Claim Adjustment Reason Code</b>	X 1	ID	1/5
<b>SITUATIONAL</b>	CAS09	782	<b>Monetary Amount</b> Monetary amount  SYNTAX: L080910, C0908  <b>SEMANTIC: CAS09 is the amount of the adjustment.</b>  <b>SITUATIONAL RULE: Required when CAS08 is present. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Amount</b>	X 1	R	1/18
<b>SITUATIONAL</b>	CAS10	380	<b>Quantity</b> Numeric value of quantity  SYNTAX: L080910, C1008  <b>SEMANTIC: CAS10 is the units of service being adjusted.</b>  <b>SITUATIONAL RULE: Required when CAS08 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Quantity</b>	X 1	R	1/15
<b>SITUATIONAL</b>	CAS11	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made  SYNTAX: L111213, C1211, C1311  <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Reason Code</b>  CODE SOURCE 139: Claim Adjustment Reason Code  <b>See CODE SOURCE 139: Claim Adjustment Reason Code</b>	X 1	ID	1/5
<b>SITUATIONAL</b>	CAS12	782	<b>Monetary Amount</b> Monetary amount  SYNTAX: L111213, C1211  <b>SEMANTIC: CAS12 is the amount of the adjustment.</b>  <b>SITUATIONAL RULE: Required when CAS11 is present. If not required by this implementation guide, do not send.</b>  <b>IMPLEMENTATION NAME: Adjustment Amount</b>	X 1	R	1/18

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<b>SITUATIONAL</b>	CAS13	380	<b>Quantity</b> Numeric value of quantity <i>SYNTAX:</i> L111213, C1311 <i>SEMANTIC:</i> CAS13 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CAS11 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME:</i> Adjustment Quantity	X 1	R	1/15
<b>SITUATIONAL</b>	CAS14	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made <i>SYNTAX:</i> L141516, C1514, C1614 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME:</i> Adjustment Reason Code <i>CODE SOURCE 139:</i> Claim Adjustment Reason Code <i>See CODE SOURCE 139: Claim Adjustment Reason Code</i>	X 1	ID	1/5
<b>SITUATIONAL</b>	CAS15	782	<b>Monetary Amount</b> Monetary amount <i>SYNTAX:</i> L141516, C1514 <i>SEMANTIC:</i> CAS15 is the amount of the adjustment. <i>SITUATIONAL RULE: Required when CAS14 is present. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME:</i> Adjustment Amount	X 1	R	1/18
<b>SITUATIONAL</b>	CAS16	380	<b>Quantity</b> Numeric value of quantity <i>SYNTAX:</i> L141516, C1614 <i>SEMANTIC:</i> CAS16 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CAS14 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME:</i> Adjustment Quantity	X 1	R	1/15
<b>SITUATIONAL</b>	CAS17	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made <i>SYNTAX:</i> L171819, C1817, C1917 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i> <i>IMPLEMENTATION NAME:</i> Adjustment Reason Code <i>CODE SOURCE 139:</i> Claim Adjustment Reason Code <i>See CODE SOURCE 139: Claim Adjustment Reason Code</i>	X 1	ID	1/5

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<b>SITUATIONAL</b>	<b>CAS18</b>	<b>782</b>	<b>Monetary Amount</b> Monetary amount	<b>X 1 R</b>	<b>1/18</b>
			SYNTAX: L171819, C1817		
			SEMANTIC: CAS18 is the amount of the adjustment.		
			SITUATIONAL RULE: <i>Required when CAS17 is present. If not required by this implementation guide, do not send.</i>		
			IMPLEMENTATION NAME: Adjustment Amount		
<b>SITUATIONAL</b>	<b>CAS19</b>	<b>380</b>	<b>Quantity</b> Numeric value of quantity	<b>X 1 R</b>	<b>1/15</b>
			SYNTAX: L171819, C1917		
			SEMANTIC: CAS19 is the units of service being adjusted.		
			SITUATIONAL RULE: <i>Required when CAS17 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i>		
			IMPLEMENTATION NAME: Adjustment Quantity		

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## 837 Institutional IGS CAS - Claim Level Adjustments

ASC X12N • INSURANCE SUBCOMMITTEE  
TECHNICAL REPORT • TYPE 3

005010X229 • 837 • 2006 • CAS  
CLAIM LEVEL ADJUSTMENTS

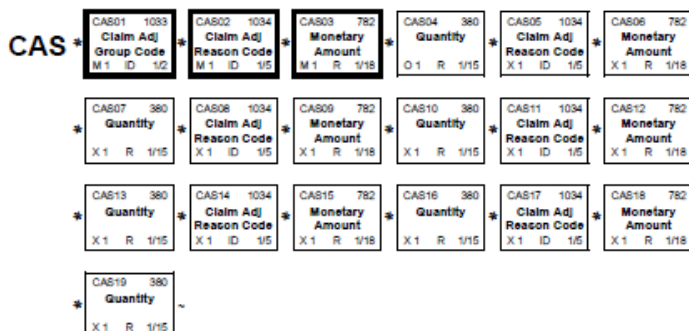
**Situational Rule:** Required when the claim has been adjudicated by the payer identified in this loop, and the claim has claim level adjustment information. If not required by this implementation guide, do not send.

- TR3 Notes:**
1. Submitters must use this CAS segment to report prior payers' claim level adjustments that cause the amount paid to differ from the amount originally charged.
  2. Only one Group Code is allowed per CAS. If it is necessary to send more than one Group Code at the claim level, repeat the CAS segment.
  3. Codes and associated amounts must come from either paper remittance advice or 835s (Electronic Remittance Advice) received on the claim. When the information originates from a paper remittance advice that does not use the standard Claim Adjustment Reason Codes, the paper values must be converted to standard Claim Adjustment Reason Codes.
  4. A single CAS segment contains six repetitions of the "adjustment trio" composed of adjustment reason code, adjustment amount, and adjustment quantity. These six adjustment trios are used to report up to six adjustments related to a particular Claim Adjustment Group Code (CAS01). The first non-zero adjustment is reported in the first adjustment trio (CAS02-CAS04). If there is a second non-zero adjustment, it is reported in the second adjustment trio (CAS05-CAS07), and so on through the sixth adjustment trio (CAS17-CAS19).

**TR3 Example:** CAS#PR#1#7.93~

**TR3 Example:** CAS#OA#93#15.06~

### DIAGRAM



MAY 2006

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**ELEMENT DETAIL**

USAGE	REF. DIS.	DATA ELEMENT	NAME	ATTRIBUTES												
REQUIRED	CAS01	1033	Claim Adjustment Group Code Code identifying the general category of payment adjustment	M 1 ID 1/2												
			<table border="1"> <thead> <tr> <th>CODE</th> <th>DEFINITION</th> </tr> </thead> <tbody> <tr> <td>CO</td> <td>Contractual Obligations</td> </tr> <tr> <td>CR</td> <td>Correction and Reversals</td> </tr> <tr> <td>OA</td> <td>Other adjustments</td> </tr> <tr> <td>PI</td> <td>Payor Initiated Reductions</td> </tr> <tr> <td>PR</td> <td>Patient Responsibility</td> </tr> </tbody> </table>	CODE	DEFINITION	CO	Contractual Obligations	CR	Correction and Reversals	OA	Other adjustments	PI	Payor Initiated Reductions	PR	Patient Responsibility	
CODE	DEFINITION															
CO	Contractual Obligations															
CR	Correction and Reversals															
OA	Other adjustments															
PI	Payor Initiated Reductions															
PR	Patient Responsibility															
REQUIRED	CAS02	1034	Claim Adjustment Reason Code Code identifying the detailed reason the adjustment was made	M 1 ID 1/5												
			IMPLEMENTATION NAME: Adjustment Reason Code													
			CODE SOURCE 139: Claim Adjustment Reason Code													
			See CODE SOURCE 139: Claim Adjustment Reason Code													
REQUIRED	CAS03	782	Monetary Amount Monetary amount	M 1 R 1/18												
			SEMANTIC: CAS03 is the amount of adjustment.													
			IMPLEMENTATION NAME: Adjustment Amount													
SITUATIONAL	CAS04	380	Quantity Numeric value of quantity	O 1 R 1/15												
			SEMANTIC: CAS04 is the units of service being adjusted.													
			SITUATIONAL RULE: <i>Required when the number of service units has been adjusted. If not required by this implementation guide, do not send.</i>													
			IMPLEMENTATION NAME: Adjustment Quantity													
SITUATIONAL	CAS05	1034	Claim Adjustment Reason Code Code identifying the detailed reason the adjustment was made	X 1 ID 1/5												
			SYNTAX: LD0607, CD605, CD705													
			SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i>													
			IMPLEMENTATION NAME: Adjustment Reason Code													
			CODE SOURCE 139: Claim Adjustment Reason Code													
SITUATIONAL	CAS06	782	Monetary Amount Monetary amount	X 1 R 1/18												
			SYNTAX: LD0607, CD605													
			SEMANTIC: CAS06 is the amount of the adjustment.													
			SITUATIONAL RULE: <i>Required when CAS05 is present. If not required by this implementation guide, do not send.</i>													
			IMPLEMENTATION NAME: Adjustment Amount													

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<b>SITUATIONAL</b>	CA507	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L050607, C0705 SEMANTIC: CA507 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CA505 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Quantity	X 1 R	1/15
<b>SITUATIONAL</b>	CA508	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made SYNTAX: L080910, C0908, C1008 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CA501. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Reason Code CODE SOURCE 138: Claim Adjustment Reason Code	X 1 ID	1/5
<b>SITUATIONAL</b>	CA509	782	<b>Monetary Amount</b> Monetary amount SYNTAX: L080910, C0908 SEMANTIC: CA509 is the amount of the adjustment. <i>SITUATIONAL RULE: Required when CA508 is present. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Amount	X 1 R	1/18
<b>SITUATIONAL</b>	CA510	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L080910, C1008 SEMANTIC: CA510 is the units of service being adjusted. <i>SITUATIONAL RULE: Required when CA508 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Quantity	X 1 R	1/15
<b>SITUATIONAL</b>	CA511	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made SYNTAX: L111213, C1211, C1311 <i>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CA501. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Reason Code CODE SOURCE 138: Claim Adjustment Reason Code	X 1 ID	1/5

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<b>SITUATIONAL</b>	CAS12	782	<b>Monetary Amount</b> Monetary amount	X 1 R	1/18
SYNTAX: L111213, C1211					
SEMANTIC: CAS12 is the amount of the adjustment.					
SITUATIONAL RULE: <i>Required when CAS11 is present. If not required by this implementation guide, do not send.</i>					
IMPLEMENTATION NAME: Adjustment Amount					
<b>SITUATIONAL</b>	CAS13	380	<b>Quantity</b> Numeric value of quantity	X 1 R	1/15
SYNTAX: L111213, C1311					
SEMANTIC: CAS13 is the units of service being adjusted.					
SITUATIONAL RULE: <i>Required when CAS11 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i>					
IMPLEMENTATION NAME: Adjustment Quantity					
<b>SITUATIONAL</b>	CAS14	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	X 1 ID	1/5
SYNTAX: L141516, C1514, C1514					
SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i>					
IMPLEMENTATION NAME: Adjustment Reason Code					
CODE SOURCE 138: Claim Adjustment Reason Code					
<b>SITUATIONAL</b>	CAS15	782	<b>Monetary Amount</b> Monetary amount	X 1 R	1/18
SYNTAX: L141516, C1514					
SEMANTIC: CAS15 is the amount of the adjustment.					
SITUATIONAL RULE: <i>Required when CAS14 is present. If not required by this implementation guide, do not send.</i>					
IMPLEMENTATION NAME: Adjustment Amount					
<b>SITUATIONAL</b>	CAS16	380	<b>Quantity</b> Numeric value of quantity	X 1 R	1/15
SYNTAX: L141516, C1514					
SEMANTIC: CAS16 is the units of service being adjusted.					
SITUATIONAL RULE: <i>Required when CAS14 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i>					
IMPLEMENTATION NAME: Adjustment Quantity					

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<b>SITUATIONAL</b>	CAS17	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made SYNTAX: L171819, C1817, C1917 SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this claim for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Reason Code	X 1	ID	1/5
<b>SITUATIONAL</b>	CAS18	782	<b>Monetary Amount</b> Monetary amount SYNTAX: L171819, C1817 SEMANTIC: CAS18 is the amount of the adjustment. SITUATIONAL RULE: <i>Required when CAS17 is present. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Amount	X 1	R	1/18
<b>SITUATIONAL</b>	CAS19	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L171819, C1917 SEMANTIC: CAS19 is the units of service being adjusted. SITUATIONAL RULE: <i>Required when CAS17 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Quantity	X 1	R	1/15

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## 837 Institutional IGs CAS - Line Adjustment

006010X223 • 837 • 2430 • CAS  
LINE ADJUSTMENT

ASC X12N • INSURANCE SUBCOMMITTEE  
TECHNICAL REPORT • TYPE 3

**SEGMENT DETAIL**

### CAS - LINE ADJUSTMENT

**X12 Segment Name:** Claims Adjustment

**X12 Purpose:** To supply adjustment reason codes and amounts as needed for an entire claim or for a particular service within the claim being paid

- X12 Syntax:**
1. **L050607**  
If CAS05 is present, then at least one of CAS06 or CAS07 are required.
  2. **C0605**  
If CAS06 is present, then CAS05 is required.
  3. **C0705**  
If CAS07 is present, then CAS05 is required.
  4. **L080910**  
If CAS08 is present, then at least one of CAS09 or CAS10 are required.
  5. **C0908**  
If CAS09 is present, then CAS08 is required.
  6. **C1008**  
If CAS10 is present, then CAS08 is required.
  7. **L111213**  
If CAS11 is present, then at least one of CAS12 or CAS13 are required.
  8. **C1211**  
If CAS12 is present, then CAS11 is required.
  9. **C1311**  
If CAS13 is present, then CAS11 is required.
  10. **L141516**  
If CAS14 is present, then at least one of CAS15 or CAS16 are required.
  11. **C1514**  
If CAS15 is present, then CAS14 is required.
  12. **C1614**  
If CAS16 is present, then CAS14 is required.
  13. **L171819**  
If CAS17 is present, then at least one of CAS18 or CAS19 are required.
  14. **C1817**  
If CAS18 is present, then CAS17 is required.
  15. **C1917**  
If CAS19 is present, then CAS17 is required.

**X12 Comments:** 1. Adjustment information is intended to help the provider balance the remittance information. Adjustment amounts should fully explain the difference between submitted charges and the amount paid.

**Loop:** 2430 — LINE ADJUDICATION INFORMATION

**Segment Repeat:** 5

**Usage:** SITUATIONAL

480

MAY 2008

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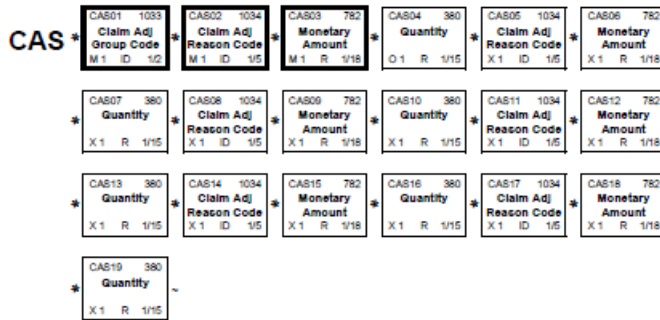
**Situational Rule:** Required when the payer identified in Loop 2330B made line level adjustments which caused the amount paid to differ from the amount originally charged. If not required by this implementation guide, do not send.

**TR3 Notes:** 1. A single CAS segment contains six repetitions of the "adjustment trio" composed of adjustment reason code, adjustment amount, and adjustment quantity. These six adjustment trios are used to report up to six adjustments related to a particular Claim Adjustment Group Code (CAS01). The first non-zero adjustment is reported in the first adjustment trio (CAS02-CAS04). If there is a second non-zero adjustment, it is reported in the second adjustment trio (CAS05-CAS07), and so on through the sixth adjustment trio (CAS17-CAS19).

**TR3 Example:** CAS\*PR\*1#7.93~

**TR3 Example:** CAS\*OA\*93#15.06~

**DIAGRAM**



**ELEMENT DETAIL**

USAGE	REP. OBL.	DATA ELEMENT	NAME	ATTRIBUTES	
REQUIRED		CAS01	1033	Claim Adjustment Group Code	M 1 ID 1/2
				Code identifying the general category of payment adjustment	
				CODE	DEFINITION
				CO	Contractual Obligations
				CR	Correction and Reversals
				OA	Other adjustments
				PI	Payor Initiated Reductions
				PR	Patient Responsibility

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005010X223 • 837 • 2430 • CAS LINE ADJUSTMENT			ASC X12N • INSURANCE SUBCOMMITTEE TECHNICAL REPORT • TYPE 3			
<b>REQUIRED</b>	CAS02	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	M 1	ID	1/5
IMPLEMENTATION NAME: Adjustment Reason Code						
CODE SOURCE 138: Claim Adjustment Reason Code						
<b>REQUIRED</b>	CAS03	782	<b>Monetary Amount</b> Monetary amount	M 1	R	1/18
SEMANTIC: CAS03 is the amount of adjustment.						
IMPLEMENTATION NAME: Adjustment Amount						
<b>SITUATIONAL</b>	CAS04	380	<b>Quantity</b> Numeric value of quantity	O 1	R	1/15
SEMANTIC: CAS04 is the units of service being adjusted.						
SITUATIONAL RULE: <i>Required when the number of service units has been adjusted. If not required by this implementation guide, do not send.</i>						
IMPLEMENTATION NAME: Adjustment Quantity						
<b>SITUATIONAL</b>	CAS05	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	X 1	ID	1/5
SYNTAX: L050607, C0605, C0705						
SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i>						
IMPLEMENTATION NAME: Adjustment Reason Code						
CODE SOURCE 138: Claim Adjustment Reason Code						
See CODE SOURCE 139: Claim Adjustment Reason Code						
<b>SITUATIONAL</b>	CAS06	782	<b>Monetary Amount</b> Monetary amount	X 1	R	1/18
SYNTAX: L050607, C0605						
SEMANTIC: CAS06 is the amount of the adjustment.						
SITUATIONAL RULE: <i>Required when CAS05 is present. If not required by this implementation guide, do not send.</i>						
IMPLEMENTATION NAME: Adjustment Amount						
<b>SITUATIONAL</b>	CAS07	380	<b>Quantity</b> Numeric value of quantity	X 1	R	1/15
SYNTAX: L050607, C0705						
SEMANTIC: CAS07 is the units of service being adjusted.						
SITUATIONAL RULE: <i>Required when CAS05 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i>						
IMPLEMENTATION NAME: Adjustment Quantity						

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<b>SITUATIONAL</b>	CAS08	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	X 1 ID 1/5
SYNTAX: L080910, C0908, C1008				
SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i>				
IMPLEMENTATION NAME: Adjustment Reason Code				
CODE SOURCE 139: Claim Adjustment Reason Code				
See CODE SOURCE 139: Claim Adjustment Reason Code				
<b>SITUATIONAL</b>	CAS09	782	<b>Monetary Amount</b> Monetary amount	X 1 R 1/18
SYNTAX: L080910, C0908				
SEMANTIC: CAS09 is the amount of the adjustment.				
SITUATIONAL RULE: <i>Required when CAS08 is present. If not required by this implementation guide, do not send.</i>				
IMPLEMENTATION NAME: Adjustment Amount				
<b>SITUATIONAL</b>	CAS10	380	<b>Quantity</b> Numeric value of quantity	X 1 R 1/15
SYNTAX: L080910, C1008				
SEMANTIC: CAS10 is the units of service being adjusted.				
SITUATIONAL RULE: <i>Required when CAS08 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</i>				
IMPLEMENTATION NAME: Adjustment Quantity				
<b>SITUATIONAL</b>	CAS11	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made	X 1 ID 1/5
SYNTAX: L111213, C1211, C1311				
SITUATIONAL RULE: <i>Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</i>				
IMPLEMENTATION NAME: Adjustment Reason Code				
CODE SOURCE 139: Claim Adjustment Reason Code				
See CODE SOURCE 139: Claim Adjustment Reason Code				
<b>SITUATIONAL</b>	CAS12	782	<b>Monetary Amount</b> Monetary amount	X 1 R 1/18
SYNTAX: L111213, C1211				
SEMANTIC: CAS12 is the amount of the adjustment.				
SITUATIONAL RULE: <i>Required when CAS11 is present. If not required by this implementation guide, do not send.</i>				
IMPLEMENTATION NAME: Adjustment Amount				

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<b>SITUATIONAL</b>	CAS13	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L111213, C1311 SEMANTIC: CAS13 is the units of service being adjusted. <b>SITUATIONAL RULE: Required when CAS11 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Quantity	X 1 R	1/15
<b>SITUATIONAL</b>	CAS14	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made SYNTAX: L141516, C1514, C1514 <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Reason Code CODE SOURCE 139: Claim Adjustment Reason Code See CODE SOURCE 139: Claim Adjustment Reason Code	X 1 ID	1/5
<b>SITUATIONAL</b>	CAS15	782	<b>Monetary Amount</b> Monetary amount SYNTAX: L141516, C1514 SEMANTIC: CAS15 is the amount of the adjustment. <b>SITUATIONAL RULE: Required when CAS14 is present. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Amount	X 1 R	1/18
<b>SITUATIONAL</b>	CAS16	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L141516, C1514 SEMANTIC: CAS16 is the units of service being adjusted. <b>SITUATIONAL RULE: Required when CAS14 is present and is related to a units of service adjustment. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Quantity	X 1 R	1/15
<b>SITUATIONAL</b>	CAS17	1034	<b>Claim Adjustment Reason Code</b> Code identifying the detailed reason the adjustment was made SYNTAX: L171819, C1817, C1917 <b>SITUATIONAL RULE: Required when it is necessary to report an additional non-zero adjustment, beyond what has already been supplied, to this service line for the Claim Adjustment Group Code reported in CAS01. If not required by this implementation guide, do not send.</b> IMPLEMENTATION NAME: Adjustment Reason Code CODE SOURCE 139: Claim Adjustment Reason Code See CODE SOURCE 139: Claim Adjustment Reason Code	X 1 ID	1/5

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<b>SITUATIONAL</b>	CAS18	782	<b>Monetary Amount</b> Monetary amount SYNTAX: L171819, C1817 SEMANTIC: CAS18 is the amount of the adjustment. SITUATIONAL RULE: <i>Required when CAS17 is present. If not required by this Implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Amount	X 1	R	1/18
<b>SITUATIONAL</b>	CAS19	380	<b>Quantity</b> Numeric value of quantity SYNTAX: L171819, C1917 SEMANTIC: CAS19 is the units of service being adjusted. SITUATIONAL RULE: <i>Required when CAS17 is present and is related to a units of service adjustment. If not required by this Implementation guide, do not send.</i> IMPLEMENTATION NAME: Adjustment Quantity	X 1	R	1/15

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