



## Encounter Edit Codes/HIPAA Edit Codes Translation -

Sequenced by HIPAA Adj Reason Code

Last Date Loaded - 5/2/2011

HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
4 (10/16/03)	The procedure code is inconsistent with the modifier used or a required modifier is missing. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	162	PROCEDURE CODE MODIFIER MISSING/INVALID	M78 (10/16/03)	Missing/incomplete/invalid HCPCS modifier.
4 (10/16/03)	The procedure code is inconsistent with the modifier used or a required modifier is missing. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	168	GESTATION INDICATOR INVALID FOR PROC/DIAG/REV CODES	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
5 (10/16/03)	The procedure code/bill type is inconsistent with the place of service. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	141	PLACE OF SERVICE MISSING/INVALID	M77 (10/16/03)	Missing/incomplete/invalid place of service.
6 (10/16/03)	The procedure/revenue code is inconsistent with the patient's age. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	254	PROCEDURE CODE AND AGE RESTRICTED	MA66 (10/16/03)	Missing/incomplete/invalid principal procedure code.
7 (10/16/03)	The procedure/revenue code is inconsistent with the patient's gender. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	255	PROCEDURE CODE AND SEX RESTRICTION.	MA66 (10/16/03)	Missing/incomplete/invalid principal procedure code.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	001	INCORRECT CLAIM STATUS CODE	MA80 (10/16/03)	Informational notice. No payment issued for this claim with this notice. Payment issued to the hospital by its intermediary for all services for this encounter under a demonstration project.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	010	SERVICING PROVIDER MISSING/INVALID	M57 (10/16/03)	Missing/incomplete/invalid provider identifier.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	015	STATEMENT THRU DATE < STATEMENT FROM DATE	M52 (10/16/03)	Missing/incomplete/invalid "from" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	016	SERVICE FROM DATE MISSING/INVALID	M52 (10/16/03)	Missing/incomplete/invalid "from" date(s) of service.



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HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	017	<b>SERVICE THRU DATE MISSING/INVALID</b>	M59 (10/16/03)	Missing/incomplete/invalid "to" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	018	<b>SERVICE THRU DATE &lt; SERVICE FROM DATE</b>	M52 (10/16/03)	Missing/incomplete/invalid "from" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	020	<b>SERVICE THRU DATE &gt; DATE RECEIVED</b>	M59 (10/16/03)	Missing/incomplete/invalid "to" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	022	<b>CAPITATION DETAIL SERVICE PERIOD INVALID</b>	M52 (08/04/09)	Missing/incomplete/invalid "from" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	025	<b>DISPENSE DATE INVALID</b>	N57 (10/16/03)	Missing/incomplete/invalid prescribing date.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	042	<b>TYPE OF BILL CODE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	044	<b>ADMISSION TYPE MISSING/INVALID</b>	MA41 (10/16/03)	Missing/incomplete/invalid admission type.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	048	<b>SURGICAL PROCEDURE CODE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	049	<b>SURGICAL DATE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.



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HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	056	REVENUE UNITS MISSING/INVALID	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	071	STATEMENT COVERS FROM DATE MISSING/INVALID	M52 (10/16/03)	Missing/incomplete/invalid "from" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	072	STATEMENT COVERS THRU DATE MISSING/INV	M59 (10/16/03)	Missing/incomplete/invalid "to" date(s) of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	073	SERVICE COVERS FROM DATE < STATEMENT FROM DATE	MA31 (08/31/04)	Missing/incomplete/invalid beginning and ending dates of the period billed.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	074	STATEMENT COVERS FROM DATE > SERVICE THRU DATE	MA31 (08/31/04)	Missing/incomplete/invalid beginning and ending dates of the period billed.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	085	DAYS/UNITS/VISITS MISSING/INVALID	M53 (10/16/03)	Missing/incomplete/invalid days or units of service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	088	DATE OF SURGERY < SERVICE/STATEMENT FROM DATE	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	089	DATE OF SURGERY > SERVICE/STATEMENT THRU DATE	MA31 (08/31/04)	Missing/incomplete/invalid beginning and ending dates of the period billed.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	123	MEDICAL RECORD NUMBER MISSING/INVALID	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.



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16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	126	<b>COMPOUND DRUG INDICATOR MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	127	<b>NATIONAL DRUG CODE MISSING OR INVALID</b>	M119 (10/16/03)	Missing/incomplete/invalid/ deactivated/withdrawn National Drug Code (NDC).
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	131	<b>PRESCRIPTION NUMBER MISSING/INVALID</b>	N57 (10/16/03)	Missing/incomplete/invalid prescribing date.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	133	<b>EMPLOYMENT RELATED INDICATOR MISSING/INVALID</b>	N30 (10/16/03)	Patient ineligible for this service.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	135	<b>CURRENT EXAM DATE MISSING/INVALID</b>	M128 (10/16/03)	Missing/incomplete/invalid date of the patient's last physician visit.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	138	<b>ACCIDENT INDICATOR MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	139	<b>EPSDT INDICATOR INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	142	<b>ORIGIN CODE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	143	<b>DESTINATION CODE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.



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16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	152	<b>TOTAL CHARGE MISSING/INVALID</b>	M54 (10/16/03)	Missing/incomplete/invalid total charges.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	153	<b>CLAIM PAYMENT MISSING/INVALID</b>	M54 (10/16/03)	Missing/incomplete/invalid total charges.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	161	<b>PROCEDURE CODE MISSING/INVALID</b>	MA66 (10/16/03)	Missing/incomplete/invalid principal procedure code.
16 (11/06/06)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	183	<b>HMO PAYMENT DATE MISSING/INVALID</b>	N307 (11/06/06)	Missing/incomplete/invalid adjudication or payment date.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	184	<b>ADJUSTMENT REASON CODE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	185	<b>FORMER ICN # MISSING/INVALID</b>	M47 (10/16/03)	Missing/incomplete/invalid internal or document control number.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	217	<b>TAXONOMY CODE IS MISSING FOR THE BILLING PROVIDER</b>	N255 (05/23/07)	Missing/incomplete/invalid billing provider taxonomy.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	218	<b>TAXONOMY CODE IS INVALID FOR THE BILLING PROVIDER</b>	N255 (05/23/07)	Missing/incomplete/invalid billing provider taxonomy.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	219	<b>TAXONOMY CODE IS MISSING FOR SERVICE PROVIDER</b>	N288 (05/23/07)	Missing/incomplete/invalid rendering provider taxonomy.



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16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	220	TAXONOMY CODE IS INVALID FOR SERVICE PROVIDER	N288 (05/23/07)	Missing/incomplete/invalid rendering provider taxonomy.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	221	NPI IS MISSING FOR SERVICE/RENDERING PROVIDER	N290 (05/23/07)	Missing/incomplete/invalid rendering provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	222	NPI IS INVALID FOR SERVICE/RENDERING PROVIDER	N290 (05/23/07)	Missing/incomplete/invalid rendering provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	223	NPI MISSING FOR THE ATTENDING PROVIDER	N253 (05/23/07)	Missing/incomplete/invalid attending provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	224	NPI IS INVALID FOR THE ATTENDING PROVIDER	N253 (05/23/07)	Missing/incomplete/invalid attending provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	225	NPI IS MISSING FOR THE REFERRING PROVIDER	N286 (05/23/07)	Missing/incomplete/invalid referring provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	226	NPI IS INVALID FOR THE REFERRING PROVIDER	N286 (05/23/07)	Missing/incomplete/invalid referring provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	229	NPI IS MISSING FOR BILLING PROVIDER	N265 (05/23/07)	Missing/incomplete/invalid ordering provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	230	NPI IS INVALID FOR BILLING PROVIDER	N265 (05/23/07)	Missing/incomplete/invalid ordering provider primary identifier.



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16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	231	<b>NPI IS MISSING FOR OTHER PROVIDER</b>	N270 (05/23/07)	Missing/incomplete/invalid other provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	232	<b>NPI IS INVALID FOR OTHER PROVIDER</b>	N270 (05/23/07)	Missing/incomplete/invalid other provider primary identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	233	<b>NPI IS MISSING FOR PRESCRIBING PROVIDER</b>	N31 (05/23/07)	Missing/incomplete/invalid prescribing provider identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	234	<b>NPI IS INVALID FOR PRESCRIBING PROVIDER</b>	N31 (05/23/07)	Missing/incomplete/invalid prescribing provider identifier.
16 (05/23/07)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	236	<b>ZIP CODE MISSING OR INVALID</b>	N291 (05/23/07)	Missing/incomplete/invalid rendering provider secondary identifier.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	248	<b>SURGICAL PROCEDURE CODE NOT ON FILE</b>	MA66 (10/16/03)	Missing/incomplete/invalid principal procedure code.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	259	<b>PROCEDURE CODE NOT ON FILE</b>	M51 (10/16/03)	Missing/incomplete/invalid procedure code(s).
16 (07/01/08)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	269	<b>ATTENDING NPI SAME AS BILLING/SERVICING NPI</b>	N253 (07/01/08)	Missing/incomplete/invalid attending provider primary identifier.
16 (07/01/08)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	271	<b>OTHER NPI SAME AS BILLING/SERVICING NPI</b>	N270 (07/01/08)	Missing/incomplete/invalid other provider primary identifier.



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16 (07/01/08)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	272	PRESCRIBING NPI SAME AS BILLING/SERVICING NPI	N31 (07/01/08)	Missing/incomplete/invalid prescribing provider identifier.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	321	RECIPIENT NUMBER NOT ON FILE	N30 (10/16/03)	Patient ineligible for this service.
16 (12/13/10)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	466	COMPOUND CLAIM WITH ONLY 1 INGREDIENT	M44 (10/16/03)	Missing/incomplete/invalid condition code.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	553	COMPOUND DRUG DID NOT CONTAIN LEGEND DRUG	M119 (10/16/03)	Missing/incomplete/invalid/ deactivated/withdrawn National Drug Code (NDC).
16 (12/13/10)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	554	COMPOUND CONTAINS DUPLICATE INGREDIENTS	M58 (12/13/10)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (12/13/10)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	555	COMPOUND DRUG - INCORRECT INGREDIENT QUANTITY/COST	M58 (12/13/10)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (12/13/10)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	556	INVALID COMPOUND - CONTAINS ONE INGREDIENT + WATER	M58 (12/13/10)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
16 (10/16/03)	Claim/service lacks information which is needed for adjudication. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	602	DRG CODE MISSING	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
17 (10/16/03)	Requested information was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.)	100	NO REVENUE CODE FOUND EXCEPT 001	MA80 (10/16/03)	Informational notice. No payment issued for this claim with this notice. Payment issued to the hospital by its intermediary for all services for this encounter under a demonstration project.



## Encounter Edit Codes/HIPAA Edit Codes Translation -

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Last Date Loaded - 5/2/2011

HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
17 (10/17/03)	Requested information was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.)	101	ORIGINAL RECIPIENT ID HAS BEEN CHANGED DUE TO LINK/UNLINK	MA80 (10/17/03)	Informational notice. No payment issued for this claim with this notice. Payment issued to the hospital by its intermediary for all services for this encounter under a demonstration project.
17 (10/16/03)	Requested information was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.)	110	ENC TAXONOMY MISSING/INVALID	M58 (06/23/06)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
17 (10/16/03)	Requested information was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.)	124	PATIENT ACCOUNT NUMBER MISSING/INVALID	N79 (10/16/03)	Service billed is not compatible with patient location information.
17 (10/16/03)	Requested information was not provided or was insufficient/incomplete. At least one Remark Code must be provided (may be comprised of either the Remittance Advice Remark Code or NCPDP Reject Reason Code.)	197	COMPOUND DRUG OR METRIC QUANTITY ERROR	M44 (10/16/03)	Missing/incomplete/invalid condition code.
18 (11/02/09)	Duplicate claim/service.	024	DUPLICATE PHARMACY/SERVICE DATE/PRESCRIPTION NUMBER/NDC	N389 (11/02/09)	Duplicate prescription number submitted.
18 (10/16/03)	Duplicate claim/service.	797	DUPLICATE ADJUSTMENT	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
18 (10/16/03)	Duplicate claim/service.	800	EXACT DUPLICATE BILL	M43 (10/16/03)	Payment for this service previously issued to you or another provider by another carrier/intermediary.
20 (10/16/03)	This injury/illness is covered by the liability carrier.	136	PREVIOUS EXAM DATE INV	M128 (08/31/04)	Missing/incomplete/invalid date of the patient's last physician visit.
31 (10/16/03)	Patient cannot be identified as our insured.	011	RECIPIENT NUMBER MISSING OR INVALID	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
47 (10/16/03)	This (these) diagnosis(es) is (are) not covered, missing, or are invalid.	166	DIAGNOSIS CODE MISSING/INVALID	MA63 (10/16/03)	Missing/incomplete/invalid principal diagnosis.
47 (10/16/03)	This (these) diagnosis(es) is (are) not covered, missing, or are invalid.	167	DIAGNOSIS CODE MISSING	MA63 (10/16/03)	Missing/incomplete/invalid principal diagnosis.
47 (10/16/03)	This (these) diagnosis(es) is (are) not covered, missing, or are invalid.	296	DIAGNOSIS CODE NOT ON FILE	MA63 (10/16/03)	Missing/incomplete/invalid principal diagnosis.
107 (07/08/04)	The related or qualifying claim/service was not identified on this claim. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	144	PATIENT ACCOUNT NUMBER IDENTIFIES HMO-DENIED CLAIM	N36 (07/08/04)	Claim must meet primary payer's processing requirements before we can consider payment.



## Encounter Edit Codes/HIPAA Edit Codes Translation -

Sequenced by HIPAA Adj Reason Code

Last Date Loaded - 5/2/2011

HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
107 (10/16/03)	The related or qualifying claim/service was not identified on this claim. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	151	<b>CLAIM CHARGE MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
107 (10/16/03)	The related or qualifying claim/service was not identified on this claim. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	786	<b>PREVIOUSLY DENIED CLM CANNOT BE ADJUSTED-RESUBMIT CLAIM</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
109 (10/16/03)	Claim not covered by this payer/contractor. You must send the claim to the correct payer/contractor.	400	<b>RECIPIENT NOT IN HMO ON DATE OF SERVICE</b>	MA31 (10/16/03)	Missing/incomplete/invalid beginning and ending dates of the period billed.
110 (05/04/09)	Billing date predates service date.	023	<b>VOID MATCHED MULTIPLE ENCOUNTERS</b>	MA31 (05/04/09)	Missing/incomplete/invalid beginning and ending dates of the period billed.
129 (10/16/03)	Prior processing information appears incorrect. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	787	<b>ADJUSTMENT CLM TYPE NOT MATCHED</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
129 (10/16/03)	Prior processing information appears incorrect. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	796	<b>SUBMITTER NOT MATCHED ON HISTORY</b>	N77 (10/16/03)	Missing/incomplete/invalid designated provider number.
129 (10/16/03)	Prior processing information appears incorrect. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	798	<b>HISTORY RECORD ALREADY ADJUSTED OR VOIDED</b>	N9 (10/16/03)	Adjustment represents the estimated amount a previous payer may pay.
129 (10/16/03)	Prior processing information appears incorrect. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)	799	<b>NO CLAIM IN HISTORY FILE MATCHES ADJUSTMENT</b>	N101 (10/16/03)	Additional information is needed in order to process this claim. Please resubmit the claim with the identification number of the provider where this service took place. The Medicare number of the site of service provider should be preceded with the letters 'HSP' and entered into item #32 on the claim form. You may bill only one site of service provider number per claim.
133 (10/16/03)	The disposition of this claim/service is pending further review.	301	<b>RECIPIENT INELIGIBLE ON DATES OF SERVICE</b>	N30 (10/16/03)	Patient ineligible for this service.
141 (10/16/03)	Claim spans eligible and ineligible periods of coverage.	064	<b>SERVICE THRU DATE &gt; STATEMENT THRU DATE</b>	MA31 (08/31/04)	Missing/incomplete/invalid beginning and ending dates of the period billed.
154 (10/16/03)	Payer deems the information submitted does not support this day's supply.	130	<b>PHARMACY DAYS SUPPLY MISSING/INVALID</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.



**Encounter Edit Codes/HIPAA Edit Codes Translation -**  
**Sequenced by HIPAA Adj Reason Code**  
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HIPAA Adjustment Reason Code (Mapping Last Change Date)	HIPAA Adjustment Reason Code Description	Encounter Edit Code	Encounter Edit Code Description	HIPAA Remark Code (Mapping Last Change Date)	HIPAA Remark Code Description
193 (07/01/09)	Original payment decision is being maintained. Upon review, it was determined that this claim was processed properly.	<b>826</b>	<b>TIMELY FILLING DETERMINED BY PREVIOUS CLAIM</b>	N377 (07/01/09)	Payment based on a processed replacement claim.
208 (08/16/10)	National Provider Identifier - Not matched.	<b>329</b>	<b>HEALTHCARE PRVDR FEDERALLY EXCLUDED FROM NJMM PARTICIPATION</b>	N77 (08/16/10)	Missing/incomplete/invalid designated provider number.
B18 (10/16/03)	This procedure code and modifier were invalid on the date of service.	<b>058</b>	<b>REVENUE/CHARGE/CODE INVALID</b>	M50 (10/16/03)	Missing/incomplete/invalid revenue code(s).
B18 (10/16/03)	This procedure code and modifier were invalid on the date of service.	<b>083</b>	<b>SURGICAL PROCEDURE CODE MISSING</b>	M58 (10/16/03)	Missing/incomplete/invalid claim information. Resubmit claim after corrections.
B18 (10/16/03)	This procedure code and modifier were invalid on the date of service.	<b>503</b>	<b>REVENUE CODE NOT ON FILE</b>	M50 (10/16/03)	Missing/incomplete/invalid revenue code(s).
B18 (10/16/03)	This procedure code and modifier were invalid on the date of service.	<b>545</b>	<b>NATIONAL DRUG CODE NOT ON FILE</b>	M119 (10/16/03)	Missing/incomplete/invalid/ deactivated/withdrawn National Drug Code (NDC).