

## 277CA Edits – Pending Future Release Date

UnitedHealthcare applies edits when an electronically submitted claim is either missing key provider information or does not match our internal systems. These claims will be returned electronically on a 277CA (claims acknowledgement) clearinghouse rejection report with instructions on what to correct and subsequently resubmit the claim for adjudication. Enhancements to these edits may occur periodically.

Message Number	277CA Message	Expanded Definition	Effective Date
E003	E003 Missing TIN, ZIP, phone; Resubmit with correct TIN/W-9, ZIP, Phone. Confirm group and individual name and correct billing/pay to address. Include provider taxonomy code as applicable. Refer to <a href="http://UHCprovider.com/edicontacts">UHCprovider.com/edicontacts</a> for additional information resources.	Our system could not make an exact match to Tax ID, zip code or phone number. New Tax IDs will require inclusion of W-9 for validation/add to our system. Include unique group and rendering service provider and taxonomy code for provider specialty which may be required for specific plan payment terms. Submit with recorded billing address vs. place of service address.	Pending 8/15/2020
E007	E007 Missing TIN; Resubmit with correct TIN/W-9: Confirm group/rendering provider name and correct billing/pay to address. Include provider taxonomy code as applicable. Refer to <a href="http://UHCprovider.com/edicontacts">UHCprovider.com/edicontacts</a> for additional information resources.	Our system could not make an exact match to Tax ID submitted on claim. New Tax IDs will require inclusion of W-9 for validation/add to our system. Include unique group and rendering service provider and taxonomy code for provider specialty which may be required for specific plan payment terms. Submit with recorded billing address vs. place of service address.	Pending 8/15/2020
E008	E008 Missing group name; Resubmit with correct UNIQUE group name. Include provider taxonomy code as applicable. Confirm correct billing/pay to address. Refer to <a href="http://UHCprovider.com/edicontacts">UHCprovider.com/edicontacts</a> for additional information resources.	The group name is required on the claim. Resubmit including the unique group name on record, confirm and include rendering service provider with the taxonomy code for provider specialty which may be required for specific plan payment terms. Submit with recorded billing address vs. place of service address.	Pending 8/15/2020
E018	E018 Missing ZIP; Resubmit with correct ZIP. Confirm group/individual name. Include provider taxonomy code as applicable and correct billing/pay to address. Refer to <a href="http://UHCprovider.com/edicontacts">UHCprovider.com/edicontacts</a> for additional information resources.	Our system could not find a match with the submitted zip code. Resubmit including unique group and rendering provider name and taxonomy code as applicable which may be needed for specific plan payment terms. Submit with recorded billing address vs. place of service address.	Pending 8/15/2020
E019	E019 Mismatch or missing rendering provider; Resubmit with correct rendering provider name. Include provider taxonomy code as applicable. Confirm correct billing/pay to address. Refer to <a href="http://UHCprovider.com/edicontacts">UHCprovider.com/edicontacts</a> for additional information resources.	Our system indicates payment should be made to the rendering service provider. Resubmit to include the service provider including taxonomy code as applicable which may be needed for specific play payment terms. Submit with recorded billing address vs. place of service address.	Pending 8/15/2020