

Other	UnitedHealthcare / NDC Home Infusion Specialty Pharmacy Claims - NDC claims only	UHNDC	N	N	Applies only to 837P claims. Before submitting an EDI file using Payer ID UHNDC, you must successfully complete specific EDI testing. Contact your clearinghouse to begin the testing process. Refer to NDC Claim Submission or call UnitedHealthcare EDI Support at 800-842-1109 for more information.
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Other	Veterans Affairs / Community Care Network (CCN)	VACCN	Y	N	
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Vision	March Vision	52461	N	N	
Vision	UnitedHealthcare Vision	00773	N	N	

* change or addition to previously published list

Medical Payer ID applies to Professional (CMS-1500) and/or Institutional (UB-04) claims
COB = Coordination of Benefits; indicates secondary/COB claims accepted electronically
Smart Edits = Apply to electronic claims submissions; Not applicable to DSNP lines of business

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