

A photograph of a female doctor with dark hair, wearing a white lab coat and a stethoscope, smiling warmly at a young girl with long blonde hair. They are in a clinical setting, possibly a doctor's office. The doctor is looking down at the girl, who is looking up at her.

California HMO Commercial Changes and Updates

Detailed information on changes to identifiers, files, reports, and processes.

May 2025 - Version 1.0

United
Healthcare

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Why now?

Our mission is to help people live healthier lives and make the health system work better for everyone.

These key updates will:



Help ensure our operational capabilities support greater electronic adoption and real-time data transfers – to and from providers and other industry partners.



Provide greater flexibility when engaging in new, regulatory-required opportunities with our HMO programs, ultimately creating a simpler member and provider experience.



Modernize IT security to protect our clients' data and improve response times.



Definitions

Key terms to understand upcoming slides and information.

Term	Key Point	Definition
Current	New Term	Refers to the files, documents, and data used, sent, and received prior to members having new IDs.
New	New Term	Refers to the files, documents, and data used, sent, and received once members have their new IDs.
DEC Number	Current/Known Term	Equivalent to the first 5 bytes of the Current Provider ID. Synonymous with a Medical Group or IPA.
Facility Number	Current/Known Term	Equivalent to the last 4 bytes of the Current Provider ID, which identifies a physician at a specific address or a building location (staff model).
Current Provider ID	Current/Known Term	Unique identifier for each PCP for a specific Medical Group or IPA at a specific location. It is made up of the Current Provider ID + Facility Number (see below). Also referred to as the PCP ID,
Current Employer Group	Current/Known Term	Unique identifier assigned to each employer that has membership.
Current Member ID	Current/Known Term	Unique identifier given to each subscriber and dependent under an employer group.
New Employer Group	New Term	Unique identifier assigned to each employer that has membership.
New Member ID	New Term	Unique identifier given to each subscriber and dependent under an employer group.
Network ID	New Term	The updated identifier used to group providers in a Medical Group, IPA, or Managed Care Organization.
Provider ID	New Term	The updated unique identifier for each physician or practice.
Current Plan Code	Current/Known Term	Unique identifier for each product/benefit plan associated to a member.
UHC Benefit ID	New Term	Unique identifier for each product/benefit plan associated to a member.





Commercial timelines

Commercial timelines

Start Date: 10/1/2025

End Date: 3/31/2027

Employer groups and members with HMO plans will receive new identifiers based on the employer groups' renewal date.

Through 9/30/2025:

- Active employer groups and members will only have current employer group IDs and current member IDs
- Only the current version of the capitation reports, and the current directory will be available.

Starting 10/1/2025:

- There will be a bifurcated experience until all groups and members receive new identifiers.
- Two sets of reports will be generated through 2027, reports for members with Current Member IDs and reports for members with New Member IDs .
- Renewing employer groups and their members will:
 - Receive the New Employer Group IDs and New Member IDs
 - Receive new ID cards with updated identifiers.
 - Have access to the new directory.
 - Will begin to appear on the “UCap” (new version) capitation reports.
- The non-renewing employer groups and membership will continue “as is” until all groups and members receive their new identifiers. They will continue to:
 - Retain their current identifiers.
 - Have access to the current directory.
 - Will appear on the current version of the capitation reports.

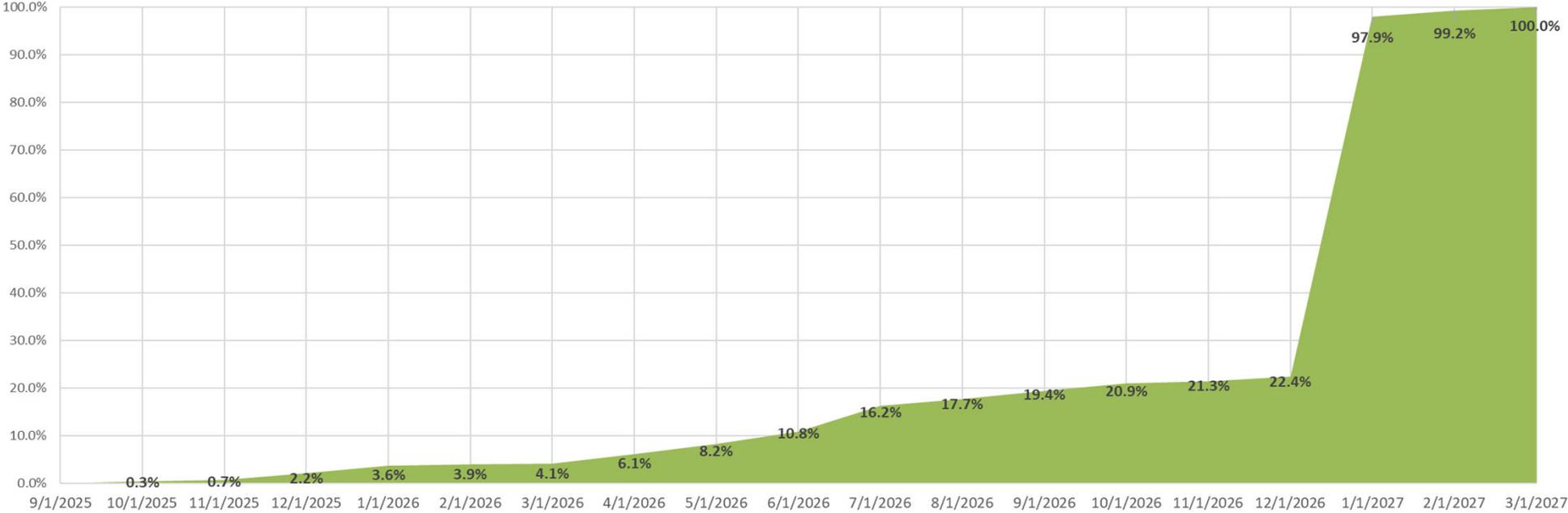
Post Q2 2027

- All employer groups and membership will have new identifiers and appear on the new “UCap” capitation reports
- Only runout/retroactive member and capitation transactions will be in the current capitation reports and files. (Note: Retroactivity window will vary based on Provider contract.)
- Only the new directory will exist with the New Provider IDs.



Forecasted Commercial membership overview timeline

Membership is as of May 2025 and depicts the full California HMO market.



First month of New Member ID assignment

Completion of New Member ID assignment





Commercial files and reports overview

Reporting from UnitedHealthcare

- All capitation reports and files supplied by UnitedHealthcare will be updated.
- Outdated and non-utilized reports and files will be replaced or retired.
- Commercial and Medicare reports:
 - Will have separate files for each line of business.
 - Commercial report start with “UC”,
 - Medicare reports start with “EC”.
 - Will have different file layouts and field names.
 - Will have different Employer Group, Member, and Provider identifiers.
 - New Reports will be available on the Provider Portal (<https://www.uhcprovider.com/>)
- Until all members received New Member IDs and runout is complete, two sets of reports and files will be created for commercial, Current and New.

Links:

- [Report Center | UHCprovider.com](#)
- [UnitedHealthcare West Capitation](#)
- [Settlement, Shared Risk Claims, and Eligibility Reports | UHCprovider.com](#)



Commercial files and reports

Current Report/File	New Report/File	New Report/File Format	Frequency	New File Timing	Notes
N/A	Encounters and Claims	X12 / 837	N/A	No changes to submission schedule.	<ul style="list-style-type: none"> Continue to submit encounters through the same methods and format. Member IDs should match the ID on the members' ID card, based on the members' effective date. No change to how provider data is submitted on the transactions. Response files: <ul style="list-style-type: none"> No changes to the overall format. There will be a new payer edit to ensure copays, coinsurance and deductibles are allowed per plan.
N/A	Authorization Log	Excel	See Notes	No changes to submission schedule.	<ul style="list-style-type: none"> Member IDs should match the ID on the members' ID card, based on the members' effective date. Additional fields will be required starting 11/1/2025, which include Servicing Provider Tax ID, Servicing Provider NPI, Servicing Address, Servicing Start and End Dates. Continue to follow the submission guidelines documented in the UHC Provider Administrative Guide.
N/A	Group/Member Crosswalk	Comma-delimited	Monthly	Starting 9/1/2025	<ul style="list-style-type: none"> Initial files will be available prior to members receiving New Member IDs.
N/A	Provider Crosswalk	Comma-delimited	Monthly	Starting 9/1/2025	<ul style="list-style-type: none"> Initial files will be available prior to members receiving New Member IDs.



Commercial files and reports

Current Report/File	New Report/File	New Report/File Format	Frequency	New File Timing	Notes
Plan/Benefit Code Report	Plan/Benefit Report	Comma-delimited	Weekly	Starting 9/10/2025	<ul style="list-style-type: none"> Initial files will be available prior to members receiving New Member IDs.
Outbound Electronic Misdirected Claims	Outbound Electronic Misdirected Claims	X12 / 837	N/A	No changes to submission schedule.	<ul style="list-style-type: none"> Misdirected claims from UHC to the delegate will be forwarded electronically effective 10/1/2025. Misdirected claims files can contain New Member ID and Current Member IDs. To receive outbound misdirected claims for members with New Member IDs, delegates MUST be fully setup on the electronic misdirected process. The print and mail process will not be available for active members that have received a New Member ID. For dates of services prior to 10/1/2025, you may receive paper copies for members with Current Member IDs. On misdirected claims, the Member IDs will be based on the members' effective date. There will be no changes to how provider data is submitted on the transactions.



Commercial files and reports

Current Report/File	New Report/File	New Report/File Format	Frequency	New File Timing	Notes
EL915	UC916 - Member Eligibility	Comma-delimited	Monthly *Weekly	By 10/1/2025	<ul style="list-style-type: none"> • Transmission of the file via ECG will remain if the connection is currently setup. • *Incremental transaction file will be weekly.
CP7810	UC7810 - Capitation Detail	Comma-delimited	Monthly	By 10/1/2025	• N/A
CP7010 - Capitation Paid Recap	UC7010 - Capitation Paid Recap	PDF	Monthly	By 10/1/2025	• N/A
CP7020 - Capitation Adjustment Summary	UC7020 - Capitation Adjustment Summary	PDF	Monthly	By 10/1/2025	• N/A
CP7030 - Capitation Analysis Summary	UC7030 - Capitation Analysis Summary	PDF	Monthly	By 10/1/2025	• N/A

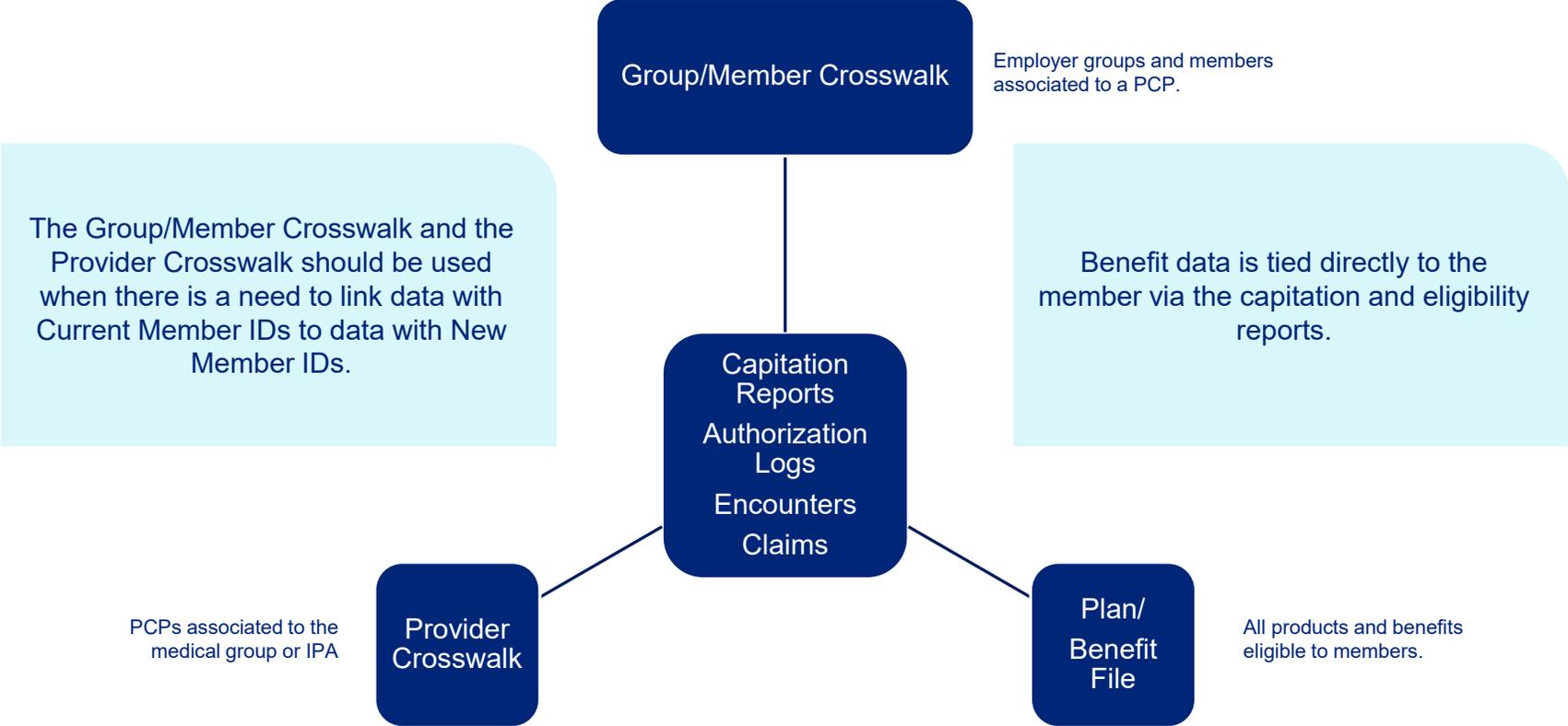


Commercial files and reports

Current Report/File	New Report/File	New Report/File Format	Frequency	New File Timing	Notes
N/A	UC7815 - Capitation Summary	Comma-delimited	Monthly	By 1/1/2026	<ul style="list-style-type: none"> • These reports will be available post the first capitation run with the New Member IDs. • All capitation detail transactions will be accounted for in the UC7810 report, which will be available in October 2025.
CP7040 - Capitation Trend by Last 12 Months	UC7040 - Capitation Trend by Last 12 Months	PDF	Monthly	By 2/1/2026	
CP7050 - Capitation History Matrix	UC7050 - Capitation History Matrix	PDF	Monthly	By 2/1/2026	
CP7090 - Capitation Details for Standard Services	UC7090 - Capitation Details for Standard Services	PDF	Monthly	By 11/1/2025	
CP7290 - Capitation Adjustment Details	UC7290 - Capitation Adjustment Details	PDF	Monthly	By 11/1/2025	
CP200 - Pharmacy Claims Cap Deduct	UC200 - Pharmacy Claims Cap Deduct	Comma-delimited	Monthly	By 12/1/2025	
CP050 - Medical Claims Cap Deduct	UC050 - Medical Claims Cap Deduct	Comma-delimited	Monthly	By 12/1/2025	



Relationship between Commercial crosswalks and reports



Key fields and data relationships between the new Commercial reports, files and crosswalks

	UC7810 - Capitation Detail	UC916 - Member Eligibility	Benefit Plan Report	Group/Member Crosswalk	Provider Crosswalk
Description:	Details all capitation transactions for the capitation reporting period.	Flat file of members eligibility transactions and PCP assignments	Listing of benefits available to members.	Maps the Current Employer Group and New Employer Group Identifiers. Maps the Current Member ID to the New Member ID.	Maps the Current Provider IDs to the New Provider IDs
Product/Plan Fields:	UHC_BENEFIT_ID	UHC_BENEFIT_ID	UHC_BENEFIT_ID		
Provider ID Fields:	GROUP_PRVDR_ID_NUMBER PCP_MED_PRVDR_ID_NUMBER	PCP_NETWORK_ID PROVIDER_CONTRACT_ID PROVIDER_GROUP_NUMBER PROVIDER_ID1			MCO Network ID Provider ID
Employer Group ID Fields:	EMPLOYER_GROUP_NUMBER	MEMBER_GROUP_ID		Member Group ID	
Member ID Fields:	MEMBER_ID ALT_MEMBER_ID	SUBSCRIBER_ID_CARD MEMBER_ID_CARD_NUMBER MEMBER_ID1		Member ID	





Commercial employer group, member, provider and plan

Data, identifiers and scenarios

Commercial employer group, member and provider identifiers

Data Element	Current Format	New Format	Action Required by You	Notes
Employer Group Number	9 alpha-numeric characters (ex: 511115)	7-digit numeric (ex: 5449199)	Ingest the Current Employer Group ID and the New Employer Group ID.	Also referred to as Policy ID or Group ID.
Subscriber/Member ID	9-digit ID including suffix (ex: 9032992-01, 9032992-02)	11-digit numeric ID including suffix (ex: 70120660600, 70120660601)	Ingest the Current Member ID and the New Member ID.	Also referred to as Subscriber ID or Dependent ID.
Network ID	6-digit DEC Number (ex: 028276)	10-digit numeric (ex: 9458999)	Ingest the Current DEC Number and the New Network ID.	Network ID will replace DEC number.
Provider ID	4-digit Facility Number (ex: 0006)	10-digit numeric (ex: 18888899)	Ingest the Current Facility Number and the New Provider ID.	Provider ID will replace Facility number.



Commercial employer group ID data and scenarios

Considerations will need to be taken into account when mapping to the New Employer Group IDs, including the following:

- Employer groups can be consolidated. When this occurs, a New Employer Group ID will be mapped to multiple Current Employer Group IDs. See lines 1 & 2 below for example.
- The Employer Groups Name may change upon receiving a new identifier. See Line 3 below. This will occur when consolidating employer groups. And this can also happen when employer groups are not consolidated.
- When a new employer group is brought onboard post 10/1/2025, it will not have a Current Employer Group ID. It will only have a New Employer Group ID. See line 4 below.

	Current Employer Group ID	Current Employer Group Name	Employer Group Effective Date	New Employer Group ID	New Employer Group Name	Start Date for New IDs
1	511115	USA Employer 1	12/1	5449199	USA Employer	12/1/2025
2	511116	USA Employer 2	12/1	5449199	USA Employer	12/1/2025
3	699332	CA Labor Force	12/1	5449200	California Labor Force	3/1/2026
4	-----	-----	12/1	6884448	Tech Employees of LA	12/1/2025



Commercial member ID data and scenarios

Over time, all members will receive New Member IDs. When mapping to the New Member ID, consider the following differences and scenarios:

- The Current Member ID suffix (last 2 bytes of the Current Member ID) is "01" for subscribers. The New Member ID will have the suffix of "00". See lines 1, 6, 8, and 10 below.
- The Current Member ID suffix for dependents starts at "02". The New Member ID suffix will start at "01"..
- For a family, the New Member ID suffix for dependents may be in a different order as the Current Member ID suffixes. Examples are shown in lines 1 – 5 below.

	Current Employer Group ID	New Employer Group ID	Employer Group Effective Date	Current Member ID	New Member ID	Member Type	Member First Name	Member Last Name	Date of Birth
1	511115	5449199	12/1	944857901	70120660600	Subscriber	John	Adams	7/4/1776
2	511115	5449199	12/1	944857902	70120660601	Spouse	Sarah	Adams	5/26/1780
3	511115	5449199	12/1	944857903	70120660602	Child	Quincy	Adams	8/4/1800
4	511115	5449199	12/1	944857904	70120660603	Child	George	Adams	8/15/1802
5	511115	5449199	12/1	944857905	70120660604	Child	Thomas	Adams	8/11/1801
6	511116	5449199	12/1	944488801	77777777700	Subscriber	Arnold	Smith	2/13/1975
7	511116	5449199	12/1	944488802	-----	Spouse	Mary	Smith	4/30/1980
8	699332	5449200	12/1	499336701	88333707400	Subscriber	Tammy	Johnson	10/5/1999
9	699332	5449200	12/1	499336702	88333707401	Spouse	Kevin	Johnson	2/22/2002
10	699332	5449200	12/1	883392901	74447700300	Subscriber	David	Shoemaker	1/3/2000



Commercial member ID data and scenarios (cont.)

- Members that are considered surviving children or surviving spouses are members where the subscriber is deceased, and the dependents remain active. These members have a Current Member ID with a suffix that correspond to a dependent ('02', '03', etc.). When these members receive the New Member ID, it will have suffix of '00', showing that he/she is subscriber. For example, see line 1 below.
- The members associated to new employer groups sold (new business) will not have corresponding Current Member IDs, represented in lines 2 & 3 below.

	Current Employer Group ID	New Employer Group ID	Employer Group Effective Date	Current Member ID	New Member ID	Member Type	Member First Name	Member Last Name	Date of Birth
1	699332	5449200	12/1	222333302	77777722200	Spouse	Michael	Done	4/6/1980
2	-----	6884448	12/1	-----	77773333200	Subscriber	Jane	Doe	9/5/2000
3	-----	6884448	12/1	-----	77773333201	Child	Jack	Doe	9/26/2023



Commercial member runout/retroactivity

- Typically, there is a maximum of 180 days post a member's last effective date for any retroactive adjustments.
- For capitation transactions, the window for retroactivity may vary based on the provider's contract, up to 6 months (180 days).
- Member retroactivity for members with Current Member IDs will only be shown on the Current capitation reports.
- All members will have new member IDs by 3/1/2027.
- The final capitation report for active current membership will be available on 2/10/2027.
 - Current capitation reports post 2/10/2027 will only contain retroactive adjustments for members.
 - The final Current capitation report will be available to you on 8/10/2027.



Commercial ID cards

Existing ID CARD - SAMPLE

		Emergency Services-Call 911 or go to the nearest emergency room.	Printed: 08/04/22												
Member: EMPLOYEE SMITH Member ID: 0000G06-		Group Number: 123456	This card does not guarantee coverage. To verify benefits, view claims, or find a provider, visit the websites or call.												
MEDICAL FOUNDATION 123456 PCP EFFECTIVE DATE 01/01/1970		EMPLOYER NAME Payer ID 87726 Eff. Date: 08/04/2022													
SMITH, JANE C (888) 123-4567 Copays Office: \$999 ER: 999% Spec: \$999		Rx Bin: 610494 Rx PCN: 9999 Rx Grp: PCCA	For Members: www.myuhc.com 800-624-8822 Servicio en Español: 800-730-7270 Mental Health: 800-999-9585 TTY Dial 711												
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Ded IND/FAM	OOPM IND/FAM	Ded IND/FAM	OOPM IND/FAM												
INN: \$9999/\$9999	\$9999/\$9999	INN: \$9999/\$9999	\$9999/\$9999												
OON: \$9999/\$9999	\$9999/\$9999	OON: \$9999/\$9999	\$9999/\$9999												
DOI-0504		UnitedHealthcare® Choice Plus Network Shared Savings WEST Pharmacy Claims: PO Box 650540 Dallas, TX 75265-0540 For Pharmacists: 800-788-7871													

Data elements changing

Data elements not changing

NEW ID CARD - SAMPLE

		Printed: XX/XX/XXXX												
Member: First M Last-Name Jr Member ID: XXXXXXXXXXXX		Group Number: XXXXXXX												
PCP Name: First M Last-Name Sr ACO Name		Mbr Group Name Payer ID 87726												
Office: XX Spec: XX ER: XX UrgCare: XX		Rx Bin : 610279 Rx PCN : 9999 Rx Grp : UNITEDRX												
<table border="0"> <tr> <td>Ded IND/FAM</td> <td>OOPM IND/FAM</td> <td>Ded IND/FAM</td> <td>OOPM IND/FAM</td> </tr> <tr> <td>INN: \$XXXX/\$XXXX</td> <td>\$XXXX/\$XXXX</td> <td>INN: \$XXXX/\$XXXX</td> <td>\$XXXX/\$XXXX</td> </tr> <tr> <td>OON: \$XXXX/\$XXXX</td> <td>\$XXXX/\$XXXX</td> <td>OON: \$XXXX/\$XXXX</td> <td>\$XXXX/\$XXXX</td> </tr> </table>		Ded IND/FAM	OOPM IND/FAM	Ded IND/FAM	OOPM IND/FAM	INN: \$XXXX/\$XXXX	\$XXXX/\$XXXX	INN: \$XXXX/\$XXXX	\$XXXX/\$XXXX	OON: \$XXXX/\$XXXX	\$XXXX/\$XXXX	OON: \$XXXX/\$XXXX	\$XXXX/\$XXXX	Referrals Required UnitedHealthcare SignatureValue Advantage Underwritten by UHC of California
Ded IND/FAM	OOPM IND/FAM	Ded IND/FAM	OOPM IND/FAM											
INN: \$XXXX/\$XXXX	\$XXXX/\$XXXX	INN: \$XXXX/\$XXXX	\$XXXX/\$XXXX											
OON: \$XXXX/\$XXXX	\$XXXX/\$XXXX	OON: \$XXXX/\$XXXX	\$XXXX/\$XXXX											
DMHC		Members: We're here to help. Check benefits, view claims, find a doctor, ask a question and more. PCP to send electronic referrals												
Web: myuhc.com		Draft												
Phone: 800-624-8822 Mental Health: 800-999-9585		Providers: 877-842-3210 or uhcprovider.com Medical Claims: PO Box 31394, Salt Lake City, UT 84131												
Pharmacists: 800-788-7871 Pharmacy Claims: OptumRx PO Box 650540, Dallas, TX 75265-0540		WEST UnitedHealthcare® Choice Plus Network												

- 1 NEW Member ID
- 2 NEW Group Number
- 3 MCO Name – different placement



Commercial provider ID data and scenarios

Provider records will also receive updated identifiers. To map appropriately, the following needs to be taken into consideration:

- Each active Current Provider ID will have a corresponding New Network ID and New Provider ID.
- The New Network ID can be cross-walked to multiple Current DEC Numbers. Examples of the data are noted in lines 4 - 7 below.
- One New Network ID can be associated to multiple Current Provider ID records. See lines 2 & 3 and 1 & 5.
- A physician can be associated to multiple Medical Groups and IPAs as either a PCP or a specialist.
- The Provider TIN should be considered when identifying a PCP that is an employed or contracted physician associated to a medical group.

	Medical Group Name	Current Provider ID	Provider NPI	Provider TIN	Provider Name	New Network ID	New Provider ID
1	The Physician IPA	8888-02	8337733771	987654321	John Smith	8778766	52655549
2	The Physician IPA	8888-03	3388226622	293847561	Mary Johnson	8778766	19999992
3	The Physician IPA	8888-11	3388226622	293847561	Mary Johnson	8778766	19999992
4	The Physician East Group	7777-21	1188446622	987654321	Sarah Silver	9458999	27777772
5	The Physician East Group	7777-45	8337733771	987654321	John Smith	9458999	52655549
6	The Physician West Group	4444-20	6646646464	987654321	Randy Quaid	9458999	18888899
7	The Physician West Group	4444-21	9933877226	987654321	Michael Gold	9458999	29999999



Commercial plan and benefit data and scenarios

When members receive New Member IDs, the plan code he/she is associated to will be updated to a UHC Benefit ID. Currently, plan and benefit information is made available via the portal (see Resources and Links section). A similar plan and benefit report will be made available in the same location, but with updated identifiers and layout.

A crosswalk between the Current Plan Code and the New UHC Benefit ID does not exist. Lookups and research should be based on members' eligibility.

Below is an example of a current plan and a new plan. The descriptions are similar in format. Though the wording of the descriptions may have some similarities, the plan details may be different.

	Current PLAN_CODE	Current PLAN_CODE_DESC	New UHC_BENEFIT_ID	New DESCRIPTION
1	98A	SA 20-40/300D SG 23	1234	20-40/300ded
2	9ZZ	SV 25-50/20%/1000DED 25	5678	25-50/20%/1000ded
3	8WW	NSA 15-30/10% SG 25	9182	15-30/10%





Commercial directory

Commercial provider directory

Providers will continue to access the directory using the link: <https://www.uhcprovider.com/en/find-a-provider-referral-directory.html>

- The directory experience will remain as-is through late 2026.

Members will access the directory via: <https://member.uhc.com/>

- Those with a New Member ID will access the new directory experience.
- The remaining members will continue to utilize the current directory experience.



We're here to help

If you have any questions or comments, please email us at ca_hmosystemupdates@uhc.com





Appendix

Resources and links

- Self Paced Trainings - <https://www.uhcprovider.com/en/resource-library/training.html>
- Capitation Report Documentation - <https://www.uhcprovider.com/en/reports-quality-programs/uhc-reports.html>
- Provider Administrative Guide - <https://www.uhcprovider.com/content/dam/provider/docs/public/admin-guides/2025-UHC-Administrative-Guide.pdf>
 - Authorization Log – Page 212
 - UnitedHealthcare West supplement – Page 431
- Current Capitation Reports - <http://www.uhcprovider.com/en/reports-quality-programs/uhcwest-reports.html>
- Current Plan/Benefit Report - <https://report-uhc-forms-prod.optum.com/#/uhcWestReportSearch>
- Report Center - <https://www.uhcprovider.com/en/reports-quality-programs/uhc-reports.html>
- Directory - <https://www.uhcprovider.com/en/find-a-provider-referral-directory.html>





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