



# California HMO Commercial Changes and Updates

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

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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:**

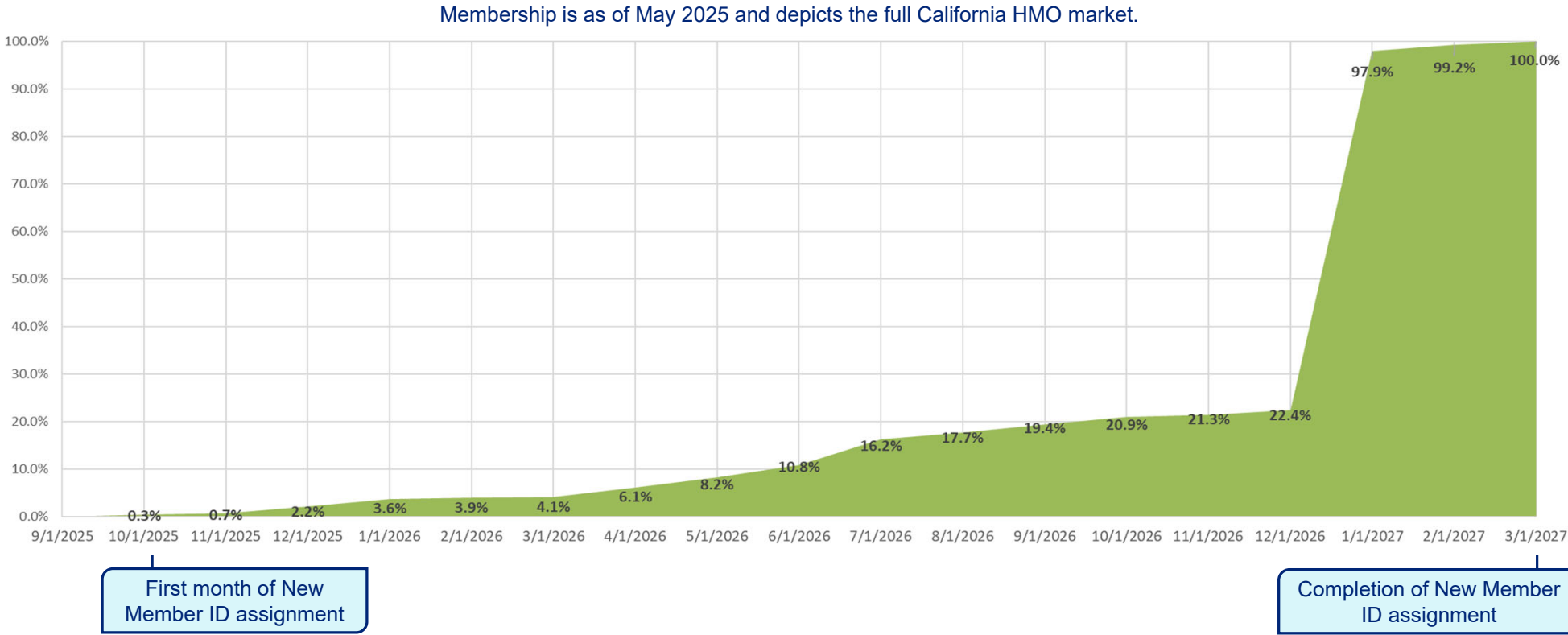
- There will be a bifurcated experience until all groups and members receive new identifiers.
- Two sets of reports will be generated through 2027, reports for members with Current Member IDs and reports for members with New Member IDs .
- Renewing employer groups and their members will:
  - Receive 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





# **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"> <li>Continue to submit encounters through the same methods and format.</li> <li>Member IDs should match the ID on the members' ID card, based on the members' effective date.</li> <li>No change to how provider data is submitted on the transactions.</li> <li>Response files: <ul style="list-style-type: none"> <li>No changes to the overall format.</li> <li>There will be a new payer edit to ensure copays, coinsurance and deductibles are allowed per plan.</li> </ul> </li> </ul> |
| N/A                 | Authorization Log      | Excel                  | See Notes | No changes to submission schedule. | <ul style="list-style-type: none"> <li>Member IDs should match the ID on the members' ID card, based on the members' effective date.</li> <li>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.</li> <li>Continue to follow the submission guidelines documented in the UHC Provider Administrative Guide.</li> </ul>   |
| N/A                 | Group/Member Crosswalk | Comma-delimited        | Monthly   | Starting 9/1/2025                  | <ul style="list-style-type: none"> <li>Initial files will be available prior to members receiving New Member IDs.</li> </ul>  |
| N/A                 | Provider Crosswalk     | Comma-delimited        | Monthly   | Starting 9/1/2025                  | <ul style="list-style-type: none"> <li>Initial files will be available prior to members receiving New Member IDs.</li> </ul>  |



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



# 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<br>*Weekly | By 10/1/2025    | <ul style="list-style-type: none"> <li>• Transmission of the file via ECG will remain if the connection is currently setup.</li> <li>• *Incremental transaction file will be weekly.</li> </ul> |
| 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   |

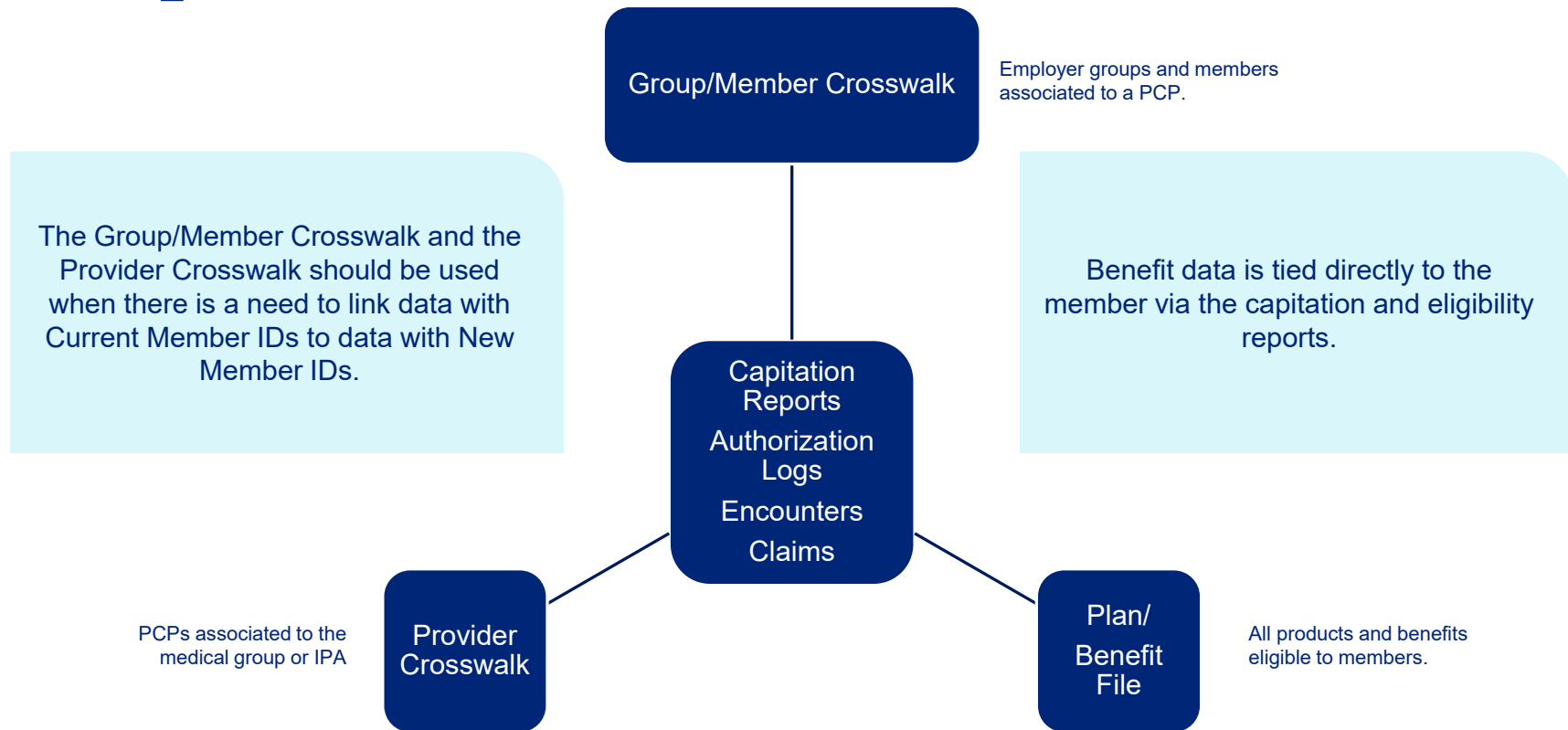


# Commercial files and reports

| 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"> <li>These reports will be available post the first capitation run with the New Member IDs.</li> <li>All capitation detail transactions will be accounted for in the UC7810 report, which will be available in October 2025.</li> </ul> |
| 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<br>PCP_MED_PRVDR_ID_NUMBER                         | PCP_NETWORK_ID<br>PROVIDER_CONTRACT_ID<br>PROVIDER_GROUP_NUMBER<br>PROVIDER_ID1 |   |  | MCO Network ID<br>Provider ID                         |
| Employer Group ID Fields: | EMPLOYER_GROUP_NUMBER  | MEMBER_GROUP_ID   |   | Member Group ID  |   |
| Member ID Fields:         | MEMBER_ID<br>ALT_MEMBER_ID   | SUBSCRIBER_ID_CARD<br>MEMBER_ID_CARD_NUMBER<br>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<br>(ex: 511115)                  | 7-digit numeric<br>(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<br>(ex: 9032992-01, 9032992-02) | 11-digit numeric ID including suffix<br>(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<br>(ex: 028276)                          | 10-digit numeric<br>(ex: 9458999)                                      | Ingest the Current DEC Number and the New Network ID.               | Network ID will replace DEC number.                |
| Provider ID           | 4-digit Facility Number<br>(ex: 0006)                       | 10-digit numeric<br>(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 shows 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.



## Existing ID CARD - SAMPLE

**Data elements not changing**

- 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](mailto: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>



