

# California HMO Commercial Changes and Updates

## Frequently Asked Questions (FAQs)

Use this guide to assist with answering California capitated delegate frequently asked questions (FAQs) regarding the UnitedHealthcare system data changes. For technical assistance, please send an email to: [ca\\_hmosystemupdates@uhc.com](mailto:ca_hmosystemupdates@uhc.com).

| Question  | Answer  |
|---|---|
| When will our offices start to see new HMO member ID cards?                           | Effective 10/01/2025, you will start to see new member ID cards for members enrolled in an HMO plan. Please ask for the member ID card at check-in to verify changes to the member ID card and update your records  |
| When is the last member scheduled to receive a new member ID?                         | March 2027.   |
| Where can I access the technical specifications and supporting documentation?         | <a href="#">California Commercial Health Plans   UHCprovider.com</a><br>→ Click UnitedHealthcare SignatureValue© Plans<br>→ View Tools & Resources  |
| Will the enhanced system impact claims reimbursement times?                           | The enhanced system is designed to simplify claims processing times and reimbursements. It provides expanded automation capabilities for faster, more consistent claims processing.   |
| For capitation transactions, what is the window for retroactivity?                    | The window may vary based on the provider's contract, up to 180 days.   |
| How will authorization log submissions for Commercial be impacted?                    | Continue to follow the process outlined in the Administrative Guide.  |
| Will encounter submissions need to be submitted differently with the enhanced system? | No, the current encounter submission process will not change in the enhanced system. <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>• No change to how provider data is submitted on the transactions.</li><li>• Response files: No change in overall format.</li></ul> Additional remark codes may be sent back based on the transactions. Clearinghouses will need to account for this and not interpret it as an error. |
| What do CP and UC represent on the capitation reports?                                | <b>CP</b> Capitation reports contain information for members with Current Member IDs. <b>UCap (UC)</b> are the capitation reports associated with the members that have received New Member IDs.  |

| Question   | Answer   |
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| Where can I access the new UCap capitation reports?  | <a href="#">Report Center   UHCprovider.com</a>  |
| How long will there be 2 sets of capitation reports for commercial?                          | Until August 2027.   |
| Will I receive combined Medicare and Commercial capitation reports with the enhanced system? | You will receive separate Medicare Advantage report(s) ( <b>CP</b> and ECap <b>EC</b> ) and 2 reports for Commercial ( <b>CP</b> and <b>UC</b> ) |
| Will the Medicare Advantage and Commercial capitation report layouts be the same?            | There will be different layouts for Medicare Advantage and Commercial capitation reports. Please see crosswalks for changes.                     |