

**Date: 05/27/2020**

**Medi-Cal**

**Important Provider Notice: #389**

**Subject: Changes to 277CA Edits for Encounter Data Submissions - Effective 6/1/20**

Encounter data submissions submitted to Partnership HealthPlan of California (PHC) on and after June 1, 2020, may be rejected for the following reasons:

STATUS CATEGORY CODE	STATUS DESCRIPTION	STATUS CODE	DESCRIPTION	REASON
A3	Acknowledgement/ Returned	33	Subscriber and Subscriber ID Not Found	<b>Member could not be identified in eligibility system</b>
A6	Acknowledgement/ Rejected for Missing Information.	232	Admitting Diagnosis	<b>Hospital claim is missing Admit Diagnosis code.</b>
A6	Acknowledgement/ Rejected for Missing Information.	234	Patient Discharge Status	<b>Hospital Discharge Status Code Missing</b>
A6	Acknowledgement/ Rejected for Missing Information.	455	Revenue Code for Services Rendered	<b>Hospital Inpatient or Outpatient claim is missing a Revenue code.</b>
A6	Acknowledgement/ Rejected for Missing Information.	255	Diagnosis Code	<b>Missing the Diagnosis code.</b>
A6	Acknowledgement/ Rejected for Missing Information.	454	Procedure Code for Services Rendered	<b>Missing the Procedure code.</b>
A6	Acknowledgement/ Rejected for Missing Information.	229	Hospital Admission Source	<b>Point of Origin for Admission (Admission Source) or Visit on Inpatient and Outpatient Hospital Claims - Must be present and = 1, 2, 3, 4, 5, 6, 7, 8, 9, A, B, C, or D.<sup>3</sup> Effective for Medi-Cal claims with a DOS on or after 7/1/13. If admission type equals 4, the admission source must be 4, 5, or 6 for received dates prior to 11/1/16. If admission type equals 4, the admission source must be 5 or 6 for received dates 11/1/16 forward.</b>
A7	Acknowledgement/ Rejected for Invalid Information	232	Admitting Diagnosis	<b>Admit Diagnosis code is invalid.</b>
A7	Acknowledgement/ Rejected for Invalid Information	700	ICD10	<b>Claim received with ICD-10 diagnosis code that is not effective for the date of service.</b>

A7	Acknowledgement/ Rejected for Invalid Information	508	ICD9	<b>Claim received with ICD-9 diagnosis code that is not effective for the date of service.</b>
A7	Acknowledgement/ Rejected for Invalid Information	258	Days/Units for Procedure/Revenue Code	<b>Count/Quantity of Service = 0 or is a negative value</b>
A7	Acknowledgement/ Rejected for Invalid Information	234	Patient Discharge Status	<b>Hospital Discharge Status Code Invalid</b>
A7	Acknowledgement/ Rejected for Invalid Information	250	Type of Service	<b>Institutional claim type of bill code is invalid.</b>
A7	Acknowledgement/ Rejected for Invalid Information	255	Diagnosis Code	<b>Invalid Diagnosis code.</b>
A7	Acknowledgement/ Rejected for Invalid Information	33	Subscriber and Subscriber ID Not Found	<b>Invalid Member Identification Number - Claims submitted with a member's SSN will be rejected. CHDP Claims ~ Patient Client Index Number (CIN) must match system information exactly.</b>
A7	Acknowledgement/ Rejected for Invalid Information	454	Procedure Code for Services Rendered	<b>Invalid Procedure Code</b>
A7	Acknowledgement/ Rejected for Invalid Information	455	Revenue Code for Services Rendered	<b>Invalid Revenue Code</b>
A7	Acknowledgement/ Rejected for Invalid Information	254	Principal diagnosis code is invalid	<b>Invalid Principal Diagnosis code.</b>
A7	Acknowledgement/ Rejected for Invalid Information	666	Surgical procedure code is invalid	<b>Invalid Surgical Procedure code.</b>
A7	Acknowledgement/ Rejected for Invalid Information	249	Place of Service	<b>Professional claim location code is invalid.</b>
A7	Acknowledgement/ Returned	258	Days/Units for Procedure/Revenue Code	<b>Revenue code 0658 was billed on more than one service line</b>
A7	Part of OMB services	510	Future Date	<b>Service date(s) are greater than received date.</b>
A7	Acknowledgement/ Rejected for Invalid Information	187	Date(s) of Service	<b>Service date(s) are not within statement covers period.</b>

For further information regarding this process, please contact the PHC EDI Department at (707) 863-4100.