UC7810 Capitation Detail File

Quick reference guide

Use this guide to assist you with inputting data in the UnitedHealthcare UC7810 Capitation Detail File report. The report provides options for capitation reporting data analysis. For access to the report and technical assistance, please refer to the Help Menu.

Reference	Field name	Field description	Field format	Codes/Variables
A	LEGAL_ENTITY	Legal entity/carrier abbreviation	3 alpha characters	NHP – Neighborhood Health Partnership, Inc. OCI – Optimum Choice, Inc.
B	CAP_RUN_GROUP	Internal data grouping value	10 alpha characters	Example: UCPUHNHPCO
C	REGULATORY_ SEGMENT	Regulatory entity for UnitedHealthcare Capitation (UCap) lines of business	10 alpha characters	Example: UCPUHNHPCO
D	RECORD_TYPE	Type of record for this data string	2 alpha-numeric characters	1E – Eligibility, applies only to members 1R – Standard service cap 3M – Member manual adjustment 4S – System adjustment: • Member level • Provider level 6P – Provider manual adjustment ZZ – Total equals the UC7030 report
E	CAP_PRODUCT_ CATEGORY	Line of business category code	2 alpha characters	CO – Commercial

Reference	Field name	Field description	Field format	Codes/Variables
F	MARKETSEGMENT	Employer group size classification	1 numeric character	Examples: 1 – E&I 2 – Small business: Defined by UnitedHealthcare as 2-50 members and sole proprietorships 3 – Small business expanded: Defined by UnitedHealthcare as 51-100 4 – Key account: Defined by UnitedHealthcare as 101-2,999 private and public HMOs, and 3,000-plus private HMOs 5 – National account: 3000-plus or multi-state, excluding HMOs 6 – Public sector: 1,000-plus subscribers (i.e., government, public schools, universities), including public HMOs, and more than 100 Labor & Trust
G	PRODUCT_CODE	Classification of product offerings	2 numeric characters	1 – Exclusive Provider Organization (EPO) 2 – HMO 3 – Indemnity 5 – Point-of-service (POS) 6 – Preferred Provider Organization (PPO) 7 – In-Network Only (INO) 8 – Dental Maintenance Organization (DHMO)
H	PRODUCT_CLASS	The class is the subcode of the product code. It's used to identify new product offerings without introducing new product codes.	9 alpha-numeric characters	NHP or NHP_GATED
I	PROCESS_YEAR	Year the capitation was paid to or recovered from the provider	4 numeric characters Date format: yyyy	Example: 2015
J	CAP_PROCESS_MONTH	Month the capitation was paid to or recovered from the provider	6 numeric characters Date format: yyyymm	Example: 201509
K	CAP_PERIOD	Month of the capitation transaction, either current or retroactive	6 numeric characters Date format: yyyymm	Example: 201509
L	CURRENT_RETRO_INDICATOR	Type of transaction	1 alpha character	C – Current R – Retroactive

Reference	Field name	Field description	Field format	Codes/Variables
M	PAYMENT_MED_PRVDR_ID_NUMBER	Provider ID number associated with the payment contract number	7 numeric characters	Example: 1234567
N	PAYEE ENTITY TYPE	Type of provider associated with the payment contract number	2 numeric characters	1 – Network 12 – Provider organization
O	CAP_PAYEE_TIN	Tax identification number (TIN) of the provider associated with the payment contract number	9 numeric characters	Example: 123456789
P	CAP_PAYEE_NAME	Name of the provider associated with the payment contract number	20 alpha characters	
Q	CONTRACT_OWNER_NUMBER	Contract number associated with the primary care network. One or more base contracts can roll up to this number.	7 numeric characters	The contract owner number is the second-tier roll-up. In the absence of second tier, this will be the first-tier base contract.
R	CONTRACT_PARENT_ENTITY_ID	Contract number for the primary care network	7 numeric characters	Example: 1234567
S	CONTRACT PARENT TIN	Tax identification number (TIN) of the parent provider associated with the payment contract number	9 numeric characters	Example: 123456789
T	CONTRACT_PARENT_NAME	Name of the parent provider associated with the payment contract number	30 alpha characters	
U	PROVIDER_SOURCE	Code that identifies the source system as the origin of the provider contract record	4 alpha characters	Example: CIRR
V	SOURCE_RISK_CONFIG_ID	Risk configuration ID	7 numeric characters	Example: 1234567
W	RISK_CONFIG_VERSION	Iteration of risk configuration	1 numeric character	
X	SOURCE_CONTRACT_HEADER_ID	UnitedHealthcare strategic platform (USP) contract header ID	7 numeric characters	Example: 1234567
Y	CONTRACT_VERSION	Iteration of the contract	1 numeric character	

Reference	Field name	Field description	Field format	Codes/Variables
Z	CONTRACT_NUMBER	Unique sequentially assigned identifier for a contract loaded into the source system. When multiple contracts are rolled together for reporting and payment, this value represents the "child" contract.	7 numeric characters	The contract number is the first-tier base contract
AA	CONTRACT_DESCRIPTION	Description of the contract	120 alpha characters	
AB	GROUP_MED_PRVDR_ID_NUMBER	At-risk provider ID number	7 numeric characters	
AC	AT-RISK PROVIDER ENTITY TYPE	Entity type of the provider at risk	2 numeric characters	1 – Network 12 – Provider organization
AD	AT-RISK PROVIDER NAME	Name associated with the provider at risk	82 alpha characters	
AE	PCP_MED_PRVDR_ID_NUMBER	Unique number identifying the primary care provider to whom the member is assigned	10 numeric characters	
AF	PCP_NAME	Name of the member's primary care provider if one is assigned, or the name of the member's primary care group	82 alpha characters	1R/1E/4S records: • Primary care – Member's primary care provider's facility name • Hospital – Associated primary care facility name • Sub-capitated – Associated primary care facility name • Third party – Associated primary care facility name
AG	PCP_STREET_ADDRESS	Street address of the primary care provider's facility	55 alpha-numeric characters	1R/4S records: Appropriate value
AH	PCP_CITY	Name of the city mapped to the ZIP code associated with the primary care provider's address	82 alpha characters	1R/4S records: Appropriate value
AI	PCP_COUNTY_NAME	Name of the county mapped to the ZIP code associated with the primary care provider's address	30 alpha characters	1R/4S records: Appropriate value

Reference	Field name	Field description	Field format	Codes/Variables
AJ	PCP_COUNTY_CODE	Name of the county mapped to the ZIP code associated with the primary care provider's address. When a ZIP code covers more than one county, the Network Operations Department determines the county code.	3 alpha-numeric characters	1R/4S records: Appropriate value
AK	PCP_STATE	State mapped to the ZIP code associated with the primary care provider's address	2 alpha characters	1R/4S records: Appropriate value
AL	PCP_ZIP	Primary care provider's ZIP code	10 numeric characters (including hyphen)	1R/4S records: Appropriate value
AM	PCP_BEGIN_DATE	Date when the member became active with the primary care provider	8 numeric characters Date format: yyyymmdd	1R/1E/4S records: Appropriate value
AN	PCP_END_DATE	Last date the member was active with the primary care provider	8 numeric characters Date format: yyyymmdd	1R/1E/4S current records: Appropriate value
AO	NPI	National Provider Identifier number	10 numeric characters	
AP	SRC_SYS_PCP_PRVDR_ID	ID number of the primary care provider assigned to the member	7 numeric characters	Example: 1234567
AQ	PROVIDER_ARRANGEMENT	Type of provider contract	2 alpha characters	PC – Primary care HO – Hospital SC – Sub-capitated TP – Third party IS – Intersegment
AR	CONTRACT_ARRANGEMENT	Type of contract risk arrangement between the provider and UnitedHealth Group	2 alpha characters	PR – Primary (shared risk) PA – Partial risk HO – Hospital TP – Third party GL – Global SP – Split risk AC – Ancillary

Reference	Field name	Field description	Field format	Codes/Variables
AS	RATETYPE	This field and the Record Type field (D) identify the variable the payment or adjustment is based on	2 alpha characters	Flat – Flat rate Fixed – Base rate, with an adjuster based on any of the following: • Age/gender/copay • Age/gender/benefit • Risk – geography/benefit/risk or risk age/gender default POP – Percent of premium
AT	PME_VALUE	Per capita code: Unit of population identifies the basis for counting members	4 alpha characters	PEPM – Per employee per month PMPM – Per member per month PPPM – Per provider per month
AU	FIXED_CAP_CODE	Type of fixed adjustment: • Copay method uses an adjustment factor based on the office visit copay amount • Benefit method uses a plan benefit adjustment factor	5 alpha characters	1R/1E current records: Appropriate value • Fixed • Copay • Benefit • Risk
AV	EMPLOYER_GROUP_NUMBER	Employer (customer) group number to which the subscriber is assigned	7 numeric characters	Customer number example: 1234567
AW	EMPLOYER_GROUP_NAME	Employer (customer) group name	82 alpha characters	Customer name
AX	FUNDING_ARRANGEMENT	Funding source	3 numeric characters	1R records only 1 – Fully insured (FI) 2 – Administrative services only (ASO)
AY	CUST_GRP_PLN_EFF_DATE	Customer group plan effective date	8 numeric characters Date format: yyyymmdd	Example: 20200421
AZ	CUST_GRP_PLN_EXPIR_DATE	Expiration date of the customer group plan	8 numeric characters Date format: yyyymmdd	Example: 20200421
BA	EMPLOYER_GROUP_EFFECTIVE_DATE	Member's start date with the employer group	8 numeric characters Date format: yyyymmdd	Example: 20200421
BB	PCP_NETWORK	Network arrangement of capitated provider	9 alpha characters	NHP or NHP_GATED
BC	MEMBER_SOURCE	Identifies the source system for the member record	4 alpha characters	Example: CIRR

Reference	Field name	Field description	Field format	Codes/Variables
BD	MEMBER_ID	Unique identifier for a member within the source system	9 numeric characters	Member ID consists of a concatenation of Employer Group Number (AV) + subscriber ID + member suffix Example: 12G4567-00123456789-00
BE	UGAP_ID	Unique member ID for UGap	38 numeric characters	
BF	ALT_MEMBER_ID	An alternative identifier for a member. ALT ID is the member number printed on their ID card.	12 numeric characters	Example: 123456789012
BG	SOCIAL_SECURITY_NUMBER	Member's Social Security number	9 numeric characters	Example: 123456789
BH	MEMBER_LAST_NAME	Member's last name	82 alpha characters	
BI	MEMBER_FIRST_NAME	Member's first name	82 alpha characters	
BJ	MEMBER_MIDDLE_NAME	Member's middle initial	1 alpha character	
BK	GENDER	Member's gender	1 alpha character	F – Female M – Male
BL	DOB	Member's date of birth	8 numeric characters Date format: yyyymmdd	Example: 20200421
BM	AGE	Member's age	3 numeric characters	Example: 123

Reference	Field name	Field description	Field format	Codes/Variables
BN	RELATIONSHIP_CODE	Member's relationship code	2 numeric characters	01 – Spouse 03 – Father or mother 04 – Grandfather or grandmother 05 – Grandson or granddaughter 06 – Uncle or aunt 07 – Nephew or niece 08 – Cousin 09 – Adopted child 10 – Foster child 11 – Son-in-law or daughter-in-law 12 – Brother-in-law or sister-in-law 13 – Father-in-law or mother-in-law 14 – Brother or sister 15 – Ward 17 – Stepson or stepdaughter 18 – Self 19 – Child 23 – Sponsored dependent 24 – Dependent of a minor dependent 25 – Ex-spouse 26 – Guardian 31 – Court-appointed guardian 32 – Mother 33 – Father 38 – Collateral dependent 48 – Stepfather 49 – Stepmother 53 – Life partner NB – Newborn
BO	MARITAL_STATUS	Member's marital status	1 alpha character	S – Single M – Married D – Divorced P – Separated U – Unknown
BP	RESIDENTIAL_ADDRESS	Member's residential street address	55 alpha-numeric characters	1E, 1R and 4S records only
BQ	CITY	Member's residential city	50 alpha-numeric characters	1E, 1R and 4S records only
BR	STATE	Member's residential state	2 alpha-numeric characters	1E, 1R and 4S records only
BS	ZIP_CODE	Member's residential ZIP code, the number mapping to a particular postal area	10 digits • 5-digit ZIP codes: Left-justify with blank spaces to the end of field • 9-digit ZIP codes: insert a hyphen in the 6th position	1E, 1R and 4S records only ZIP+4 Example: 92804-0001

Reference	Field name	Field description	Field format	Codes/Variables
BT	TELEPHONE	Member's telephone number	12 numeric characters, including hyphens	1E, 1R and 4S records only Example: 999-999-9999
BU	MEMBER_RESIDENTIAL_COUNTY_NA ME	Name of the county mapped to the ZIP code associated with the member's address	82 alpha characters	
BV	MEMBER_RESIDENTIAL_COUNTY_CO DE	County code mapped to the ZIP code associated with the member's address	32 alpha characters	
BW	ADJUSTMENT_CODE	3-letter code that identifies an additional payment to or a deduction from the provider. For manual adjustments, the payment or deduction is on record types of 3M (member level) or 6P (provider level).	3 alpha characters	MBR – Member adjustment SRW – Security reserve withhold RTR – Retroactive CPJ – Capitation general adjustment
BX	ADJUSTMENT_COMMENT	Reason for the adjustment	255 alpha-numeric characters	3M and 6P records only
BY	ADJUSTMENT_CATEGORY	Type of adjustment used in conjunction with the adjustment code	10 alpha-numeric characters	3M, 4S and 6P records only: Employer – Adjustment for all members in an employer group Member – Adjustment for an individual member Provider – Adjustment for all members with a provider Product – Adjustment for all members with a product code Benefit plan/Cover plan – Adjustment for all members with a benefit plan or rider System withhold – Adjustment to all members of the contracted provider at the provider level with an accumulator Lump sum – Provider-level adjustment for a flat dollar amount. Alternatively, this can be loaded as a provider-level adjustment. Member premium – M&R capitation – Adjustment based on the premium billed to a member or employer group
BZ	CAPPED_ADJUSTMENT_FLAG	Capped adjustment indicator	1 alpha character	1R, 3M, 4S and 6P records only C – Capitated adjustment N – Noncapitated adjustment

Reference	Field name	Field description	Field format	Codes/Variables
CA	CAPPED_COUNT	Number of current and retroactive members assigned to the provider for the capitation cycle month	2 numeric characters	1 – Addition -1 – Deduction
CB	CAPITATION_RATE	Capitation rate for the contracted group based on the applicable rate table	12 numeric characters, including hyphen: -ddddddddd dd.cc	1R records For fixed or flat-rate calculation methods, the capitation rate is calculated prior to applying factors 4S (system adjustment) Member/employer premium
CC	CAPITATION_AMOUNT	Calculation is based on the contract terms in system; also known as standard services capitation	12 numeric characters in monetary format, including hyphen -ddddddddd ddd.cc	
CD	CAP_ENTITLED_INDICATOR	Defines the member's eligibility based on the industry standard 15/30 rule	1 alpha character	C – Capped: Eligible on or before the 15th of the month N – Noncapitated: Eligible on or after the 16 of the month R – Reversed
CE	TRANSACTION_COUNT	Count of each material capitation transaction	5 numeric characters	Non-financial records will show 0
CF	TRANSACTION_TERM_ADD	Transaction action code flag: add, term, demographic, current	2 alpha characters	CM – Current (current member: processing period date = capitation period date) RA – Retro Add (retroactive member addition: processing period date > capitation period date) RC – Retro Change (retroactive member change, with the type of change not identified in this field: processing period date > capitation period date) RD – Retro Term (retroactive member termination/deletion: processing period date > capitation period date)
CG	TRANSACTION_TYPE	Transaction group code displays groups: benefits, primary care provider, eligibility and contract	2 alpha characters	CM – Current [current member: processing period date = capitation period date] RA – Retro Add [retroactive member addition: processing period date > capitation period date] RC – Retro Change [retroactive member change, with the type of change not identified in this field: processing period date >

Reference	Field name	Field description	Field format	Codes/Variables
				capitation period date] RD – Retro Term [retroactive member termination/deletion: processing period date > capitation period date]
CH	TRANSACTION_BEGIN_EFFECTIVE_D ATE	Effective date for the member transaction (CI)	8 numeric characters Date format: yyyymmdd	
CI	MEMBERSHIP_TRANSACTION_CODE	Code used to classify the member transaction	10 alpha-numeric characters	ADDR_CNTY – Member's address county ADDR_ST – Member's address state AGE_GENDER – Member's age and gender band factor BASE_CAP – Base capitation rate BENPLANADD – Member added to benefit plan BENPLANTRM – Member terminated from benefit plan DOB – Member's date of birth GENDER – Member's gender MGRP – Member's group MGRP_CNTRT – Member's group contract NETCAPRATE – Net capitation rate NET_CONTR – Network contract PLAN – Member's benefit plan PLAN_OPTN – Plan option POSTALCODE – Member's address postal code PROV_ASSN – Provider assignment type PROV_CHG – Member's assigned provider PROV_LOC – Member's assigned provider location PROV_ORG – Member's assigned provider organization RELATION – Member's relationship to subscriber SBCR – Subscriber
CJ	ELIGIBILITY_START_DATE	Member's start date with the plan	8 numeric characters Date format: yyyymmdd	
CK	ELIGIBILITY_END_DATE	Member's end date with the plan	8 numeric characters Date format: yyyymmdd	

Reference	Field name	Field description	Field format	Codes/Variables
CL	COPAY_ADJUSTMENT_VALUE	Value used to calculate the copayment factor. Applies only to fixed capitation, not flat rate.	8 numeric characters Digit format, with hyphen: -dddd.ccccc	• Copay adjustment type (CM) of dollar amount (+/-), applied to base rate in copay and age/gender-adjusted capitation calculation • Copay adjustment type (CM) of percentage (+/-) of base rate applied to base rate in copay and age/gender-adjusted capitation calculation
CM	COPAY_ADJUSTMENT_TYPE	Copay factor type code: copay adjusted fixed capitation only	5 alpha characters	
CN	OFFICE_VISIT_COPAY	Member's copayment for a primary care visit to the member's physician or group	11 numeric characters Monetary format, with hyphen: -dddddddddd. cc	
CO	GEO_FACTOR	Member's geographic factor	8 numeric characters	
CP	AGE_GENDER_FACTOR	Group age/sex factor	8 numeric characters	Applies to fixed (AGC/AGB) or flat capitation (A/G) groups only
CQ	ERG FACTOR	Member's risk factor	10 alpha characters	
CR	BENEFIT_FACTOR	Benefit factor for the group-level capitation calculation	8 numeric characters	• Global • Hospital • Independent physician association (IPA) • Primary care provider
CS	DEFAULT_FACTOR_INDICATOR	This field will display when one or more factors/adjustment rates were unavailable at the time of capitation processing	1 alpha-numeric character	D – Demographic: copay adjustment or age/gender factor not found; processed without adjustment B – Benefit: benefit factor not found; processed as factor of 1 S – System: value reserved for future use NULL – No default used, or contract is not fixed rate
CT	BENEFIT_PLAN_ID	Code identifying the member's medical plan benefits package	10 alpha-numeric characters	Example: M030012345
CU	BEN_BNDL_OPT_ID	Benefit bundle option ID	8 numeric characters	
CV	NAME_BEN_BNDL_OPT_ID	Benefit bundle name	82 alpha-numeric characters	NP – M030012345-RX03001234-NHP_6-12345678