

Claims Resolution Matrix — Professional & Institutional

This Claims Resolution Matrix is to be used as a reference tool to troubleshoot professional or institutional claims that have been submitted electronically (i.e., submitted via 837P or 837I transaction) and rejected. Refer to the Coding Definitions section for detailed information about category, entity, and claim status codes.

277 Claim Acknowledgments Details																			Claim Resolution Instructions	
Claims Level Loop 2200D									Line Level Loop 2220D									837P Loop/Data Element	Error Resolutions 837P	
Edit #	Primary Status 277CA Elements			Secondary Status 277CA Elements			Tertiary Status 277CA Elements			Primary Status 277CA Elements			Secondary Status 277CA Elements			Tertiary Status 277CA Elements				
	STC01-1	STC01-2	STC01-3	STC10-1	STC10-2	STC10-3	STC11-1	STC11-2	STC11-3	STC01-1	STC01-2	STC01-3	STC10-1	STC10-2	STC10-3	STC11-1	STC11-2	STC11-3		
2	A7	33	IL	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2010AA.NM109	The member ID number submitted was not valid. Submit the member ID number as it appears on the member's ID card — without spaces, hyphens, dashes, or other special characters.
135	A3	116																	Interchange Control Header (ISA) or Functional Group Header (GS)	The member ID number submitted was not valid for the receiver code on the claim. Refer to the payer ID grid to confirm the correct interchange (ISA-08) and application (GS-03) receiver codes for the member.

Coding Definitions

These code definitions are derived from other sources, including the X12 (<https://X12.org/codes>), and are published by AmeriHealth solely for your convenience. The information was current at the time of publication.

If you have further questions after reviewing this document, please contact the Smart Data Solutions support team Monday – Friday, 9 a.m. – 6 p.m. EST at stream.support@sdata.us or 855-297-4436.

Claim Status Category Codes	
A3	The claim/encounter has been rejected and has not been entered into the adjudication system.
A7	The claim/encounter has invalid information as specified in the status details and has been rejected.

Claim Status Codes	
33	Subscriber and subscriber ID not found
116	Claim submitted to incorrect payer

Entity Codes	
IL	Insured or Subscriber