



The following error codes are possible in the 277U

A1	19	Entity acknowledges receipt of claim/encounter.
A3	31	Subscriber/patient name mismatched
A3	33	Subscriber/Patient id not found.
A3	88	Patient not eligible/not approved for dates of service.
A3	116	Claim submitted to incorrect payer.
A3	157	Missing or Invalid Information – Other Insurance
A3	158	Patient date of birth mismatch
A3	481	Claim/submission format is invalid: Multiple providers billed.
A3	510	Future date of service
A3	550	Coordination of Benefits code
A6	145	Provider specialty/taxonomy code.
A6	189	Facility admission date
A7	228	Type of bill for UB claim
A7	231	Hospital admission type.
A7	234	Patient status.
A7	249	Place of service.
A7	255	Diagnosis code.
A7	402	Claim amount must be greater than zero
A7	453	Procedure Code Modifier(s) for Service(s) Rendered
A7	454	Procedure code for services rendered.
A7	488	Diagnosis code(s) for the services rendered.
A7	562	National Provider Identifier (NPI)
A8	128/562/145	Taxonomy not on file for tax id/NPI affiliation

Note:

A1 - The claim/encounter has been received. This does not mean that the claim has been accepted for adjudication.

A3 - Acknowledgement/Returned as unprocessable claim-The claim/encounter has been rejected and has not been entered into the adjudication system.

A6 - Acknowledgement/Rejected for Missing Information - The claim/encounter is missing the information specified in the Status details and has been rejected.

A7 - Acknowledgement/Rejected for Invalid Information - The claim/encounter has invalid information as specified in the Status details and has been rejected.

A8 - Acknowledgement / Rejected for relational field in error.

Note: The codes and descriptions above are as the writing of this document. Although we will endeavor to keep this guide current, some changes may occur. If this does occur, please visit www.wpc-edi.com for a complete list and detailed explanation please visit.