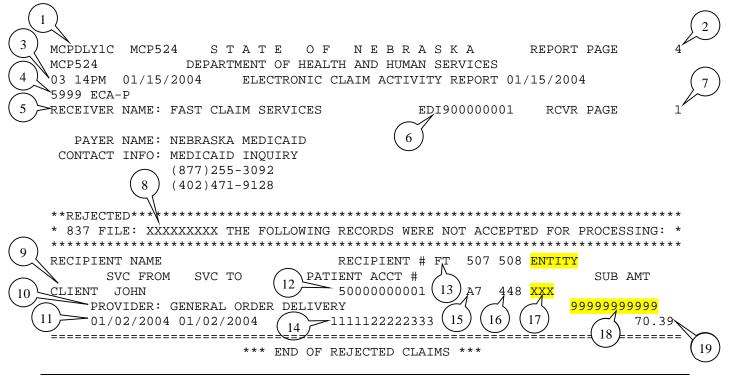# NEBRASKA MEDICAID PROGRAM
ELECTRONIC CLAIM ACTIVITY (ECA) REPORT – Rejected Claims

The Electronic Claim Activity (ECA) Report for **Rejected Claims** is generated when individual claims are rejected before being loaded into the claims processing system. Claims are rejected if they do not pass certain validity edits. **Rejected claim** ECA reports are generated at approximately 6:30 P.M. Central Time Monday through Friday. A sample report with descriptions is provided below.

Nebraska Medicaid uses national Claim Status Category Codes (Code Set 507) and Claim Status Codes (Code Set 508) for reporting on the ECA Report. These codes and descriptions can be found at the following web site: http://www.wpc-edi.com/codes. Claim status category codes indicate general status (rejected for invalid information, rejected for missing information etc.); claim status codes identify the specific error.

```
MCPDLY1C  MCP524    S T A T E   O F   N E B R A S K A      REPORT PAGE    4
MCP524             DEPARTMENT OF HEALTH AND HUMAN SERVICES
03 14PM  01/15/2004    ELECTRONIC CLAIM ACTIVITY REPORT 01/15/2004
5999 ECA-P
RECEIVER NAME: FAST CLAIM SERVICES          EDI900000001   RCVR PAGE      1

   PAYER NAME: NEBRASKA MEDICAID
 CONTACT INFO: MEDICAID INQUIRY
               (877)255-3092
               (402)471-9128

  **REJECTED***************************************************************
  * 837 FILE: XXXXXXXXX THE FOLLOWING RECORDS WERE NOT ACCEPTED FOR PROCESSING: *
  ***********************************************************************
RECIPIENT NAME                      RECIPIENT # FT  507 508 ENTITY
    SVC FROM    SVC TO          PATIENT ACCT #                    SUB AMT
CLIENT  JOHN                       50000000001   A7  448 XXX
    PROVIDER: GENERAL ORDER DELIVERY                         99999999999
    01/02/2004 01/02/2004       1111122222333                     70.39
================================================================================
                  *** END OF REJECTED CLAIMS ***
```

1. Nebraska Medicaid internal processing job names
2. Nebraska Medicaid internal report page
3. ECA generation date and time
4. Submitter ID and claim type submitted (I = Institutional, P = Professional, D = Dental)
5. Trading partner name receiving the ECA report
6. Trading partner ID
7. Page number received by trading partner
8. GS06 from submitted 837 claims file
9. Patient name
10. Medicaid provider name
11. Claim dates of service
12. Patient Medicaid ID number
13. Frequency type code
14. Patient account number as assigned by the medical provider.
15. Claim status category code (507) indicating general status - accepted, rejected, additional information requested, etc.
16. Claim status code (508) indicating reason for rejection or deletion of each claim.
17. Entity Code
18. Provider's NPI Number or Provider's Nebraska Medicaid number
19. Claim total charge

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