

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
Highlighted payers are new or have been altered in the last 90 days. Please verify that your system is setup correctly for this payer				
1199 National Benefit Fund	13162	Y		G
1ST MEDICAL NETWORK (MEDICAL RESOURCES)	58203	Y		G
360 Alliance Gilsbar	88053	Y		G
A.G.I.A, INC.	95241	Y	Claims are printed and mailed	G
AAG - American Administrative Group	37283	Y	Formerly Gallagher Benefit Admir	G
AARP	36273	Y		C
ABC HEALTH PLAN	48185	Y	ABC Provider Number, call (631) 360-3102.	G
Abri Healthplan	ABRI1	N		G
Access Administrators	AHS01	Y		T
Acclaim	64071	Y		G
Acclaim Repricing	21356	Y		G
Acordia National	87815	Y		T
ADMIN MEDICAL SVCS	61271	Y		G
ADMINISTRATIVE CONCEP	22384	Y		G
Administrative Services	59141	N		G
ADVANTAGE HEALTH SOLU	35209	Y		G
Advantage Preferred Plans	77070	Y		G
Advantra Freedom	25152	Y		G
Advantra/Health America, Inc./Health Assurance	25126	Y		G
ADVENTIST HEALTH SYSTEM	95340	Y		G
Advica/Northeast Georgia Health System, Inc	13376	Y		G
Advocate Health Centers	36320	Y		G
Advocate Health Partners	65093	Y		T
Aetna 60054 - (Commercial only)	60054	Y		C
Aetna Affordable Health Choices	57604	Y		G
Aetna Better Health	23225	Y		G
AETNA TEXAS MEDICAID	38692	Y		G
Affiliated Doctors of Orange County	ADOC5	Y		T
Affiliated Physicians Group	M3CA1	Y		T
Affinity Health Plan	13334	Y	Contact EDI@Affinityplan.org or (718)794-7592 prior to sending claims.	G
Affinity Health Plans (TMG Health)	13333	Y	Effective for Medicare claims with DOS on or after 1/1/2010	G
Aftra Health Fund	13346	Y		G
AHPO (Cleveland, OH)	31138	Y		G
Alaska Children's Services, Inc. - Group # P68	91136	Y	Please include Group Number when submitting claims.	G
ALASKA ELECTRICAL HEALTH	92600	Y		G
Alaska Laborers Construction Industry Trust - Group # F23	91136	Y	Please include Group Number when submitting claims.	G
Alaska Pipe Trades Local 375 - Group # F24	91136	Y	Please include Group Number when submitting claims.	G
Alaska United Food & Commercial Workers Health & Welfare Trust - Group # F45	91136	Y	Please include Group Number when submitting claims.	G
ALICARE	13550	Y		G
All Savers Insurance Co.	37602	Y		C
Allegiance Benefit Plan Management, Inc.	81040	Y		G
Alliance (WI Only)	Call	Y	(WI providers ONLY. Call Dave Sell at 608-210-6656 to obtain rendering provider, location IDs.)	G
Alliance PPO, LLC	52148	Y		C
Alliant Health Plans of Georgia	58234	Y		G
Allied Benefit Systems	37308	Y		G
Alta Health Strategies	87043	Y		G
Altius	12X38	Y		G
AMA Insurance Agency, Inc.	AMAIA	Y		T
Amalgamated Life	13550	Y		G
AmerPlan	38219	Y	Claims are printed and mailed to the payer.	G
AMERIBEN SOLUTIONS	75137	Y		G
Americaid CC Tampa	06161	Y		G
Americaid Community Care (Dallas/Ft. Worth)	27514	Y		G
Americaid Community Care (Houston)	27515	Y		G
Americaid Community Care (Maryland)	27517	Y		G
Americaid Community Care (New Jersey)	27516	Y		G
American Administrators	42112	Y		G
American Behavior	63103	N		G
American Benefit Plan Administrators	95170	Y		G
American Benefits Management OH	34187	Y	Valid for P.O. Box 35008, N. Canton, OH 44735	
American Community Mutual Insurance	60305	Y		G
American Family Insurance	AMF11	Y		G
AMERICAN GENERAL LIFE AND ACCIDENT	62030	Y		G
American Healthcare Alliance	01066	Y		G

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American Imaging Management, Inc.	36369	Y		G
American International Group	87726	Y		C
American Lifecare	72099	Y	Valid for billing address of 1100 Poydras Street, Suite 2600, New Orleans, LA 70163-2602	G
American Medical Securities	81400	N		C
American National Insurance (ANICO)	74048	Y		G
American Postal Workers Union Health Plan	44444	Y		G
American Republic	42011	Y		G
American Service Life Insurance Company	97055	Y	United Ins. Div.	G
AMERICAN WORKER HEALTH PLUS	37322	Y		G
Americhoice of New Jersey Personal Care Plus	86001	Y	Requires AmeriChoice assigned provider ID. Please contact AmeriChoice at (888) 362-3368.	C
Americas 1st Choice Health Plans of South Carolina	20553	N		T
America's Health Choice	21810	Y		T
America's PPO / America's TPA	41178	Y		T
Americhoice of NJ (Medicaid NJ)	86047	Y		C
Americhoice of NY (Medicaid NY)	86048	Y		C
Americhoice of NY Personal Care Plus (Medicare NY)	86002	Y	All claims submitted require your Americhoice assigned provider ID#. Contact them @ 888-362-3368	C
Americhoice of PA Personal Care Plus (Medicare)	86003	Y	All claims submitted require your Americhoice assigned provider ID#. Contact them @ 888-362-3368	C
Americhoice of PA (Medicaid PA)	86049	Y		C
Americhoice of TN	95378	Y		C
Amerihealth Administrators, Inc.	54763	Y		G
Amerihealth Mercy Health Plan	22248	Y		G
Amerihealth NJ/DE - HMO	23037	Y		G
Amerihealth Non-HMO NJ/IBC (Passport Advantage) (For Dates of service 12/31/2009 only. For later claims, use 76569.)	12X24	Y		G
Amway Corporation	38254	Y		G
Antares Management Services	34192	Y		G
Anthem Blue Cross of California *	47198	Y	Enrollment Required.	N
APA PARTNERS	16140	Y		G
APEX BENEFITS SERVICE	34196	Y		G
APS Healthcare, Inc (American Psych Systems)	54160	Y		G
APWU Health	55544	Y	Claims are printed and mailed to the payer. If filing a claim for a federal plan member, use payer ID 44444	G
APWU Health Plan/Beech Street	95377	Y		G
ARCADIAN MGMT SERVICE	77045	Y		G
Arkansas Best Corporation - Choice Benefits	75278	Y		G
Arnett Health Plans	95440	Y	Payer Requires Unique Provider ID for billing, rendering or referring provider fields. Contact Arnett Health Plans EDI coordinator @ 765-448-7483 for additional information prior to first claims submission	C
ASC Benefit Services, Inc.	72467	Y	Payer ID is for ACS Benefit Services, Inc. ONLY	
ASR Physicians Care	38265	Y		G
Associates for Health Care, Inc. (AHC)	36326	Y		G
Assurant Health (Fortis Insurance Company)	39065	Y		G
ASSURANT HLT SELF FUN	37313	Y	Claims should go to payer in FT. MILL, SC Only	G
Assurant MiniMed-Key Family	37323	Y		G
AssureCare, Inc.	88035	Y		G
ASSURED BENEFITS ADMI	74240	Y		G
Asuris NW Health	93221	Y		G
Athens Area Health Plan Select 95691	95691	Y		G
Atlantic Medical Insurance	22285	N		G
Atlanticare Admin	22304	Y		G
Automated Group Administration	37280	Y	Please send these EDI claims to the Payer ID of the PPO shown on the Members ID Card. If you have any questions, please call 260-489-6447 (703).	G
Automotive Machinists Local 289 Health & Welfare Trust -Group #F32	91136	Y		G
Avera Health Plans	46045	Y		G
Avmed, Inc.	59274	Y		T
AZ Physicians IPA	03432	Y		G
Banner Health	12X42	Y		G
Baptist Healthcare Network	74275	Y		G
Beacon Health Strategies	43324	Y		G
BeneFirst	37125	Y		G
BENEFIT ADMIN. SYSTEM	36149	Y		G
Benefit Coordinators	25145	Y	Valid for billing address of 111 Ryan Court, Suite 300, Pittsburgh, PA	N
Benefit Management	37222	Y		G
Benefit Management Admin (BMA)	BMATP	Y		T
Benefit Management Services	56139	Y		G

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Benefit Management Systems, Inc.	37212	Y		G
BENEFIT PLAN ADM INC	37286	Y		G
Benefit Plan Administrators, Inc.	37118	Y		G
Benefit Planners, Inc.	74223	Y		G
Benefit Systems & Services, Inc. (BSSI)	36342	Y		G
Benesight (Formerly TPA)	87265	Y		G
BENESYS	37248	Y		G
BERKSHIRE HEALTH PLAN	23243	Y	Prior to submitting, call (610) 372-8044 ext. 3019	T
BEST LIFE & HEALTH CO	95604	Y		G
BIENVIVIR SENIOR HEALTH SERVICES	12X40	Y		G
Blue Care Network	12B58	N	Enrollment requirec	N
Blue Cross Blue Shield of Wisconsin *	12B29	Y		N
Blue Cross of Alabama *	12B54	Y	Enrollment required.	N
Blue Cross of Alaska *	12B47	Y	Enrollment required.	N
Blue Cross of Arizona	55471	Y	Enrollment required.	N
Blue Cross of Arkansas *	12021	Y	Enrollment required.	N
Blue Cross of California	47198	Y	Enrollment Required.	N
Blue Cross of Colorado	15491	Y		N
Blue Cross of Connecticut *	35341	Y	Enrollment required.	N
Blue Cross of Delaware *	12B76	Y	Enrollment Required.	N
Blue Cross of Florida	35171	Y	Enrollment required.	N
Blue Cross of Georgia	35371	Y		N
Blue Cross of Hawaii *	15181	Y	Enrollment required.	G
Blue Cross of Idaho *	12B07	Y	Enrollment Required.	N
Blue Cross of Illinois *	12B08	Y	Enrollment Required.	N
Blue Cross of Indiana *	12B09	Y	Enrollment Required.	N
Blue Cross of Iowa *	12B10	Y	Enrollment Required.	N
Blue Cross of Kansas *	57325	Y	Enrollment Required.	N
Blue Cross of Kansas City *	12B66	Y	Enrollment Required.	N
Blue Cross of Kentucky	55341	Y	Enrollment required.	N
Blue Cross of Louisiana *	12B12	Y	Enrollment Required.	N
Blue Cross of Maine *	12B13	Y	Enrollment Required.	N
Blue Cross of Maryland *	12011	Y	Enrollment Required.	G
Blue Cross of Massachusetts *	12B14	Y	Enrollment Required.	N
Blue Cross of Michigan *	12B18	Y	Enrollment Required.	N
Blue Cross of Minnesota	00220	Y	Enrollment Required.	N
Blue Cross of Mississippi *	12B17	Y	Enrollment Required.	N
Blue Cross of Missouri *	12B65	Y	Enrollment Required.	N
Blue Cross of Missouri - Kansas City, Missouri *	55691	Y	Enrollment required.	N
Blue Cross of Montana *	12B77	Y	Enrollment Required.	N
Blue Cross of Nebraska	00260	Y		G
Blue Cross of Nevada	00265	Y		G
Blue Cross of New Hampshire *	15121	Y	Enrollment Required.	N
Blue Cross of New Jersey Horizon *	55261	Y	Enrollment required.	N
Blue Cross of New Mexico *	12B22	Y	Enrollment Required.	N
Blue Cross of New York City (Empire) *	12B36	Y	Enrollment Required.	N
Blue Cross of New York of Central *	12B37	Y	Enrollment Required.	N
Blue Cross of New York of Northeastern *	12B68	Y	Enrollment Required.	N
Blue Cross of New York of Rochester *	12B40	Y	Enrollment Required.	N
Blue Cross of New York of Utica, Watertown *	12B38	Y	Enrollment Required.	N
Blue Cross of New York of Western *	12B39	Y	Enrollment Required.	N
Blue Cross of New York State *	12B35	Y	Enrollment Required.	N
Blue Cross of North Carolina *	12B23	Y	Enrollment Required.	N
Blue Cross of North Dakota *	12B78	Y	Enrollment Required.	N
Blue Cross of Ohio *	12B24	Y	Enrollment Required.	N
Blue Cross of Oklahoma *	12B59	Y	Enrollment Required.	N
Blue Cross of Pennsylvania Capital *	12B60	Y	Enrollment Required.	N
Blue Cross of Pennsylvania Western/Central Highmark *	12B81	Y	Enrollment Required.	N
Blue Cross of Rhode Island *	12B74	Y	Enrollment Required.	N
Blue Cross of South Carolina *	12B55	Y	Enrollment Required.	N
Blue Cross of South Dakota *	12B33	Y	Enrollment Required.	N
Blue Cross of Tennessee *	55131	Y	Enrollment required.	N
Blue Cross of Texas *	55011	Y	Enrollment required.	N
Blue Cross of Utah - FEP *	12B1E	Y	Enrollment Required.	N
Blue Cross of Utah *	12B42	Y	Enrollment Required.	N
Blue Cross of Vermont *	12B32	Y	Enrollment Required.	N
Blue Cross of Virginia	55371	Y		N
Blue Cross of Washington *	12B27	Y	Enrollment Required.	N
Blue Cross of West Virginia *	12B28	Y	Enrollment Required.	N
Blue Cross of Wisconsin *	12B29	Y	Enrollment Required.	N
Blue Cross of Wyoming *	12B30	Y	Enrollment Required.	N
Blue Shield of California *	94036	Y	Enrollment Required.	N
Bluegrass Family Health	61124	Y		G

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BMC Health Net Plan	13337	Y		G
BMGI BENEFIT MANAGEMENT GROUP INC	20018	Y		G
Boilermakers National Health & Welfare Fund	36609	Y		G
Boon-Chapman Benefit Administrators, Inc.	74238	Y		G
BPS, Inc.	48964	Y	(Formerly known as Benefit Plan Services, Inc.)	G
BRIDGEWAY NETWORK	68054	Y		G
BritCay	22286	N		G
Brokerage Concepts, Inc.	51037	Y		G
Brown & Brown Benefits	59069	Y		G
Brown & Toland Medical Group	94316	Y		G
Bryan Independent School District	BRISD	Y		T
Buckeye Community Health	32004	Y	Prior to submitting claims, please call Provider Relations Dept at 1-866-296-8731 to verify your provider info is on the file in the claim system. This will prevent rejections and allow payments to be made in a timely manner.	G
Cahaba GBA Home Health & Hospice	12M97	N	Valid for the following states: CO, KS, MD, MO, MT, ND, NE, PA, VA, WV, WY, IA, DE, DC, UT and SD	G
California Anthem Blue Cross *	47198	Y	Enrollment Required.	N
California Blue Cross *	47198	Y	Enrollment Required.	N
Cal-Optima Direct	CALOP	Y		G
Cambridge ISG	59334	Y		G
CANNON COCHRAN MANAGEMENT SERVICES INC	71057	Y		G
CANNON COCHRAN MGMT	37105	Y		G
Cape Health Plan	38245	Y		G
Capital Community Health Plan	87726	Y		C
Capital District Physicians Health Plan	12X03	Y		G
Capital Health Plan	95112	Y		T
Capitol Administrators	68011	Y		G
Cardiovascular Care Providers	GCVCP	Y		T
CARE 1ST HLTH PLAN OF	57116	Y		G
CareCore Aetna Radiology	14179	Y		G
CareCore National	14182	Y		G
CareCore National - Healthnet	14184	Y	Additional Provider Info RENDERING PROVIDER NETWORK ID, REFERRING PROVIDER ID, FACILITY INFO and FACILITY ID required	G
CareCore National - Healthnet New Jersey	14185	Y		G
CareCore Oxford Radiology	14180	Y		G
Care Improvement Plus	77082	Y		G
Care Management Group of Greater NY, Inc.	11331	Y		G
Care Wisconsin Health Plan (Trizetto)	27004	N		T
Carelink Advantra	25139	Y	West Virginia HealthAssurance and Carelink commercial claims only. For Carelink Medicaid, send on paper to P.O. Box 7373 London, KY 40742	G
Carelink Health Plan	25139	Y	West Virginia HealthAssurance and Carelink commercial claims only. For Carelink Medicaid, send on paper to P.O. Box 7373 London, KY 40743	G
Carelink Medicaid	25140	Y		G
Carenet	25142	Y		G
Careplus Health Plan	95092	N		T
CareSource of IN	37311	Y		G
Cariten Commercial	62073	Y		C
Cariten Senior Health	62072	Y		C
Carolina Care Plan, Inc.	57105	Y		G
Carolina Crescent Health Plan	12K85	Y		G
Carolina Summit Healthcare, Inc.	56195	Y		G
Caterpillar Inc.	37060	Y		G
CBCA	55438	Y		G
CBSA	41124	Y		G
CCN Managed Care, Inc.	33005	Y		G
CDO Technologies	87065	N		G
CDS GROUP HEALTH	88022	Y		G
Cement Masons & Plasterers Health & Welfare Trust -Group #F16	91136	Y	Please include Group Number when submitting claims.	G
CENPATICO ARIZONA	68048	Y		G
Cenpatico Behavior Health	68051	Y		G
CENPATICO GEORGIA	68050	Y		T
CENPATICO INDIANA	68052	Y		G
Cenpatico Ohio	68051	Y		G
CENPATICO TEXAS	68053	Y		T
Centene Advantage Plans	68056	Y		G
Center Care (For Safety & Claims)	USC02	Y		T
Center Care (For Unicare Claims)	UNC01	Y		T
CenterCare	13357	Y		G
Centra Healthplan	75196	Y	(Formerly Health Economics Corp.)	G

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Centra Healthplan	75243	Y	[Formerly Centra Benefits of Texas (MS, TX, WA)]	G
Central Benefits Life	31118	Y		G
Central Benefits Mutual	31118	Y		G
Central Benefits National	31118	Y		G
Central Mass Health Care	02041	Y		G
Central Reserve Life	34097	Y		G
Central States Health & Welfare Funds	36215	Y		G
Century Health Solutions	48120	Y		G
CHA Commonwealth Health Alliance	23171	Y		G
CHAMPVA - HAC	84146	Y		N
CHCcares of South Carolina	25151	Y		G
Chesapeake Life Insurance Company	59223	Y		G
Chesterfield Resources, Inc.	34154	Y		G
Children's Community Health Plan	39113	Y		G
ChoiceOne-UTMB CHIP	UHSCH	Y		T
CHP Direct Supermed	90441	N		G
CHP/RPU (FABOH)	39112	Y	(Facility physical address required on claim.)	G
Christian Brothers Services	61271	Y		G
CIGNA	62308	Y		C
CIGNA Behavioral Health	MCCBV	Y		C
CIGNA - PPA	62308	Y		C
CIGNA - PPO	62308	Y		C
CIGNA Flex Care (New Mexico only)	62310	Y		G
CIGNA Health Plan - HMO	62308	Y		C
CIGNA Medicare Advantage	86033	Y		G
CIGNA Senior	86033	Y		G
Cincinnati Financial Corporation	46871	Y		G
Citrus Health Plan	10207	Y		T
Claim Management Services, Inc.	39141	Y		G
Claimshop- Employers Coalition on Health	27008	N		G
Claimsware Inc. DBA ManageMed	57080	Y		G
Clearchoice Health Plan	77201	Y		G
CMHC	02041	Y		G
CNA Health Partners	71063	Y		G
CNA Health Partners Repricing - AR	48153	Y		G
CNA Insurance Company	36094	Y		G
CNIC Health Solutions.	37227	N		
Cofinity	38335	Y		G
Colonial Healthcare	37123	Y		G
Colonial Medical	22284	N		G
Colorado Kaiser Permanente (Colorado plans only)	COKSR	Y		P
Columbia Cornell Care	25351	Y		G
Columbia United Providers	91162	Y		G
COMM CHOICE HLTH PLAN	61948	Y		G
COMMERCE BENEFITS GRP	34181	Y		G
Commonwealth Admn, LLC	37237	Y		G
Commonwealth Care Alliance	14315	Y		G
Community Care Behavioral Health Organization	25179	Y		G
Community Care BHO	23282	Y		G
Community Care Managed Health Care Plans of Oklahoma	73143	Y		G
Community Care Organization	39126	Y	Pilot (in testing)	G
Community Choice of Michigan	38325	Y		G
Community First I Par Plus	COMMF	Y		T
Community Health Alliance	35193	Y		G
Community Health Choice	48145	Y		G
Community Health Electronic Claims/CHEC/webTPA	75261	Y		G
Community Health Network of CT	62149	Y	Community Health Network of Ct cannot accept electronic claims for Anesthesia. Contact LeAnn Olson at 203-237-4000 ext 3136 for information.	G
Community Health Plan - St. Joseph MO	90010	Y	Service areas of NW Missouri, NE Kansas, SW Iowa, SE Nebraska	G
Community Health Plan of Washington	12T30	Y		G
Community Premier Plus	13374	Y		G
Community Premier Plus for Neighborhood Health Pro	32481	Y		G
COMPREHEN BEHAVIORAL	59314	Y		G
Comprehensive Benefits Administrators, Inc	03036	Y		G
CONNECTICARE	78375	Y		G
ConnectiCare, Inc	06105	Y		G
Connecticut General (CIGNA)	62308	Y		C
Conseco Services, LLC	35196	Y		G
CONSOCIATE GROUP	37135	Y		G
Consolidated Health Plans	87843	N		G

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Continental General Insurance	71404	Y		G
Continental Key Family	35315	N		T
Continental Life & Accident Co	35196	Y		G
Conversion Plan - APWU	55544	Y	Claims are printed and mailed to the payer.; For conversion plan members only. If filing a claim for a federal plan member, please use payer ID 44444	G
Cook Group Health Plan	35149	Y		G
Cooperative Benefit Administrators - CBA	52132	Y		G
COOPERATIVE MANAGE CARE SERVICES, INC	35199	Y		G
CORE MGMT RESORCE GRP	58231	Y		G
CoreSource Little Rock	75136	Y		G
CoreSource of North Carolina	35180	Y		G
CoreSource of PA, MD, IL	35182	Y		G
CORESOURCE OH	35183	Y	Submit claims where address is in Ohio. For assistance 800-689-0106	G
CoreStar	41045	Y		G
Cornerstone Benefit Administrators	35202	Y		G
CORP SYSTEMS ADMIN	37246	Y		G
Corporate Benefit Services of America	41124	Y		G
CORPORATE BENEFITS SERVICES, INC.	56116	Y		G
Correctional Medical Services	43160	Y		G
CORSOLUTIONS	75235	Y		G
Country Life Insurance Company	62553	Y		G
Covenant Administrators	58102	Y		G
Covenant Management System Employee Benefit I Par Plus	CMSEB	Y		T
Coventry Carpenter's Health	25125	Y		G
COVENTRY HEALTH CARE	61271	Y		G
Coventry Health Care of Delaware, Inc.	25130	Y		G
Coventry Health Care of Indiana, Inc.	25131	Y		G
Coventry Health Care of Iowa, Inc.	25132	Y		G
Coventry Health Care of Kansas, Inc. - Kansas City	25133	Y		G
Coventry Health Care of Kansas, Inc. - Wichita	25134	Y		G
Coventry Health Care of Louisiana, Inc.	25135	Y		G
Coventry Health Care of Nebraska, Inc.	25136	Y		G
Coventry Health Georgia	25127	Y		G
Coventry Health Southcare/Healthcare Preferred	25147	Y		G
Creative Medical Systems	64068	Y		G
Creative Plan Administrators	37320	Y		G
Custom Benefit Administrators	39170	Y		G
Custom Design Benefits Inc.	82056	Y		G
DakotaCare	DAK01	Y		G
Dart Management Corporation	06172	Y		G
DAVITA VILLIAGE HEALTH	33066	Y		G
DC Chartered Health Plan	95740	R	Please contact Jason Dowling at 202-408-2013 to join Chartered Health Plans EDI Network	G
Dean Health Plan	39113	Y		G
Definity Services	64159	Y		C
Delaware Health Plan Consortium	63081	Y		G
Delaware Physicians Care, Inc.	27009	Y		G
DelawareCare (CHC of Delaware Medicaid)	25137	Y		G
DELTA HEALTH SYSTEMS	94235	Y		G
DENVER HEALTH MED PLN	84135	Y		G
DENVER HEALTH MEDICAID CHOICE	84133	Y		T
Deseret Mutual	12X35	N	Please call Debbie Hansen at 800-777-3622 ext 5838 to be setup for electronic claims under Trading Partner Id HT001755-015 prior to claims submission	G
DESTINY HEALTH	36436	Y		G
DETROIT MEDICAL CTR	56240	Y		G
DIRECTORS GUILD OF AMERICA	23706	Y		G
DIVERSIFIED GROUP BKG	06102	Y	Verify the Payer ID, Member ID, Payer City, and State before submitting claims	G
Driscoll Childrens Health Plan	74284	Y		G
Dunn & Associates	35186	Y		G
EBC INC	CALL	Y	Please call (440) 262-1160 to obtain the payerID.	G
EBMS (Employee Benefit Management Services, Inc)	12X44	Y		G
EBS of OHIO	34166	Y	Valid for PO Box 2568, Mansfield, OH 44906	G
El Paso First - CHIP I Par Plus	EPF03	Y		T

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Elder Health HMO of Pennsylvania	52192	Y	Payer services providers in MD and PA only	N
ELDERPLAN	31625	Y	Provider ID required on all claims	G
Elmcare L.L.C.	NAELM	Y		G
ELMCO	37253	Y		G
Emerald Health Network, Inc. (All PPO Business)	34167	Y		G
Emerald HMO (HMO Claims only)	34555	Y		G
Employee Benefit Corporation	37215	Y		G
Employee Benefit Concepts MI	38241	Y		G
Employee Benefit Management Corp. (EBMC)	31074	Y		G
Employee Benefit Services	37216	Y		G
Employee Benefit Services of Louisiana, Inc (EBS)	41198	Y		G
Employee Benefits Plan Administration, Inc	03036	Y		G
Employee Plans, LLC	35112	Y		G
Employee Security Inc.	54098	Y		G
Employers Direct Health	75236	Y		G
Employers Health Network LLC	20508	N		G
EMPLOYER'S DIRECT SF	75233	Y		G
Employers Insurance of Wausau - aka Wausau (Now known as UMR Wausau/UHIS)	39026	Y		G
Employers Mutual, Inc (FL)	59298	Y		G
Encompass	37110	Y		G
Encore Health Network	35206	Y		G
Enstar Natural Gas - Group # P61	91136	Y	Please include Group Number when submitting claims	G
Entrust	36878	All		G
Epic Life Ins. (Wisconsin Physician Services)	12X29	Y	Subscriber id = 9 digits, WPS Provider id qualifier - G2	G
EPN (Seton Health Plan Exclusive PR I Par Plus)	EPNSH	Y		T
EQUICOR	62308	Y		C
EQUICOR - PPO	62308	Y		C
Equitable (CIGNA)	62308	Y		C
EQUITABLE PLAN	61271	Y		G
Equitable Plan Services	73126	Y	Valid for billing address of P O Box 720460, Oklahoma City, OK 73172	G
Erin Group Administrators	23250	Y		G
ES Beveridge and Associates	34108	Y		G
ESSENCE HEALTHCARE	20818	Y		G
Evercare	87726	Y		C
Evergreen Health Plan	58233	Y		G
EVOLUTIONS HEALTHCARE SYSTEMS, INC.	59313	Y	Valid for PO Box 5001, New Port Richey, FL 34656.	G
EXCEL	61271	Y		G
ExclusiCare	71412	Y		G
Fallon Community Health Plan	22254	Y		G
Family Care	60995	Y		G
Family Care Medicaid	FCD01	Y		P
Family Care Medicaid Mental Health	FCM01	Y		P
Family Care Medicare	FCR01	Y		P
Family Health Partners/MC+ Missouri	43173	Y		G
Family Health Partners-Healthwave of KA	31472	Y		G
Family Health Systems - WI/Group Health Cooperative	39168	Y	Now known as Group Health Cooperative of South Central Wisconsin. (Formerly Family Health Systems - WI/Group Health Cooperative)	G
Family Health Systems - WI/Group Health Cooperative	39167	Y	Now known as Group Health Cooperative of South Central Wisconsin. (Formerly Family Health Systems - WI/Group Health Cooperative)	G
FARA BENEFIT SERVICES	37289	Y	Processes Health Plan Claims Only. NO WORKMENS COMP CLAIMS	G
FCE BENEFIT ADMINISTRATORS	33033	Y		G
Federally Qualified Healthcare Clinic *	FQHC1	Y	Enrollment required. Includes ALL states	N
Federated Mutual Insurance	41041	Y		G
Fidelis Care New York	11315	Y		G
Fidelis Secure Care	77054	Y		G
First Allmerica	69140	Y		G
First Allmerica Financial Life Ins. Co.	69140	Y		G
First Carolina Care	56196	Y		G
First Choice	75138	Y		G
First Choice Health Network	91131	Y		G
First Choice of CT (Requires a 5-8 character Provider Network ID.)	14162	Y		G
First Health	87043	Y		G
First Health Network	73159	Y		G
First Integrated Health	75232	Y		G
First State Health Plan	63080	Y		G
FirstCare	94999	N		G
FirstCare Star Medicaid	94998	N		G

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
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FirstGuard Health Plan - Kansas *	90060	Y	Enrollment required. Call 800-225-2573 ext 25525	G
FirstGuard Missouri *	90061	Y	Enrollment required. Call 800-225-2573 ext 25525	G
Florida 1st	59276	Y		G
Florida League of Cities, Inc.	59698	Y		G
FLORIDA HOSP HC SYS	59321	Y	RT 30-Claims Cert. ID is reqd. Must=11 num chars. Last two positions must not be 00. RT 46-12 Rendering Provider Network Id is reqd. Must be between 4 & 6 numerics. RT 30-24 Provider Id reqd. if Rendering Network Id not present	G
Florida Hospital Waterman	48116	Y		G
FMH Benefit Services, Inc.	48117	Y		G
Formax, Inc.	87066	Y		G
Fortis Benefits	70408	Y		G
Fortis Insurance Company (Assurant Health)	39065	Y		T
FoxEverett - Ingalls Ship Building	64067	Y		G
Fox-Everett, Inc.	64069	Y		G
Freedom Health Plan	41212	Y		G
Fresenius Family Care	23130	Y		G
Fresenius Medical Care Health Plan I Par Plus	FMCHP	Y		T
FrontPath Health Coalition	34171	Y		G
G.E. Group Life Assurance Company	67814	Y	[Formerly Phoenix American Life (PAL), Phoenix Home Life, Phoenix Home Life Mutual Ins. CO., and Phoenix Mutual)	G
Gallagher	37283	Y		G
GALVESTON COUNTY INDIGENT HEALTHCARE	30005	Y		G
Gates McDonald	31147	Y	For HMO Workers Comp Claims ONLY	N
Gateway Health Plan	25169	Y		G
Gateway Health Plan - Medicare Assured	60550	Y	Please verify claims for Gateway Health Plan - Medicare Assured; 60550 (Yellow Card).	G
Gateway Health Plan of Ohio, Inc.	76028	Y	Please verify claims for Gateway Health Plan of Ohio Inc.; 76028 (White Card).	G
GE Group Administrators, South Carolina	06143	Y	Formerly Phoenix Group Services	G
GEHA (Government Employees Hospital Association)	44054	Y		G
Geisinger Health Plan	75273	Y		G
General American Life Insurance Company	63665	Y		G
Generations Health	46050	N		G
George Washington Health Plan	52098	Y		G
Georgia Power Medical Benefits Plan	61271	Y		G
Gettysburg Health	23212	Y		G
GHI - New York (Group Health Inc.)	13551	Y		G
GHI HMO Select	25531	Y		G
Gilsbar	07205	Y		G
Glassworkers Health & Welfare Fund - Group # F29	91136	Y	Please include Group Number when submitting claims.	G
GMS INC	47083	Y		G
Golden Rule Insurance Company	37602	Y		C
Golden Triangle Physician Alliance	GTPA1	Y		T
Goodyear Tire & Rubber Company	34025	Y		G
Great Lakes Health Plan	95467	Y		G
Great-West Life & Annuity Ins. Co.	80705	Y		C
Group Administrators Ltd.	36338	Y		G
GROUP AND PENSION ADMINISTRATORS, INC.	48143	Y	Claims are printed and mailed	G
GROUP HEALTH COOPERATIVE	39167	Y		G
Group Health Cooperative (Eastern WA)	91121	Y	Eastern Washington State. Please call (888) 767-4670 prior to first submission	G
Group Health Cooperative (WA)	91051	Y		G
Group Health Plan (GHP)	25141	Y		G
Group Insurance Service Center, Inc.	37276	Y		G
GROUP PRACTICE AFFILIATES	68046	Y		G
Guardian Healthcare	77010	Y		G
Guardian Life Insurance Company of America	64246	Y		G
Gundersen Lutheran Health Care	39180	Y		T
H.E.R.E.I.U Welfare Pension Funds	37114	Y		G
Harrington	75243	Y		G
Harrington Benefit Services, Inc.	95266	Y	(Formerly R.E. Harrington, Inc.)	G
Harrington Benefit Services, Inc.	06131	Y	(Formerly Third Party Claims Management)	G
Harris Methodist Health Plan	75201	Y		G
Harris Methodist Health Plan	75202	Y	For HMO Medicaid Product	G
Harvard Pilgrim Healthcare	04271	Y		G
HCH Administration	37111	Y		G
HCH Administration	37215	Y	Formerly John P Pearl Associates	G
HCHA ALBO-Self Funded	37329	Y		G
HCPC ALLIANCE PHYSICI	20257	Y		G

# Institutional Claim Payers List (03/10/2010)



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HDM Benefit Solutions I Par Plus	HDMCO	Y		T
HDPC PREMIER HEALTHCA	90023	Y		G
Health Administrators	34185	Y		G
Health Alliance Exclusive & Plus	23172	Y		G
Health Alliance Medical Plans	77950	Y		G
Health Alliance Plan of Michigan	38224	Y		G
Health America Inc./Health Assurance/Advantra	25126	Y		G
Health Assurance/Health America, Inc./Advantra	25126	Y		G
Health Care Network of Wisconsin (HCN)	42102	Y		G
Health Care Savings	56142	Y		G
HEALTH CHOICE ARIZONA	62179	Y	Contact 480.333.4538 JPerlmutter@iasishealthcare.com prior to submission	G
Health Choice Generations	62180	Y		G
HEALTH COST SOLUTIONS	62111	Y		G
Health Design	34158	Y		G
Health First - Tyler, TX	75234	Y		G
HEALTH FUTURE, LLC	30946	Y		G
Health Management Admin	12T11	TBD		G
Health Market Care Assured	62295	Y		G
Health Net - California	95567	Y		G
Health Net - California (Encounters only.)	95568	Y		G
Health Net America	20199	Y		G
HEALTH NET PEARL	12X48	Y		G
Health New England	04286	Y		G
Health One Alliance	58216	Y		G
Health Options of Illinois I Par Plus	NAHOI	Y		G
Health Partners - Jackson, TN	62157	Y		G
Health Partners, PA	80142	Y		G
Health Plan Management	37221	Y		G
Health Plan of Michigan	83253	Y		G
HEALTH PLAN SERVICES	59140	Y		G
Health Plans, Inc.	44273	Y		G
Health Plus	11324	Y		G
Health Risk Management, Inc.	41170	Y		G
Health Services for Children with Special Needs	37290	Y		G
Health Services Preferred (HSP) by Emerald Health	34167	Y		G
Healthcare Options I Par Plus	EPF37	Y		T
Healthcare Resources NW	56731	Y		G
HEALTHCARE SOLUTIONS	73147	Y		G
HEALTHCARE USA	25143	Y		G
HealthChoice of Connecticut/Yale Preferred Health	95376	Y		G
HealthChoice of Memphis	62168	Y		G
HEALTHCOMP INC	85729	Y		G
HealthEZ	41178	Y		T
Healthfirst of NY	80141	Y		G
HealthGuard of Lancaster	23226	Y		G
HealthHelp Network, Inc. (HHNI)	59087	Y		G
HealthLink	90001	Y	Contact Provider Relations Dept at (800) 624-2356 for provider number	G
Healthlink HMO	96475	Y	Please call (800) 624-2356 for Provider ID	G
Healthnet - Kansas City, MO	43132	Y		G
Healthnet of Arizona, Inc.	38309	Y		G
Healthnet of the Northeast	06108	Y		G
Healthpartners of MN	12X51	N	Enrollment requirec	N
Healthsmart Accel	75237	Y		T
HealthSmart Preferred Care	75250	Y		G
Healthsource CMHC	02041	Y		G
HEALTHSOURCE GA	62308	Y		C
HEALTHSOURCE IN	62308	Y		C
HEALTHSOURCE KY	62308	Y		C
Healthsource Massachusetts, Inc.	02041	Y		G
HEALTHSOURCE ME	62308	Y		C
HEALTHSOURCE NH	62308	Y		C
HEALTHSOURCE OH	62308	Y		C
HEALTHSOURCE PROVI	62308	Y		C
Healthsource Provident (CIGNA)	68195	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308	G
HEALTHSOURCE SOUTH	62308	Y		C
Healthsource, AR (Med) (CIGNA)	71075	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308	G
Healthsource, GA (CIGNA)	58210	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308	G

# Institutional Claim Payers List (03/10/2010)



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Healthsource, IN	35167	Y		G
Healthsource, KY	61127	Y		G
Healthsource, ME (CIGNA)	01041	Y	Claims are edited under Cigna's Payer Specific Edits - Payer ID 62318	G
Healthsource, N. TX (CIGNA)	75255	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308	G
Healthsource, NC (CIGNA)	56147	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308	G
Healthsource, NY	16126	Y		G
Healthsource, OH	31141	Y		G
Healthsource, SC (claims)	06119	Y	Healthsource Network Providers Only. Claims are edited under Cigna's Payer Specific Edits - Payer ID 62318	G
Healthsource, SC (Encounters)	06119	Y		G
Healthsource, TN (CIGNA)	62129	Y	Claims are edited under CIGNA's payer specific edits, Payer ID 62308 An EDI application must be submitted prior to submitting claims. Contact Provider Relations at (615) 291-7035	G
HealthSpring	25193	Y		G
HealthStar, Inc.	36332	Y		G
Healthy Choice, Healthy Choice Plus	69140	Y		G
Healthy Kids I Par Plus	M3FL3	Y		T
Heritage New York Medical Group	11328	Y		G
Heritate Physician Network I Par Plus	HPN11	Y		T
HFN Healthsease I Par Plus	M3FL5	Y		G
HIGH DESERT PRIMARY C	33069	Y		G
Highline Medical Services MOLINA	91164	Y		G
Highline Medical Services PSHP	91161	Y		G
Hinsdale Physicians Healthcare	NAHIN	Y		G
HIP - Health Insurance Plan of Greater New York *	55247	Y		G
Hawaii Management Alliance Association (HMAA)	99208	N		G
HMA Hawaii	86066	Y		N
Holy Cross Health Partners	NAHLX	Y		G
HOMETOWN HEALTH	88023	Y		G
Hometown Health Providers	88537	Y		G
Horizon Healthcare of New York *	55261	Y	Enrollment required.	N
Horizon NJ Health	22326	Y		G
Hotel Employees & Restaurant Employees Health Trust -Group #F19	91136	Y	Please include Group Number when submitting claims.	G
HPS Paradigm, Inc.	58227	Y		G
HRM	41170	Y		G
HRM Claim Management	41170	Y		G
Hudson Health Plan	13335	Y		G
Humana Care Plan	61101	Y		T
Humana Group Health Plan	61101	Y		T
Humana Health Chicago	61101	Y		T
Humana Health Chicago Insurance Company	61101	Y		T
Humana Health Plan	61101	Y	[HCDS only call L. Stansbury at (502) 580-7375]	T
Humana Insurance Agency	61101	Y		T
Humana Insurance Company	61101	Y		T
Humana Medical Plan - CA	61101	Y		T
Humana Medical Plan - KY	61101	Y		T
Humana Military - Tricare (Regions 3 & 4)	61125	Y		G
Humana Wisconsin Health Organization	61101	Y		T
HUNT INSURANCE GRP	37260	Y		G
HVVEE	61271	Y		G
I E SHAFFER	22175	Y		G
IBA Health & Life Assurance Co.	38234	Y		G
IBC Personal Choice *	12X26	Y	Enrollment Required.	N
IBI	41124	Y		G
Idaho True Blue *	12B84	Y	Enrollment Required.	N
IMCARE	41600	Y		G
INDECS CORPORATION	40585	Y		G
Indiana Health Network	35204	Y		G
INDIANA PROHEALTH	35161	Y		G
Indiana Teamsters Health Benefits Fund	35107	Y		G
Individual Health Insurance Companies	31053	Y		G
Informed, LLC	52196	Y		G
Ingalls Provider Group	NAING	Y		G
Inland Empire Health	IEHP1	N		G
INSTIL HEALTH PFFS	12B89	Y		G
Insurance Design Administrators	13315	Y		G
Insurers Administrative Corporation I Par Plus	IAC01	Y	Prior to submitting claims: edihelp.iacusa.com	G
Integra Group	31127	Y	Please contact Payer prior to submitting claims	G
Integranet I Par Plus	INET1	Y		T

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
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Integrated Care Network (ICN) by Emerald Health	34167	Y		G
Integrity Benefit Network GA	58200	Y		G
INTER UNION OF OPER15	37269	Y	Located in New York, NY	G
InterCare Health Plans.	37227	N		N
Inter-County Health Plan	23252	Y		G
INTERGROUP SERVICES CORPORATION	23287	Y		G
International Brotherhood of Boilermakers Employee Health Care Plan (IBBEHC)	48603	Y		G
International Educational Exchange Services, Inc. (IEES)	16158	Y		G
International Funding Inc.	39182	Y		G
International Medical Group, Inc. I Par Plus	IMGIN	Y		T
INTGRITAS Benefit Group	20435	Y	Claims will be printed and mailed to payer.	G
Iowa Benefits Inc.	41124	Y		G
J. F. Molloy and Associates, Inc.	61271	Y		G
JJ Sepcialty Services, Inc. I Par Plus	JISSP	Y		T
John Alden Life Insurance Co.	41099	Y		G
John Deere (River Valley)(Call 309-765-1593 for enrollment and providerID)	95378	Y		C
John Muir Trauma Physicians	CALL	Y	Please contact John Muir Trauma Physicians at 925-947-5288 for Payer id information.	G
Johns Hopkins	52189	Y	New Submitters should send in their Billing NPI & Rendering servicing NPI	G
Joplin Claims	43178	Y	(Formerly BMI)	G
JP Farley Corporation	34136	Y		G
JSL Administrators	37272	Y		G
Kaiser Foundation Health Plan - Colorado plans only	COKSR	Y		P
Kaiser Foundation Health Plan of Georgia	21313	Y		T
Kaiser Mid-Atlantic	52095	Y		G
Kaiser of OH	34092	Y		G
Kaiser Permanente N. CA	94135	Y		G
Kaiser Permanente S. CA	94134	Y		G
Kanawha Insurance Co.	57038	Y		G
Kansas City Life Insurance Co.	44030	Y		G
Kelsey Seybold - Institutional Claims I Par Plus	KELSI	Y		T
Kempton Company	73100	Y		G
Kempton Group Administrators	73100	Y		G
Kern Health Systems	77039	Y		G
Key Benefit Administrators	37217	Y		G
KEY SELECT	37321	Y		G
Keystone Mercy Health Plan	23284	Y	Medicaid managed care. Payer requires registration and testing; please call (877) 234-4271.	G
Klais and Company	34145	Y		G
LA Care Health Plan	LACAR	Y		G
Lake Forest Managed Care Associates	37112	Y		G
LAKESIDE HLTH SER	95415	Y		T
Leggett and Platt	75279	Y		G
LEON MEDICAL CTR Health Plan I Par plus	65055	Y		T
LIBERTY HEALTH ADVANTAGE	87071	Y		G
Liberty Mutual Insurance Company	11123	Y		G
Life Investors Inc. Co. of America - Hurst, TX	LIIC2	Y		T
Life Investors Inc. Co. of America - Little Rock, AR	LIICA	Y		T
Life Investors Inc. Co. of America - Louisville, KY	LIIC3	Y		T
LIFE TRAC	41136	Y		G
Linden Oaks Behavioral Health I Par Plus	LOBH1	Y		T
Lovelace Health Plan	62310	Y		G
Lovelace Sandia	90328	N		G
Lovelace Senior Options (LSO)	62310	Y		G
Lovelace Senior Plan (LSP)	62310	Y		G
MA Blue Cross	12B14	Y		N
MAG Mutual Healthcare Solutions	22445	Y		G
Magellan Health Services	12X27	Y		G
MAGNACARE	11303	Y		G
Mail Handlers Benefit Plan	62413	Y	Also known as Mailhandlers/CAC.	G
Maksin Management Corporation	22195	Y		G

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MAMSI Life and Health Insurance Co. (MLH)	52148	Y		C
Managed Care Network	22771	Y		G
Managed Care Services, LLC	35162	Y		G
Managed Health Services Wisconsin	39187	Y		G
Managed Physical Network	41159	Y		C
Manatee Service Center (Bradenton, FL)	41555	Y		G
Manhattan National Life Insurance Co	35196	Y		G
Manulife W. J. Sutton Company	98010	Y		G
Maricopa Health Plan / Maricopa Care Advantage	09908	Y		G
Maryland Physicians Care	22348	Y		G
MASHANTUCKET PEQUOT TRIBAL NATION	37121	Y		G
Masters, Mates and Pilots Program	12T52	Y		G
Mayo Management Services, Inc	41154	Y		G
McCare	38264	Y	Claims will be printed and routed to Payer	G
McLaren	38338	Y		G
MD - Individual Practice Association, Inc. (M.D. IPA)	52148	Y		C
MDWise Hoosier Alliance Health Plan	20475	Y		G
MedAdmin Solutions	58202	Y	(Formerly Advanced Data Solutions, Inc.)	G
MedAdmin Solutions	58204	Y	(Formerly Parity Healthcare.)	G
MedBen (Newark, OH)	74323	Y		G
MedCom	59231	Y		G
MEDCOST BENEFIT SVCS	56205	Y	Formerly Payer ID 56151	G
Medcost, Inc. PPO	56162	Y		G
Medica	94265	Y	Medica requires a unique Medica assigned provider ID.	C
Medicaid - TX Premier Plan I Par Plus	EPF02	Y		G
Medicaid of Alabama *	12K01	Y	Enrollment required.	N
Medicaid of Arizona *	12K02	Y	Enrollment required.	N
Medicaid of Arkansas *	12023	Y	Enrollment required.	N
Medicaid of California (MediCal) *	57016	Y	Enrollment required.	N
Medicaid of Colorado *	15481	Y	Enrollment required.	N
Medicaid of Connecticut *	12K04	Y	Enrollment required.	N
Medicaid of Florida *	12K34	Y	Enrollment required.	N
Medicaid of Georgia *	12K05	Y	Enrollment required.	N
Medicaid of Idaho *	12K07	Y	Enrollment required.	N
Medicaid of Indiana *	35011	Y	Enrollment required.	N
Medicaid of Iowa *	12K10	Y	Enrollment required.	N
Medicaid of Kansas *	47163	Y	Enrollment required.	N
Medicaid of Kentucky *	12K11	Y	Enrollment required.	N
Medicaid of Louisiana *	12K12	Y	Enrollment required.	N
Medicaid of Maine *	12K13	Y	Enrollment required.	N
Medicaid of Maryland *	12007	Y	Enrollment required.	N
Medicaid of Massachusetts *	55291	Y	Enrollment required.	N
Medicaid of Michigan *	12K37	Y	Enrollment required.	N
Medicaid of Minnesota *	12K16	Y	Enrollment required.	N
Medicaid of Mississippi *	12K17	Y	Enrollment required.	N
Medicaid of Missouri *	12K14	Y	Enrollment required.	N
Medicaid of Montana *	12K77	Y	Enrollment required.	N
Medicaid of Nebraska *	15201	Y	Enrollment required.	N
Medicaid of Nevada *	12K20	Y	Enrollment required.	N
Medicaid of New Jersey *	12006	Y	Enrollment required.	N
Medicaid of New Mexico *	12K22	Y	Enrollment required.	N
Medicaid of New York *	12K35	Y	Enrollment required.	N
Medicaid of Ohio *	35091	Y	Enrollment required.	N
Medicaid of Oregon *	12K41	Y	Enrollment required.	N
Medicaid of Pennsylvania *	12008	Y	Enrollment required.	N
Medicaid of Rhode Island *	12K74	Y	Enrollment required.	N
Medicaid of South Carolina *	12K55	Y	Enrollment required.	N
Medicaid of South Dakota *	12K36	Y	Enrollment required.	N
Medicaid of Tennessee *	12K46	Y	Enrollment required.	N
Medicaid of Texas *	86916	Y	Enrollment required.	N
Medicaid of Vermont *	12K26	Y	Enrollment required.	N
Medicaid of Virginia *	55381	Y	Enrollment required.	N
Medicaid of Washington *	12K27	Y	Enrollment required.	N
Medicaid of West Virginia *	12K28	Y	Enrollment required.	N
Medicaid of Wisconsin	WIMCD	Y		N
Medicaid of Wyoming *	12K30	Y	Enrollment required.	N
MEDICAL BENEFIT ADMIN *	68041	Y		G
Medical Benefit Administrators Inc dba MBA of MD Inc	37298	Y		G
Medical Benefits Administrators, Inc. (Newark, OH)	74323	Y		G
Medical Benefits Companies (Newark, OH)	74323	Y		G
Medical Benefits Mutual	74323	Y		G

# Institutional Claim Payers List (03/10/2010)



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Medical Benefits Mutual (Newark, OH)	74323	Y		G
Medical Claims Service, Inc.	04258	Y		G
Medical Control, Inc (ppoNext)	75229	Y		G
Medical Development Internationa	52181	Y		G
Medical Mutual of Ohio	29076	Y	Provider's Medical Mutual assigned 12 digit ID number required	G
MEDICAL MUTUAL OF OHIO CAREWORKS	10010	Y		G
Medical Network of Colorado Springs	CSMED		Testing	
Medical Partners of America	80026	N		T
Medical Reimbursement Associates	62177	Y		G
Medical Value Plan - Ohio (MVP)	38224	Y		G
Medicare of Alabama *	12M01	Y	Enrollment required.	N
Medicare of Arizona *	12M02	Y	Enrollment required.	N
Medicare of Colorado *	15471	Y	Enrollment required.	N
Medicare of Connecticut *	35331	Y	Enrollment required.	N
Medicare of Florida *	35181	Y	Enrollment required.	N
Medicare of Georgia *	35361	Y	Enrollment required.	N
Medicare of Idaho *	12M07	Y	Enrollment required.	N
Medicare of Indiana *	12M09	Y	Enrollment required.	N
Medicare of Iowa *	12M10	Y	Enrollment required.	N
Medicare of Kansas *	55181	Y	Enrollment required.	N
Medicare of Kentucky *	12M11	Y	Enrollment required.	N
Medicare of Louisiana *	12M12	Y	Enrollment required.	N
Medicare of Maine *	35471	Y	Enrollment required.	N
Medicare of Maryland *	55541	Y	Enrollment required.	N
Medicare of Massachusetts *	55271	Y	Enrollment required.	N
Medicare of Michigan *	12M18	Y	Enrollment required.	N
Medicare of Minnesota *	12M16	Y	Enrollment required.	N
Medicare of Mississippi *	12M17	Y	Enrollment required.	N
Medicare of Missouri *	12M15	Y	Enrollment required.	N
Medicare of Montana *	12M77	Y	Enrollment required.	N
Medicare of Mutual of Omaha *	25351	Y	Enrollment required.	N
Medicare of Nebraska *	12M19	Y	Enrollment required.	N
Medicare of Nevada *	12M20	Y	Enrollment required.	N
Medicare of New Jersey *	12005	Y	Enrollment required.	N
Medicare of New Mexico *	12M22	Y	Enrollment required.	N
Medicare of New York *	12M35	Y	Enrollment required.	N
Medicare of North Carolina *	12M23	Y	Enrollment required.	N
Medicare of North Dakota *	12M82	Y	Enrollment required.	N
Medicare of Ohio *	12M24	Y	Enrollment required.	N
Medicare of Oklahoma *	12M37	Y	Enrollment required.	N
Medicare of Pennsylvania *	12M60	Y	Enrollment required.	N
Medicare of South Carolina *	12M55	Y	Enrollment required.	N
Medicare of South Dakota *	12M83	Y	Enrollment required.	N
Medicare of Tennessee *	12M53	Y	Enrollment required.	N
Medicare of Texas *	12M31	Y	Enrollment required.	N
Medicare of Utah *	12M84	Y	Enrollment required.	N
Medicare of Virginia *	12004	Y	Enrollment required.	N
Medicare of West Virginia *	12M28	Y	Enrollment required.	N
Medicare of Wisconsin *	12M29	Y	Enrollment Required.	N
Medicare of Wyoming *	12M30	Y	Enrollment required.	N
MedPlan PPO	58216	Y		G
MedSolutions, Inc	62160	Y		G
MEGA Life & Health (United Insurance Division)	97055	Y	Claims United Ins. Div.	G
MEGA Life & Health Insurance Company - Insurance Center	59221	Y	Payer ID valid only if the addresses on the Health ID card matches the following P.O. Box 982009, North Richland Hills, TX 76182	G
MEGA Life & Health Starbridge StarHRG	59225	Y		G
MEMIC	01047	Y		G
Memorial Clinical Associates/ SelectCare of Texas	62181	Y		G
Memorial Hermann Health Network I Par Plus	MHHNP	Y		T
Mental Health Network	74289	Y		G
MHNET	74289	Y		G
Mercy CarePlus	71079	Y		G
Mercy Care Plan of Arizona	86052	Y		G
Mercy Health Plans	43166	Y		G
MERCYCARE	CALL	Y	Call 608-758-7739 for payer id	G
Meridian Health	77042	Y		P
Meridian Health Plan	13189	Y		G
MESA MENTAL HEALTH	85035	Y		G
METCARE HEALTH PLAN	65113	Y		G
MethodistCare, Inc.	95420	Y		G
MetraHealth or Travelers	87726	Y		C
Metro Plus Health Plan	13265	Y		G
Metropolitan Health Plan	10850	Y		G
Michael Reese Physicians Group	37127	Y		G

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
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Mid Atlantic Psychiatric Services, Inc. (MAPSI)	52148	Y		C
Mid-Atlantic Health System	63079	Y		G
Midlands Health Partners	47080	Y		T
Mid-Valley CareNet, Inc.	31140	Y		G
Midwest Health Plans, Inc. I Par Plus	MP77	Y		G
Mid-West National Life Insurance Co. of Tennessee - Insurance Center	59224	Y	Payer ID valid only if the addresses on the Health ID card matches the following P.O. Box 982017, North Richland Hills, TX 76182	G
Mid-West Nat'l Life & Health Ins. Co.	97055	Y		G
MidWest Securities	MIDSC	N	A UnitedHealthcare Company	C
MidWest Security Admin	79480	N		C
MISS SELECT HLTH CARE/SELECT ADMN SERVIC	64088	Y	Also Select Administrative Services (SAS	G
Mississippi Select Healthcare	75203	Y		G
Missouri Care / MC	43179	Y		G
Molina Healthcare of California	38333	Y		T
Molina Healthcare of Michigan	38334	Y		G
Molina Healthcare of New Mexico I Par Plus	CIMSA	Y		T
Molina Healthcare of Ohio	20149	Y		T
Molina Healthcare of Texas I Par Plus	20554	Y		T
Molina Healthcare of Washington I Par Plus	38336	Y		T
MONTEFIORE CMO	13174	Y		G
Monumental Life	MML12	Y		T
MORRIS ASSOCIATES	35092	Y		G
Motorola	36111	Y		G
Mountain States	86040	Y		G
MPEEBT (MISSISSIPPI PUBLIC ENTITY)	37233	Y		G
MPLAN, Inc./HealthCare Group, LLC	95444	Y		G
MULTIPLAN AMER FAMILY	39634	Y	Only accepts claims for the states of AZ, IL, IN and OH.	G
Multiplan Wisconsin Preferred Provider Network	34080	y		G
Mutual Alliance Plan (MAP)	69140	Y		G
Mutual Assurance	37256	Y		G
Mutual Group (The) (US)	70491	Y		G
Mutual of Omaha Insurance Company	71412	Y		G
Mutual of Omaha Medicare *	25351	Y	Enrollment Required.	N
Mutually Preferred	71412	Y		G
MVP - Ohio	38224	Y		G
MVP Health Plan of NY	14165	Y	MVP Health Plan (Mohawk Valley) (providers should contact MVP at 877-461-4911 before submitting claims)	G
N.W. Ironworkers Health & Security Trust Fund - Group # F15	91136	Y		G
N.W. Roofers & Employers Health & Security Trust Fund -Group #F26	91136	Y	Please include Group Number when submitting claims.	G
N.W. Textile Processors - Group # F14	91136	Y	Please include Group Number when submitting claims	G
NAA (North American Administrators, LP - Nashville, TN.)	65085	Y		G
NALC/Affordable	53011	Y		G
National Association of Letter Carriers	53011	Y		G
National Association of Letter Carriers/NALC	53011	Y		G
National Benefits Administrators - New Jersey	56175	Y		G
National Benefits Administrators - North Carolina	56176	Y		G
National Group Life Insurance Co	35196	Y		G
National Health Benefits Corporation-NHBCO2	88050	Y		G
National Imaging Associates, I Par Plus	NIA11	Y		T
National Rural Letter Carrier Association (Policy Number GMG1846)	71412	Y		G
Nationwide Health Plans	31417	Y		G
NCAS - Fairfax, VA	75190	Y		G
NCAS-CHARLOTTE	75191	Y		G
NCTA	52103	Y		G
Neighborhood Health Plan	8588M	Y	Please contact ENS prior to claim submission.	G
Neighborhood Health Plan of MA	04293	Y		G
Neighborhood Health Providers/Suffolk Health Plan	11325	Y		G
NESIKA HEALTH GROUP	37255	Y		G
NETCARE LIFE HLTH INS	66055	Y		G
Network Health Insurance Corp-Medicare	77076	N		G
Network Health MA	04332	Y		G
Network Healthplan of Wisconsin	39111	Y		G
New Alliance Health Plan	96218	Y		G
New ERA	75281	Y		G

# Institutional Claim Payers List (03/10/2010)



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New West Health Plan	84141	Y		G
New York Hospital Community Health Plan	13373	Y		G
New York Life - Long Term Care I Par Plus	NYL11	Y		T
NEW YORK PRESBYTERIAN SYSTEM SELECT	24819	Y		G
NGS American, Inc	38225	Y		G
Nippon Life Insurance Company of America	81264	Y		G
NJ CARPENTERS HEALTH	22603	Y		G
North American Benefits	34159	Y	Valid for billing address of P O Box 94928, Cleveland, OH 44101-4928 or P. O. Box 89476, Cleveland, OH 44101-5476	G
NORTH AMERICAN MED	E3510	Y	Contact 1-800-956-8000 prior to initial submission of claims.	G
Northern Ill HealthPlan	36347	Y		G
Northern Nevada Trust Fund	88027	Y		G
Northwest Community Health Partners	NANWC	Y		G
Northwest Diagnostic Clinic I Par Plus	NWDS1	Y		T
Nova Casualty Company	16114	Y		G
NOVA Healthcare Administrators NY	16644	Y		G
Novasys Health Network	71080	Y		G
NPPN\Conseco	35197	Y		G
NTCS STAFF	52104	Y		G
NY Presbyterian Community Health Plan	48186	Y		G
Nyhart	37299	Y		G
Oak West Primary Physician Association	NAOAK	Y		G
Ochsner Health	72127	Y	Requires unique provider ID; please contact Jill Brant, OHP Provider Relations at (504) 219-6682 or jill.brant@ochsner-hmo.com	G
ODS Health Plan	13350	Y		G
Ohio Health Choice, PPO	34189	Y		G
Omnicare, A Coventry Health Plan	25150	Y	For dates of service after 10/1/2004 only	G
ONE Health Plan of California, Inc.	80705	Y		C
ONE Health Plan of Colorado, Inc.	80705	Y		C
ONE Health Plan of Georgia, Inc.	80705	Y		C
ONE Health Plan of Illinois, Inc.	80705	Y		C
ONE Health Plan of Texas, Inc.	80705	Y		C
ONE Health Plan, Inc.	80705	Y		C
Operating Engineers Locals 302 & 612 Health & Security Fund #F12	91136	Y	Please include Group Number when submitting claims.	G
Optima Health Plan	54154	N		N
OptumHealth Behavior Solutions	87726	Y		C
OptumHealth New Mexicc	87726	Y		C
Optimum Choice of the Carolinas, Inc. (OCCI)	52148	Y		C
Optimum Choice, Inc. (OCI)	52148	Y		C
Option Services Group	37125	Y		G
ORTHONET CORPORATION	13381	Y	CIGNA (NY,CT, & NJ) HMO/POS outpatient therapy claims only	G
OSF HealthPlans	62171	Y		G
Oxford	06111	Y		C
P5 HEATLH PLAN SOLUTI	87068	Y		G
PA PREFERRED HEALTH	CALL	Y	Call Manager of PPHN Claims Operations (410) 349-3222	G
Pacific Life & Annuity Company	67466	Y		G
PacifiCare Behavioral Health	33053	Y		C
PacifiCare of Arizona	95964	Y		C
PacifiCare of California	95959	Y		C
PacifiCare of Colorado	COPHS	Y		C
PacifiCare PPO - All States	95999	Y		C
PacificSource Health Plans	93029	Y		T
Parkland Community Health Plan	66917	Y		G
Partner Care I Par Plus	M3FL7	Y		T
Partners National Health Plan of NC	56152	Y		G
PARTNERSHIP OF HEALTH CA	12M81	Y		G
Passport Advantage. (For Dates of service after 12/31/2009 only. For earlier claims, use 12X24.)	76569	Y		G
Passport Health Plan	61129	Y		G
PATIENT ADVOCATE,LLC	10525	Y		G
Pedicare Title 19 I Par Plus	M3FL7	Y		T
Pedicare Title 21 I Par Plus	M3FL8	T		T
PEOPLES HEALTH NETWORK	72126	Y	Network ID required on claim	G
Personal Care	25146	Y		G
Personal Insurance Administrators, Inc.	95397	N		G
PHA Admin Serv, Prime Health of Alabama	63088	Y		G
PHCS Savility	13306	N	ONLY for Savility card members	G
Phoenix Group Services (Texas)	75238	Y		G
Phoenix Group Services, Inc.	06143	Y		G

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
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Phoenix Health Plan	03440	Y		G
PHP of Mid-Michigan	87726	Y		C
PHP of South Carolina	87726	Y		C
PHP of South Michigan	87726	Y		C
PHP of Southwest Michigan	87726	Y		C
PHP of West Michigan	87726	Y		C
Physician Health Partners	PHPMC	N		G
Physicians Alliance/Stones River Regional IPA	15749	Y		G
Physicians Care Network	57098	Y		G
Physicians Care Network (Rockford IL only)	36345	Y		G
Physician's Health Choice - Claims I Par Plus	PHCS1	Y		T
PHYSICIANS HEALTH COLLABORATIVE	20398	Y		G
Physicians Health Plan Inc. (South Carolina)	87726	Y		C
Physicians Health Plan of N. Indiana	12399	Y		G
Physicians Mutual	47027	Y		G
Physicians Plus Insurance Corporation	39156	Y	Send all PPO and dental claims to the address on the back of the insureds ID care	G
Physicians United Plan I Par Plus	10775	Y		T
Piedmont Administrators	56151	Y		G
Piedmont Behavioral Health	06607	Y		G
Pinnacle Claims Management, Inc.	24735	Y		T
PINNACOL ASSURANCE	84109	Y		G
Pioneer Life Insurance Co	35196	Y		G
Pipeline Industry Benefit Fund (Tulsa, OK)	73074	Y		G
Pittman & Associates	37224	Y		G
PLANNED ADMINISTRATOR	37287	Y		G
PM Group	67466	Y		G
POLY AMERICA MEDICAL	32680	Y		G
POMCO	16111	Y		G
PPO Plus, LLC	72148	Y		G
PPOM, LLC	38335	Y		G
Prairie States Enterprises, Inc.	36373	Y		G
Preferred Administrator I Par Plus	EPF10	Y		T
PREFERRED BEN ADMIN	61665	Y		G
Preferred Care - NY *	12X04	Y		G
PREFERRED CARE FL EHC CENTRAL	59291	Y		G
PREFERRED CARE PARTNE	65088	Y	Claims for the Miami Florida area only	G
Preferred Community Choice/PCCSelect/CompMed	73145	Y		G
Preferred Health Plan (Louisville, KY)	61106	Y		G
Preferred Health Professionals (PHP Kansas City)	31478	Y		G
PREFERRED HEALTH SYSTEM	60110	Y		G
Preferred Network Access	36401	Y		G
Preferred One	41147	Y		G
Premier Benefits, Inc	43166	Y		G
Premier Health Network	37119	Y		G
Premier Health Plans	43166	Y		G
Prestige Health Choice	45056	Y		G
Prevea Health Plan	39185	Y		G
Primary Health Network	82048	Y		G
Primary Health Plan I Par Plus	PRIME	Y		T
Primary PhysicianCare, Inc.	56144	Y		G
Prime Health	63088	Y		G
Prime West Health Plan	61604	N		G
PRINCIPAL	61271	Y		G
Principal Financial Group	61271	Y		G
Principal Life Insurance Co.	61271	Y		G
Print claims that will be mailed to payer	PRINT	N	These claims will be printed and mailed to payer at current charges.	N
PRO CARE HEALTH PLAN	38329	Y	Valid: PO Box 3160 AND PO Box 3590 Detroit MI 48203	G
ProCare Health Plan Medicaid	70259	Y		G
PROCLAIM DBA PROFESSIONAL CLAIM ADMIN	41163	Y		G
Professional Benefit Administrators (Winter Park, FL)	59296	Y		G
Professional Benefit Administrators, Inc (Oak Brook, IL)	36331	Y	Payor ID is only valid for claims with billings submission name, city and state of Professional Benefit Administrators, Inc (Oak Brook, IL)	G
Professional Claims Management (Canton OH)	37242	Y	Payor ID only valid for claims with a billing submission address of P.O. Box 35276 Canton OH 44735-5278	G
Professional Risk Management	34134	Y		G
Promina	58226	Y		G
PROVIDENT	62308	Y		C

# Institutional Claim Payers List (03/10/2010)



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Provider Networks of America (PRO-NET)	51032	Y		G
PsychCare, LLC	51052	Y		G
Puget Sound Benefits Trust - Group # F25	91136	Y	Please include Group Number when submitting claims.	G
Puget Sound Electrical Workers Trust - Group # F33	91136	Y	Please include Group Number when submitting claims.	G
Pyramid Life Insurance Company	48055	Y		G
QUAD MED LLC	39197	Y		G
Qual Choice of Arkansas	35174	Y		G
QualCare, Inc.	23342	Y		G
Quality Health Plans	QHP01	Y		P
Quincy HealthCare Management Inc.	37129	Y		G
RBMS, LLC	91176	Y		G
REGIONAL CARE INC	47076	Y		G
Renaissance Physicians Organization	76066	Y		G
Reserve National Insurance	73066	N		G
RESOURCEONE ADMINISTRATORS FKA ADMINONE	37278	Y		G
RESURRECTION HEALTH CARE PREFERRED	36396	Y	Call (773) 572-8311 or( 773) 572-8309 prior to your first submission	G
Resurrection Physicians Group I Par Plus	RPPG1	Y		T
RightChoice Benefits Administrators	37331	N		T
RMSCO, INC.	16117	Y		G
Rooney Life Inc.	37602	Y		C
Rosemont of Des Plaines, IL	36215	Y		G
Rush Prudential Health Plans (HMO Only)	36389	Y		G
S & S Healthcare Strategies	31441	Y		G
Sagamore Health Network	35164	Y		T
SANTA CRUZ MMCC	CALL	Y	Call the EDI Support Unit at 831-430-5510	G
SCAN HEALTH PLAN	72261	Y		G
Scan Health Plan Arizona	73172	Y		G
Scott & White I Par Plus	88030	Y		T
Seabury & Smith	13310	Y		G
SECURE HEALTH PLANS GA	28530	Y		G
Security Health Plan	39045	Y		T
SELECT BENEFIT ADMIN	37282	Y	Valid for P.O. Box 440, Ashland, WI 54806.	G
Select Benefit Administrators (Des Moines Iowa)	42137	Y	Payer ID only valid for claims with a billing submission address of P.O. Box 8339 Des Moines Iowa 50301	G
Select Benefit Administrators, Inc.	93031	N		G
Select Health of South Carolina	23285	Y		G
Select Health UHIN	12X37	Y		G
SelectCare	00014	Y		G
SELF INSURED BENEFIT ADMINISTRATORS	59111	Y	Only for 18167 US Highway 19 North, Suite 300, Clearwater, FL 33764	G
Self Insured Plans	36404	Y		G
Self-Funded Plans, Inc (IL, PA, OH)	34131	Y		G
Senior Whole Health Care	83035	Y		G
SENTINEL MANAGEMENT	23249	Y		G
Sentry Life	39033	Y	Requires Sentry Life Insurance Co group and subscriber numbers. Contact Sentry Customer Service at (800) 426-7234	G
Seton Employee Plan Care Program I Par Plus	SHCAR	Y		T
Seton Employee Plan I par Plus	SHEBP	Y		T
Seton Health Plan - CHIP I Par Plus	SHPCH	Y		T
Seton Map Program (Mediview) I Par Plus	SHMAP	Y		T
Shasta Administrative Services	75280	Y	Jeld-Wen Claims Only	G
Sierra Health Systems	76342	Y		C
Signature Health Alliance	62159	Y		G
Silver Cross Managed Care Organization	NASCR	Y		G
Sloan's Lake Managed Care	84096	Y		G
SMIPA/SFIPA	94249	Y		G
Smith Administrators	02057	Y		G
Sound Health (now known as First Choice Health Network)	91131	Y		G
SOUTH CENTRAL PREFERR	CALL	Y	Call Provider Relations (717) 851-6715	G
SOUTHERN BENEFIT SERV	37318	Y	No longer process claims for Brockman Enterprises and SPS International	G
Southern Health Services, Inc.	25128	Y		G
Southwest Service Life/Galaxy Health	37266	Y	Requires unique policy number or ID card. Valid for billing address of PO Box 982005 Ft. Worth, TX 76182	G
Special Risk International	52190	Y		G
SPECTRUM ADMINISTRATO	23253	Y		G
Spohn Health	SPOHN	Y		T
ST MARYS HEALTH PLAN	88029	Y		G
St. Barnabas System Health Plan	22240	Y		G

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St. Johns/First Health	37264	Y		G
St. Therese Physician Association	37116	Y		G
Starmark	61425	Y		G
State Employees Group Benefits	72087	Y	Located in Louisiana	G
State Farm Insurance Companies	31053	Y		G
STATE OFTX DENTAL	57254	Y		G
Sterling Option 1	91151	Y		T
Student Insurance - Boston Mutual Life Insurance Company	74227	Y		C
Student Insurance - Life Insurance Company of Boston and New York	74227	Y		C
Student Insurance - MEGA Life & Health Insurance Company	74227	Y		C
Student Insurance - Mid-West National Life Insurance Company of Tennessee	74227	Y		C
Student Insurance - Reliance Insurance Company	74227	Y		C
Student Insurance - Reliance National Insurance Company	74227	Y		C
Suffolk Health Plan of NY	88331	Y		G
SummaCare Health Plan	95202	Y		G
Summerlin Life and Health Insurance	86071	Y		N
Summit Healthplan I Par Plus	20197	Y		T
Sun Health	12X52	Y		G
Superior Health	75274	Y	Valid for claims with the following mailing address: P.O. Box 2388, Stow, OH 44224	G
Superior Benefits	23218	Y		G
Superior Health Plan	39188	Y	Prior to submitting claims, please call provider relations dept @ 1-800-218-7453 to verify provider info is on file in the claim system. This will prevent rejections and allow payments to be made timely manner.	T
Superior Health/Centene Corp I Par Plus	SHP11	Y		T
Swedish Covenant Hospital	NASWD	Y		G
Tall Trees Administrators	88067	Y		G
Team Choice - Alpha Care Gold I Par Plus	ADSL1	Y		T
Team Choice PPO	75133	Y		G
Team Choice UMC	75134	Y		G
Teamcare	36215	Y		G
Teamsters Local Union #301	36612	Y		G
Texan Plus/Selectcare of TX (Kelsey) I Par Plus	KLSY1	Y		T
Texas Children	75228	Y		G
Texas Children's Health Plan	76048	Y		G
Texas Healthspring I Par Plus	THS01	Y		T
Texas Municipal League Group	74214	Y		C
Texas True Choice	TTCEC	Y		T
THE BOON GROUP	BOONG	Y		T
The City of Odessa	75600	Y		G
The EPOCH Group	28777	Y		G
The Ford Meter	37305	Y		G
THE HEALTH EXCHANGE	20356	Y		G
The Health Plan	34150	Y		G
The Loomis	23223	Y	Call Provider Relations at 610-374-4040 ext. 2438 for procedures prior to submitting electronically	G
The MEGA Life & Health Insurance Company - Insurance Center	59221	Y	Payer ID valid only if the addresses on the Health ID card matches the following P.O. Box 982009, North Richland Hills, TX 76182	G
The MEGA Life and Health Insurance Company-OKC	59227	Y		G
The Mutual Group (US)	70491	Y		G
The OATH	72112	Y		G
The OATH of Louisiana	72112	Y		G
The Preferred Healthcare System - PPO Altoona, PA	04320	Y		G
Therapy Review System	75305	N		G
Third Party Administrators Inc.	37225	Y	(Call Julie Blasek at 630-416-1111 x156 to verify if you should be sending claims to TPA, Inc. in Maperville, IL)	G
TLD Advantage in Sioux Falls	TLC01	A		G
TMG Life Insurance Company	70491	Y		G
Today's Health I Par Plus	WITH1	Y		T
Today's Option I Par Plus	48055	Y		T
Tooling & Manufacturing Association	61425	Y		G
Total Carolina Care	68055	Y	Prior to submitting claims, please call Provider Relations Dept at 1-866-433-6041 to verify your provider info is on file in the claim system.	G
Total Community Care	31182	Y		G
Total Health Care	38201	Y		C
Total health Choice	38202	Y		C
Touchstone Health PSO	23856	Y		G

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Touchstone Health/Health Net Smart Choice	13402	Y		G
Tower Life Insurance Co.	69493	Y		G
TPSC - IPN	91078	Y		G
TR PAUL INC	37230	Y		G
Transamerican Life	59222	Y	Payer ID valid only if the address on the Health ID Card matches the following: P.O. Box 982009, North Richland Hills, TX 76182.	G
Travis County Hospital District MAP I Par Plus	TCHD1	Y		T
Tricare North *	85031	Y	Enrollment Required.	N
Tricare South *	65941	Y	Enrollment Required.	N
Tricare West *	35521	Y	Enrollment Required.	N
Trilogy Health	98514	N		G
True Choice USA - Christus Healthplan I Par Plus	TCUCH	Y		T
True Choice USA I Par Plus	TCUSA	Y		T
Trustmark	61425	Y		G
Tufts Health Plan	04298	Y		T
<b>TYSON FOODS</b>	<b>62308</b>	<b>Y</b>		<b>C</b>
UBH RIOS	87726	Y		C
UICI - Administrators	75240	Y		G
UICI - Administrators - State of Nevada	75245	Y	Accepting claims only for the State of Nevada.	G
<b>UMC Health Plan</b>	<b>75130</b>	<b>Y</b>		<b>G</b>
UMR Kansas	62061	Y		G
UMR Wausau/UHIS	39026	Y		G
UMWA - UNITED MINE WORKERS ASSOC	52180	Y		G
UNICARE Major Accounts	80314	Y		G
UNICARE Special Accounts	65099	Y		G
Unified Group Services	35198	Y		G
Unified Health Services	62170	Y		G
UNION LABOR LIFE INS	13142	Y		G
Union Pacific	87042	Y		G
United Behavioral Health	87726	Y		C
United Medical Resources	31107	Y	This payer id is valid for all claims addresses on UMR member ID cards with a listed payer id of 31107	C
United of Omaha	71412	Y		G
UnitedHealthcare	87726	Y		C
UnitedHealthcare (former MetraHealth Care Plans, Met Life, Metropolitan Life Ins Co, MetraHealth Elect, MetraHealth Healthcare Network HMO)	87726	Y		C
UnitedHealthcare (former MetraHealth Healthcare Network PPO, New York State Employees (Empire), Travelers Ins Co, Travelers Plan Administrators)	87726	Y		C
UnitedHealthcare (former The Travelers, Travelers Health Network (HMO & Care Option), Travelers/CGT - PPO, MetraHealth - UNET)	87726	Y		C
UnitedHealthcare of Alabama	87726	Y		C
UnitedHealthcare of Arizona, Inc.	87726	Y		C
UnitedHealthcare of Arkansas	87726	Y		C
UnitedHealthcare of California - Northern California	87726	Y		C
UnitedHealthcare of California - Southern California	87726	Y		C
UnitedHealthcare of Colorado, Inc.	87726	Y		C
UnitedHealthcare of Florida	87726	Y		C
UnitedHealthcare of Georgia	87726	Y		C
UnitedHealthcare of Illinois	87726	Y		C
UnitedHealthcare of Kentucky, Ltd.	87726	Y		C
UnitedHealthcare of Louisiana	87726	Y		C
UnitedHealthcare of Mississippi	87726	Y		C
UnitedHealthcare of New England	87726	Y		C
UnitedHealthcare of New York (includes New York and New Jersey)	87726	Y		C
UnitedHealthcare of North Carolina, Inc.	87726	Y		C
UnitedHealthcare of Ohio	87726	Y		C
UnitedHealthcare of Tennessee	87726	Y		C
UnitedHealthcare of Texas - Dallas	87726	Y		C
UnitedHealthcare of Texas - Houston	87726	Y		C
UnitedHealthcare of the Mid-Atlantic	87726	Y		C
UnitedHealthcare of the Midlands - HMO (Choice, Select)	87726	Y		C
UnitedHealthcare of the Midlands - PPO (Choice Plus, Select Plus, Self Funded)	87726	Y		C

# Institutional Claim Payers List (03/10/2010)



Payer	ID	Reports	Additional Info	Type
Highlighted payers are new or have been altered in the last 90 days. Please verify that your system is setup correctly for this payer				
UnitedHealthcare of the Midwest - Choice, Choice Plus, Select, Select Plus	87726	Y		C
UnitedHealthcare of the Midwest - Medicare Complete	87726	Y		C
UnitedHealthcare of Upstate New York	87726	Y		C
UnitedHealthcare of Utah	87726	Y		C
UnitedHealthcare of Virginia	87726	Y		C
UnitedHealthcare Plans of Puerto Rico	87726	Y		C
Unity Health Insurance	66705	Y		G
Univera Health - Southern Tier	16108	Y		G
Univera Healthcare	16107	Y		G
Univera Healthcare - CNY	16105	Y		G
Univera Healthcare SSA WNY, PPO, Traditional	12X19	Y		G
Universal Care - California	33001	Y		G
Universal Health Care, Inc	50528	Y		G
University Health Alliance - HI	02910	Y		G
University of Washington Students & Graduate Appts. -Group #P67	91136	Y	Please include Group Number when submitting claims.	G
University Physicians Healthcare Group	07503	Y		G
UPMC Health Plan	23281	Y		G
Upper Peninsula Health Plan	38337	Y		G
US Benefits	93092	Y		G
US Department of Labor *	12X31	Y		G
US Family Health Plan	12T48	Y		T
USAA (United States Automobile Association)	74095	Y		G
USFHP St Vincent Catholic Med Center NY	13407	Y		T
USI Administrators, Inc.	23217	Y		G
UTMBP	76049	Y	Prior to submitting please call Provider Relations at (281) 652-8700.	G
Value Options	12X56	Y		G
VANTAGE HLTH PLAN INC	72128	Y		G
Verity National Group	75256	Y		G
Veterans Administration Fee Basis Programs	12115	Y		G
VHP Community Care	23173	Y		T
VIDA CARE	24818	Y		G
Vista	55248	Y	Payer requires re-enrollment	G
VIVA Health	63114	N	VIVA Health requires a complete member ID number, including suffix on all claim submissions. Pls use the following site to verify member information: <a href="https://estep.cschcg.com/TRI_provider/doEntry.jsp">https://estep.cschcg.com/TRI_provider/doEntry.jsp</a>	G
VNS CHOICE Medicare (Formerly Visiting Nurses Service)	77073	Y		G
VOLUSIA HEALTH NETWORK	59266	Y		G
Vytra Healthcare	22264	Y		G
Wal-Mart	75257	Y	Only stores in the following states: AK, DE, ID, MT, ND, OR, SD, VT, WA (HCFA only), WI, WY	G
Washington National Insurance Co	35196	Y		G
Waterstone Benefit Administrators	73155	N		T
Watkins Associated	58082	Y		G
Wausau Insurance Companies - aka Employers Insurance of Wausau (Now knows as UMR Wausau/UHIS)	39026	Y		G
WEA Insurance Group	39151	Y	Payer doesn't accept secondary claims electronically.	G
WEBTPA I Par Plus	75261	Y		T
webTPA/Community Health Electronic Claims/CHEC	75261	Y		G
Wellcare Choice I Par Plus	M3FL4	Y		T
Wellcare Health Plans, Inc. (Encounters)	59354	Y		G
Wellcare HMO, Inc.	14163	Y	Wellcare Provider ID required	G
Wellcare of CT	14164	Y		G
Wellcare PFFS	77072	Y		G
Wellmed Medical (Claims) I Par Plus	WELM2	Y		T
WELLPATH	25129	Y		G
Wenatchee Valley Medical Center	91064	N		G
WEST & SOUTHERN FINANCIAL GROUP	31048	Y		G
West Coast Stationary Engineers Health & Security Trust Fund - Group #F13	91136	Y		G
Western Grower's Assurance Trust	24735	Y		T
Western Grower's Insurance Company	24735	Y		T
WESTERN MUTUAL INS	37247	Y		G
WestLake Financial Group, Inc.	WESTL	Y		T
Weyco Inc.	38232	Y		G
WILLIAM C EARHART	93050	Y		G

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Willis Administrative Services Corporation (Now known as UMR Kansas.)	62061	Y		G
Windsor Home Network *	11696	N	Submitters please contact Windsor Billing Dept at (615)371-0433 prior to submitting	G
Windsor Medicare Extra	62153	Y		G
Wisconsin Auto and Truck Dealers	39200	Y		G
Wisconsin Physicians Service Insurance Corporation	12X29	Y	Subscriber ID - 9 digits, WPS Provider ID qualifier - G2	G
Worksite Benefit Systems	20333	Y		G
World Insurance Company	75276	Y		G
WPP Eldercare Wisconsin	77080	Y		G
WRITERS GUILD-INDUSTRY HEALTH PLAN	23710	Y		G
Yale Preferred Health/HealthChoice of Connecticut	95376	Y		G
Yavapai County	09829	N		G

Report Codes	Meaning
L	LATER DATE - ENS WILL PROVIDE REPORTS FROM THE INSURANCE COMPANY WHEN THEY BECOME
Y	YES - REPORTS ARE PROVIDED
N	NO- REPORTS ARE NOT PROVIDED
S	SUMMARY - REPORTS ONLY
R	REJECTION - REPORTS
TBD	TO BE DETERMINED

General Payer Information	
P	PAR Payers, Direct Connections
C	Contracted Restricted, Direct Connections
T	Transitional, Direct and NonDirect Connections
G	Gateway, NonDirect Connections
N	NonPar Payers, Direct and NonDirect Connections
*	EMC Agreement Required, please go to <a href="http://www.enshealth.com">www.enshealth.com</a> , DOWNLOAD CENTER for required forms
**	Secondary claim submission is supported by X12 submitters only