



Payer Updates: April 19 – May 2, 2016, Experian’s Payer Team has added the following new payers and made improvements to existing payers.

New Eligibility Payers

- Health Choice Insurance Company
- Metropolitan Health Plan (MHP) Medicare

New Claims Status Payers

- WPS C-SNAP Batch*

Payer Improvements

Eligibility:

- Horizon NJ Health – Search Options Updated:
 1. Member ID, Name, and DOB
 2. Member ID and DOB
 3. Name and DOB

Claims Status: None

Embellishments:

- IlliniCare Health Plan – Claims Status - This request will add data retrieved during the current embellishment and will add the call when the denied EDI claim status response returns from the payer as well as when an EDI claim status response returns from the payer with a paid assigned category code for both Medicare as well as Medicaid.

Discontinued Payers

- CountyCare – Claims Status

* Special enrollment required

If your clients would like to access any of the available payers, please have them contact their Client Administrators who can configure the payer access, Provider ID, and NPI information. If you have any questions about the payer list, please contact Customer Support at customer.support@passporthealth.com.

Payers Health Exchange Identification and Information

For the 2016 benefits year, the below payers are reporting generic Health Insurance Exchange (HIX) information indicating that a member is enrolled through the exchange in their 271 eligibility response. The message and type of information may vary by payer; however we will always flag these payers as “This is a Health Insurance Exchange Member”.

HIX information can be found in three locations within Experian Health/Passport eligibility:

eCare NEXT and OneSource clients:

- MyResponse:
 - This information will be displayed in the widget labeled “Health Insurance Exchange.”
 - This widget will combine an indicator “This is a Health Insurance Exchange Member,” any grace period and/or premium paid to dates that were provided, along with any free-form text message segments received from the payer response pertaining to the member’s HIX information.
- Full response:
 - This information will be displayed in a “Benefit Description” section of the response and the description label will be HIX/ACA.
 - The “Benefit Description” section will combine an indicator “This is a Health Insurance Exchange Member,” any grace period and/or premium paid to dates that were provided, along with any free-form text message segments received from the payer response pertaining to the member’s HIX information.

EDI clients:

- EDI:
 - This information will be displayed in the 271 returned to the client as an EB*D****HIX/ACA~ segment.
 - Any segments following the EB*D in the related loop(s) will pertain to the member’s HIX data. This will always include a message segment MSG*This is a Health Insurance Exchange Member ~ and can also include DTP and additional MSG segments if the payer returned that information in the eligibility response.

DSID	Payer	Grace Period	Grace Period	Premium Paid	Premium Paid
		Begin Date	End Date	Begin Date	End Date
28	Aetna				
382	Altius Health Plans	X	X		
1156	Ambetter of Arkansas				
410	Amerigroup				
311	AmeriHealth	X	X		X
310	AmeriHealth Administrators	X	X		X
314	AmeriHealth Caritas Pennsylvania	X	X		X
367	Anthem	X	X		X
431	Anthem Midwest (IN, KY, OH)	X	X		X
432	Anthem Northeast (CT, ME, NH)	X	X		X
433	Anthem Southeast (VA)	X	X		X
434	Anthem West (CO, NV)	X	X		X
891	Avera Health Plans	X			
684	BCBS of Western New York	X	X		X
34	Blue Cross Blue Shield of Alabama	X	X		X
230	Blue Cross Blue Shield of Arizona	X	X		X
335	Blue Cross Blue Shield of Arkansas				
35	Blue Cross Blue Shield of Florida				X
270	Blue Cross Blue Shield of Georgia	X	X		X
306	Blue Cross Blue Shield of Illinois	X	X		X
403	Blue Cross Blue Shield of Kansas			X	X
36	Blue Cross Blue Shield of Louisiana	X	X		X
227	Blue Cross Blue Shield of Massachusetts	X	X		X
407	Blue Cross Blue Shield of Michigan				X
435	Blue Cross Blue Shield of Minnesota	X	X		X
380	Blue Cross Blue Shield of Missouri	X	X		X
880	Blue Cross Blue Shield of Montana	X	X		X
427	Blue Cross Blue Shield of Nebraska	X	X		X
307	Blue Cross Blue Shield of New Mexico	X	X		X

412	Blue Cross Blue Shield of North Carolina	X	X		X
574	Blue Cross Blue Shield of North Dakota	X	X		X
478	Blue Cross Blue Shield of Oklahoma	X	X		X
420	Blue Cross Blue Shield of Rhode Island	X			
239	Blue Cross Blue Shield of Tennessee BlueCare				
240	Blue Cross Blue Shield of Tennessee Commercial				
308	Blue Cross Blue Shield of Tennessee TennCare Select				
39	Blue Cross Blue Shield of Texas	X	X		X
879	Blue Cross Blue Shield of Vermont				
336	Blue Cross Blue Shield of Wisconsin				
582	Blue Cross Blue Shield of Wyoming	X	X		X
33	Blue Cross of California	X	X		X
40	Blue Cross of Northeast Pennsylvania	X	X		X
470	Blue Shield of California	X	X		X
548	Boston Medical Center Healthnet				
865	CalOptima				
345	Capital BlueCross	X	X		X
655	Capital District Physicians Health	X			
393	CareSource	X			
725	Celticare				
295	CHC Carenet				
250	CHC Group Health Plan	X	X		
245	CHC of Delaware				
741	CHC of Florida	X	X		
742	CHC of Florida Medicare	X	X		
214	CHC of Georgia	X	X		
246	CHC of Iowa	X	X		
247	CHC of Kansas City	X	X		
249	CHC of Nebraska	X	X		
284	CHC Southern Health Services	X	X		
317	CIGNA				
617	Community Care of Oklahoma				
219	ConnectiCare				
1157	CoOpportunity	X	X		X
711	Coventry Advantra Savings				
585	Coventry Health and Life Nevada	X	X		
586	Coventry Health and Life Oklahoma	X	X		
584	Coventry Health and Life-TN	X	X		
589	Coventry Health Care Federal				
356	Coventry Healthcare National	X	X		
869	CoventryCares of Kentucky				
659	Denver Health Medical Plan	X	X		X
882	Emblem Health				
61	Empire Blue Cross Blue Shield	X	X		X
460	Excellus BCBS	X	X		X
215	Health America/Health Assurance	X	X		
464	Health Net National				
476	Health Net National Medicaid				
579	Health Partners of Minnesota Commercial	X	X		X
580	Health Partners of Minnesota Medicaid	X	X		X
581	Health Partners of Minnesota Medicare	X	X		X
1354	Health Republic Insurance of New York				
296	HealthCare Inc.	X	X		
294	Healthcare USA (MO)	X	X		
518	Healthfirst of New York				
532	Healthfirst of New York Medicaid				
533	Healthfirst of New York Medicare				
683	HealthNow	X	X		X
386	Highmark BCBS	X	X		X
1400	Highmark BCBS of Delaware	X	X		X
81	Horizon Blue Cross Blue Shield of New Jersey	X	X		X
82	Humana				X
713	Independence Administrators	X	X		X
86	Independence Blue Cross FOC	X	X		X

900	Independent Health	X	X		X
315	Keystone First	X	X		X
313	Keystone Health Plan East	X	X		X
736	Magellan				
1011	MDWise Health Indiana Plan				X
1014	MDWise Select Health Network				X
1015	MDWise St. Catherine				X
1016	MDWise St. Francis				X
1017	MDWise St. Margaret Mercy				
1018	MDWise St. Vincent				X
1019	MDWise Total Health				X
1020	MDWise Wishard				X
1201	MHNet Behavioral Health	X	X		
325	Molina				
326	Molina (CA)				
516	Molina (FL)				
327	Molina (MI)				
439	Molina (OH)				
517	Molina (TX)				
328	Molina (UT)				
329	Molina (WA)				
928	Molina (WI)				
396	Molina Healthcare of New Mexico				
482	Mountain State Blue Cross Blue Shield	X	X		
390	MVP Health Care				
1261	New Mexico Health Connections				
627	Pacific Source Health Plan				
734	Paramount				
468	PersonalCare/Coventry Health of Illinois	X	X		
472	PHC DEMO (Commercial)	X	X		X
474	PHC DEMO (Medicare)				
505	PreferredOne				
453	Premera Blue Cross				X
395	Presbyterian Health Plan				
959	QualCare				
842	QualChoice Arkansas				
521	Scott and White Health Plan				
628	SummaCare Health Plan	X	X		X
629	SummaCare Health Plan Medicare	X	X		X
332	UNICARE				
287	UnitedHealthcare	X	X		X
902	Univera				X
446	UPMC Health Plan				
445	UPMC Medicaid Health Plan				
244	Wellpath Select	X	X		
211	Western Health Advantage				
929	WINhealth Partners				

Payer List Changes: Claims & Remits

The following payers have been ADDED to the Payer List:

Payer Name	INSTITUTIONAL				PROFESSIONAL				Remarks
	Payer Code	2ndry	Claim ENR	Remit ENR	Payer Code	2ndry	Claim ENR	Remit ENR	
ARC Administrators	CXARC	N	N		CXARC	N	N		New Claims Payer
JLS Family Enterprises	JLSFE	N	N		JLSFE	N	N		New Claims Payer
Delta Dental of Wisconsin	39069			Y	39069			Y	New Remit Payer
DentaQuest-Government Plans-Wisconsin	CX014			Y	CX014			Y	New Remit Payer

The following DELETIONS were made to the Payer List:

Payer Name	INSTITUTIONAL				PROFESSIONAL				Remarks
	Payer Code	2ndry	Claim ENR	Remit ENR	Payer Code	2ndry	Claim ENR	Remit ENR	
Physician Health Partners	PHPMD	N	N		PHPMD	N	N		Payer Code Deactivated

Payer List Changes: Workers' Compensation

The following payers have been ADDED:

Payer Code	Payer Name	Remarks
J1516	Cardenas Markets (Carl Warren)	Effective 05/11/16
J1996	Triangle Insurance	Effective 05/11/16

The following payers have been CHANGED:

Payer Code	Payer Name	Remarks
J1830	FCCI	Added Jurisdictions: VA