



Payer Updates: December 13, 2016 – January 23, 2017 -- Experian's Payer Team has added the following new payers and made improvements to existing payers.

New Eligibility Payers

- Ambetter of Illinois
- Delta Dental of California
- HealthSmart Benefit Solutions Oklahoma City
- Nebraska Total Care
- Medica Market Place*

New Claims Status Payers

- Ambetter of Illinois
- HealthSmart Benefit Solutions Oklahoma City

Payer Improvements

- None

Enhancements:

- Humana* – Claims Status: The payer will return full demographics, Contractual Adjustment Amount, Co-Pay Amount, Deductible Amount, Discount Amount, Payer Reason Code, Payer Reason Description.
- Molina (WA)* – Claims Status: The payer will return full demographics, billed amount, paid amount, co-pay, deductible, co-insurance, line status and reason codes, check number, check date

Payer Name Changes, Consolidations, 5010 Conversions, Search Option changes:

- Cooks Children's Health Plan - Search Options: 1. Subscriber ID, Name
- Southpath Health - Search Options: 1. Subscriber ID, Name
- Managed Care of America - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Stewart C. Miller - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Corporate Benefit Services - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Populytics - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Community First Health Plans - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Automated Benefit and Services - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Capitol Administrators - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Specialties and Paper Products - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Mutual Medical Plans - Search Options: 1. Subscriber ID, Name / 2. Subscriber ID, Name, Dependent Name, Dependent DOB
- Pro-Health – Search Options: Last and First Name updated to allow hyphen
- Capital Blue Cross – Search Options: Optional Group Number added to all search options
- Molina (all State Plans) – Search Options: 1. Subscriber ID, Name, DOB / 2. Name, DOB
- Blue Cross Blue Shield of Missouri – Search Options: Additional STC selection

Discontinued Payers:

- Fidelis SecureCare of Michigan – Eligibility & Claims Status
- MDWise Hoosier Alliance Medicaid – Claims Status
- Meridian Health Plan of Illinois
- Phoenix Health Choice

* 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 Begin Date	Grace Period End Date	Premium Paid Begin Date	Premium Paid 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				X

240	Blue Cross Blue Shield of Tennessee Commercial				X
308	Blue Cross Blue Shield of Tennessee TennCare Select				X
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
225	Harvard Pilgrim	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
525	Kaiser Foundation Health Plan of Colorado				
526	Kaiser Foundation Health Plan of Colorado Medicare				
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				X

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 and 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	
Affinity Essentials	23334	Y	N	Y	23334	Y	N	Y	Added 835 Transaction
Benefit Management LLC/VBA	88092	Y	N	na	88092	Y	N	na	New Payer
Blue Cross Medicare Advantage (IL, MT, NM, OK, TX)	66006	N	N	Y	66006	N	N	Y	New Payer
Bright Health Plan	CB186	N	N	na	CB186	N	N	na	New Payer
ClaimsWare Inc. dba ManageMed	57080	Y	N	Y	57080	Y	N	Y	Added 835 Transaction
CWIBENEFITS INC.	57080	Y	N	Y	57080	Y	N	Y	Added 835 Transaction
Delaware Medicaid	12K87	Y	Y	na	SKDE0	Y	N	Y	Added 835 Transaction for 837P
District of Columbia Medicare	12M63	Y	Y	na	SMDCO	Y	Y	Y	Added 835 Transaction for 837P
Fringe Benefit Group	45289	N	N	na	45289	N	N	na	New Payer
Independent Physicians at Mercy	INDPM	N	N	na	INDPM	N	N	na	New Payer
Jencare Medical	JCARE	N	N	na	JCARE	N	N	na	New Payer
Mdwise Exchange Market Place	45627	N	N	N	45627	N	N	N	New Payer
Mdwise Healthy Indiana Plan	31354	Y	N	N	31354	Y	N	N	New Payer
Mdwise Hoosier Care Connect	91313	N	N	N	91313	N	N	N	New Payer
Mdwise Hoosier Healthwise	35191	Y	N	N	35191	Y	N	N	New Payer
Molina Healthcare of Virginia	26176	Y	N	na	26176	Y	N	na	New Payer
OSF Healthcare Central	OSFC9	N	N	na	OSFC9	N	N	na	New Payer
Partners In Health	PARTH	N	N	na	PARTH	N	N	na	New Payer
Quality Care Partners	89461	Y	N	na	22312	Y	N	na	New Payer
Spencer Stuart (ARM, LTD)	38416	Y	N	na	38416	Y	N	na	New Payer
TLC Benefit Solutions (Global Care)	TLC79	N	N	Y	TLC79	N	N	Y	New Payer
Together with Children's Community Health Plan of Wisconsin	251CC	N	N	N	251CC	N	N	N	New Payer
UMWA Health & Retirement Funds	52180	Y	N	Y	52180	Y	N	Y	Added 835 Transaction
University of Illinois	UIC67	N	N	na	UIC67	N	N	na	New Payer
Virginia Medicare	12004	Y	Y	na	SMVA0	Y	Y	Y	Added 835 Transaction for 837P

The following **CHANGES** 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	
Aetna-American Continental Insurance Company (remits only)	62118	na	na	Y	62118	na	na	Y	Remits Only
American Family Medicare Sup and PPO Policies Administered by Am Rep	56071	N	N	na	56071	N	N	na	ERA discontinued
American Republic Insurance	42011	N	N	na	42011	N	N	na	ERA discontinued
Central Reserve Life	34097	N	N	na	34097	N	N	na	ERA discontinued
Continental General Insurance Company	71404	N	N	na	71404	N	N	na	ERA discontinued
Medico Insurance Company	23160	N	N	na	23160	N	N	na	ERA discontinued
Sterling Medicare Advantage (remits only)	67829				67829				Remits Only

The following payers were **REMOVED** from the Payer List:

Payer Name	INSTITUTIONAL				PROFESSIONAL				Remarks
	Payer Code	2ndry	Claim ENR	Remit ENR	Payer Code	2ndry	Claim ENR	Remit ENR	
AmeriHealth VIP Care - DC	77007				77007				The Payer has indicated that this Plan was discontinued on 12/31/2014 and the timely filing limit has expired.
AmeriHealth VIP Care - LA	77006				77006				The Payer has indicated that this Plan was discontinued on 12/31/2014 and the timely filing limit has expired.
Evergreen Health Cooperative	45319				45319				All claims for Evergreen Health Cooperative should be submitted to EBS using Payer ID 93240.
Fidelis Secure Care	77054				77054				Do not submit Claims for this Payer ID after 01/01/2017 or they will be rejected. Claims with a DOS 01/01/2016 through 12/31/2016 can be mailed to the following address: Fidelis, P.O. Box 3597, Scranton, PA 18505
First Choice VIP Care	37510				37510				The Payer has indicated that this Plan was discontinued on 12/31/2014 and the timely filing limit has expired.
Keystone Connect (Amerihealth)	77050				77050				The Payer has indicated that this plan was terminated in October 2015 and the timeframe for filing claims has expired.
Lincoln Republic Insurance (remits only)	42011				42011				The Payer has indicated that this service has been terminated. Please contact the Payer directly for information about obtaining ERA.
MDWise Hoosier Alliance (for claims with 2015 Service Dates)	20475				20475				This payer id 20475 has now been cancelled for all dates of service.
OneNet PPO (formerly Alliance PPO / MAPSI)	52149				52149				The OneNet Medical product was discontinued on March 15, 2016. 837I and 837P claims with dates of services after 3/15/2016 should not be sent to OneNet PPO, payer ID 52149. Claims with service dates after March 15, 2016 should be sent to the appropriate Payer/TPA/employer as listed on the member's identification card. Medical claims with service dates before March 15, 2016 may continue to be submitted to OneNet electronically. As of February 9, 2017, and continuing through March 15, 2017, OneNet medical claims requiring pricing should be mailed to: OneNet PPO/MAPSI Claims P.O. Box 934 Frederick, MD 21705-0934 Claims are subject to the payer's timely filing requirements. For further questions, contact OneNet Customer Care at 800-342- 3289.
Orthonet Corporation - CIGNA	13381				13381				The Payer has indicated that in the future all claims will be processed by Cigna.
Premera Blue Cross	12B27				5B930				Payer Codes Deactivated
WINhealth Partners/Wyoming Health Solutions	27327				27327				The payer is no longer in business.

Payer List Changes: Workers' Compensation – none