



Payer Updates: April 4-17, Experian's Payer Team has added the following new payers and made improvements to existing payers.

New Eligibility Payers

- Aetna Better Health (FL)
- Blue Cross Medicare Advantage
- Together with Childrens Community Health Plan

New Claims Status Payers

- Aetna Better Health (FL)
- Blue Cross Medicare Advantage
- Healthcare Highways

Payer Improvements

- QualChoice Arkansas Eligibility: Search Options updated to: 1. Subscriber ID, Name, DOB
- HealthPlus of Michigan Eligibility: Social Security Number, Name search removed - Current Search Options: 1. Subscriber ID, Name, DOB 2. Name, DOB
- HealthPlus of Michigan Medicaid Eligibility: Social Security Number, Name search removed - Current Search Options: 1. Subscriber ID, Name, DOB 2. Name, DOB
- HealthPlus of Michigan Medicare Eligibility: Social Security Number, Name search removed - Current Search Options: 1. Subscriber ID, Name, DOB 2. Name, DOB

Enhancements:

- Cigna* - Claims Status: The payer returns: Allowed Amount, Amount Not Covered, Deductible/Copay Applied, Covered Balance, Patient Coinsurance, Patient Responsibility, Remark Code

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

- Rocky Mountain Health Plan – Eligibility: Added Search Option: Name, DOB / Subscriber ID updated to allow 2-20 AN characters

Discontinued Payers:

- Assurant Health - Time Insurance (FIC) Claims Status
- Assurant Health - Time Insurance (FIC) Eligibility
- Assurant Health - John Alden Life (JALIC) Claims Status
- Assurant Health - John Alden Life (JALIC) Eligibility
- Assurant Health - Union Security (USIC) Claims Status
- Assurant Health - Union Security (USIC) Eligibility
- Centerlight Healthcare Eligibility
- Centerlight Healthcare Medicaid Eligibility
- Centerlight Healthcare Medicare Eligibility
- Pro-Claim Plus Claims Status
- Pro-Claim Plus Eligibility
- WINhealth Partners Eligibility

* 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 2017 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				
1172	Bridgespan Health	X	X		X
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				
1675	MDWise				X
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		
773	Moda Health				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				
500	Regence Blue Cross Blue Shield of Oregon	X	X		X
844	Regence Blue Shield of Washington	X	X		X
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	
Alaska Medicaid	77200	Y	Y	Y					New Payer
AmeriHealth New Jersey (Non-HMO)	60061	Y	Y	Y	60061	Y	Y	Y	New payer effective 3/15
BlueChoice HealthPlan Medicaid of South Carolina	00403	Y	N	Y	00403	Y	N	Y	Added 835 Transaction
Harken Health	43313	Y	N	N	43313	Y	N	N	Added 835 Transaction
Healthcomp Inc.	85729	N	N	Y	85729	N	N	Y	Added 835 Transaction
HFN Inc.	36335	N	N	Y	36335	N	N	Y	Added 835 Transaction
Illinois Medicaid	SKILO	Y	N	Y	SKILO	Y	N	Y	Added 835 Transaction
Little Company of Mary (For claims with a DOS on or after 1/1/17)	LCM1	N	N	na	LCM1	N	N	na	New Claims Payer
Premera BCBS of Alaska	00430	Y	N	Y					New Payer
Premera BCBS of Washington	00430	Y	N	Y					New Payer
Tricare for Overseas	12X46	N	Y	Y	SX163	N	Y	Y	Added 835 Transaction
Trusteed Plans Service Corporation	91078	N	N	Y	91078	N	N	Y	Added 835 Transaction

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	
Affiliated Physicians Group	APG01	N	N	na	APG01	N	N	na	Correction: Remits not available
Community Health Plan of Washington	CHPWA	Y	N	Y	CHPWA	Y	N	Y	Payer Code Change from 12T30 to CHPWA & added 837P
Tufts Health Public Plans (aka Network Health)	04298	N	Y	Y	04298	N	Y	Y	Payer Code Change from 04332 to 04298 for claims. Remit Enrollment is done using 04332.
Virginia Mason Group Health	91131	Y	N	na	91131	Y	N	na	Added new Plan Name to existing Payer ID

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	
AFTRA Health Fund (claims with DOS prior to 1/1/2015)	13346	N	N	na	13346	N	N	na	Discontinued payer code effective 2/7/17.
AmeriHealth Non-HMO (PPO) NJ (remits only)	SX055		na	Y	SX055		na	Y	Discontinued payer code. Use 60061
AmeriHealth Non-HMO (PPO) of Delaware (remits only)	SX055		na	Y	SX055		na	Y	Discontinued payer code.
Excellus - BCBS Central NY-RMSCO	12B71	Y	Y	na					Discontinued payer code.
First Priority	14232 42331				23241				Discontinued payer code.. The Payer has indicated that they are no longer accepting electronic claims. Effective 2/1/2017, any remaining BCNEPA legacy claims must be submitted on paper to the following addresses: First Priority Health (FPH) P.O. Box 219617 Kansas City, MO 64121-9617
FirstCarolinaCareMedicare	34200	N	N	na	34200	N	N	na	Discontinued payer code effective 1/1/17.

Hudson Health Plan	13335	N	N	Y	13335	N	N	Y	Discontinued payer code. Professional and Institutional Claims for Payer ID 13335 Hudson Health Plan should be submitted to Payer ID 14165 MVP HEALTH PLAN OF NY
INTotal Health (claims with DOS prior to 7/01/2016)	10262	N	Y	Y	10262	N	Y	Y	Discontinued payer code. Claims with DOS 7/1/16 or after should use 35115.

The following remarks are INFORMATIONAL:

Payer Name	INSTITUTIONAL				PROFESSIONAL				Remarks
	Payer Code	2ndry	Claim ENR	Remit ENR	Payer Code	2ndry	Claim ENR	Remit ENR	
Connecticare - Medicare	78375	N	N	Y	78375	N	N	Y	Professional claims containing DOS for both 2016 and 2017 should be submitted separately
Trusteed Plans Service Corporation	91078	N	N	Y	91078	N	N	Y	Claims with expired group numbers will reject. This includes the following: 45760 - IBEW 45124 - Valley Freightliner 45125 - Gordon Trucking 45425 - AHBL Inc. 45635 - Trans-System Inc. 45750 - May Trucking

Payer List Changes: Workers' Compensation - None