

CLAIMS & ERA PAYER LIST December 12, 2025

LEGEND:

I = Institutional, P = Professional, D = Dental

COB = Coordination of Benefits

Transaction Column: 837 = Claims, 835 = ERA

Available Column: A Check-mark indicates that the transaction type is available.

Enrollment Column: A Check-mark indicates that enrollment is required for the transaction type.

COB Column: A Check-mark Indicates that the payer accepts secondary claims electronically for the transaction type.

Attachments: A Check-mark indicates that the payer accepts medical attachments electronically for the transaction type.

Submitter Id Column: A Check-mark Indicates that the payer requirs a provider submitter Id crosswalk for the transaction type.

Payer Name	Payer Code	Transaction	_	/ailab			llmen	_	CO		_			s Su	_		Notes
					D			D I	Р	D		P	P D		P	D	
9 National Benefit Fund	13162	835		√	<u> </u>	/ \	√		┸	_	_	_			_	_	
National Benefit Fund	13162	837	✓			_	_		4			_					
edical Network - Atlanta GA	29076	837	✓	_		_	_	✓	´	4	_	/ /			<u> </u>	<u> </u>	
NAtlanta GA	29076	837	✓	\checkmark				✓	′ √	/	_	/ /	/				
entury Health and Benefits	59069	837	✓	✓													
grees Health	20446	837	\checkmark														
legree Benefits	72091	835	√	>	,	/	√										
egree Benefits	72091	837	✓	√													
I Benefit Plan Administrators	93044	837	\checkmark	√													
Administrators LLC	11370	837	\checkmark	✓				✓	′ ∨	/							
I.A. Inc.	95241	835	✓	✓													
I.A. Inc.	95241	837	✓			Т											
Benefit Plan Administrators Inc.	75240	837	✓	✓		T		✓	′ √	/							
-American Administravie Group	37283	837	✓	✓				✓	′ ∨	/							
P - UnitedHealthcare Insurance Company	36273	835	✓	✓	,	/ ,	√		T		T	1					
- UnitedHealthcare Insurance Company	36273	837	√	√		T		_	′ v	/							
Dental Insurance Plan	AARP1	835			√	1	1	√	T		1	1					
Dental Insurance Plan	AARP1	837			√	1			1	√	/						
MedicareComplete through UnitedHealthcare/AARP MedicareComplete	87726	837	✓	✓		_	_		<i>'</i>	/	_	/ /	/				
ay Health	ABLPY	835	✓			1	1	_	+								
ay Health	ABLPY	837	✓	✓		_	_	_	1	_	_						
o Advantage Health Plan	03443	837		√		1	_		′ v	/	1	1					
ute Total Care	68069	837	√		_	_	_	\ \	_	_	_	/ _/	/	_	_		
rated Claims Inc.	99999-0748	837	√			+	_		_	/	+	+					
Administrators	AHS01	837	<i>\</i>			+	_	+	Ť	_	+	_		+	_	1	
s Community Health Network	ACCOM	835	√			/ ,	√	+	+								
s Community Health Network	ACCOM	837	<i>\</i>	_		+	Ť	_	+	+	+	_			1		
is IPA	ACC01	835	√		_	+	+	\pm	+	+							
SS IPA	ACC01	837	<i>\</i>		-	+	+	_	+	+	+	_	_	_	-	_	
ss Medical Group	AMG02	835		√		+	\dashv		+								
ss Medical Group	AMG02	837	_	√	-	+	+	+	+	+	+	+					
sss Primary Care Medical Group (APCMG)	NMM01	837	√	-	-	+	+	+	+		+	+	-				
ss to Care Health Plan/Sendero	ACHP1	835	√ √		-	/ ,	√	+	+	+	+	+					
ss to Care Health Plan/Sendero	ACHP1	837	✓		+	+	<u>`</u>		′ √	/	_	+	_		\vdash		
m IPA	IP095	837	✓	√ √	-	+	+	- V	, '	/	+	+			\vdash		
untable Care Management Group, LLC	45328	837	✓	√ √	./	+	+	Ť	Ť	+	-	+	+		\vdash	\vdash	
untable Care Management Group, ELC untable Healthcare IPA (AHCIPA)	45328 AHIPA	837	✓	✓ ✓	_	+	+			/	+	+			\vdash		
	IAS21	837	✓ ✓		+	/ ,	√	+	Ť	+	-	+	-1-		1	1	
Property & Casualty Ins - MedSup (ERA Only) MG	37118	837	√ √		+	<u> </u>	<u> </u>	_	+	+	+	+			-		
Benefit Services Inc.		837	√ √		+	/	√	+	+	+	+	+	_		\vdash	\vdash	
	72467				-	<u> </u>	v	_	+	+	+	+	_				
Benefit Services Inc.	72467	837	√		_	+	+	_	_	/	+	+			\vdash		Also known as Clifton Hoalth Sustame
N Care Groups	24585	837	√	-	-	+	+		´ _ v	-	+	+			-		Also known as Clifton Health Systems
ra Benefit Services LLC	38254	837	√ /	√ /	+	+	+	+	+	_	_	+	_		\vdash	_	EDA Deves Code TILIO
nistration Systems Research Corporation	38265	837	√	√	-	/	/	-	╄			-					ERA Payer Code TLU02
ninistration Systems Research Corporation	TLU02	835	√ /	-		_	√ /	+	+	_	_	+	_		\vdash	_	
ninistrative Concepts Inc.	22384	835		√		/ ,	√	_	+	_	_	4			-	_	
ministrative Concepts Inc.	22384	837	✓	✓													

March Series Marc				A۱	/ailab	le	Enro	ollmer	nt	CO	В	A	ttachm	ents	Sub	mitte	· Id	
Secretary Conference Conf	Payer Name	Payer Code	Transaction	_	_						_	_	_	_	_	_	_	Notes
Section Sect	Administrative Services Inc.	59141	837	✓	√													
Appendix	AdminOne, LLC	87871	837	✓	✓													
Management Man				✓	√													
Authors Author				_	$\overline{}$	_			√	√	<u> </u>							
Authority by Propagate Part Annual Propagate Authority Propaga				✓	_			_	_									
According by Accord Community Services GROW 1977 7 7 7 7 7 7 7 7 7				√	_	_	_	_	_	—	4	Ι,	, ,	_				
Security Proceed Process 1975				√	_	_	-	-	_	_	+	_				_		
Secondary Paris Marter 1985 1975 7 7 1 1 7 7 7 7 7 7				√	_	_	\dashv	+			+	V	_	\vdash		_		
Management Man				V /	_	_	-	-										
Secretary by systems relativishment (1992) 1977 7 7 7 7 7 7 7 7 7				·/	_	-		+	_	_	+	·/						
Marting Medical disparance				_	-		_	_			+	_	_	+		_		
Marchest North Americanisms				<i>\</i>	-	_		_				Ť	Ť					
Second Administration				√	_	_	_	_		Ť	1	1	_	1		_		
Manufact Administration				√	-		√	√										
Manufact	Advantek Benefit Administrators			✓	_			_		1	1	1						
Manuscript Solutions		59374	835	✓	✓		√	✓										
Memorial relations Memorial St. V V V V V V V V V	ADVANTICA BENEFITS			✓	✓				√	√								
Appendix Install Park Network																		
Abstract is sold in Service Mode: A				_	$\overline{}$													
Appendix Health System West - Reposelle CA				_	_													
Apominist Notes the Note of Notes				✓.	_		_	_	√	√	_	1		lacksquare				
Advanced Physical Partners				√	_		√	√										
Advanced whether Administrators (commely Kentucky velal Administrators) CD19 A2377 A357 A277 A358 A277 A358 A277 A359 A277 A359 A277 A359 A277 A359 A277 A359 A377 A277 A359 A377 A378 A378	,			√	_	_	_	_	_	+	\bot	1		lacksquare				
Autors prietal frammistrators (cell 159) 837 V V V V V V V V V V V V V V V V V V V	,			_	_	_	-	-			+	+				_		
Autorour health Administrators (formerly Kentucky Health Administrators) Allocated Medical Group - AMD (Legacy AMC) AMD (Legacy AMC) Allocated Medical Group - AMD (Legacy AMC) AM				_	-	_	_	_			+	_						
Makebook Medical Group - AMC (Legacy AMC) S3237 S37 V V V V V V V V V						7	/	7	7	+	+-	+	+	+		-		
Advocate Medical Group - AMC (Legacy ANC) Advocate Medical Group - AMC (Legacy ANC) Advocate Physician Partners 65093 835				_	$\overline{}$	_	<u> </u>	<u> </u>	<u> </u>	+	+	+		+				
Allocate Physician Partners				_	_	<u> </u>	./	./	_	+	+	+	_			_		
Advocate Physician Partners				\ \	-		Ť	Ť										
Abstract Physician Partners				<i>\</i>		_	√	√	_	+	+	+		1				
Ages Administrative Services C6637 837 V				_	_			Ť				T						
Action				✓	✓		_	_		1	1	1						
Aetra (Professional Encounter Calims - Not BULK) 60054 837		60054	835	✓	✓	✓	√	√	√									
Actro Affordable Health Choices (SM) - SRC 57604 835 7 7 7 7 7 7 7 7 7	Aetna	60054	837	✓	✓	✓			√	√		√	✓					
Agens a Affordable Health Choices (SM) - SKC	Aetna (Professional Encounter Claims - Not BULK)	60054	837		\checkmark					√		√	√					
Aetra Affordable Health Choices (SM) - SKC Aetra Better Health of California 128CA 837 / V V V V V V V V V V V V V V V V V V				✓	√		\checkmark	√										
Alterna Better Health of California 128CA 835 7 7 7 7 7 7 7 7 7				✓	_						_							
Active Detect Health of Florida 128CA 837 V V V V V V V V V				✓	_		_	_	√	√	_	√	′ √					
Aetna Better Health of Florida 128FL 835				√.	_	_	√	√	_	4	4							
Aetna Better Health of Florida				√	_	_	,	,	_	_	+	_		_				
Active Detail Free Details D				√		_	√	√	_	+	+-	+	_					
Aetna Better Health of Kansas Alexa Better Health of Kansas Alexa Better Health of Kentucky 128KY 835				_	_	-	/	/	_	+	+-	-		-				
Aetna Better Health of Kansas 128KS 835 V V V V V V V V V				_	_	-	V	<u> </u>	-	+	+	+		+				
Aetna Better Health of Kansas 128KS 837				_	-	-	1	1		+	+	+						
Aetna Better Health of Kentucky Aetna Better Health of Kentucky Aetna Better Health of Kentucky Aetna Better Health of Kentucky (SKYGEN TPA) Aetna Better Health of Louisiana Aetna Better Health of Louisiana Aetna Better Health of Louisiana Aetna Better Health of Maryland Aetna Better Health of Maryland Aetna Better Health of Michigan Aetna Better Health of Michigan Aetna Better Health of Michigan Aetna Better Health of Nichigan Aetna Better Health of Nichigan Aetna Better Health of Nebraska (for claims with DOS prior to 1/1/17) Aetna Better Health of New Jersey Aetna Better Health of New					_	_	Ť	Ť		1	+	+		1				
Aetna Better Health of Kentucky (SKYGEN TPA) ABHKI 837 ABHKI 838 ABKI ABHKI 837 ABHKI 838 ABKI ABKI BBKI				<i>\</i>	_		√	√	Ť	Ť		1						
Aetna Better Health of Kentucky (SKYGEN TPA) ABHKI 837 V V V V V 10/01/2025. Aetna Better Health of Louisiana 128LA 835 V	·			✓	_					√	1	1						
Aetna Better Health of Kentucky (SKYGEN TPA) ABHKI 837 V V V V V 10/01/2025. Aetna Better Health of Louisiana 128LA 835 V						T					1							For claims with DOS on or after 10/01/2025, use payer Id 86098 for claims prior to
Aetna Better Health of Louisiana 128LA 837 ✓	Aetna Better Health of Kentucky (SKYGEN TPA)	ABHK1	837			✓					✓			✓				
Aetna Better Health of Maryland 128MD 835 ✓																		
Aetna Better Health of Maryland 128MD 837 ✓																		
Aetna Better Health of Michigan 128MI 835	·			√	_		√	√										
Aetna Better Health of Michigan 128MI 837 ✓																		
Aetna Better Health of Nebraska (for claims with DOS prior to 1/1/17) 25133 835 ✓ </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>√</td> <td></td> <td>_</td> <td>_</td> <td>_</td> <td>_</td> <td>lacksquare</td> <td></td> <td></td> <td></td> <td></td>							√	√		_	_	_	_	lacksquare				
Aetna Better Health of New Jersey 46320 835 ✓ <td></td> <td></td> <td></td> <td>_</td> <td></td> <td>_</td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>				_		_	_					_						
Aetna Better Health of New Jersey 46320 837 ✓ <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td>_</td> <td>_</td> <td></td> <td>+</td> <td>-</td> <td>\vdash</td> <td>+</td> <td></td> <td></td> <td></td> <td></td> <td></td>						_	_	_		+	-	\vdash	+					
Aetna Better Health of New York 34734 835 ✓							√	√		1			-					
Aetna Better Health of New York 34734 837 ✓				_	_	V	/	/			+	+		\vdash				
Aetna Better Health of Ohio 50023 835 \forall Image: Solid Im					_	-	v	v										
Aetna Better Health of Ohio 50023 837 🗸 🗸 📗 🗸 🗸 💮						\dashv	1	1	+	+	+	+				_		
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RAGINA BETTER HEALTH OF UKIANOMA 1280K 835 V V 1 V V V V V V V	Aetna Better Health of Oklahoma	128OK	835	✓		_	√	√	Ť	Ť		1						
Aetra Better Health of Oklahoma 1280K 837 / / 1 / / 1				_	-	-	Ť	_	./	1								
Aetna Better Health of Pennsylvania 23228 835 / / / / / /			-	_	-	_	√	√	Ť	Ť								

			A۱	vailat	ble	Enr	ollme	nt	СО	В	- 1	Attach	ments	Su	bmitt	er Id	
Payer Name	Payer Code	Transaction	-	Р	_	_	_	D I	_	D	_	I F	_	_	Р	D	Notes
Aetna Better Health of Pennsylvania	23228	837	\checkmark	\checkmark													
Aetna Better Health of Texas (Medicaid & CHIP)	38692	835	_	✓		✓	√		_		1						
Aetna Better Health of Texas (Medicaid & CHIP)	38692	837	√	_		,	_	_	_	_	+				_		
Aetna Better Health of Virginia Aetna Better Health of Virginia	128VA 128VA	835 837	_	√ √		√	√	_	+	+	+	-		_	-		
Aetna Better Health of West Virginia Aetna Better Health of West Virginia	128WV	837	√ ✓	_		√	./		+		+						
Aetna Better Health of West Virginia	128WV	837	√	_			Ť	_	+	+	+	+			_		
Aetna Better Health Premier Plan (JVHL)	M5JVH	835	<i>\</i>	_		√	√				T						
Aetna Better Health Premier Plan (JVHL)	M5JVH	837	✓	✓		✓	√	_	/ /		T						Provider must be an approved JVHL lab
Aetna Better Health Premier Plan MMAI	26337	835	✓	✓		✓	✓										
Aetna Better Health Premier Plan MMAI	26337	837	✓	✓				~	/ /	_							
Aetna Medicare	18014	835			✓			√									
Aetna Medicare	18014	837	L .	L,	✓		_	_	_	_	_	,	√		_		
Actna Medicare	60054	837	_	√			_		′ √		`	/ /	/				
Aetna OhioRISE Aetna OhioRISE	45221 SKOH0	837 835	√ √	_		√	√	_	+	+	+	_			-		Effective 2/1/2023, remittance returned under Ohio Medicaid
Aetna Oniokise Aetna Senior Supplement/American Continental	62118	835	√ ✓	_	Н	√ √	√ √	-	+	+	+	-		_	-	_	Effective 2/1/2023, remittance returned under Offio Medicald
Aetna U.S. Healthcare (JVHL)	J1JVH	835	\ \	√ 		√	√ ✓		+		+						
Aetna U.S. Healthcare (JVHL)	J1JVH	837	√ ✓	_		√	√ √		/ /	_	T	$\neg \vdash$					Provider must be an approved JVHL lab
Affiliated Doctor's of Orange County	ADOCS	837	√	· √				Ť	Ť		T						···· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·
Affiliated Partners IPA	POP09	837		√													
Affiliated Physicians IPA	POP06	837		√													
Affinity by Molina Healthcare	16146	837	✓	\checkmark				V	/ \	′							
Affinity Health Plan	13334	835	√	✓		√	√				I						
Affinity Health Plan	13334	837	✓	_			_				┸	_			_		
AFFINITY MEDICAL GROUP	46594	837	✓					_	_	_	4						
AFLAC (ERA Only)	52080	835	✓	√		✓	✓	_	_	_	+	_		_	_		
Aflac Benefits Solutions, Inc AFTRA Health Fund (claims with DOS on or after 1/1/2015)	ABS01	837		√ /	√				/ /	,	+						
AFIRA Health Fund (claims with DOS on or after 1/1/2015) AGA	62308 37280	837 837	√ √	√ √			-		/		+						
Agate Resources Inc. (LIPA)	20048	837	· ·	√ √	Н		-	-	+	+	┿	+			1		
Agency Services Inc	64158	837	1	√ 					+		+						
AgeRight Advantage	ARA01	837	√	_			_	_	_	_	+			1	1		As of January 23, 2024, the payer does not offer an electronic remittance.
Agewell New York	AWNY6	835	✓	✓							T						, ,
Agewell New York	AWNY6	837	✓	✓													
AHP Provider Network	MPM38	837	√	✓													
AHPO (Cleveland OH)	31138	837	✓	_						\perp							
AHS Plans	91026	837	✓	_	✓		_	V	′ √	_	4						
AIDS Healthcare Foundation	95422	837	√	_		,	,	_	_	_	+	_			_		
Aither Health	64884 64884	835 837	√ √	√ /		✓	√	-	/ /	_	+		_	+	-	-	
Aither Health AKM Medical Group	CAPMN	837	./	√ √			-	, v		_	+						
Alabama Medicaid	12K01	835	·/		Н	./	-	- L'	Ť	+	╫	-			1		
Alabama Medicaid	12K01	837	<i>\</i>			Ť			+		+						
Alabama Medicaid	SKAL0	835		✓			✓	一	_	_	T		_	+	т		
Alabama Medicaid	SKAL0	837		✓					√		T						
Alabama Medicare	10112	835		✓			√										
Alabama Medicare	10112	837		✓			\checkmark		✓	Ĺ							
Alameda Alliance for Health	95327	835	✓	✓		✓	√										
Alameda Alliance for Health	95327	837	✓	_		✓	√	_	_		4						
Alamitos IPA	AIPAZ	837	√ /		Ш	Ш	_		/ /	_	+	+		_	\vdash		
Alamitos IPA Alan Sturm & Associates Dental	CAPMN	837 837	√	√			-	V	′ √	_			-	-			
Alaska Carpenters Trust	R7003 91136	837		,/	✓		\dashv			√	+	+	√				
Alaska Calperters Trust Alaska Children's Services Inc.	91136	837	√								+	-					
Alaska Electrical Trust Funds	60054	837	<i>\</i>	√ √				V	/ /	1	١,	/ _	/				
Alaska Laborers Construction Industry Trust	91136	837	√	_	П			T	Ť	1	T	T					
Alaska Medicaid	77200	835	✓	_		√	✓				1						
Alaska Medicaid	77200	837	✓	√		✓	√	V	′ √		Ι						
Alaska Medicare	02001	835	✓			√					Ι						
									T		Т						Payer requires the provider's NPI(s) and Provider (submitter) ID(s) be set up in the provider
Alaska Medicare	02001	837	✓			✓			<u> </u>	_	┸			√	_		table at the clearinghouse prior to claim submission.
Alaska Medicare	SMAK0	835		√			√	_			+	_			√		
Alaska Medicare	SMAK0	837	_	√	Ш		√	_		1	+	\bot		\bot	✓		
Alaska Pipe Trades Local 375	91136	837 837	√ √	√ /				-	-	-	+			-			
Alaska United Food & Commercial Workers Health & Welfare Trust Albuquerque Public Schools	91136 85600	837	√ ✓	_		√	√	+	+		+				\vdash		
Albuquerque Public Schools Albuquerque Public Schools	85600	835	√ √	_		V	·	-	-	+	+	-					
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Payer Name	Payer Code	Transaction		Р	D	1	_	D			_	I P	_	_	Р	D	Notes
Alexian Brothers Community Services of TN	44423	837	✓	✓							T						
ALICARE	13550	837	✓	✓													
Align Senior Care (CA)	ASCA1	835		✓		✓	✓										
Align Senior Care (CA)	ASCA1	837	_	✓	Ш						_				_	_	
Align Senior Care (FL)	ASFL1	835	_	✓	Ш	✓	✓				_						
Align Senior Care (FL)	ASFL1	837		√	Ш	,	_	_	_	_	4	_			_	_	
Align Senior Care (MI)	ASMI1	835 837	√	_	Н	√	√			-	-						
Align Senior Care (MI) Align Senior Care (VA)	ASMI1 ASVA1	837	√ /	√ √	Н	√	√	-	+	+	+				+	┢	
Align Senior Care (VA)	ASVA1	837	√ √		Н		Ť	-	+	+	+				+	+	
Aligned Community Physicians	ACP17	837	√ √	√ √				,	/ /	/							As of November 14, 2023, Electronic Remits Advice (ERA) is not available for this payer at this time.
Alignment Health Plan	CCHPC	835	✓	✓	П	✓	✓		T	1	1					1	
Alignment Health Plan	CCHPC	837	✓	✓													
Alignment Healthcare	AHCA1	835	-	✓		✓	✓										
Alignment Healthcare	AHCA1	837	✓	-													
All Savers/UHC	81400	835	√		ш	✓	√	_	_	_	_	_			_	_	
All Savers/UHC	81400	837	_	√	ш			,	/ /		+					_	
All United Medical group	AUMG1	835	√	-	\square		_	_	+	+	+	\perp			_	-	
All United Medical group	AUMG1	837	√		\vdash		_	_	-	+	+						
AllCare Advantage AllCare Advantage	MRCHP MRCHP	835 837	√ /	_	Н	√	√	+	+	+	+	+		+		1	Former payor ID 26160
Allcare Advantage Allcare Health CCO	MRCHP	837	√ √	_	Н	√		+	+		+	-					Former payer ID 26160
Allcare Health CCO	MRIPA	835	√ √	_	Н	·	·	+	+	+	+	+		+		\vdash	
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AllCare IPA	AC101	837	T	√ √	\Box		Ì	\dashv	+	+	+						
Allegiance Benefit Plan Management Inc.	81040	835	1	√	√	√	√	√	_	_	_	_		1	_	_	
Allegiance Benefit Plan Management Inc.	81040	837	_	√	✓					√	/						
Alliance Behavioral Health	23071	835	✓		П	✓	✓		┰	1	1				Т	1	
Alliance Behavioral Health	23071	837	✓	✓		✓	✓	,	/ /	/							
Alliance Coal Health Plan	93658	835	✓	✓		√	✓										
Alliance Coal Health Plan	93658	837	\checkmark	✓													
Alliance IPA	HCP01	837	✓	_	Ш		_		/		_				_		This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
Alliance Physicians High Desert	22417	835	√	_	Н	✓	✓		_	_	_	_			_	-	EFT enrollment is required in order to obtain ERA's
Alliance Physicians High Desert	22417	837	√	_		_	_	_	/ /	,	+			+	_	_	
Alliance Physicians Medical Group	APP01 58234	837 835	√ √	√ √	Н	√	√	-	/ /		+				-	1	
Alliant Health Plans of Georgia Alliant Health Plans of Georgia	58234	837	_	√ √	Н		·	-	+	+	+				-	-	
Allianz Global Assistance	50749	837	_	√ √	Н	-	-	+	+	+	+	_	+-	+	+	+	
Allied Benefit Systems	37308	835	√ √	_		√	1			+							
Allied Benefit Systems	37308	837	√ √	_	V	Ť	Ť	_	_	+	+	_		+-	_	_	
Allied Healthcare	ALLCA	835		√		√	√			+							
Allied Healthcare	ALLCA	837	_	✓	П				_	1	1					1	Payer returns ERA's automatically once electronic claim submission begins.
Allied Pacific of California	NMM01	837	✓	✓													
Allied Physicians Medical Group	NMM01	837	✓	✓													
Allina Health Aetna	54398	835	✓	✓		✓	✓										
Allina Health Aetna	54398	837	✓					_	/ /		I						
Allwell of Arkansas Health & Wellness	68069	837		√				,	/ /	/	٧	/ /	/				
Aloha Care	99030	835	-	✓	ш		√		┸	_	4	_			_	_	
Aloha Care	99030	837	√	_	Ш	_	√	4	4	4	+	_				1	
Alpha Care Medical Group	NMM04	835	√ /	_	Н	√	√	+	+	+	+	+		1	-	1	
Alpha MCO	NMM04	837	√	/	\vdash	\dashv	-	+	+	-	+	+			-	-	
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AltaMed Alterwood Advantage	ALTAM RP016	837	_	√	_				+				√				
AltaMed Alterwood Advantage Altus Dental	ALTAM RP016 50503	837 837	√	√	_					√	/		√				
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AltaMed Alterwood Advantage Altus Dental Alvarado IPA Always Care Benefits Always Care Vision AMA Insurance Agency	ALTAM RP016 50503 SYMED STR01 ATR01 AMAIA	837 837 837 837 837 835	√	\frac{1}{\sqrt{1}}	√	✓				√	/						
AltaMed Alterwood Advantage Altus Dental Alvarado IPA Always Care Benefits Always Care Vision AMA Insurance Agency AMA Insurance Agency	ALTAM RP016 50503 SYMED STR01 ATR01 AMAIA AMAIA	837 837 837 837 837	√ √	\frac{1}{\sqrt{1}}	√	✓				✓ ✓	′						
AltaMed Alterwood Advantage Altus Dental Alvarado IPA Always Care Benefits Always Care Vision AMA Insurance Agency AMA Insurance Agency AMA Insurance Agency	ALTAM RP016 50503 SYMED STR01 ATR01 AMAIA AMAIA TH071	837 837 837 837 837 835 835 837	\frac{1}{\sqrt{1}}	\ \(\)	√		✓			✓ V	′						
AltaMed Alterwood Advantage Altus Dental Alvarado IPA Always Care Benefits Always Care Vision AMA Insurance Agency AMA Insurance Agency AMA Insurance Agency Amada Health	ALTAM RP016 50503 SYMED STR01 ATR01 AMAIA AMAIA TH071 AMDA1	837 837 837 837 837 835 835 835 835	\frac{1}{\sqrt{1}}	\ \(\)	√		✓				/						
AltaMed Alterwood Advantage Altus Dental Alvarado IPA Always Care Benefits Always Care Vision AMA Insurance Agency AMA Insurance Agency AMA Insurance Agency	ALTAM RP016 50503 SYMED STR01 ATR01 AMAIA AMAIA TH071	837 837 837 837 837 835 835 837	\frac{1}{\sqrt{1}}	\ \(\)	√		✓ ✓		/		/						

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MODITION 1975 197	Payer Name	Payer Code	Transaction	_		_	_	_	_	_	_	_	_	_	Subn	_	Notes
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MACE					_		T			✓		_	_				
Secretary Communication	AMCO						T	1									
Montest Charles Prince March	Ameri-West Health Associates	PROSP	837	✓	✓				√	✓							
Security Color Museum (Marcon Color Museum	AmeriBen Solutions Inc.	75137	835	✓	✓	√	′ √	/									
Marcan Formaco	AmeriBen Solutions Inc.	75137	837	✓	>												
Marchest Prof.	America's Choice Health Plans	20029	835	✓	>	\	\	/									
Montani Administrative Group	America's Choice Health Plans			✓	√												
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Montres another Will Administration 9372 V V V V V V V V V	·			_		_	┺	_	√	✓			ш	_		_	
Montres Filtry Municipal Processes								/					\vdash	-	-	4	
American Family Incorporate 1213						_	+	/	+		Н	-	\vdash	_	+	_	
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American Healthcare Alliance	AMERICAN HEALTH ADVANTAGE UTAH	31145	835	✓	✓	✓	′ √	/									
American Healthcare Alliance	AMERICAN HEALTH ADVANTAGE UTAH	31145	837	✓	✓		1		√	✓							
American Internate (American Internate Company (ERA Only)	American Healthcare Alliance	01066	835	✓	✓	_	′ √	/									
American Insurance Company (ERA Only) 60577 835	American Healthcare Alliance	01066	837	\checkmark	✓												
American Insurance Administrators (AIA) (EIA Only) American Insurance Co. of Texas 8199 837 V V V V V V V V V V V V V V V V V V V	American Heritage	77083	837		\												
American Insurance Co. of reas 81949 837 V	American Income Life Insurance Company (ERA Only)	60577	835	✓	>	>	` `	/									
American National Ins. Co. (ANICC) American National Ins. Co. (ANICC) American National Iufe Insurance Company of Texas (ERA Only) IAS23 B35 V V V V V V V V V V V V V V V V V V V	American Insurance Administrators (AIA) (ERA Only)			✓	√	✓	` ✓	/									
American National Life Insurance Company of Texas (ERA Only) American Postal Workers Union Health Plan Autorican Postal Workers Union Health Plan American Specialty Insurance 42011 335 V V V V V I I I I I I I I I I I I I I																	
American National Life Insurance Company of Texas (EAA Only) American Postal Workers Union Health Plan Ad444 835					_	√	′ √	/									
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American Sentinel Co. 17965 837 V V V V V V V V V V V V V V V V V V V	·			_	_				-				\vdash	-	+	-	
American Specialty Health Plans 43146 835	·		-	✓	_	+	+	+	+	/				_	\dashv	_	
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American Specialty Health Plans					_	+	+	+					\vdash	-	\dashv	-	
American Specialty Health Plans ASHP1 837 ✓ Image: Control of the	American Charlette Health Dlans				·/	+	./	/					\vdash	-	\dashv	+	
AMERICAN THERAPY ADMINISTRATORS ATHAL 837 √ ✓	·				<u></u>	+	Ť									-	
American Trust Administrators Inc. 56195 837 √ √ √ √ √ √ √ ✓ <td></td> <td></td> <td></td> <td>/</td> <td></td> <td></td> <td>Т</td> <td>\top</td> <td>J</td> <td>1</td> <td></td> <td></td> <td></td> <td>-</td> <td>-</td> <td>-</td> <td></td>				/			Т	\top	J	1				-	-	-	
American West Health Care Solution AWHCS 837 √ √ √ √ √ √ √ ✓ <td></td> <td></td> <td></td> <td></td> <td></td> <td>+</td> <td>t</td> <td>+</td> <td>Ť</td> <td>Ť</td> <td></td> <td></td> <td></td> <td>_</td> <td>\dashv</td> <td>_</td> <td></td>						+	t	+	Ť	Ť				_	\dashv	_	
Americas Health Plan AHP01 835 √ √ √ √ √ √ √ √ √ √ √ √ √ √ ✓							Т							-			
Americas Health Plan AHP01 837 √ √ √ √ √ √ √ √ √ √ √ √ √ √ ✓	Americas Health Plan						Т				М						
Amerigroup (ERA Only) 04567 835 √ √ √ √ √ √ √ √ √ √ ✓	Americas Health Plan						Т		√	√			\Box	_			
Amerigo (ERA Only) IASO1 835 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Americhoice Maryland and Washington (ERA Only)						′ _/	/			П						
Amerigroup Community Care - lowa/Maryland 27514 835 √ √ √ √ √ √ √ ✓ <	Americo (ERA Only)													_			
Amerigroup Florida 27519 837 √ √ √ √ √ √ √ √ √ √ √ √ ✓ </td <td>Amerigroup Community Care - Iowa/Maryland</td> <td></td>	Amerigroup Community Care - Iowa/Maryland																
Amerigroup Georgia 26375 835 √ √ √ √ ✓ </td <td>Amerigroup Florida</td> <td></td> <td></td> <td>_</td> <td></td> <td></td> <td>T</td> <td>1</td> <td>✓</td> <td>✓</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Amerigroup Florida			_			T	1	✓	✓							
Amerigroup Illinois 27518 837 √ √ √ √ √ √ ✓ <td>Amerigroup Georgia</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>′ √</td> <td>/</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Amerigroup Georgia						′ √	/									
Amerigroup/Wellpoint Arizona WLPDEN 835	Amerigroup Illinois			_			Т	T	√	✓	П			7		7	
	Amerigroup/Wellpoint Arizona		835	✓	✓	√ √	´ _ ✓	/ /	′								
	Amerigroup/Wellpoint Arizona	WLPNT	837	✓	✓	√	Т	Т	✓	✓		✓	✓			T	

Davies News	Davier Code	Tuesception	A	vailab	le	Enro	ollmei	nt	CO	В	At	tachm	ents	Subr	mitter	Id	Notes
Payer Name	Payer Code	Transaction	-1	Р	D	1	Р	D I	P	D	1	Р	D	- 1	Р	D	Notes
Amerigroup/Wellpoint Iowa	WLPNT	837	_	✓				✓	√		√						
Amerigroup/Wellpoint New Jersey	WLPNT	837	√ /	_	_	_	_	√		_	√				_	_	
Amerigroup/Wellpoint Tennessee Amerigroup/Wellpoint Texas	WLPNT WLPNT	837 837	√ ./	√ √	-	-	-	√ √	_	+	√ √			-	-	-	
Amerigroup/Wellpoint Washington	WLPNT	837	V	_					_		√						
AmeriHealth Administrators	54763	835	<i>\</i>	√	_	√	√	Ť	Ť	1	Ť	Ť			_		
AmeriHealth Administrators	54763	837	✓	✓				√	√								
AmeriHealth Caritas Delaware	77799	835	✓	_		✓	✓										
AmeriHealth Caritas Delaware	77799	837	√	√		_	_	√	√								
AmeriHealth Caritas Florida AmeriHealth Caritas Florida	77003	835 837	√ √	√ √		√	√	_	+	_				-	-		Formerly Prestige Health Choice
Amerihealth Caritas Louisiana (LACare)	77003 27357	835	·/	√ √	-	√	√	-	+	+	-	+		-	-		
Amerihealth Caritas Louisiana (LACare)	27357	837	Ţ	√		Ť	Ť	√	1	+							
AmeriHealth Caritas New Hampshire	87716	835	✓	_		✓	✓										
AmeriHealth Caritas New Hampshire	87716	837	✓	✓													
AmeriHealth Caritas Next - A Product of AmeriHealth Caritas VIP Next, Inc.	47073	835	✓	_		√	✓		\perp						_		
AmeriHealth Caritas Next - A Product of AmeriHealth Caritas VIP Next, Inc.	47073	837	√	√	_	_	_	√	√	4	-	1		_	-	_	
AmeriHealth Caritas Next A Product of AmeriHealth Caritas Florida, Inc. AmeriHealth Caritas Next A Product of AmeriHealth Caritas Florida, Inc.	45408 45408	835 837	√ √	√ √		√	√	+	+	1	\vdash			\dashv	\dashv		
AmeriHealth Caritas Next A Product of AmeriHealth Caritas Florida, Inc. AmeriHealth Caritas Next North Carolina	83148	835	√ √	-		√	√	+						+			
AmeriHealth Caritas Next North Carolina	83148	837	√	√		Ť	Ť		T	T	t			\dashv	1		
AmeriHealth Caritas North Carolina	81671	835	√	_		√	√	┚									
AmeriHealth Caritas North Carolina	81671	837	√	√		Į	Į										
AmeriHealth Caritas of Ohio Medicaid MCE	35374	835	√	√	\perp	√	√	4	L	_	_	_	Ш	_	_	_	
AmeriHealth Caritas of Ohio Medicaid MCE	35374	837	√	_		-		√	_	-				-	-	_	
AmeriHealth Caritas Ohio AmeriHealth Caritas Ohio	84243 SKOH0	837 835	\ \	√ √		√	1		Ť	+	\vdash				\dashv		Effective 2/1/2023, remittance returned under Ohio Medicaid
AmeriHealth Caritas Onio AmeriHealth Caritas Ohio Transportation	42435	837	√ √	_	-	•	Ť	_	+	+	1	1			_		Effective 2/1/2023, remittance returned under Onio Wedicald
AmeriHealth Caritas Ohio Transportation	SKOH0	835	_	√		✓	✓			1							Effective 2/1/2023, remittance returned under Ohio Medicaid
AmeriHealth Caritas Pennsylvania	22248	835	✓	✓		✓	√										
AmeriHealth Caritas Pennsylvania	22248	837	✓	✓				✓	√								
AmeriHealth Caritas VIP Care	77062	835	√	√		✓	✓	_	4	_					_	_	
AmeriHealth Caritas VIP Care AmeriHealth Caritas VIP Care - Delaware DSNP	77062 87406	837 835	√	√ √	-	√	/	_	+	+	1	+		-	-	-	
AmeriHealth Caritas VIP Care - Delaware DSNP	87406	837	√ ✓	_		Ť	Ť								_		
AmeriHealth Caritas VIP Care - Florida DSNP	88232	835	_	<i>\</i>	_	√	√	_	1	1					_		
AmeriHealth Caritas VIP Care - Florida DSNP	88232	837	✓	✓													
Amerihealth Caritas VIP Care Plus (JVHL)	MDJVH	835	✓	\checkmark		\checkmark	\checkmark										
Amerihealth Caritas VIP Care Plus (JVHL)	MDJVH	837	✓	_	_	_	√	√	√	_		1			_		Provider must be an approved JVHL lab
AmeriHealth Caritus VIP Care Plus (Michigan)	77013	835	√ √	√ /	_	√	√	_	_	_					_	_	
AmeriHealth Caritus VIP Care Plus (Michigan) AmeriHealth Delaware (Non-HMO)	77013 93688	837 837	./	√ √	-	-	-	_	-/	+	1	+		-	-	-	ERA Payer Code SX055
AmeriHealth Delaware (Non-HMO)	SX055	835	<i>\</i>	√ √		√	√	Ť	Ť	+							Livi Payer Code 3x055
Amerihealth District of Columbia	77002	835	✓	_		_	✓	_	1	т					一		
Amerihealth District of Columbia	77002	837	✓	✓													
AmeriHealth New Jersey (Non-HMO)	60061	835	✓	✓		√	✓										
AmeriHealth New Jersey (Non-HMO)	60061	837	√	_		_	_	- √	√	4		4		_	_		
Amerihealth NJ/DE HMO Amerihealth NJ/DE HMO	95044 95044	835 837	./	√ √		√	<u> </u>	_	√	1					-		
AmeriHealth NorthEast	77001	835	√ √		-	√	√	Ť	Ť	+	1	1			-		
AmeriHealth NorthEast	77001	837	✓	√		Ť		√	√								
Ameritas Dental	47009	835			√			√									
Ameritas Dental	47009	837			✓					✓			✓				
Ameritas Life Insurance Corp of New York	72630	835		Ш	√ /	4	4	✓	1	L	\vdash	_	Ш	_	_		
Ameritas Life Insurance Corp of New York Americal Insurance Company (naver only accents Secondary claims)	72630 64090	837	./		√	./	./	+	-	√			\vdash	\dashv	-		
AmFirst Insurance Company (payer only accepts Secondary claims) AmFirst Insurance Company (payer only accepts Secondary claims)	64090 64090	835 837	√ √	√ √		<u>√</u>	٧	+	+	+	┢			\dashv	\dashv		
Amica Mutual Insurance	12287	835	_	√ √	-	√	√				т		\Box	\dashv	_		
Amica Mutual Insurance	12287	837	√	√													
Amida Care	24818	837	✓	-													
Amida Care Medicare	79966	837	√	√		Ţ	Ţ		Į		F			Ţ	Ţ		
Amplifon	72947	835	√	√ /		√	√	_			\vdash			_	_	_	
Anaheim Memorial IPA Anchor Benefit Consulting Inc.	IP095 53085	837 837	√ √	√ √		+	+	√	√	+			\vdash	-	\dashv		
Ancillary Care Services (ERA Only)	A2004	835	√ √	√		√	√	+	\vdash	+				\dashv	\dashv		ERA Only
Angel Medical Group	SCPR1	837	√	_	_	Ť	+	\top	1		т		\vdash	\neg	_		
Angle Insurance Company of Utah	39856	835	√	_		√	√							丁			
Angle Insurance Company of Utah	39856	837	✓	\checkmark													

Payer Name	Payer Code	Transaction			ole D			nt D I	CO				n ents	_	bmitte P	_	Notes
Antares Management Solutions	34192	837	✓	✓			T	√	/ √								
Antelope Valley Medical Associates	SMG01	837	√	√	\neg	\neg	\neg		1	1	1						
Anthem BCBS Dental	84105	835			✓			✓									
Anthem BCBS Dental	84105	837			√		\Box										
Anthem BCBS Maine Dental	AD180	835			√			√									
Anthem BCBS Maine Dental	AD180	837	ш	ш	✓	—	_		<u> </u>	<u> </u>							
Anthem Blue Cross and Blue Shield of New York	00303	835	√.	ш	$\boldsymbol{\dashv}$	√	4	_	_	_							
Anthem Blue Cross and Blue Shield of New York	00303	837	\perp		$oldsymbol{oldsymbol{}}$	_	_		4	4	✓						
Anthem Blue Cross and Blue Shield of New York	00803	835	ш	√ /	$\boldsymbol{ o}$	4	$\overline{}$			-	-						ERA Payer Code 00803.
Anthem Blue Cross and Blue Shield of New York Anthem Blue Cross Blue Shield of Colorado	00803 12B03	837 835		✓	_	√	\dashv	-	-	+	-	✓					
Anthem Blue Cross Blue Shield of Colorado Anthem Blue Cross Blue Shield of Colorado	12B03	837	√ √	Н	$\boldsymbol{ o}$	Ť	$\boldsymbol{+}$	_	/	+	√						
Anthem Blue Cross Blue Shield of Colorado	AD050	835	Ľ	\blacksquare	√	\dashv	\dashv	./	+	+	Ť						
Anthem Blue Cross Blue Shield of Colorado	AD050	837	Н	\neg	<i>\</i>	一	o	Ť	+	+	1	_	1				
Anthem Blue Cross Blue Shield of Colorado	SB550	835	\blacksquare	√	Ħ	\neg	√										
Anthem Blue Cross Blue Shield of Colorado	SB550	837	П	√	\neg	\neg	\neg		√	1	1	✓					
Anthem Blue Cross Blue Shield of Connecticut	12B04	835	\checkmark			✓			1								
Anthem Blue Cross Blue Shield of Connecticut	12B04	837	✓	J	口	I	I	√			√						
Anthem Blue Cross Blue Shield of Connecticut	SB560	835		✓			✓										
Anthem Blue Cross Blue Shield of Connecticut	SB560	837	Ш	✓	二	$oldsymbol{\bot}$	$oldsymbol{\bot}$		√			✓					
Anthem Blue Cross Blue Shield of Georgia	00101	835	√	لبر	آلم	√	4										
Anthem Blue Cross Blue Shield of Georgia	00601	835	لب	✓	Щ	_	✓	_		_	L		1	_	_		
Anthem Blue Cross Blue Shield of Georgia	12015	837	✓	إجر	\rightarrow	4	4	√	٠,	-	_ ✓	-					
Anthem Blue Cross Blue Shield of Georgia	SB600	837		\checkmark	ightarrow	$\overline{+}$	_	_	\perp	+	\vdash	√					
Anthem Blue Cross Blue Shield of Indiana	12B09	835	L\	Н	$\boldsymbol{ o}$		4	_		-	_						
Anthem Blue Cross Blue Shield of Indiana Anthem Blue Cross Blue Shield of Indiana	12B09 SB630	837	√		\rightarrow	$\boldsymbol{\dashv}$	_	_	+	+	√	+	_				
Anthem Blue Cross Blue Shield of Indiana Anthem Blue Cross Blue Shield of Indiana	SB630	835 837	Н	√ √	$\boldsymbol{ o}$	\dashv	<u> </u>	-	1	┿	+	V	+	-	-		
Anthem Blue Cross Blue Shield of Hidiana Anthem Blue Cross Blue Shield of Kentucky	12B11	835	√	Ň	$\overline{}$	√	\rightarrow		Ť	+	-	Ť					
Anthem Blue Cross Blue Shield of Kentucky Anthem Blue Cross Blue Shield of Kentucky	12B11 12B11	837	<u>/</u>	М	$\overline{}$	Ť	$\boldsymbol{+}$	_	/	+	-/	+					
Anthem Blue Cross Blue Shield of Kentucky Anthem Blue Cross Blue Shield of Kentucky	SB660	835	Ť	√	一	\dashv	<u> </u>	Ť	+		Ť						
Anthem Blue Cross Blue Shield of Kentucky	SB660	837	\vdash	√ √	\neg	\neg	Ť	_	√	1	1	√	1	1	1		
Anthem Blue Cross Blue Shield of Maine	12B13	835	\checkmark	一		✓	\neg		Ť								
Anthem Blue Cross Blue Shield of Maine	12B13	837	✓	П	П	\neg	\neg	_		1	√						
Anthem Blue Cross Blue Shield of Maine	SB680	835	П	✓			✓										
Anthem Blue Cross Blue Shield of Maine	SB680	837		✓	\Box	\Box	Т		√			✓					
Anthem Blue Cross Blue Shield of Missouri	12B65	835	✓			√											
Anthem Blue Cross Blue Shield of Missouri	12B65	837	✓	\Box	\Box	\Box	\Box	√	′		✓						
Anthem Blue Cross Blue Shield of Missouri	SB741	835	ш	✓	4	_	✓		4	<u> </u>							
Anthem Blue Cross Blue Shield of Missouri	SB741	837	H	✓	_	_	_		√	4	_	√		_	_		
Anthem Blue Cross Blue Shield of Nevada	12B20	835	V	Н	$\boldsymbol{-}$	√	-	_		+	_	4	-				
Anthem Blue Cross Blue Shield of Nevada	12B20	837	✓		$oldsymbol{-}$	_	_	_	4	+							
Anthem Blue Cross Blue Shield of Nevada Anthem Blue Cross Blue Shield of Nevada	SB765 SB765	835 837	$oldsymbol{}$	√ √	\rightarrow	-	√	-	1	+-	+	1	+				
Anthem Blue Cross Blue Shield of New Hampshire	12B21	835	/	Ň	$\overline{}$	√	\rightarrow		Ť	+		Ť					
Anthem Blue Cross Blue Shield of New Hampshire Anthem Blue Cross Blue Shield of New Hampshire	12B21 12B21	837	<u>/</u>	М	$\overline{}$	Ť	$\boldsymbol{+}$	_	/	+	-/	+	1				
Anthem Blue Cross Blue Shield of New Hampshire	SB770	835	H	√	$\overline{}$	\dashv	√	Ť	+		Ť						
Anthem Blue Cross Blue Shield of New Hampshire	SB770	837	М	V	\dashv	一	十		√		т	√					
Anthem Blue Cross Blue Shield of Ohio	12B24	835	√	一	一	√	一				T						
Anthem Blue Cross Blue Shield of Ohio	12B24	837	✓		J			√	′		√						
Anthem Blue Cross Blue Shield of Ohio	SB338	835		\			√										
Anthem Blue Cross Blue Shield of Ohio	SB338	837	口	✓	\Box	\Box	$oldsymbol{oldsymbol{oldsymbol{\square}}}$		√			✓					
Anthem Blue Cross Blue Shield of Ohio Dental	AD332	835	ш		√		Į	√			L						
Anthem Blue Cross Blue Shield of Ohio Dental	AD332	837	ш	ш	\checkmark		_		_	_	_						
Anthem Blue Cross Blue Shield of Virginia	12002	835	√	Д	4	√	4	_		-	Η,						
Anthem Blue Cross Blue Shield of Virginia	12002	837	\perp		ightharpoonup	_	$\overline{+}$	_	4	+	_			_		_	
Anthem Blue Cross Blue Shield of Virginia	SB923 SB923	835 837	\vdash	√ √	\rightarrow	\dashv	√	-	1	-	┢	√					
Anthem Blue Cross Blue Shield of Virginia Anthem Blue Cross Blue Shield of Wisconsin	00450	837	./	Ť	\rightarrow	√	+		Ť	+	\vdash	· ·					
Anthem Blue Cross Blue Shield of Wisconsin	00950	835	Ť	√	\rightarrow	_	√		+	+				1			
Anthem Blue Cross Blue Shield of Wisconsin	12B29	837	V		\rightarrow	\dashv	十	√	/	+	√						ERA Payer Code 00450
Anthem Blue Cross Blue Shield of Wisconsin	AD450	835	Н	\neg	√	一	\dashv	√ ·	\top		Ė						.,
Anthem Blue Cross Blue Shield of Wisconsin	AD450	837		-	√	一	十				T						
Anthem Blue Cross Blue Shield of Wisconsin	SB950	837	П	✓	\neg	丁	丁		√	Т	П	✓		П	П		ERA Payer Code 00950
Anthem Bide Cross Bide Shield of Wisconsin	30330				_	_	-	_					_	_			
Anthem Maine Health	00958	835	✓	>		✓	√										
Anthem Maine Health Anthem Maine Health	00958 00958	837	✓	✓	\exists	<u> </u>	<u> </u>	√	_		√	√					
Anthem Maine Health	00958		√ √	√ √		√ √	√	✓ ✓	_		√	√					Effective 2/1/2023, remittance returned under Ohio Medicaid

			Av	ailab	le	Enro	ollmen	nt	COE	3	Att	achment	ts S	ubmit	ter Id	····
Payer Name	Payer Code	Transaction	- 1	Р	D	1	Р	D I	Р	D	-	Р [D I	Р	D	Notes
Anthem Ohio Medicaid Vision	2937V	837	√	_		Ţ										
Anthem Ohio Medicaid Vision	SKOH0	835	√	_	_	√ ,	√	_		\perp				4	4	Effective 2/1/2023, remittance returned under Ohio Medicaid
Apex Benefit Services	34196 34196	835 837	√	√ /		√	✓			\vdash		-		+		
Apex Benefit Services ApolloCare Partners of Nevada	34196 NMM08	837	✓ ✓	_		+	+	√	√	\vdash				+		
AppleCare Medical Management	APP01	835	✓	√ √		√	1	· ·	Ť					+	_	
AppleCare Medical Management	APP01	837	√	√		Ť	Ť	√	√							
AppleCare Medical Management	APP01	837	√	✓		_		√	-	П				1		
ARC Administrators	CXARC	837	✓	✓												
Arcadia Healthcare Solutions - IPG	11081	837	✓	✓												
Arcadia Healthcare Solutions - NPA	36364	835	_	✓		√	√									
Arcadia Healthcare Solutions - NPA	36364	837	√	√	_	4	_	_		\perp				4		
Arcadia Methodist IPA	NMM01	837	√	√ /		-	-	_		\vdash		-		+		
Arcadian Management Services Inc Arch Health Partners	77045 ARCH1	837 835	✓ ✓	√ √		-	+	+		\blacksquare				+		
Arch Health Partners	ARCH1	837	✓ ✓	√ √	-	-	-	_	1	+				+	+	
Archeater anders Archeare Senior Life	R3495	835	√	√ √	√	√	✓ .	√ -	\vdash					+		
Archcare Senior Life	R3495	837	√	√	√	Ť	_		1					1	1	
Argus Dental Plans	ARG01	835			✓	T	1	√								
Argus Dental Plans	ARG01	837			✓	┚							ፗ	\mathbf{I}^{-}		
Argus Vision and Dental Plans, Inc.	ARGUS	837	_	√												
ARISE	39185	835	✓	_		\checkmark	✓									
ARISE	39185	837	√	√												
Arizona Medicaid	AZMCD	837	√	√ /	_	,	_	√	✓	\blacksquare			_	_	_	ERA Payer Code MCDAZ
Arizona Medicaid	MCDAZ	835	✓	√ /	_	_	√ /	_	1	\blacksquare			_	٠,	1	
Arizona Medicare	SMAZ0 SMAZ0	835 837		√ √	-	_	√ √	+	1	\vdash			_	√ √	_	
Arizona Medicare Arizona Medicare Part A \ Jurisdiction JF	03101	837	√	√	-	√	√	-		+					+	
Arizona Medicare Part A \ Jurisdiction JF	03101	837	√ ✓		_	√ ✓	+	+		\vdash				+		
Arizona Priority Care Plus	27154	837	√	√	_	Ť	_	_	1				Ť	+	+	
Arkansas Best Corporation - Choice Benefits	62308	837	✓	√				√	✓							
Arkansas Medicaid	12023	835	✓			√	\neg							1		
Arkansas Medicaid	12023	837	✓					√								
Arkansas Medicaid	SKAR0	835		✓			✓									
Arkansas Medicaid	SKAR0	837		✓					✓							
Arkansas Medicare	07101	835	√		_	√	_	٠,		\perp				4		
Arkansas Medicare	07101	837	✓		_	√	_	√		\vdash			_	+	-	
Arkansas Medicare Arkansas Medicare	SMAR0 SMAR0	835 837		√ √		_	√ √	+	√	\vdash				+		
Arkansas Superior Select	61184	837	./	√ √	-	-	V	+	· ·	\vdash				+	+	
Arkansas Superior Select	61184	837	√	√		_	_			\vdash				+		
ARM, Group	88035	837	✓	√		_	_	√	✓					1	1	
ARM, Ltd	63240	835	✓	✓		√	✓									
ARM, Ltd	63240	837	✓	✓												
Arroyo Vista Family Health Center	NMM01	837	✓	✓												
Arta Health Network	WMM01	837		✓			\perp		✓							
ASAGEHA	06603	837	√	√		_	_		٠,		L.,	L .		4		
Ascension Complete	68069	837	√	√ /	_	_	,	√		\vdash	✓	✓		+		
Ascension Living Alexian PACE	R3471 R3471	835 837	√ √	√ √		√	√	_	1	\vdash				+	+	
Ascension Living Alexian PACE Ascension Living Pace Michigan	R3471 R3458	837	✓ ✓	√ √		\dashv	+	√	√					+		
Ascension Living St. Vincent PACE	R3459	837	√	_		+	_	Ť	Ť							
Asian American Medical Group	AAMG1	835	√			√	√			П						
Asian American Medical Group	AAMG1	837	✓							П						
ASONET	CX076	837			√					√						
Aspen Medical Associates	16180	837	✓	√				√	✓							
Aspire Health Plan	46156	835	_	√		√	√									
Aspire Health Plan	46156	837	_	√ /	_	4	_	\bot	1	\square		$oldsymbol{oldsymbol{\sqcup}}$	_	\bot	\perp	
Aspirion	99999-0ASU	837	√	√ /	_	_		-		\vdash				-		
Aspirus Medicare Advantage Aspirus Medicare Advantage	36483 36483	835 837	√	_		√	√	+	-					+	+	
ASRM LLC	36483 ASRM1	837	√ √	√ √		\dashv	\dashv					++				
ASRM LLC	TLU02	837	✓ ✓	√ √		√	1	+	H							
Asserta Health	IHS14	837	√ ✓	√ ✓		Ť		√	✓							
ASSOCIATED ADMINISTRATORS, LLC (ERA ONLY)	13788	835	√	√		T		T	Ė							ERA ONLY
Associated Hispanic Physicians	AHPSC	837	✓	√				√	√					1		
Associated Hispanic Physicians of Southern CA	MPM44	837	✓	\checkmark				√								
Associated Hispanic Physicians of Southern California IPA	AHPSC	837	✓	\checkmark				√	✓							

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Payer Name	Payer Code	Transaction	_					D I		D		Р	_		D	Notes
Associates for Health Care Inc. (AHC)	36326	837	✓	√												
Assurant Health (now Sun Life)	70408	837			√					✓						
Assurant Health Self Funded	75068	835	✓			√	✓									
Assurant Health Self Funded	75068	837	_	✓		_	_		√,					_		
Assured Para fits Administratory	88035	837	_	√	_	_	_	√	√				_	_	-	
Assured Benefits Administrators Assured Benefits Administrators	74240 74240	835 837	√ √	√ √		√	√							+		
Assured Benefits Administrators Astiva Health	84320	837	_	√ √	-	+	-	_	+-	+		-	_	+	+	
Astrana Care	NMM12	837	<i>\</i>	√		_								+	+	
Astrana Health Management	NMM01	835	√	√		√	✓		1					1	1	
Astrana Health Management	NMM01	837	✓	_												
Asuris NW Health	93221	835	✓	✓		√	✓									
Asuris NW Health	93221	837	✓	\checkmark				√	✓							
Athens Area Health Plan Select	95691	837	✓	-						_						
Atlantic Coast Life	87020	837	✓	✓		_	_	√	√					_		
Atlantic Medical Insurance	22285	837	✓	√	_	-	_	-	_	\vdash				_		
Atlas Life Insurance Company ATRIO Health Plans	90956 ATRIO	837 835	/	√ √	-	√	√		-	+				+	+	
ATRIO Health Plans	ATRIO	835	✓ ✓	_		Ť	٧	-						+		
Aultcare	341488123	835	√	_		√	√									
Aultcare	341488123	837	✓	√		1	\top									
Automated Benefit Services	38259	835	✓	-		√	√									
Automated Benefit Services	38259	837	✓	√				√	✓							
Automated Benefit Services, Inc	38260	837	✓	✓												
Automated Group Administration Inc.	37280	837	✓	✓												
Auxiant	AUX01	835	✓.	✓		√	√		١.					_		
Auxiant	AUX01	837	✓	✓		_	_	√	✓					_	_	
Auxiant (Wisconsin)	CX024	837		,	√	_	/							_		
Avalon Healthcare Solutions Capital Blue Cross Avalon Healthcare Solutions Capital Blue Cross	AVA03 AVA03	835 837		√ √		-	√		√	+				+	+	
Avaion Healthcare Solutions North Carolina	AVA03	835		✓		-	√		Ť					+		
Avalon Healthcare Solutions North Carolina	AVA02	837		√	_		\	_	√	1				_	+	
Avalon Healthcare Solutions South Carolina	AVA01	835		✓		_	√									
Avalon Healthcare Solutions South Carolina	AVA01	837		✓		T			√					1		
Avalon Healthcare Solutions Vermont	AVA04	835		✓			√									
Avalon Healthcare Solutions Vermont	AVA04	837		√					\	_						
Avante Health	AH001	837		✓		_	_		✓							
AVC Health (ViCare Health)	VCH01	835	√ /	√		√	✓							_		
AVC Health (ViCare Health) Avera Health Plans	VCH01 46045	837	√	_	_	/	_	√	√			┢	_	+	-	
Avera Health Plans	46045	835 837	✓ ✓	√ √	_	√	<u> </u>	_	-				_	+	+	
AveraAdvantage	48055	837	\ \	√		-	-		_					+	_	
Avesis (Vision)	87098	835	Ė	√			√									
Avesis (Vision)	87098	837		√										_		
Avesis Dental	86098	837			√					✓			√			
AvMed Inc.	59274	835	✓	√		√	✓									
AvMed Inc.	59274	837	✓	_												
AXA Assistance_USA	65101	837	√	√	_	_	_	_	_					_	_	
Axminster Medical Group	AXM01 AXM01	835 837	√ √	√ √	-	√	√	-		\vdash		\vdash	+	-	-	
Axminster Medical Group AZ Complete Health (for claim DOS on or after 10/01/18)	68069	837	✓	_		\dashv	\dashv	√	√		√	√	+	+		
Azeros Health Plans Inc.	16644	835	✓	-		√	√	Ť	Ť		Ť	+				
Azeros Health Plans Inc.	16644	837		√		1	\top									
Bakersfield Family Medical Center	BKRFM	837		√		丁	丁	√	✓					1		
Bakery & Confectionery Union and Industry International Health	BCTF1	837	✓													
Banker's Life	36066	835		✓		I	✓									
Banker's Life	99999-0178	837	√	√			Ļ	√	✓							
Banker's Life & Casualty (ERA Only)	36066	835	L	√	_	_	√ /	_	_			lacksquare	_	_	\bot	
Bankers Fidelity Life Insurance Company (ERA Only)	30152 66901	835 835	√ √	√ /		√ √	√ /					H	+	-		
Banner - University Family Care Banner - University Family Care	66901	835	_	√ √	-	V	٧	./	√				-	+	+	
Banner Aetna	67895	835	✓	_	-	√	√	Ť	Ť				+	+		
Banner Aetna	67895	837	✓	✓		Ť	Ť	√	√							
Banner Health	12X42	835	√	-	_	√	√	Ť	Ť							
Banner Health	12X42	837	✓	√				√	√							
Banner Health AZ	SX145	835		✓		_	✓									aka Banner Health Network
Banner Medicare Advantage Plus PPO	84324	835	✓	-		√	√									
Banner Medicare Advantage Plus PPO	84324	837	✓	√												

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Payer Name	Payer Code	Transaction	1	_	D	_	_	D I	_	_	i i		_	_	Р	D	Notes
Banner Medicare Advantage Prime HMO	84323	835	√	1	_	√	1	_	T	_	_		_	_			
Banner Medicare Advantage Prime HMO	84323	837	<i>\</i>		-	Ť	Ť	_	╅	+	_	+	+	+			
BARInet	CB369	837	✓	_					╅	+							
Basic Plus	41204	837	✓		_	_	_	_	/ _	7	_	_	_	_			
Bay Bridge Administrators	06941	837	✓	√					/ _	/							
BayCare Select Health Plans	81079	835	✓	✓	\neg	√	√	\neg	1	1	Т		1	_			
BayCare Select Health Plans	81079	837	✓						1								
			П			\neg			1								Per EDI Gateway, effective 07/01/2020, claims for date of service 07/01/2020 and after for
																	Texas A&M (TAMU) and Health Plus members will need to be submitted to FirstCare using
Baylor Scott & White Health Plan	88030	837	✓	✓				_	∕	/							Payer ID 94999.
BCBS Federal Employee Program (FEP) Dental	BCAFD	835			√			√									
BCBS Federal Employee Program (FEP) Dental	BCAFD	837			√				T								
BCBS Texas Medicaid Star Chip	66002	835	✓	✓		√	√										
BCBS Texas Medicaid Star Chip	66002	837	✓	✓				√	/ v	/							
BCBSAZ ACA Standard Health With Health Choice	RP105	835	✓	✓		√	√										
BCBSAZ ACA Standard Health With Health Choice	RP105	837	✓	\checkmark	\checkmark												
BCBSIL Community Health Plans	66012	835	✓	✓		\checkmark	√										
BCBSIL Community Health Plans	66012	837	✓	✓							✓	√					
BCBSMI Medicare Plus Blue PPO (JVHL)	KCJVH	835	✓	✓		√	√										
BCBSMI Medicare Plus Blue PPO (JVHL)	KCJVH	837	\checkmark	\checkmark		\checkmark	√	✓	/ v	/							Provider must be an approved JVHL lab
BCBSMN Blue Plus Medicaid	00562	835	_	✓		✓	√										
BCBSMN Blue Plus Medicaid	00562	837	✓	\checkmark		\Box		~	′ ∨	/	√	√					As of January 1, 2024, use new payer code 00726 regardless of date of service
BCBSMN Blue Plus Medicaid	00726	835	✓	_		√	√		I								
BCBSMN Blue Plus Medicaid	00726	837	✓	✓				>	\ \	/							
BCBSMN Blue Plus Medicaid Waiver	FS802	835		✓			√										aka Bridgeview
BCBSMN Blue Plus Medicaid Waiver	FS802	837		✓								√	·				aka Bridgeview
BCBSMN Non-Emergent Transportation	A5143	835		✓			√										
BCBSMN Non-Emergent Transportation	A5143	837	_	✓													
Beacon Health Options	BEACON963116116	837	_	√				✓	_	_							
Beacon of Life	65432	837	-	✓				✓	′ ∨	/							
Beaumont Employee Health Plan (JVHL)	JEJVH	835	√		_	√	_										
Beaumont Employee Health Plan (JVHL)	JEJVH	837	_	✓		√	_	✓	′ ∨								Provider must be an approved JVHL lab
Beaver Medical Group	45967	835	✓	_		√	√		_								
Beaver Medical Group	45967	837		✓		_			_		_						
Behavioral Health Systems	63100	837	✓	_	_	_	_	_			_						
Bella Vista Medical Group	MPM10	837	✓	_	_	_		✓	′ _ ∨	4	_	_					
Ben-e-lect (ERA Only)	EDHP1	835		√	_	√	√	_	_	_		4	4				ERA Only
BeneBay	23243	837	✓	√	_	_	_		′ ∨	_	_	_					
BeneCare Dental Plan	23210	837	1	_	√	_	_	_	+	√	_	_	_	_			
Benefit & Risk Management Services	99320	835		√	,	✓	√ _	_	_	_	_	_	_				
Benefit & Risk Management Services	99320	837	_	√	√	_		_	+	-	-	+					
Benefit Administration Services	41205	835	√	_	_	√	√	_		,	+						
Benefit Administration Services	41205	837		√ /	_	_	_		′ ∨		-	-		_			
Benefit Coordinators Corporation (Pittsburgh PA)	25145	837	_	√ /	_	_	_	_	+	+	_	+	_	_	_		
Benefit Health Plan Benefit Management Admin (BMA)	52682 BMATP	837 835	√	√	-	/	-	_	+	+	+	+	-	+			
	BMATP		√ √	-	-	<u> </u>	_	+	+	+	_	+-	_	_	_		
Benefit Management Admin (BMA) Benefit Management Group-NV		837	-	-	-	-	_	_		+	+	+	-	_			
	36459	837	√	/	-	/	/		+	+	+						
Benefit Management Inc. of KS Benefit Management Inc. of KS	48611 48611	835 837	√ √	√ ./	\dashv	√	٧	+	+	-							
	88092	837	√ √	_	-	-	+	+	/ _	/	+	+		+			
Benefit Management LLC/VBA	37212	837	_	√ √	\dashv	-	-		Ť		+	+	-	-			
Benefit Management Systems Inc Benefit Plan Administrators	88052	837	✓ ✓		\dashv	\dashv	-	+	+	+							
Benefit Plan Administrators Benefit Plan Administrators Co. (Eau Claire WI)	39081	835		√ √	\dashv	√	./	+	+	+	+	+	+				
Benefit Plan Administrators Co. (Eau Claire WI)	39081	837	√ √		\dashv	Ť	v	+	+	+	+	1	+	+			
Benefit Plan Administrators Co. (Eau Claire WI)/UCS	46891	835	√ √		_	√	7	_	+	+	+	+	_	+			
Benefit Plan Administrators Co. (Eau Claire WI)/UCS	46891	837	√ √		\dashv	Ť	v		/ _	/							
Benefit Plan Administrators Inc.	37118	837	√ √		-	-	-	·	Ť		+	+-	+	+-			
Benefit Solutions, Inc.	60338	837		√ √				.,	, ,	/							Claims previously submitted to payer code 88057. Effective June 30th, 2023, please submit all claims to 60338.
Benefit Support, Inc.	40459	837	√ √		√	\dashv	-	Ť	Ť	+		+					Giulina to 00000.
Benefit Systems & Services Inc.	36342	835	√ √	_	_	√	./	+	+	+		1		+			
Benefit Systems & Services Inc.	36342 36342	835	✓ ✓		-	·	V	+	+	+		+					
Benesight	87265	837	√ √	_	\dashv				/ _	/							
Benesys	37248	837	_	√ √	\dashv		-	Ť	Ť			1					
Benesys Inc.	37248	835		√ √	\dashv	√	√	+	+								
Benesys Inc.	37248	837	√ √		\dashv	Ť	-		+			1					
BeneSys, Inc.	38238	835	√ ✓		\dashv	√	/	+	+	+							
senes ₁ s, me.	30230	033	٧	v		v	v										

			A۱	vailab	ole	Enro	ollme	nt	СО	В		Attach	ments	Sul	bmitte	er Id	
Payer Name	Payer Code	Transaction	_	Р	_			D I		_	_	I P	_	T	_	_	Notes
BeneSys, Inc.	38238	837	✓	√					T		T						
BeniComp	18151	837	✓	✓													
Benveo - MultiPlan	76253	837	✓	✓													aka One Share Health
Berkshire Intergroup	10956	837	_	✓				~	′ √								
Berkshire Lehigh Partners	95606	837	_	√				_			4						
Best Life & Health Insurance Co.	95604	837	√	_	✓	_	_	~	′ √		+						
Better Health Plan of Florida	20488	835	√ /	_		_	_	_	4	_	╁	_					
Better Health Plan of Florida BEVERLY ALIANZA IPA	20488 NMM06	837 837	√	√ √		-	-	-	+	+	┿	-	-				
Beverly Hospital BEVAHISP	MPM42	837	./	√		_	_	_	/ /	_	+						
Bienvivir Senior Health Plan	BSHS1	837	Ť	√		_	_	Ť	Ť	_	+	-	_	+			
Black Hawk	CB987	837	√	√		_		_	+	+	t						
Block Vision, Inc.	BV001	837		√				_	√	_	т			1			
Blue Benefit Administrators of MA	03036	835	✓	✓		✓	✓				T						
Blue Benefit Administrators of MA	03036	837	✓	✓							T						
Blue Care Network (BCN Commercial Labs) (JVHL)	JJJVH	835	✓	✓		✓	√										
Blue Care Network (BCN Commercial Labs) (JVHL)	JJJVH	837	\checkmark	\checkmark		\checkmark	\checkmark	٧	′ √	′							Provider must be an approved JVHL lab
Blue Care Network (BCN Reimbursable Labs) (JVHL)	JQJVH	835	✓	_	_	_	✓				L						
Blue Care Network (BCN Reimbursable Labs) (JVHL)	JQJVH	837	✓	_	_	_	√	V	′ √	1	┸	\bot		_	_		Provider must be an approved JVHL lab
Blue Care Network (JVHL Network)	J9JVH	835	√	_	_	_	√ /		Α.		+	4	4				Day idea work has an array and DAIII lab
Blue Care Network (JVHL Network)	J9JVH	837	\checkmark	_		√	√	V	′ √		+	-		-			Provider must be an approved JVHL lab
Blue Care Network Advantage of Michigan	00210	837	✓	_					-	_	╀						
Blue Care Network Advantage of Michigan Blue Care Network of Michigan	00710 00210	837 837	./	√	H	\dashv			+	+	+	+	+	-			
Blue Care Network of Michigan	00210	837	· ·	√		-	-	-	+	+	╫						
Blue Cross Blue Shield of Alabama	12B54	835	1	Ť		√			+		+						
Blue Cross Blue Shield of Alabama	12B54	837	<i>\</i>			Ť	_	_	_	+	╈	_		+			
Blue Cross Blue Shield of Alabama	SB510	835	Ė	√		_	√	Ť	+	+	t						
Blue Cross Blue Shield of Alabama	SB510	837		✓		_	_	\neg	√	_	т		_	1			
Blue Cross Blue Shield of Arizona	53589	835	√	√	√	✓	√	√			T						
Blue Cross Blue Shield of Arizona	53589	837	✓	✓	✓			_	′ √	′ √	T						
Blue Cross Blue Shield of Arizona Advantage	77078	835	✓	✓													
Blue Cross Blue Shield of Arkansas	00520	835	\checkmark	✓		\checkmark	✓										
Blue Cross Blue Shield of Arkansas	12021	837	✓					V			`	✓					
Blue Cross Blue Shield of Arkansas	SB520	837		✓				_	√	1	_						
Blue Cross Blue Shield of Delaware	12B76	835	√		-	√	_	_		_	+	_	_	_			
Blue Cross Blue Shield of Delaware	12B76	837	√			√	_	V		_	+						
Blue Cross Blue Shield of Delaware Blue Cross Blue Shield of Delaware	SB570 SB570	835 837		√ √		-	√ √	-	_	,	┿	-	-	+			
Blue Cross Blue Shield of District of Columbia (Carefirst)	12000	835	./	Ľ		√	Ť	-	Ť	+	+						
Blue Cross Blue Shield of District of Columbia (Carefirst)	12000	837	<i>\</i>			Ť	_	_	+	+	╈	_		+			
Blue Cross Blue Shield of District of Columbia (Carefirst)	SB580	835	✓	_		✓	✓		+	1	t						
Blue Cross Blue Shield of District of Columbia (Carefirst)	SB580	837	✓	✓					1	_	T			1			
Blue Cross Blue Shield of Florida (Florida Blue)	00590	835	✓	✓		✓	√				T						
Blue Cross Blue Shield of Florida (Florida Blue)	00590	837	✓	✓				~	′ √		Т						
Blue Cross Blue Shield of Hawaii (HMSA)	12B62	837	✓														
Blue Cross Blue Shield of Hawaii (HMSA)	HMSA1	835	✓	✓		\checkmark	✓										
Blue Cross Blue Shield of Hawaii (HMSA)	SB971	837	_	√			_		- √	_	4						
Blue Cross Blue Shield of Illinois	00621	835	√	✓	√ ,	✓	✓	√	_	_	+	_		_	_		
Blue Cross Blue Shield of Illinois	00621	837	,		✓	-	-	_	_	+	+						504.0 0 1 00004
Blue Cross Blue Shield of Illinois Blue Cross Blue Shield of Illinois	12B08 SB621	837 837	_	/		_		~		_	+						ERA Payer Code 00621
Blue Cross Blue Shield of Iowa (Wellmark)	88848	837	/	√ √	-	-	-	_			+	-	_	+	-		ERA Payer Code 00621
Blue Cross Blue Shield of Kansas	47163	835				/	1	Ť		1	+						
Blue Cross Blue Shield of Kansas	47163	837	√					_		_	1	/ /	/				
Blue Cross Blue Shield of Kansas	CBKS1	835	Ħ	H	√			√	Ť		Ť	Ť					
Blue Cross Blue Shield of Kansas	CBKS1	837			√		7		1	√	十						
Blue Cross Blue Shield of Kansas City	47171	835	✓	✓	_	√	✓				┇						
Blue Cross Blue Shield of Kansas City	47171	837	✓	✓				V	′ √	1							
Blue Cross Blue Shield of Louisiana	53120	835	✓	✓		\checkmark	√		\mathbf{I}		Ι						
Blue Cross Blue Shield of Louisiana	53120	837	_	✓		√	√	V	′ √		I						
Blue Cross Blue Shield of Maryland (Carefirst)	12011	837	√			J			Į	Ţ	Ţ			$oxed{\Box}$			
Blue Cross Blue Shield of Maryland (Carefirst)	SB690	835	✓	_	Ш	✓	√		L		L						
Blue Cross Blue Shield of Maryland (Carefirst)	SB690	837	Ļ	✓	ш	_			\bot	_	1	\bot	_				
Blue Cross Blue Shield of Massachusetts	12B14	835	√,		Ш	✓	_	_		_	+	+	_	\perp	\vdash	Ш	
Blue Cross Blue Shield of Massachusetts	12B14	837	√	Н		4		/	+	-	+	-	-				
Blue Cross Blue Shield of Massachusetts Blue Cross Blue Shield of Massachusetts	CBMA1	835	\vdash	Н	√ /	_	\dashv	√	+	-	+	+	+	+	\vdash	Н	
DIGE CLOSS DIGE SHIELD OF INIASSACTION SELES	CBMA1	837			✓					√							

Payer Name	Payer Code	Transaction			le I				COE			tachme P			_	_	Notes
Blue Cross Blue Shield of Massachusetts	SB700	835		√		T	√					П					
Blue Cross Blue Shield of Massachusetts	SB700	837		✓		T			✓								
Blue Cross Blue Shield of Michigan	00210	835	✓		,	/											
Blue Cross Blue Shield of Michigan	00210	837	✓			4											
Blue Cross Blue Shield of Michigan	00710	835		√ _	_	4	✓	_	_	_							
Blue Cross Blue Shield of Michigan	00710	837		√ /		/	/						-				Dayor Doguiros Cony of FOD for Missing FDAs
Blue Cross Blue Shield of Minnesota Blue Cross Blue Shield of Minnesota	00720 00720	835 837	V	√ √	+	4	V	√	V	1							Payer Requires Copy of EOB for Missing ERAs
Blue Cross Blue Shield of Mississippi	12B17	835	√ √	· ·	-	/	-		Ť	1					-		
Blue Cross Blue Shield of Mississippi	12B17	837	Ţ		_	/	_	√						√			
Blue Cross Blue Shield of Mississippi	CBMS1	837			√	T		√ ·	1	✓							
Blue Cross Blue Shield of Mississippi	SB730	835		√		T	√										
Blue Cross Blue Shield of Mississippi	SB730	837		√		T	√		✓						✓		
Blue Cross Blue Shield of Montana	00751	835	✓	√	,	/	√										
Blue Cross Blue Shield of Montana	00751	837	\checkmark	√	√			√	✓								
Blue Cross Blue Shield of Nebraska	00760	835	✓	✓	`	/	√										
Blue Cross Blue Shield of Nebraska	00760	837	✓	✓		4	_	√	✓	_							
Blue Cross Blue Shield of Nebraska	CBNE1	835			√ /	4	_	√		ļ.,		igspace	ш				
Blue Cross Blue Shield of Nebraska	CBNE1	837		,	√		_	+	_	√		\vdash	ш	_			
Blue Cross Blue Shield of New Mexico	00790	835	√ /	-		/	√	-	,			+	\vdash				
Blue Cross Blue Shield of New Mexico Blue Cross Blue Shield of North Carolina	00790 12B23	837 835	√	√	+	/	+	- √	_				\vdash				
Blue Cross Blue Shield of North Carolina	12B23 12B23	837	∨		-	-	-	√					-				
Blue Cross Blue Shield of North Carolina Blue Cross Blue Shield of North Carolina	61473	837	Ť		1	+	-	Ť									
Blue Cross Blue Shield of North Carolina	SB810	835		√	Ť	+	<u>√</u>	_	_	_			\vdash				
Blue Cross Blue Shield of North Carolina	SB810	837		√		+	Ť		√								
Blue Cross Blue Shield of North Dakota	12B78	837	√	√	\neg	+	_	√	_	т	Т	T	-	_			
Blue Cross Blue Shield of North Dakota	55891	835	√	√	,	/	√										
Blue Cross Blue Shield of Oklahoma	00840	835	✓	√	,	/	√		1			1					As of 4.11.2025 Electronic Remittance Advance is not offered at this time.
Blue Cross Blue Shield of Oklahoma	00840	837	✓	✓	√	T		√	✓	✓							
Blue Cross Blue Shield of Oklahoma	SB840	837		✓													
Blue Cross Blue Shield of Rhode Island	12B74	835	\checkmark		,	/											
Blue Cross Blue Shield of Rhode Island	12B74	837	✓			_		√									
Blue Cross Blue Shield of Rhode Island	SB870	835		√		4	√	_	١.								
Blue Cross Blue Shield of Rhode Island	SB870	837	Ļ	√	_	,	_	_	√	_							
Blue Cross Blue Shield of South Carolina	12B55	835	√ /		`	4	-		-	-		1			_		
Blue Cross Blue Shield of South Carolina Blue Cross Blue Shield of South Carolina	12B55 SB880	837 835	√	-/	_	+	√	√	-								
Blue Cross Blue Shield of South Carolina	SB880	837		√ √	-	+	<u> </u>	+	-				-		-		
Blue Cross Blue Shield of South Caronna Blue Cross Blue Shield of South Dakota (Wellmark)	88848	835	√	√ ✓	-	/	./	+	Ť								
Blue Cross Blue Shield of South Dakota (Wellmark)	88848	837	Ţ	√		+	Ť	√	1	1		+					
Blue Cross Blue Shield Of Tennessee	00390	835	√	_		/	√	Ť	t								
Blue Cross Blue Shield Of Tennessee	00390	837	✓	✓	,	/	√	√	✓			1 1					
Blue Cross Blue Shield of Texas	84980	835	✓	√	√ 、	/	√ ·	√									
Blue Cross Blue Shield of Texas	84980	837	✓	√	√			√	✓	✓							
Blue Cross Blue Shield of Texas - Medicaid STAR Kids	66001	835	✓	✓	`	/	√										
Blue Cross Blue Shield of Texas - Medicaid STAR Kids	66001	837	✓	✓				√	_		✓	✓					
Blue Cross Blue Shield of Texas - Medicaid STAR/CHIP	66001	837	✓	✓		_		√	✓		✓	✓					
Blue Cross Blue Shield of Vermont	BCBSVT	835	√	√ ,	`	4	√ _	_	_	₩	_						
Blue Cross Blue Shield of Vermont	BCSVT	837	√	√	_	,	_	_	-	-	-						
Blue Cross Blue Shield of Wyoming	53767 53767	835 837	√ /	√ /		4	√		V								Institution of the state of the
Blue Cross Blue Shield of Wyoming Blue Cross Community Health Plans	66005	837	√ √	√ √	-	+	-	- √	· ·	1			-				Inst: Former payer code 12B30; Prof: Former payer code SB960;
Blue Cross Community Health Plans	MCDIL	835		√ ✓	-	/	√	_	-								Equivalent to payer code 66005
Blue Cross Community Health Plans	MCDIL	837	√ √	√ √	+	+	*	√	-								Equivalent to payer code 66005
Blue Cross Complete (JVHL)	KPJVH	835	<i>\</i>	√ 	-	/	√	Ť	Ť				\vdash				q peper
Blue Cross Complete (JVHL)	KPJVH	837	_	-	_	7	_	√	√								Provider must be an approved JVHL lab
Blue Cross Medicare Advantage (IL, MT, NM, OK, TX)	66006	835	_	√		/		T									••
Blue Cross Medicare Advantage (IL, MT, NM, OK, TX)	66006	837		✓		I											
Blue Cross of California - Anthem	47198	835	✓	√	√ 、	/	√	√									
Blue Cross of California - Anthem	47198	837	✓	✓	√			√	✓		✓	✓	√				
Blue Cross Personal Choice	54704	835	_	√	,	/	√										
Blue Cross Personal Choice	54704	837	√	_		\perp	_	√	✓	_			Ш				
Blue Medicare Advantage	00772	835	√ ,	√	`	/	√	+	!			\square	ш				
Blue Medicare Advantage	00772	837	√	√ 	_	/	/	√	✓	_		\bot	Ш				
Blue Ridge Independence At Home Pace	R3464	835		√ /	-	/	√	+	-	1		\vdash	\vdash				
Blue Ridge Independence At Home Pace	R3464	837	\checkmark	\checkmark					1	1	1	1					

Payer Name	Payer Code	Transaction			ble				COE			tachme				Notes
April 1995			4	Р	D		Р	D I	Р	D		Р	D		Р	
Blue Shield of California	BSCA1	837			√											As of As of November 09, 2023, Electronic Remits Advice (ERA) is not available for this payer at this time.
Blue Shield Of California (Claims and Encounters)	BS001	835		✓			✓									
Blue Shield Of California (Claims and Encounters)	BS001	837		✓					√							
Blue Shield Of California (Claims and Encounters)	BSCAI	835	✓		Ш	✓										
Blue Shield Of California (Claims and Encounters)	BSCAI	837	√	_		_	_	✓	-					_		
Blue Shield of California Promise Health Plan	C1SCA	835	√	√ /	ш	√	√	_	-					-	_	Formerly Care1st HP of California
Blue Shield of California Promise Health Plan BlueChoice Health Plan of South Carolina (Medicaid)	C1SCA 00403	837 835	√	√ √		√	√	_	+	+-	-	+	-	-	-	
BlueChoice Health Plan of South Carolina (Medicaid)	00403	837	√ ✓			Ť	Ť	_	√					-	_	For claims with DOS on or after 1/1/2024.
BlueChoice Health Plan of South Carolina (Medicaid)	EH403	835	<i>√</i>	√	\blacksquare	√	1	Ť	Ť	1	_	$\boldsymbol{\vdash}$		_	_	10. dams man 200 on or dreat 2/2/202 n
BlueChoice Health Plan of South Carolina (Medicaid)	EH403	837	✓	_				√	✓		√	√				For claims with date of service before 1/1/2024.
BlueChoice HealthPlan	00922	835	✓	_		✓	✓		1					一		
BlueChoice HealthPlan	00922	837	✓	✓				√	√							
BlueCross BlueShield of Western New York Medicaid/CHP	00246	835	✓	_		✓	✓									
BlueCross BlueShield of Western New York Medicaid/CHP	00246	837	✓	·	Ш			✓	√		✓	✓				
Boilermakers National Health & Welfare	36609	837	✓	_	ш	4	_	_	4	1			ш	_	_	
BOLDAGE PACE IN EVANSUILE	65436	837	√ /	_		4	_	_	-	-			\vdash	-	_	
BOLDAGE PACE IN EVANSVILLE BOLDAGE PACE IN EVANSVILLE	65433 BOLD1	837 835	√ √	_	'	\dashv	\dashv		√	√				\dashv	\dashv	
BOLDAGE PACE IN EVANSVILLE BOLDAGE PACE KY OWENSBORO	65435	835	√ √	_	\vdash	+	-	+					\vdash	\dashv	\dashv	
BOLDAGE PACE SC CHARLESTON	65434	837	✓	_	√	┪		_	√	√	H		\vdash	\dashv		
BOLDAGE PACE SC CHARLESTON	BOLD1	835	√	_		7	_	Ť	Ė	Ė				_	_	
Boon Administrative Services	BOONG	835	✓	√	П	√	✓	\top			T			一		
Boon Administrative Services	BOONG	837	✓			╛		ᆂ								
Boon-Chapman Benefit Administrators Inc.	74238	835	✓	✓		✓	\checkmark									
Boon-Chapman Benefit Administrators Inc.	74238	837	✓	✓												
Boston Medical Center HealthNet Plan	13337	835	✓	✓		✓	√									
Boston Medical Center HealthNet Plan	13337	837	√	_			_	✓	√					_		
Boulder Administration Services	18768	835	√	√		√	✓	_	-					-		
Boulder Administration Services BPS First Health	18768 67707	837 837	√ /	_	Н	_	\dashv		√	\vdash	_	\vdash		\dashv	_	
Brain and Spine Network	BSN01	835	·/	✓ ✓		√	./	-	+-	1	1			-	-	
Brain and Spine Network	BSN01	837	<i>√</i>	_		Ť	Ť								_	
Brand New Day (Encounters)	UC002	837	<i>√</i>	_		7	_	_	_					\neg	_	For Encounter Submissions Only
Brand New Day (FFS)	UC001	837	√	√												,
Braven Health	84367	835	✓	✓		✓	✓									
Braven Health	84367	837	✓	✓				✓	√							
Bravo Health	52192	837	✓	✓	Ш											
Bravo Health Star Plus	52192	837	√	_		_			-					_		
Breckpoint	BRKPNT	837	√	_	✓	,	_	_						_	_	
BridgeSpan	BRIDG BRIDG	835 837	√ √	_		√	√		-				-			
BridgeSpan Bridgeway Arizona	68069	837	✓ ✓	_			_		_	-	√	√		-		
Bright Healthcare	BRGHT	835	./	./		/	/									Effective 1/1/22, Bright Health Medicare Advantage and Commercial plans have merged into one payer code, 'BRGHT'. In order to receive remittance files for all MCR Advantage and Commercial plans, ERA/EFT enrollment must be completed via both Instamed and through V- Pay (SDS).
BritCay	22286	837	√	√	\vdash	Ť	Ť									1 4) (353).
Brodart	35182	837	√	_	П	7		\neg	√					_	_	
Brokerage Concepts	51037	835	✓	✓		✓	✓									
Brokerage Concepts	51037	837	✓	✓												
Brookshire IPA	BIPAZ	837	√		Ш			√					Ш	[
Brookshire IPA	CAPMN	837		√	ш	_	_		<u> </u>	_			ш	_	_	
Broward Health	37314	837	√ /	_	H			✓	√	-			Н	\dashv	_	
Brown & Toland Medical Group Brown & Toland Medical Group	94316 94316	835 837	√	√ √	H	✓	V	+	+	\vdash			Н	\dashv	\dashv	
Brown and Toland Health Services	94316 BTHS1	837		√ √	\vdash	+	\dashv	+						\dashv	\dashv	
Brown and Toland Sutter Select	BTSS1	837	Ť	√	\vdash	+	\dashv	+			H		\vdash	\dashv	\dashv	
BSI Companies	25916	837	√	√	√	7	_	\neg						\dashv	_	
Buckeye Community Health	68069	837	√	_	口	1		√	√		√	✓				
Buckeye Ohio Medicaid	42020	837	✓	_		J		ᆂ								
Buckeye Ohio Medicaid	SKOH0	835	✓	_			✓									Effective 2/1/2023, remittance returned under Ohio Medicaid
Buckeye Ohio Medicaid Transportation	SKOH0	835	✓	_	Ш	√	✓		┰		匚					Effective 2/1/2023, remittance returned under Ohio Medicaid
Buckeye Ohio Medicaid Vision	4202V	837	✓	_	Ш		_						Ш	_		
Buckeye Ohio Medicaid Vision	SKOH0	835		√ /	Н	√	√	+	_				Ш	-	_	Effective 2/1/2023, remittance returned under Ohio Medicaid
Buenaventura Affiliated Physicians Inc. Business Administrators & Consultants	BVAP1 49984	837	√ /	_	1	-	-		√	1			\vdash	\dashv	-	
Dubiness Auministrators & Consultants	49984	837	\checkmark	✓	V					1	1					

				!!	-	Formal			COL					Culto		. 1.1	
Payer Name	Payer Code	Transaction	A	vailab P	_	_	Ilmen P [D I	COE	B D	_	_	ents D	Subi	_	r Id D	Notes
Butler Benefit	42150	837	√					√	√								
Bywater	12090	837		√		_		T	Ť	т							
C&O Employees Hospital Association	23708	835		✓		,	√										
C&O Employees Hospital Association	23708	837		✓													
Cal Care IPA	PROSP	837	_	_		_		√	_	_							
Cal Care IPA Encounters	PPM02	837	_	√	_	_	_	√			Ι,	—		_			Encounters
Cal Viva Health	95567	837	√		_	-	4	√			√						
California Health and Wellness	68047 68069	837 835	√ /	√ √	_	/	/	√	✓	+	√	✓		_	_		
California Health and Wellness California IPA (Capital MSO)	CTPL1	837	√ √	_	-	√ ·	<u>√</u>	_	+-	┿	+	+			-		
California Kids Care (CKC)	CKC01	835	√	_		√ ,	./		+	+							
California Kids Care (CKC)	CKC01	837		<i>\</i>	_	Ť	Ť	_	+	+	1	+			_		
California Medicaid - Medi-Cal	57016	837	_	✓		+				1							
California Medicaid (Medi-Cal)	CAMC1	835	√			√	_	_	1	1	1	1		_			
California Medicaid (Medi-Cal)	CAMC1	837	✓			√					✓						
California Medicaid (Medi-Cal)	SKCA0	835		✓		,	√										
California Medicaid (Medi-Cal)	SKCA0	837		\checkmark		,	√		√			✓					
California Medicare	12M64	835	✓			√											
California Medicare	12M64	837	✓			√	للب	√									
California Medicare - Northern Region	SMCA1	835	Ш	√	_	_	√	_	Ļ	\vdash	_	1	Щ				
California Medicare - Northern Region	SMCA1	837		√		_	√ /	_	√	_			Ш	_			
California Medicare - Southern Region	SMCA2	835		√ /		_	√ /	\perp		-	1			_			
California Medicare - Southern Region	SMCA2	837	/	√ /	-	+	√	-	√				\vdash	\dashv			
California Pacific Medical Center CalOptima Direct	94056 CALOP	837 835	√ √	_		√ ,	./			\vdash	1			-			
CalOptima Direct	CALOP	837	√ √	_	-	<u> </u>	<u> </u>	+	+	+	+						
Calvo's SelectCare	CALSC	835	√	_		\dashv	+										
Calvo's SelectCare	CALSC	837		✓	√	o	_		√	V	1	+		_	_		
Camp Lejeune Family Member Program	CLFM1	837	✓	_				√	_								
Cannon Cochran Management Services Inc. Metairie LA	71057	837		✓		\neg						1					
CAP Management Systems	15821	835	✓	✓		√ 、	√										ERA Payer Code 15821
CAP Management Systems	95399	837	✓	✓				✓	√								
Capital Blue Cross Dental	CBC01	837			✓					✓							
Capital Blue Cross of Pennsylvania	23045	835	✓	_		_	√										
Capital Blue Cross of Pennsylvania	23045	837	✓			√ 、	√	√	√								
Capital District Physicians Health Plan	12X03	837	√		_	_	_		4	_		4					
Capital District Physicians Health Plan	SX065	835	✓	_	_	√ ,	√ _	_	-	_	_				_		
Capital District Physicians Health Plan Capital Health Plan	SX065 95112	837 835	√	√ √	_	✓ 、	/		+	-							
Capital Health Plan	95112	837	√ √	_	-	<u> </u>	<u> </u>	_	+-	┿	1	+			-		
Capitol Administrators	68011	835		✓		√ ,	√		+	+							
Capitol Administrators	68011	837	_	√	_	Ť	Ť	_	+	1	1	+			_		
Caprock Health Plans	CAPHP	835	_	√		✓ 、	√										
Caprock Health Plans	CAPHP	837	√			十	_	_	1	т	1	1		_			
Cardinal Innovations	13010	837	√	_		√ ,	√	√	√			İ					
Cardon Outreach	99999-0911	837	✓	✓		√ ,	√										
Care 1ST Health Plan of CA	57115	837	✓	\checkmark													
Care Access Health Plan (CAHP)	12K89	837	✓	_													
Care Access Health Plan (CAHP)	65062	835	✓	_		√ 、	√		Ļ								
Care Access Health Plan (CAHP)	65062	837	Ш	√	_			_	_	_	_	_	Ш				
Care Access PSN	65063	837		√		_			,	_		_	\blacksquare	_			
Care Around the Clock (CAREATC)	57721	837	_	_		_	_	√	√	\vdash	-			_			EDA Davar Cada 97736
Care Improvement Plus	77082	835	-	√ /	-	+	-	+		-			\vdash	\dashv			ERA Payer Code 87726.
Care Improvement Plus Care Improvement Plus (For DOS on or after 1/1/16.)	77082 87726	837 837	√ √			-	-	_	√	1	√	√		-			
Care N' Care	66010	835	_	✓ ✓	-	√ ,	√	-	·		Ť	· ·	\vdash	-			
Care N' Care	66010	837	√	_		` `	+		+		\vdash			\dashv			
Care To Care	41222	837		√		-			1		1		\vdash	_			
Care1st Health Plan Arizona - Medicaid (DOS > 12/2/22)	68069	837	√			1	1	√	✓		✓	√		一			
Care1st Health Plan Arizona - Medicare	14163	837		√		\neg			√			✓	\Box	_			
Care1st Health Plan of Arizona - Medicaid (DOS < 11/30/22)	57116	835		✓		√ ,	√										
Care1st Health Plan of Arizona - Medicaid (DOS < 11/30/22)	57116	837		✓										二			
Care4Kids (WI Medicaid)	39113	837		✓				√	√								
CAREAssist	PAIOR02	835	✓	✓													
CAREAssist	PAIOR02	837		✓													
CareCentrix	11345	835	✓	_		√ 、	√		\perp				Ш				
CareCentrix	11345 14182	837 837		✓					-		1			_			
CareCore National				✓							•						

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Payer Name	Payer Code	Transaction			D I		РΕ	_	P		_			D I	Р	D	Notes
CareCore National LLC (Aetna Radiology Claims)	14179	837	✓	\checkmark		T											
CareCore National LLC (Oxford Radiology Claims)	14180	837	_	√	\Box	工	工										
CareCore/WCNY RAD	14188	837		√	4	4	4	_	4	_							
CareFirst Administrators/NCAS (Charlotte, NC)	75191	835	_	_		√ \	√ _	_		_	_		_		_		
CareFirst Administrators/NCAS (Charlotte, NC) CareFirst Administrators/NCAS (Fairfax, VA)	75191 75190	837 835	_	√ √	+	/ ,	√	+	┿	+	+	-	+	+	+	+	
CareFirst Administrators/NCAS (Fairfax, VA)	75190	837	√ ✓		Ť	+		+	+	+	+				+		
CareFlorida	65088	837	_	√ √	十	+	十	_	/ /	/	+	_	+	_	+	+	
Careington Benefit Solutions	60601	837	H	H	√	+	+	Ť	Ť	√	/	1			+		
Carelon Aetna Home Health	34010	835	✓	√		/ v	√	_	1	1	1		_		1	1	
Carelon Aetna Home Health	34010	837	✓	✓		T		√	′ √	/							
Carelon Anthem Home Health	34009	835	✓	√	v	√ v	√	T									
Carelon Anthem Home Health	34009	837	✓	✓													
Carelon Behavioral Health	BHOVO	835		√		√	√	┸									Previously known as Beacon Health Options / Value Options
Carelon Behavioral Health	BHOVO	837	_	√	_	4	4	✓	′ √	_					_		Previously known as Beacon Health Options / Value Options
Caremore (ERA Only)	CM001	835	_	√		√ \	<u>√</u>	_		_	4	_	4	_	4	4_	ERA Only
Caremore Health Plan	CARMO	837	√ /		4	4	4		_	_	-	-	+	+		-	
CareOregon Behavioral Health CareOregon Inc.	VMMH1 93975	837 835	_	√ √	_	+	√	+	′ √	+	+	-	+	+	+		
CareOregon Inc.	93975	835	_	√ √		+	*	+	+	+		+	+	+	+		
CarePartners of Connecticut	16307	835	√ ✓		`	/ v	√						+	+			
CarePartners of Connecticut	16307	837	_	√	Ť	+	十	_	Т	+		+	+	+	+		
CarePlus Health Plans, Inc.	95092	835	√	_	 ,	/ v	√		T		\top		1	\dashv			
CarePlus Health Plans, Inc.	95092	837		<i>\</i>	一一	干	十	_	/ /	/	T		1	_	1		
CareSource Arkansas	ARCS1	835	_	√		√ v	√										
CareSource Arkansas	ARCS1	837	✓	✓				_	′ ✓	/							
Caresource GA	GACS1	835	✓	√	v	√ v	√										
Caresource GA	GACS1	837		√	工	工	I	~	\ \	/							
CareSource Indiana	INCS1	835	_	√	V	√ v	√										
CareSource Indiana	INCS1	837	_	√		_	_	✓	′ ✓	4					_		
Caresource Kentucky	KYCS1	835		√		√	✓	_		_	_				_		
Caresource Kentucky	KYCS1	837	√ /	_	+	+	_		′ √	4	4	_	4	_	4	4	
CareSource NC CareSource NC	NCCS1 NCCS1	835 837	√ √	√ √	—	√ ∨	√		/ /	/	+		+	-	+	+	
CareSource of Michigan Medicaid	MIMCDCS1	835	√ √	_	+	/ v	/	Ť	Ť	+	+		-	_	+	+	
CareSource of Michigan Medicaid	MIMCDCS1	837	_	<i>√</i>	一	+	╁	+	+	+	+	_	+	_	+	+	Effective for dates of service starting on October 1, 2023, and forward.
CareSource OH	31114	835	_	√	$\overline{}$	/ v	√		1								
CareSource OH	31114	837		√	$\neg \neg$	т	\neg	_	′ √	/	1		_	_	1	1	As of 2/1/23, all Medicaid claims should be submitted to payer code 31500.
CareSource Ohio Medicaid	31500	837	✓	✓		T		1									
CareSource Ohio Medicaid	SKOH0	835	✓	√	v	√ \	√										Effective 2/1/2023, remittance returned under Ohio Medicaid
CareSource Ohio Medicaid Vision	3150V	837	✓	√		$oldsymbol{\perp}$											
CareSource Ohio Medicaid Vision	SKOH0	835	√			√ v	✓	_		_			_		_		Effective 2/1/2023, remittance returned under Ohio Medicaid
CareSource West Virginia	WVCS1	835	_	✓	V	√ ∨	√	_							_		
CareSource West Virginia	WVCS1	837	_	√	_	+	_		′ √	4	_		_	_	+	4	
Cariten Senior Health	61101	835 837		√	<u> </u>	√	<u> </u>	-	_	/	_						EDA Douar Codo C1101
Cariten Senior Health Carolina Behavioral Health Alliance	62072 56215	837		√ √	\rightarrow	+	+	-	_	+	+		+	-	+	+	ERA Payer Code 61101
Carolina Benefit Administrators	00498	837	√ √		+	+	+	+	+	+	+	-	+	-	+	+	
Carolina Care Plan	29076	837	√ √	_	十	十	+		/ /	/	١,	/ 、	/		+		
Carolina Complete Health	68069	837	_	<i>\</i>	十	十	十	<i>\</i>	_	_	_	/ \	_	1	1		
Carolina SeniorCare	71499	837	✓	-		1	_			1	1	1			1		
Carpenters Health and Welfare Fund of Philadelphia	CX101	837		✓	丁	┰	工		Ι	I	I	ፗ			I		
Cascade Health Alliance, LLC	CHA01	835	✓	✓					I								
Cascade Health Alliance, LLC	CHA01	837	✓		✓	工	$oldsymbol{oldsymbol{\perp}}$										
Catholic Health LIFE	R3486	835	_	√	_	√ ∨	√		I		Į						
Catholic Health LIFE	R3486	837			√	_		_	\perp	_	_	_	_	\bot	_	_	
Catholic Life Insurance	87020	837		√	4	4	4	√	_		-		_	\perp	-		
Catholic United Financial	87020	837 837		√	+	+	+		′	_	+	+	+	+	+	_	
CBA Blue CBHNP - HealthChoices	03036 65391	837		√ √	+	/ ,	/	-	+	-	+	-	+	+	-	-	
CBHNP - HealthChoices	65391	837		✓ ✓	+	+	+	+	+	+	+	+	+	+	+		
CCA Health California FFS Claims	TU127	837		√ √	+	+	+	+	+	+	+	+	+	+	+		
CCA-Reliance	MKJVH	835		√ √	+	/ ,	√		+		+		+	+			
CCA-Reliance	MKJVH	837	_	<i>\</i>		_	√	_	/ /	/	1		_	\top	1	1	Provider has been approved per JVHL lab
Cedar Valley Community HealthCare (CVCH)	42558	835		√			√	T	Ť		T		1	1			ii i
Cedar Valley Community HealthCare (CVCH)	42558	837	_	√	⇉	▔	⇉	_	′ √	/					1	1	
							_								_		
Cedars Sinai Medical Cedars Sinai Medical	95164 95164	835		√ √													

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Payer Name	Payer Code	Transaction	1		D		Р	-	1	_	D	-	Р	D	1		D	Notes
Cedars Towers Surgical Medical Group (Encounters Only)	HPIPA	837		\checkmark														
Cedars-Sinai Medical Network Services	95166	835	_			✓	✓	Ш	_									
Cedars-Sinai Medical Network Services	95166	837	√					ш	_									
Cedars-Sinai Medical Network Services Celtic Insurance	95167 68063	837	√ /		_		,		_							_		
Celtic Insurance	68063	835 837	√ √	√ √	_	✓	✓	H	√	√								
CeltiCare	68069	837	√	✓					√ √	√ √		./	√			-		
Cement Masons & Plasterers Health & Welfare Trust	91136	837	V						•	Ť		· ·	Ť			_		
Cencal Health	95386	835	✓			√	√											
Cencal Health	99111	837	✓					П	√	✓								
Cenpatico - Arizona (for DOS prior to 10/01/18)	68068	837	✓	√					√	✓								
Cenpatico - Florida	68068	837	✓	\					✓	✓								
Cenpatico - Georgia	68068	837	✓	√					\checkmark	✓								
Cenpatico - Illinois	68068	837	√					Ш	√	✓								
Cenpatico - Indiana	68068	837	√	√					_	√						_		
Cenpatico - Kansas	68068	837	√					Ш	√ /	√ /						_		
Cenpatico - Kentucky	68068 68068	837 837	√ √	√ √		\vdash		$\vdash \vdash$	√ √	√ √					-	\dashv		
Cenpatico - Massachuetts Cenpatico - Mississippi	68068	837	√ ✓	√ ✓				_	√ √	_					\dashv	\dashv		
Cenpatico - Missouri	68068	837	√ √	√ √				-	√ √	√ √					\dashv	\dashv		
Cenpatico - Ohio	68068	837	√ ✓	√				\vdash	_	√ ✓					\dashv	\dashv		
Cenpatico - South Carolina	68068	837	V					\vdash	_	√ √						_		
Cenpatico - Texas	68068	837	√					_	_	√						一		
Cenpatico - Wisconsin	68068	837	✓						√	√								
Cenpatico Behavioral Health	68068	835	✓	\		✓	✓											
Cenpatico Behavioral Health	68068	837	✓	\					\checkmark	✓								
																		Formerly NHI Billing Services. Claims enrollment not required; however, payer must be
Centauri Health Solutions	14043	837	✓						\checkmark									notified prior to sending claims to a new provider.
Centene Medical	68069	835	√	✓	_	✓	✓	Ш	_							_		
Centene Medical	68069	837	√						_	√		✓	✓			_		
Center for Elders Independence	94312	837	✓	√				Н	✓	√						_		
Center IPA CenterLight Healthcare	POP01 13360	837 835	√	√ √		√	√	\vdash	-	-						-		
CenterLight Healthcare	13360	837	√		_	_												
Centers Plan for Healthy Living	CPHL1	835	V	√		√	√	Н	-							_		
Centers Plan for Healthy Living	CPHL1	837	<i>√</i>			Ť	Ť		√	√								
Centinela Valley IPA	MPM03	837	√					_	√	√						_		
Centivo	45564	835	✓	✓		✓	✓											
Centivo	45564	837	✓	\														
CentraCare	66698	837	\checkmark	\														
Central & Southwest Services	75177	837	Щ	✓	_			ш		✓								
Central Alliance Physicians - Guidant	CAP01	837	√	✓												_		
Central California Alliance for Health (CCAH)	CCA01	835	√ /		_	√	√		,	,						_		
Central California Alliance for Health (CCAH)	CCA01 NMM10	837 835	√ /	√ √	_	√	√ /	Н	√	√						-		
Central California Physician Partners Astrana Central California Physician Partners Astrana	NMM10	837	√ √	√ ✓		✓	V	\vdash	√	√						_		
Central Health Medicare Plan	CHCPI	837	_						√ ✓	_						_		
Central Health MSO	CHCPI	837	<i>√</i>	√	П			_	√	√					\dashv	寸		
Central Mass Heath Care	02041	837	√					П	√							寸		
Central Reserve Life Ins Co-Medicare Supplement	13193	837	✓	√														
Central States Health & Welfare Funds	36215	835			√													
Central States Health & Welfare Funds	36215	837	✓	✓	_						✓							
Central States Health & Welfare Funds	36215	837	Ш		✓			Ш	Ţ		✓					Ţ		
Central States Indemnity (ERA Only)	IAS02	835	√			✓	✓	ш		Ļ						_		
Central Susquehanna Healthcare Providers (CSHP)	55731	837	√												\blacksquare	_		
Central Valley Medical Group Central Valley Medical Providers CVMEDPRO	CVH01 MPM59	837 837		√ √				$\vdash \vdash$	✓	√					\dashv	-		
Centurion	42140	837	√ ✓			√	/	\vdash							\dashv	\dashv		
Centurion	42140	837		√ ✓		Ť	· ·	\vdash							\dashv	-		
Centurion Health of Indiana, LLC	IHS11	837		√				\vdash								\dashv		For claims with DOS on or after December 1, 2023 (IN Only)
Century PHO	36393	837	√						✓	√						7		
Cerner HealthPlan Services	20356	835		✓		√	√	_								寸		
Cerner HealthPlan Services	20356	837		\														
CG United (Barbados Eastern Caribbean)	22287	837		√														
Chaffey Medical Group	49533	835		\		√	√	Ш								\Box		EFT enrollment is required in order to obtain ERA's
Chaffey Medical Group	49533	837	√		_			Щ								[
Champion Payer Solutions	CPS01	835		√		Ш		ш		_			Ш			_		
Champion Payer Solutions	CPS01	837	✓	✓	✓													

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Payer Name	Payer Code	Transaction	-	Р	D	_	_	D I	_	D	_	Р	_	_	Р	D	Notes
CHAMPVA HAC MEDICARE CROSSOVER (ERA Only)	80214	835	✓	√		✓	√										
CHAMPVA - HAC	84146	835	✓	✓		✓	✓										
CHAMPVA - HAC	84146	837	✓	✓							√	√					
Chautauqua County Healthcare Plan (Mayville NY)	16600	837		√													
CHCS Services, Inc (ERA Only)	75895	835	✓	✓		✓	√										ERA Only
Cherokee Nation Comprehensive Care Agency	CHERO	837	✓	✓													
Chesterfield Resources Inc.	34154	835	√	✓		✓	√			<u> </u>	_						
Chesterfield Resources Inc.	34154	837	√	✓	✓	_	_	_	+	√	1	_	-				
Childhealth Plus by Healthfirst (CHP)	80141 94321	837 837	V	/	\vdash	-	_	_	+	+	+	_	_		Н		
Children First Medical Group Children of Women Vietnam Veterans-VA HAC	94321 84146	837	√	√ √	\vdash	-	-	_	+	+-	√	· 🗸	+				
Children's Community Health Plan	39113	837	✓	_	\vdash	_	_	√	√	+	Ť	·					
Children's Community Health Plan - Wisconsin	39113	837	<i>.</i>	√	-	_	_			+	+	_	+				
Children's Hospital Orange County (CHOC) Health Alliance	CHOC1	835	<i>\</i>	√		√	√	Ť	Ť								
Children's Hospital Orange County (CHOC) Health Alliance	CHOC1	837	✓	√	т				1	1	1		1		П		
Children's Medical Security Plan of Massachusetts	12K14	837	✓			✓		√									
Children's Medical Security Plan of Massachusetts	SKMA0	837		✓			✓		✓		T						
Childrens Medical Center Health Plan	CMCHP	835	✓	√		✓	✓										
Childrens Medical Center Health Plan	CMCHP	837	✓		Ш		\Box							لــــا			
Chinese Community Health Plan	94302	835	✓		Щ	✓	✓	_									
Chinese Community Health Plan	94302	837	√.	√	Щ	_		_	_	_	_	4	1	Ш	Щ		
CHOC - Children's Hospital Of Orange County Health Alliance	33065	837	✓	_	Н	_		\bot	_	-				Ш	Ш		
Choice Medical Group	CMG01	835	_	√	ш	_		_	-	+	\perp			Ш			
Choice Medical Group	CMG01	837	√	√	\vdash	-		√									
Choice Physicians Net First Choice Choice Physicians Network	CPNFC CPN01	837	√ /	√ /	\vdash	/	/	✓		+	+	_	_		Н		
,	CPN01	835 837	√ √	_		√	✓	_	1	+	+	+					
Choice Physicians Network Choice Physicians Network - Amada Health	CPN01 CPNA1	835	√ √			√	./		· ·	+	+						
Choice Physicians Network - Amada Health	CPNA1	837	_	✓	-	Ť	·		-	+	-	_					
Chorus Community Health Plans	39113	837	_	✓		-	-	√	1	+	+						
Christian Brothers Services	38308	835	√ ✓	√	\vdash	√	√	Ť	Ť	+	+				Н		
Christian Brothers Services	38308	837	<i>\</i>	√		Ť	Ť			+							
Christian Care Ministries	59355	835		_		✓	√		1	1	1						
Christian Care Ministries	59355	837	✓	✓													
Christian Health Aid	98628	837	✓	✓													
Christiana Care VBR	VB002	837	✓	✓				√	√								
Christus Health Medicare Advantage	10629	835	✓	\checkmark		✓	✓										
Christus Health Medicare Advantage	10629	837	✓	✓													
Christus Health TX HIX	52106	837	✓	_													
Christus Spohn Health Network	SPOHN	837	✓	✓													
Christus Texas Medicaid	45210	837	√,			_	_	_ ✓	√	4	_						
CIGNA	62308	835	√	-	√	✓	√	√		+	1	_	-				
CIGNA (Harlish Bartana)	62308	837	√	√	√	/	/	- ✓	✓		_						
CIGNA - (Health Partners) CIGNA - (Health Partners)	KQJVH	835 837	√ /	-	_	√ /		√	1	+-	+	_	+				Provider must be an approved JVHL lab
CIGNA - (Health Partners)	62308	837	_	✓ ✓	\vdash	√	√	✓ ✓		╁	+						Provider must be an approved JVHL lab
CIGNA - PPO	62308	837	√	_	\vdash	-	+			+	+						
CIGNA (Non-HAP & CIGNA-HAP)	KDJVH	835	✓	-	\vdash	√	√	Ť	Ť		t						
CIGNA (Non-HAP & CIGNA-HAP)	KDJVH	837	<i>,</i>	√	\Box	_	<i>√</i>	√	√		т			П			Provider must be an approved JVHL lab
CIGNA Behavioral Health	62308	835	✓		_	_	✓	T			T						ERA Payer Code 62308
CIGNA Behavioral Health	MCCBV	837	✓								T						ERA Payer Code 62308
CIGNA Behavioral Health	SX071	837		\checkmark					√								ERA Payer Code 62308
CIGNA Dental	62308	837			✓					√							
Cigna Encounters	99139	837															
CIGNA Health Plan - HMO	62308	837	✓	-	Щ		[√	√					Ш	Ш		
CIGNA Medicare Advantage	62308	835	√	√	Щ	✓	√				1						
CIGNA Medicare Advantage	86033	837	_	√	Ш	_	_	_	_	\bot	1	_	_	ш	Ш		ERA Payer Code 62308
Cigna-Healthspring	52192	835	_	_	\vdash	√	✓	+	+	-				\vdash	H		
Cigna-Healthspring	52192 CCHPC	837 837	√ /	√	\vdash	_	_	+	-	+	-	_	1	Н	Н		
CITIZENS CHOICE HEALTH PLAN Citrus Valley IPA	NMM01	837	_	√	\vdash	-		_						H			
Citrust Health Plan	10207	837	✓	✓	\vdash	\dashv		√	√	+				Н	H		
City Of New Orleans (LA)	J2309	837	1	Ť	\vdash	_	-	Ť	Ť			+		Н			
ClaimChoice Administrators	83063	835	<i>\</i>	√	\vdash	√	√				t						
ClaimChoice Administrators	83063	837	<i>.</i>	√	Н						1			П			
ClaimChoice Administrators (DOS >1.1.21)	38219	835	<i>\</i>	√	\Box	√	√				T			П			formerly known as AmeraPlan
ClaimChoice Administrators (DOS >1.1.21)	38219	837	✓	✓	\Box		7		1	Т		1		П	П		formerly known as AmeraPlan
Claims Development Corporation	43056	837		✓		一			1	1	1	1	1				

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Part	Payer Name	Payer Code	Transaction	_	_												Notes
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Country fields Country fields Count				-		_	✓	√	—	L ,	_	.			_		
Page 1979				_		_	_	_	√	√		√	√		_	_	
Control Andrew State				√ /	-		√	√		/					-	_	
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College Coll					_		_	_	_	1	1		1				
The content 1,000				✓			√	√									
1,000 1,00	Clinicas del Camino Real	CDCR1	837	✓	✓				√	✓							
Control Control Professor Control	Clover Health	13285	835	\checkmark	√		√	√									
Scanting Processor				_	✓								$oldsymbol{ol}}}}}}}}}}}}}}}}}}$		_		
Control Method				_	,		_		√						_		
Control Administrative Services				_	_	_	4	4	_	_	1				-	4	
Count of Amountation Services 7705				_	_	-	-	-	_	+	-		+		-	-	
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Control Cont							1										
Country Coun				√													
Coloring Medical Colo				√													
Section Sect	Coeur Plan Services, LLC	11854	837	\checkmark	✓	✓											
Collective Health	, .			✓	_		I										
Selection Sele				✓	-	✓	_	_			_				_		
Coloris Medical Coloris Medi							_	√	_	-					_		
Coornal Medical Extern Curibbeam 2224 837 7 7 7 7 7 7 7 7 7				√			_	_	_	_	_				_	_	
Colonial Medical Esterer Caribbean 22387 837 87 87 87 87 87 87				/		_	/	/	_	+	-		+		-	-	
Colonial Medical Extern Caribbean 22,287 833 7 7 7 8 8 7 7 7 8 8				./			<u> </u>	<u> </u>	_	-					-	_	
Coloridad Access				<u> </u>		_	√	√	_	1			+ +		_	_	
Section Sect				_			Ť	Ť									
Colorand Community Health Alliance		84129	835	_			√	√		1							
Colorado Colorado Community Health Alliance	Colorado Access	84129	837	✓	✓				√	✓							
Colorato Medical Colorato Medicare 12M03	Colorado Community Health Alliance	COCHA	835	\checkmark	√		√	√									
Colorado Medicial	·											✓	✓				
Colorado Mediciare				√	-		_	_	_	_	_		\perp		_	_	
12M03 835 V V V V V V V V V				√ /		_	_	√ /		1			+		_	_	
Colorado Medicine				√ /	√	_	_	√			\vdash				-	_	
Colorado Medicare				·/		_	_	-	-/	+	1	1	+ +		-	-	
SMCO0				·	√		_	√	Ť							+	
Additional Commercial Provider Strong Additional Commercial Provider Provider Strong Additional Commercial Provider Provider Provider Provider Strong Additional Commercial Provider Provider Provider Provider Provider Strong Additional Commercial Provider Provider Provider Provider Pr							_	_	_	✓	1		1				
Second Health Cooperative	Commerce Benefits Group	34181	835	√	√		✓	✓									
Second Common Ground Health Cooperative	Commerce Benefits Group	34181	837	✓	✓												
Common Ground Health Cooperative	Commercial Travelers/PHX	88091		\checkmark	√		√	√									
Common Ground Health Cooperative 77170 837				_			_[_					$oxed{\Box}$				
Commonwealth Care Alliance (DOS > 4/1/23) A2793 835				√	_	_	√	√	+				\vdash	\dashv	_		
Commonwealth Care Alliance (DOS > 4/1/23) A2793 835				✓	-		_	/	+	-					\dashv	_	
A2793 R35 V V V V V V V V V				_		\dashv	٧	·	+	+				\dashv	\dashv	-	
A2793 837 V V V V V V V V V				_			√	√	+	+			+	\dashv			
CommuniCare Advantage 34525 837																	
COMMUNITY ALLIANCE MEDICAL GRP CAMG1 837 ✓	CommuniCare Advantage						1		+						1		. 2.25. 1. Sandactions prior to 1/2/20/ and 14010 and 14010.
Community Care Alliance of Illinois 85468 837 ✓	COMMUNITY ALLIANCE MEDICAL GRP			_	_		1			П		Π					
Description of the provider must be an approved JVHL lab Provider must be an appro	Community Care Alliance of Illinois			_					√	√		L					
1792 837 V V V V V V V V V	Community Care Associates (Healthchoice)	JWJVH	835				√	√									
Community Care BHO 23282 835 V V V V V V V V V	Community Care Associates (Healthchoice)			√			√	√	√								Provider must be an approved JVHL lab
Community Care BHO 23282 837 ✓ </td <td>, , ,</td> <td></td> <td></td> <td>لبا</td> <td></td> <td></td> <td>_</td> <td></td> <td>\perp</td> <td>✓</td> <td></td> <td></td> <td>igspace</td> <td></td> <td>_</td> <td></td> <td></td>	, , ,			لبا			_		\perp	✓			igspace		_		
Community Care Health CCH25 837 ✓<	•			_		4	√	√	_	!			igspace	\dashv	_		
Community Care Inc Family Care (Wisconsin) 60995 835 ✓				_		\vdash	+	_	+		\vdash		+	\dashv	\dashv	_	For dates of consist on Jeffey 01/01/2025
Community Care Inc Family Care (Wisconsin) 60995 837 ✓				_		\dashv	,	./	+	–			+	\dashv	\dashv	-	roi uates oi service ori/arter 01/01/2025.
Community Care Inc. (Wisconsin) 39126 835 ✓				_	-		v	Ť	+	1					\dashv		
Community Care Inc. (Wisconsin) 39126 837 🗸 🗸 💮 🗸 🗸						-	√	√	+					\dashv	-		
	Community Care Inc. (Wisconsin)						T		√	√							
	Community Care IPA			_			√	✓	T								

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Payer Name	Payer Code	Transaction	A	vailable P	D I	nrolli	ment D	_	COB P	D	Atta	ichmen P	D	Subm	itter Id	Notes
Community Care IPA	MPM48	837	√	√	_	_	_	П				_		_	_	
Community Care Managed Health Care Plans of Oklahoma	73143	835	√		_	/ /		П						_	_	
Community Care Managed Health Care Plans of Oklahoma	73143	837	✓	√				✓	✓							
Community Care Plan	59064	835	✓		~	/ \										formerly known as South Florida Community Care Network - SFCCN
Community Care Plan	59064	837	_	√	_			✓	✓					_		formerly known as South Florida Community Care Network - SFCCN
Community Care Plan (Florida Health Kids)	FHKC1	835	-	√		/ /		ш			_		_	_	_	
Community Care Plan (Florida Health Kids)	FHKC1	837	√		_	, ,	,						_	_	_	
Community Care Plan (Medicaid) Community Care Plan (Medicaid)	59065 59065	835 837	√ /	√ √		/ √		√	/				-	+	+	Formerly known as South FL Community Care Network - SFCCN (Medicaid) Formerly known as South FL Community Care Network - SFCCN (Medicaid)
COMMUNITY CARE PLAN (PALM BEACH HEALTH DISTRICT)	PBHD1	835	√ √		_	/ /	,	ľ			-			-		Formerly known as south FE community care Network - SFCCN (Medicald)
COMMUNITY CARE PLAN (PALM BEACH HEALTH DISTRICT)	PBHD1	837	√	_	Ť	Ť		√	√							
Community Eye Care	CECVP	837		√	_	_	_	П		_	_			十	_	
Community Family Care	NMM05	835	✓	√	_	/ /										
Community Family Care	NMM05	837	✓	√				✓	✓							
Community Family Care Health Plan	CFCHP	835	✓													
Community Family Care Health Plan	CFCHP	837	✓			┸								_		
Community First Claims	COMMF	835	_	√	√	/ \								_	_	
Community First Claims	COMMF	837	√ /		+	,	+	Н		_			_	_	+	EDA Douge Code 42722
Community First Health Plan, Inc. Community Health Alliance	42723 35193	835 835	√ ./	√ √	✓ ✓	_	_	\vdash		-			+	+	+	ERA Payer Code 42723
Community Health Alliance	35193	835	_	√ √	+	Ť	+	√	./	\dashv			+	+	+	
Community Health Center Network	CHCN1	835	Ť	√ √	+	√		Ý	·			-	+	+		
Community Health Center Network	CHCN1	837		√	+	Ť										
Community Health Choice	48145	835	√	_	_	/ /		П		7				\neg		
Community Health Choice	48145	837	√													
Community Health Electronic Claims/CHEC/webTPA	75261	837	\checkmark	√												Electronic Remittance Advice (ERA) will continue to be routed through SDS
Community Health Group	66170	837	\checkmark					\checkmark	√							
Community Health Group	CHGRI	835	✓	_	^	/ \										
Community Health Group	CHGRI	837	√		_		_	✓						_	_	
Community Health Plan of Washington	CHPWA	835	-	√ /		/ /		,	,				_	_	_	
Community Health Plan of Washington	CHPWA 60495	837 837	√ /		+	+	+	_	√ /				_	+	+	
Community Health Plan, Inc. CommunityConnect HealthPlan	95192	835	√ √		_	/ /	_	√	V					+	_	
CommunityConnect HealthPlan	95192	837	√		Ť	Ť	+	√	√		_		_	+	_	
Comp - Ohio (Austintown OH)	34177	837	✓			1										
Companion Life	37322	835	✓	√	_	/ /		П						1	1	
Companion Life	37322	837	✓	√												
Compcare (Wisconsin BadgerCare only)	95192	837	✓	√				\checkmark	√							
Complete Senior Care	R3485	835	✓	_		/ \	_							_		
Complete Senior Care	R3485	837	✓	-	✓	Н,	_	✓	✓	√	_		_	_	_	
Compsych	37363	835		√ /	_	√		Н								
Compsych Compsych	37363 U7363	837 835	√	✓	_	/		Н					-	+	+	
Compsych	U7363	837	√ √		Ť	+	+	H		-	-	-	-	+	_	
Compusys of Colorado	COMPU	837	Ť	√		+								+		
Concierge HMO IPA	СННМО	837	√		_	_	_	П		_		_	_	_	_	
Concierge TPA	CAS01	837	√													
CONCORDIA CARE INCORPORATED	33632	837	✓	√											I	
Conifer Health Solutions (Adventist)	CAPMN	837		√					✓							
Connected Senior Care Advantage	AGL03	837	√			_		✓	\checkmark	[[
Connecticare - Medicare	78375	835		√ /	√	/ √			,				_	_	_	
Connecticare - Medicare	78375	837	√ /		_	,	_	✓	√	_			\perp	_	+	
ConnectiCare Inc	06105 06105	835 837	√ ./	7		/ √	-	\vdash		-				+	+	
ConnectiCare Inc Connecticut Carpenters Health Fund	06105 37307	837 835	√ √	√ √	_	/ /	-			\dashv				+		
Connecticut Carpenters Health Fund	37307	837	√ √	_	Ť	Ť		Н				-		\dashv	+	
Connecticut General (CIGNA)	62308	837	√		\top			√	√							
Connecticut Medicaid	12K04	835	√		_	/		П		一				\neg		
Connecticut Medicaid	12K04	837	√					✓								
Connecticut Medicaid	SKCT0	835		√		√										
Connecticut Medicaid	SKCT0	837		√					√							
Connecticut Medicare	12M04	835	√	Щ	~	_		لِبا			[_		
Connecticut Medicare	12M04	837	√		√	_		✓				_	_	\perp	\perp	
Connecticut Medicare	SMCT0	835		√ /	+	√	_	Н		\dashv		_		+	+	
Connecticut Medicare Conseco Services LLC (ERA Only)	SMCT0 11285	837 835	√	√ √	_	/ \		\vdash	√	\dashv		-	+	+	+	ERA Only
Consociate Group	37135	835	-	√ √	V	_	_	Н		\dashv				-		Livi Only
Consociate Group	37135	837	_	√ √	Ť	Ť	_	√	\checkmark			-	-	+	_	
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Payer Name	Payer Code	Transaction	_	_	DI	_	_	_	P	_	_	P	D	_	P	D	Notes
Consolidated Associates Railroad	75284	837	√	√	_	_	T	_	т	П							
Consolidated Health Plans	87843	835	_	√	_	/ /	7	_									
Consolidated Health Plans	87843	837	✓	✓													
Consumer's Mutual Insurance	KWJVH	835	✓	\checkmark	V	/ /											
Consumer's Mutual Insurance	KWJVH	837		✓	_	/ /	_	√	✓								Provider must be an approved JVHL lab
Consumers Choice Health SC	45321	835	✓	-		′ ✓	4			_							
Consumers Choice Health SC	45321	837	√	√		_	4	√	√		_						
Consumers Life Insurance Company	29076	837	√ /	_		_	_	√	-	_	✓	✓					
Container Graphics Corporation Contessa Health	08680 99433	837 837	√ √	_	_	+	+	√	√	-	-	1				-	
Contessa Health	CH201	835	_	√ √		/ /	/	_	\vdash								
Contigo Health	34158	837	√ √		Ť	Ť	+	-	1	1		1					
Continental General Ins Co-Medicare Supplement	13193	837	√	_			+										
Continental General Insurance Company	71404	835	√	_	_	/ /	7	_	_			1					
Continental General Insurance Company	71404	837	_	√			\top										
Continuum (formerly Marrick WRx)	46478	837	✓	√		1	T	_									
Continuum Health Solutions (Workers Comp)	59557	837	✓	✓				√	✓								
CONTRA COSTA BEHAVIORAL HEALTH PLAN	ССМНР	837		✓		Ι	I										
CONTRA COSTA HEALTH PLAN	CCHS	835	√	√	V	/	/										
CONTRA COSTA HEALTH PLAN	CCHS	837	√			Ţ	Ţ		$oxedsymbol{oxedsymbol{oxedsymbol{\square}}}$		\Box						
Contractors, Laborers, Teamsters & Engineers (Local 14B)	47046	837	√	✓			4	√	✓								
Conversion Plan-APWU	55544	837	✓	⋈	_	+	+	+	┡	_		\vdash					
Cook Children's Health	TH104	837	—	√ /					-	1							
Cook Childrens Health Plan Star	CCHP9	835	√ /	_		′	4	-	,	\vdash		\vdash					
Cook Childrens Health Plan Star Cook Group Health Plan	CCHP9 35149	837 837	√ √		-	+	+	√	√ √								
Cook Medical Group	60065	837	_	√ √		-	+	·	·								
Cooks Children's Health Plan	CCHP1	835	√ √	_		/ /	/	_	+	_	-	1				-	
Cooks Children's Health Plan	CCHP1	837	√		Ť	Ť											
Cooperative Benefit Administrators (CBA)	39026	837	V	_	_	_	+	√	√	_	√	√				_	
Coordinated Benefit Plan	14829	835	_	√	~	/ /	/		t								
Coordinated Benefit Plan	14829	837	✓			_	1	√	✓			1					
Coordinated Medical Specialists	58204	837	✓	✓													
COPC - Senior Care Advantage	AGL02	835	✓	✓													Payer returns ERA's automatically once electronic claim submission begins.
COPC - Senior Care Advantage	AGL02	837	√	✓				✓	√								
Core Administrative Services	58231	835	_	✓	~	\ \											
Core Administrative Services	58231	837		√			_										
CoreCivic	55962	837	✓	_		_	4	_	۲.	_	_	4				_	
CoreSource AZ MN	35182	837	√		_	_	+	_	√	-		1					
CoreSource NC IN	35182 CORIZ	837 837	√ √	_	_	+	+	_	√	⊢		_					
Corizon Health Inc. Corizon Inc.	43160	837	√ √		-	-	╫	-	1			+					
Cornerstone Benefit Adminstrators	35202	835		√ ✓	_	/ /	/										
Cornerstone Benefit Administrators	35202	837	_	√ √	Ť	Ť		_	1	_		+					
Cornerstone Hospice and Palliative Care, Inc.	RP111	837	· ✓	_		+	+	√	1								
Cornerstone Preferred Resources	CB268	835	✓		_	/ /	7	Ť	Ė	_		1					
Cornerstone Preferred Resources	CB268	837		√			1		1								
Corporate Benefits Service	56116	835	√		_	/ /	/	Т	П	T							
Corporate Benefits Service	56116	837	√			I	I		L			Ĺ					
Corporate Plan Management, Inc.	64270	837	√	✓		Ι	I	√	✓								
CorrectCare - Integrated Health	CCIH	835	√	√	٧	/ /	/		L								
CorrectCore Integrated Health	CCIH	837	\	_		L	丄										
CorrectCare - Integrated Health		007	✓	✓			┸	√	✓	_							Non-Louisiana Jails
CorrectCare - Integrated Health CorrectCare Integrated Health - Jail	CCIHJAIL	837	_	_						1			Ш				
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only)	EHCHP	835	√	√			4		_	_							ERA Only
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only)	EHCHP IAS03	835 835	√	√ √	V												ERA Only
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) County of Fresno	EHCHP IAS03 AMM21	835 835 837	√ √	√ √ √			/		Ė								·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno County of Riverside	EHCHP IAS03 AMM21 EC999	835 835 837 837	√ √ √	\ \[\]			/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) County of Fresno County of Riverside County of Sacramento - EMSF	EHCHP IAS03 AMM21 EC999 AMM20	835 835 837 837 837	√ √ √	\ \frac{1}{4} \]			/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) County of Fresno County of Riverside County of Sacramento - EMSF County Services Medical Program	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1	835 835 837 837 837 837	\ \forall \	\frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}}		/ /											·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) County of Fresno County of Riverside County of Sacramento - EMSF County Services Medical Program CountyCare	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1 06541	835 835 837 837 837 837 835	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}}													·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno Country of Riverside Country of Sacramento - EMSF Country Services Medical Program Country Care Country Care CountryCare	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1 06541	835 835 837 837 837 837 835 835	\ \(\) \(\) \(\) \(\)	\frac{1}{\sqrt{1}}		/ /	/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno Country of Riverside Country of Sacramento - EMSF Country Services Medical Program CountryCare CountryCare Covenant Administrators, Inc.	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1 06541 06541 58102	835 835 837 837 837 837 835 835 837	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		/ /	/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno Country of Riverside Country of Sacramento - EMSF Country Services Medical Program Country Care Country Care CountryCare	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1 06541	835 835 837 837 837 837 835 835	\frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		/ /	/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno Country of Riverside Country of Sacramento - EMSF Country Services Medical Program CountyCare CountyCare Covenant Administrators, Inc. Covenant Administrators, Inc.	EHCHP IASO3 AMM21 EC999 AMM20 CMSP1 06541 58102 58102	835 835 837 837 837 837 835 835 837	\frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		/ /	/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fiverso Country of Riverside Country of Sacramento - EMSF Country Services Medical Program CountryCare CountryCare Covenant Administrators, Inc. Covenant Administrators, Inc. Covenant Management System Employee Benefit Plan	EHCHP 1AS03 AMM21 EC999 AMM20 CMSP1 06541 06541 58102 58102 CMSEB	835 835 837 837 837 837 835 837 835 837 835	\frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}} \frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}			/										·
CorrectCare Integrated Health - Jail Correctional Health Partners (ERA Only) Country Financial (ERA Only) Country of Fresno Country of Riverside Country of Sacramento - EMSF Country Services Medical Program CountryCare CountyCare CountyCare Covenant Administrators, Inc. Covenant Administrators, Inc. Covenant Management System Employee Benefit Plan Covenant Management System Employee Benefit Plan	EHCHP IAS03 AMM21 EC999 AMM20 CMSP1 06541 06541 58102 58102 CMSEB CMSEB	835 835 837 837 837 837 835 837 835 837 835	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\frac{1}{\sqrt{1}}	· · · · · · · · · · · · · · · · · · ·		/										·

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Payer Name	Payer Code	Transaction	_	Р	D	_	_	D I	_	_	-		D			D	Notes
CoventryCares - Aetna Better Health of Michigan	J8JVH	837	√	√		√	√	V	′ √								Provider must be an approved JVHL lab
CoventryCares of Michigan	60054	835	✓	✓		✓	✓										
CoventryCares of Pennsylvania	23228	837	√	✓													
Cox Health Plan	00019	835		✓			√		\perp								
Cox Health Plan	00019	837		✓		_	_		_								
Cox Health Plan	00119	835	√			✓	_	_	_	_	_						
Cox Health Plan	00119	837	√	,		-	-	_	, ,	+	-			_	_		
CPR Share Plans	CB695 64068	837 837	√ /	_		\dashv	+		′ √	+	┢				_		
Creative Medical Systems Creative Plan Administrators	37320	837	√ √	√ √	-	-	+	+	+	+	-				_		
Crescent Health Solutions	56213	837	<i>\</i>	-			-										
Crossway Health Share	33213	837	√	_	_	_	_	_	_	+	1	+ +	-	_	_		
Crown City Medical Group	MPM35	837	√	√				_	/ /								
Croy-Hall Mgmt. Inc.	37266	837	✓	_			_		1	1	1						
CSEA DENTAL	CX054	837			✓					✓							
CSI Life (ERA Only)	IAS04	835	✓	\checkmark		\checkmark	\checkmark										
CSI Network Services	34186	837	✓	\checkmark				V	′ √								
CSO Omaha (ERA Only)	IAS05	835	✓	_		_	√			_		Ш]		
Culinary Las Vegas - Unite HERE Health	59144	835	_	✓		√	√		_	_							
Culinary Las Vegas - Unite HERE Health	59144	837	√	_		,	_	_	_	_	1						
Curachoice	CC304	835	√	_	_	√	√	_		-							
Current Health Solutions	CC304	837	√ /	_	\dashv	_	_		, ,	_							
Current Health Solutions Custom Design Benefits	77153 82056	837 835	√ ./	√ √	-	√	√	V	′ √	-		+					
Custom Design Benefits Custom Design Benefits	82056	835	✓ ✓	_	\dashv	Ť	Ť	-		+							
CVS Accountable Care	CVSACO	835	\ \/	√ √		√	√										
Davis Vision	00157	835	Ť	√		_	√	_									
Davis Vision	00157	837		√	-	\neg	Ť	_	_	_							
DC Risk Solutions	DCRSS	837	√	√			7	_	′ √								
Dean Health Plan	39113	835	✓	_		√	✓		1	1	1						
Dean Health Plan	39113	837	✓	✓				~	′ √								
Dean Health Plan by Medica	41822	835	✓	\checkmark		√	√										
Dean Health Plan by Medica	41822	837	./	√													Inst: As of January 1, 2024, this payer does not offer Electronic Remittance Advice (ERA) at this time.; Prof: As of January 1, 2024, this payer does not offer Electronic Remittance Advice (ERA) at this time.;
DELANO IPA	77124	835	Ť	√ _		-	√	Ť	Ť	+							(LIA) at this time.,
Delaware First Health	68069	837	√	√			Ť	_	/ /		√	√					
Delaware Medicaid	12K87	835	✓			✓	_	_	T	1							
Delaware Medicaid	12K87	837	✓					_									
Delaware Medicaid	SKDE0	835		✓			✓										
Delaware Medicaid	SKDE0	837		✓					√								
Delaware Medicare	12M76	835	✓			√											
Delaware Medicare	12M76	837	✓			√		V	_								
Delaware Medicare	SMDE0	835		√		_	√ <u> </u>	_	╄.		_						
Delaware Medicare	SMDE0	837	,	√		_	√	_	√	1	-						
Dell Children's Health Plan (DCHP)	38261	835	√ /	√ /		√	√	_	_								
Dell Children's Health Plan (DCHP) Delta Dental (DDIC)	38261 94276	837 835	√	√	√	+	-	<u> </u>	+								
Delta Dental (DDIC)	94276	837			√ √			1		√							
Delta Dental CA FedVIP	CDCA1	835			√ ✓	_		√		Ť							
Delta Dental Northeast	02027	835			√		_	√									
Delta Dental Northeast	02027	837	П	П	✓				T	✓	П		✓				
Delta Dental of Alabama	DDAL1	835			✓			✓									
Delta Dental of Alabama	DDAL1	837			✓					✓			✓				
Delta Dental of Alaska	DDAK1	835			✓			√									
Delta Dental of Alaska	DDAK1	837		Ш	✓	[✓		Ш]		
Delta Dental of Arizona	86027	835			√			✓			1						
Delta Dental of Arizona	86027	837			√ /	_	_	_	_	✓	-		✓				
Delta Dental of Arkansas Delta Dental of Arkansas	CDAR1 CDAR1	835 837		H	√ √	-	-	√	-	√		+	√	_			
Delta Dental of Arkansas Delta Dental of California	77777	837			✓ ✓	\dashv	\dashv	√	+	Ý		+	V				
		835		Н	√ √	\dashv	-	V	+	√			√				
	77777					_	+	/	-	Ť	-	+	•	-	_		
Delta Dental of California	77777 DDPCO				\checkmark			V									
	DDPCO DDPCO	835 837			√	+	+	√	+	√		+	√		-		
Delta Dental of California Delta Dental of Colorado	DDPCO	835				+	+	√ 	ŧ	√ √	_	H	✓ ✓				
Delta Dental of California Delta Dental of Colorado Delta Dental of Colorado	DDPCO DDPCO	835 837			√			√ √		_	_		_				
Delta Dental of California Delta Dental of Colorado Delta Dental of Colorado Delta Dental of Connecticut	DDPCO DDPCO 22189	835 837 837			√ √					_			_				

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Submits of Groupe March M					_	_	1 1	√	+	Ť			_	
State Proceed of State Pro									tt	✓				
Company Comp							1	√	${f T}$	_		_	_	
Section of Micros - Horizontal 1990	Delta Dental of Idaho	82029	837		√				T	√		✓		
Color Section of Processing Color	Delta Dental of Illinois	05030	835		√			√						
Description of Allers Service of Minors	Delta Dental of Illinois	05030	837		√					✓		√		
Mail	Delta Dental of Illinois - Individual	IDIND	835		√			✓						
Control of Vision Cont										√		√		
COSA				$oldsymbol{\sqcup}$			L	√	\perp					
Crist Company Crist Company Crist Company										√		✓		
Description of Standard Standards									$\perp \perp$					
Color Colo				-			\vdash	_	$oldsymbol{+}$	√		✓		
Description of Montalay				-			-	✓	\vdash	_				
Description of Management Control Store V					_	_		/	+	√				
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Description							H	<u> </u>	+	./		./		
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Deta Dental of Montana DOMTI 837								_		√		1		
Deta Dental of Montana Dotal Dental of Mehasia							1 .	√ 	\boldsymbol{T}	_			_	
Delta Dental of Nebraska										✓		√		
Deta Dental of Newbraska DENM 1 837					√		1 1	√		_				
Delta Dental of News lessy Delta Dental of New lessy 12189 837 Delta Dental of New Mexico DDPNM 837 Delta Dental of New Mexico DDPNM 837 Delta Dental of New Nexico DDPNM 837 Delta Dental of New Nork 11198 837 V V V V V V V V V V V V V V V V V V V	Delta Dental of Nebraska	07027			√					√		✓		
Delta Dental of New Jersey		DDNV1	835		√			√	\boldsymbol{T}	7				
Delta Dental of New Jessey Delta Dental of New Mexico Delta Dental of New York Delta Dental of North Carolina Sciol 835 V V V V V V V V V V V V V V V V V V V	Delta Dental of Nevada	DDNV1	837		√					✓		✓		
Delta Dental of New Mexico DDPMM 835 Delta Dental of New Mexico DDPMM 837 Delta Dental of New Mexico DDPMM 837 Delta Dental of New Mexico DDPMM 8387 Delta Dental of New York 11198 837 V	Delta Dental of New Jersey	22189	835		√			√						
Delta Dental of New Mexico DDPNM 837	Delta Dental of New Jersey	22189	837		√					√		✓		
Delta Dental of New York 11198 835	Delta Dental of New Mexico	DDPNM	835		√			✓						
Delta Dental of New York 11198 837	Delta Dental of New Mexico	DDPNM								\checkmark		✓		
Delta Dental of North Carolina 56101 835	Delta Dental of New York							√						
Delta Dental of North Carolina 56101 837										√				
Delta Dental of North Dakota 07029 835							<u> </u>	√	\perp	_				
Delta Dental of North Dakota 07029 837 V V V V V Delta Dental of Ohio DDPO 835 V V V V V Delta Dental of Ohio DDPO 835 V V V V DEDETAL OF ORD DDPOK 835 V V V V DEDETAL OF ORD DDPOK 835 V V V DDPOK 837 V V										√		✓		
Delta Dental of Ohio DDPO 835 V V V V V V V V V							<u> </u>	√		_				
Delta Dental of Ohio DPPO 837 ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ DPD Bass of Control of Oklahoma DPPOK 835 ✓					_	_	щ		$oldsymbol{\sqcup}$	\checkmark		√		
Delta Dental of Oklahoma DDPOK 835 V <th< td=""><td></td><td></td><td></td><td>$oldsymbol{\sqcup}$</td><td>_</td><td>_</td><td>1</td><td>√</td><td>$oldsymbol{\sqcup}$</td><td>,</td><td></td><td>,</td><td>_</td><td></td></th<>				$oldsymbol{\sqcup}$	_	_	1	√	$oldsymbol{\sqcup}$,		,	_	
Delta Dental of Oklahoma DDPOK 837 V V V V V V V V V				\vdash			\vdash		+	√		√		
Delta Dental of Oregon CDOR1 835 V V V V V V V V V							H	<u> </u>	\vdash	,		/	_	
Delta Dental of Oregon CDOR1 837 V V V V V V V V V				\vdash			\vdash	/	+	V		√		
Delta Dental of Pennsylvania 23166 835 ✓								Y	+	/				
Delta Dental of Pennsylvania 23166 837 V							++	./	++	V				
Delta Dental of Puerto Rico 66043 835 V					_	_		<u> </u>		./				
Delta Dental of Puerto Rico 66043 837 \$\frac{1}{2}\$	•							/	+	·				
Delta Dental of Rhode Island 05029 835 \$\frac{1}{2}\$							H	Ť		/		/		
Delta Dental of Rhode Island 05029 837 \$\frac{1}{2}\$ \$							1	√	\vdash	Ť	_			
Delta Dental of South Carolina 43091 835 ✓					_	_			\Box	√				
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Delta Dental of South Dakota 54097 837 \$\sqrt{1}\$ \$\sqrt{2}\$ \$									$oldsymbol{ o}$	\checkmark		√		
Delta Dental of Tennessee DDPTN 835 Image: Second control of tennessee Jet an image: Second control of tennessee DDPTN 837 Image: Second control of tennessee Jet an image: Second control of tennessee Jet and tennessee										_		_		
Delta Dental of Tennessee DDPTN 837								√	\Box					
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Delta Dental of Texas DDTX1 837							П		\Box	\checkmark		√		
Delta Dental of Utah DDUT1 835			835					√						
Delta Dental of Utah DDUT1 837	Delta Dental of Utah		837		√					✓		√		

Dayor Nama	Payer Code	Transaction	Av		e				COE			tachme	ents	Subn	nitter	ld	Notes
Payer Name						_	Р	D I	Р	D	-	Р	D	1	Р	D	Notes
Delta Dental of Virginia	54084	835	Щ		√ /	1	4	✓	lacksquare	Ļ	L			Ţ	4		
Delta Dental of Washington	54084 91062	837 835	Н		√ √	4	-	_	-	✓			_	_	_		
Delta Dental of Washington Delta Dental of Washington	91062	837	Н		√ √	-	-	<u> </u>	+	√	1		-	-	-		
Delta Dental of Washington DC	52147	835			<i>√</i>	_	-	√		t					1		
Delta Dental of Washington DC	52147	837	П	_	√	_	\neg		т	√					_		
Delta Dental of West Virginia	31096	835			✓			✓									
Delta Dental of West Virginia	31096	837		_	✓					✓			✓				
Delta Dental of Wisconsin	39069	835			√	_	_	√	_	٠.	_			_	_		
Delta Dental of Wisconsin	39069	837	H		√ √	4	-	,	\bot	√	_		√	-	4		
Delta Dental of Wisconsin - Individual Delta Dental of Wisconsin - Individual	WDENC WDENC	835 837	H		√ √	-	-	√	+	+			-	-	-	-	
Delta Dental of Wyoming	CDWY1	835			√ /	-		1									
Delta Dental of Wyoming	CDWY1	837	П		√		\neg		т	√		1	√	\neg	\neg		
Delta Dental Wisconsin Medicare Advantage	WIMAN	837			✓					✓			✓				
Delta Health Systems	DHS01	835	✓	✓		√	✓										
Delta Health Systems	DHS01	837	✓	√	_	_	_	√	√	٠.	_			_	_		
Delta Minnesota M.A. Public Programs	07031	837	\vdash	_	√ /	\dashv	4	/	-				√	\dashv	-		
DELTACARE USA DELTACARE USA	DDCA2	835 837	\vdash		√ √	\dashv	+	V	┢	√		+		-	+		
Dental Professionals of Wisconsin	39148	837	\vdash		√ √	+	-	+		✓ ✓					-		
DentaQuest Government Plans	CX014	835	М	_	√	1	7	√		Ť				_			
DentaQuest Government Plans	CX014	837		_	√												
DentaQuest Vision	63740	835		√			√										Also known as EyeQuest
DentaQuest Vision	63740	837		√													
Dentegra	88888	835	Ш	_	√	_	_	√	_	_	_		_	_	_		
Dentegra	88888	837			√	-	_	_	+	-	-		_	_	-		Face water Claims Oak (ast FFC)
Denti-Cal Encounters Denver Health - Indigent	DTCA7 84134	837 837		√	√	+	-	+	+	+	-		-	-	+		Encounter Claims Only (not FFS)
Denver Health - Holgent Denver Health and Hospital Authority	84133	837	1	√ √	-	-	-	_	+	+			-	-	-	-	
Denver Health Medical Plan	84135	835	<i>√</i>	√		√	√										
Denver Health Medical Plan	84135	837	√	√	\neg					1				\neg			
Denver Health Medical Plan - FHN	65456	837	\checkmark	\checkmark													
Denver Health Medical Plan Inc Medicare Choice	84131	837	√	✓	_		_			_				_			
Deseret Mutual	12X35	837	√	_	_	√	_									_	ERA Payer Code SX105
Deseret Mutual Deseret Mutual	SX105 UH105	835 837	✓	√ √	_	_	√ √	_	_	_			_	_	_		ERA Payer Code SX105
Desert Medical Group	DESRT	837	_/	√ √	-	\dashv	<u> </u>		+	+	1		_	-	-	-	ENA Fayer Code 3X103
Desert Oasis Healthcare	44006	837	H	√ √	_	_		Ť							1		
Desert Valley Medical Group	DVMC1	837	√	√	\neg	_	\neg			1				\neg			
Detego Health	62599	837	\checkmark	\checkmark													
Devoted Health	DEVOT	835	✓	√		√	✓										
Devoted Health	DEVOT	837	√	√	_		_									_	
DHMN Preferred IPA Hospital Risk DHMN Preferred IPA Hospital Risk	DHM02	835 837	√ /	_	_	√	√			_			_	_	_		
DHMN Santa Cruz	DHM02 DHM01	837	_	√ √	-	√	√	√	√	-	1		-	-	-		
DHMN Santa Cruz	DHM01	837	<i>\</i>	√	_	Ť	Ť		V						1		
Dialysis TPA	82435	837	√	√	\neg	_	\neg			1				\neg			
Diamond Bar Medical Group	NMM01	837	√	√													
Dignity Global	MPM27	837	√	√	_	_	_	_ ✓		_				_			
Dignity HCLA	MPM28	837		√	4	_		√	√			\square			4		
Dignity Health - Mercy Medical Group / Woodland Clinic Dignity Health - Mercy Medical Group / Woodland Clinic	PROH1 PROH1	835 837	√ √		-	√	√	+		_	H		_	\dashv	4		
Dignity Health - Sacramento Hospital	HOSH1	835	√ √		-	1	√	_	+	+	1		_	-	-	-	
Dignity Health - Sacramento Hospital	HOSH1	837	√ √		+	Ť	Ť	√	√					\dashv			
Dignity Health Management Services	DHM02	837	√ √	√		7	7	· √									
Dignity Health Medical Group - Inland Empire	DHFIE	837	√						√								
Dignity Health Medical Group- Inland Empire (Professional Risk)	PROH4	835	√.	_	I	√	√								I		
Dignity Health Medical Group- Inland Empire (Professional Risk)	PROH4	837	√	√	4	4	4								_		
Dignity Health MSO	27133 MCS03	837	√ /	_	_	_	_	\bot	_	_			_	_	_		
Dignity Health MSO Dignity Health MSO	MCS03	835 837	√ ./	_	+	√	V	+	-				-	-	+		
Direct Care Administrators	DCA62	837	Ť	√ √	\dashv	\dashv	-	+	√					\dashv	\dashv		
District 9 Machinists Wel	MWELT	835	√	_	√	+	+	\top	Ť				-	\dashv	+		ERA Only for 837I, 837P, and 837D
District of Columbia Medicaid	12001	835	√	\dagger	_	√	1	\top			H			\neg	1		. ,
District of Columbia Medicaid	12001	837	√		_	√	┚	√									
District of Columbia Medicaid	SKDC0	835		√			√										
District of Columbia Medicaid	SKDC0	837		√			√		√								

			Α	vaila	ble	Enr	rollm	ent		СОВ		At	tachn	nents	Sı	ubmit	ter Id	
Payer Name	Payer Code	Transaction	1	Р	D	1	Р	D	1	Р	D	- 1	Р	D	1	Р	D	Notes
District of Columbia Medicare	12M63	837	√	_		√												
District of Columbia Medicare	SMDC0	835		√	_		√			,						_	4	
District of Columbia Medicare	SMDC0 06102	837 837	/	√ √			✓			√					-	+	-	
Diversified Administration Corporation Diversified Benefit Administrators	DBA20	837	_	√ √	_	√	√							+		+	+	
Diversified Benefit Administrators	DBA20	837	\ \	√ √	_	·	_		√	√						+	+	
DMC Care	JSJVH	835	1	√	_	√	√		_	Ť						+	+	
DMC Care	JSJVH	837	√	_	_	✓	_		✓	√				1	1	1	1	Provider must be an approved JVHL lab
Doctors Healthcare Plans	DRHCP	835	√	✓		✓	✓											
Doctors Healthcare Plans	DRHCP	837	✓	✓														
Dolton Medical Group	DOLMG	837	✓	✓					✓	✓								
Dominion Dental	DOM01	837	٠,	L	✓									√		_	4	
Downey Select IPA	APP01	837	√	√					✓	√			1	-	4	+-	+	
Dreyer Health Driscoll Children's Health Plan	DREYR 74284	837	/	√	_	/	√			✓					_	_	+	
Driscoll Children's Health Plan	74284	835 837	√ √	√ √	_	✓	V					-	-	+	-	+	+-	
Dunn and Associates Benefits Administrators Inc.	35186	835	\ \	√	_	√	√										+	
Dunn and Associates Benefits Administrators Inc.	35186	837	<i>\</i>	<i>\</i>		Ė	Ť						1		_	_	_	
DuPage Medical Group	57140	835	✓	-		√	√									T	T	
E-V Benefits Management Inc (Columbus OH)	34159	837	I	√	_					√					I	Ι		
E.S. BEVERIDGE & ASSOCIATES	34108	837	√	√	_													
Early Intervention CBO	36434	837		√	_													
Early Intervention Central	TH084	837		√			Ļ									L		
East Boston Neighborhood Pace	25849	835	1	√	\vdash	✓	✓							_		\bot	_	
East Boston Neighborhood Pace	25849	837	√ √	_												+	-	
Eastern Iowa Community Healthcare (EICH) Eastland Medical Group	23861 66122	837 837	V /	√ √	\vdash				✓	✓					-	+	+	
Easy Access Care IPA	EAIPA	837	√ √	_					√	√				+		+	+	
Easy Care MSO	ECMSO	837	_	√	_				_	_								
Easy Choice Health Plan of California	20532	837	<i>\</i>	_	_				√	√			1	1	+	+	+	
Easy Choice Health Plan of New York	24770	837		√	-													
EBIX HEALTH ADMINISTRATION EXCHANGE (EHAE)	IAC01	837	√	√												1	1	
EBMC	31074	835	√	✓		\checkmark	\checkmark											
EBMC	31074	837	√	√													_	
EBMS (Employee Benefit Management Services Inc.)	12X44	837	√ √						√									ERA Payer Code 81039
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.)	12X44 81039	837 835		√	E	√	√		√							Ė	Ė	
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.)	12X44 81039 81039	837 835 837	√ √	√ √					√	√								ERA Payer Code 81039 ERA Payer Code 81039
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore	12X44 81039 81039 R3491	837 835 837 835	√ √ √	\ \ \		✓ ✓	√ √		√	√								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore	12X44 81039 81039 R3491 R3491	837 835 837 835 837	√ √ √	\ \ \ \	√				✓ 	√								
EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health	12X44 81039 81039 R3491 R3491 66456	837 835 837 835 837 837	√ √ √	\ \ \ \ \ \	√				√ 	√ ✓								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore	12X44 81039 81039 R3491 R3491	837 835 837 835 837	√ √ √	\ \ \ \	√				✓ 									
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA)	12X44 81039 81039 R3491 R3491 66456 SX110	837 835 837 835 837 837 837	√ √ √	\ \frac{1}{4} \fra	√				✓ ————————————————————————————————————									
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EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno El Paso First - CHIP El Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS	12X44 81039 81039 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37	837 835 837 835 837 837 837 837 837 837 837 837	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	√ 		√ ✓		✓ ————————————————————————————————————									
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EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First Health Plan Premier Plan Star Medicaid HMO	12X44 81039 81039 83491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37	837 835 837 837 837 837 837 837 837 837 837 835	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}} \frac{1}{\sqr	✓ ————————————————————————————————————	√ - - - - - - - - - - - - -	√ ✓											
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS	12X44 81039 81039 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37 EPF02	837 835 837 837 837 837 837 837 837 837 837 837	\frac{1}{\sqrt{1}} \frac{1}{\sqr		\frac{1}{2}	✓ — — ✓ ✓	\ \ \ \ \ \											
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First Health Plan Premier Plan Star Medicaid HMO	12X44 81039 81039 83491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37	837 835 837 837 837 837 837 837 837 837 837 835	\frac{1}{\sqrt{1}}		✓ ————————————————————————————————————	√ - - - - - - - - - - - - -	\ \ \ \ \ \		\frac{1}{2}	√								
EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno El Paso First - CHIP El Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS El Paso First Health Plan Premier Plan Star Medicaid HMO El PASO FIRST HEALTH PLAN PROME PLAN STAR MEDICATION PLAN PROME P	12X44 81039 81039 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF02	837 835 837 837 837 837 837 837 837 837 837 835 837 835	\frac{1}{\sqrt{1}} \frac{1}{\sqr		✓ ————————————————————————————————————	✓ — — ✓ ✓	\ \ \ \ \ \		✓	✓ ✓								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYECTO DEI Barrio EI Proyecto Del Barrio Elderhaus Inc.	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37 EPF02 EPF02 EPF07 MPM04 64192	837 835 837 837 837 837 837 837 837 837 835 835 837 835 837 835 837 835				\frac{1}{\sqrt{1}}	\ \ \ \ \ \ \ \		✓	✓ ✓								
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EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno El Paso First - CHIP El Paso First - CHIP El Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH DLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) El PROYECTO DEI Barrio ElderPlan Inc. ElderPlan Inc. Elderwood Health	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 03964	837 835 837 837 837 837 837 837 837 837 835 835 837 835 837 835 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		✓	✓ ✓								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First Health Plan Premier Plan Star Medicaid HMO EI Paso First Health Plan Premier Plan Star Medicaid HMO EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYECTO DE Barrio Elderhaus Inc. Elderhaun Inc. Elderhaun Inc. Elderwood Health Element Care Inc.	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 03964 04326	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		✓	✓ ✓								
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EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI Paso First Health Plan Premier Plan Star Medicaid HMO EI Paso First Health Plan Premier Plan Star Medicaid HMO EI PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI Proyecto Del Barrio ElderPlan Inc. ElderPlan Inc. ElderPlan Inc. ElderPlan Inc. Elderwood Health Element Care Inc. elipsLife (ERA Only)	12X44 81039 81039 83491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF07 EPF07 EPF07 MPM04 64192 31625 31625 03964 04326 04326 04326	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 835 837 837 835				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		✓	✓ ✓								
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EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno El Paso First - CHIP El Paso First - CHIP El Paso First - CHIP EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN PREMIER PLAN STAR MEDICAID HIMO EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) El Proyecto Del Barrio ElderPlan Inc. ElderPlan Inc. ElderWood Health Element Care Inc. Element Care Inc. Element Care Inc. ElipsLiffe (ERA Only) Elite Physicians Group	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF07 EPF07 MPM04 64192 31625 31625 31625 03964 04326 04326 IAS20 EPG01	837 835 837 837 837 837 837 837 837 837 837 835 835 837 835 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		✓ ✓ ✓	✓ ✓ ✓								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYECTO DEI BARTIO EI PROYECTO DEI BARTIO EIderPlan Inc. ElderPlan Inc. ElderPlan Inc. Elderwood Health Element Care Inc. elipsLife (ERA Only) Eitte Physicians Group Emanate Health IPA	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 31625 03964 04326 04326 IAS20 EPF01 MPM62	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		✓ ✓ ✓	✓ ✓ ✓								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno El Paso First - CHIP El Paso First - CHIP El Paso First - CHIP El PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS El Paso First Health Plan Premier Plan Star Medicaid HMO El Paso First Health Plan Premier Plan Star Medicaid HMO El PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) El Proyecto Del Barrio ElderPlan Inc. ElderPlan Inc. ElderPood Health Element Care Inc. Elderwood Health Element Care Inc. Element Care Inc. ElipsLife (ERA Only) Eite Physicians Group Emanate Health IPA (NMM) Emanate Health IPA (Center PDT MSO)	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF37 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 31625 03964 04326 04326 IAS20 EPG01 MPM62 NMM01	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}		<i>y y y y</i>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYOCTO DEI Barrio Elderhaus Inc. ElderPlan Inc. ElderPlan Inc. ElderPlan Inc. Elderwood Health Element Care Inc. Element Ca	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 03964 04326 04326 04326 IAS20 EPF01 MPM62 NMM01 MPM62 NMM01 MPM46 MPM47 11271	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					_			
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYECTO DEI Barrio Elderhaus Inc. ElderPlan Inc. ElderNead Health Med Center NMM Emanate Health Med Center NMM Emanate Health Med Center PDT MSO Emblem Dental Emblem Dental	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF07 EPF07 MPM04 64192 31625 31625 03964 04326 04326 IAS20 EPG01 MPM62 NMM01 MPM46 MPM47 11271 EMBDQ	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					_			
EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) EBMS (Employee Benefit Management Services Inc.) Edenbridge PACE of West Baltimore Edenbridge PACE of West Baltimore Edison Health Educator's Mutual (EMIA) EGID (Employees Group Insurance Division) EHS Medical Group - Fresno EI Paso First - CHIP EI Paso First - CHIP EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS EI PASO FIRST HEALTH PLAN PREMIER PLAN MEDICAL HOND EI PASO FIRST HEALTH DEN PREMIER PLAN STAR MEDICAID HIMO EL PASO FIRST HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP) EI PROYECTO DEI BARTIO EIderPlan Inc. EIderPlan Inc. EIderPlan Inc. EIderPlan Inc. ElderPlan Inc. Elderwood Health Element Care Inc. Element C	12X44 81039 81039 83491 R3491 R3491 66456 SX110 22521 SYMED 12T27 TH090 EPF37 EPF02 EPF02 EPF02 EPF07 MPM04 64192 31625 31625 03964 04326 04326 04326 IAS20 EPF01 MPM62 NMM01 MPM62 NMM01 MPM46 MPM47 11271	837 835 837 837 837 837 837 837 837 837 835 837 835 837 835 837 837 837 837 837 837 837 837 837 837				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_			_	_			

Payer Name	Payer Code	Transaction		vailab P			rollmer P		CO			Attach				tter Id	Notes
EMHS Employee Health Plan	16565	835	_	√	_		1	Ť	_	Ť	Ŧ			7		Ť	
EMHS Employee Health Plan	16565	837	√ √	_	Н	 	<u> </u>		/ /	/	+	+	+	+	+	_	
EMI Health	SX110	835	√	_	П	✓	√		1	1	T						
EMI Health	SX110	837	\checkmark	✓	П	✓	√	V	/ /	/	Т				T		
EMI-KP Ambulance Claims	59299	837		✓													
Empire Dental	55093	835			✓			√									
Empire Dental	55093	837			✓					√			~	/			
Empire Healthcare IPA	EHI01	835	✓	✓	ш	✓	✓			┸	┸				_		
Empire Healthcare IPA	EHI01	837	√	✓	ш	ш	_		/ /	_	_				_		
Empire Omnipro (BC NY City)	12B36	837	\perp	$m{arphi}$	ш	ш	_			_	_	_	_	_	_	_	
Empire Omnipro (BC NY State)	12B35	837			Н	$oldsymbol{oldsymbol{ iny}}$	\dashv			+	+	4	4	-	+	-	
Empire Physician's Medical Group Employee Benefit Concepts (Farmington Hills MI)	EMP01 38241	837 837	√	√ √	-	lacksquare	_	_	+	+	+	_	_	-	+	_	
Employee Benefit Consultants, Inc.	37257	835	√	_	\boldsymbol{dash}	√		_	+	+	+	-	+	+	+	+	
Employee Benefit Consultants, Inc.	37257	837	√	_	1	H	Ť		+		/						
Employee Benefit Logistics	92135	835	√ √	_		√	7	_	+	Ť	+	+	+	+	+	+	
Employee Benefit Logistics	92135	837	✓	_	\vdash	一	Ė		/ /	/	1				\top		
Employee Benefit Services	37216	835	√	_	П	√	√		T		Т						
Employee Benefit Services	37216	837	✓	✓				V	/ /	/							
Employee Benefit Services Inc. (EBSI)	60221	835	√	✓		√	✓				Ι						
Employee Benefit Services Inc. (EBSI)	60221	837	✓	✓			\Box				I						
Employee Benefit Systems	42149	837	√	✓	-	口	$oldsymbol{oldsymbol{oldsymbol{oldsymbol{I}}}$										
Employee Benefits Administration & Management Company	22262	835	ш	✓	ш	Ш	✓				L						
Employee Benefits Administration & Management Company	22262	837	لبل	√	ш	ш	_	_	_	_	_	_	\bot	_	\bot	_	
Employee Benefits Plan Administration Inc. (E.B.P.A.)	03036	837	L ✓	√	ш	ш	—	_	4	4	4	_	4		-		
Employee Health Systems	SYMED	837	√	_	_	ш	_	_	_	_	_	_	_	_	_	_	
Employee Plans LLC	35112	837		√	$oldsymbol{\sqcup}$	$oldsymbol{oldsymbol{\sqcup}}$	$\boldsymbol{\dashv}$	_	_	_	_	_	_	_	_	_	
Employee Security, Inc.	54098	837	+	√ /	Н	$oldsymbol{oldsymbol{ iny}}$	_	_	- √		+	_	_		_		
Employer Direct Healthcare Employer Plan Services, Inc.	48888 74212	837	√ √	√ /	_	√	√	_	+	+	+	-	+	-	+	+	aka Fringe Benefit Group - Houston
Employer Plan Services, Inc.	74212	835 837	√ √	_	_	Ě	Ť		/ /	/	_				-		aka Fringe Benefit Group - Houston
Employer's Direct Health - Employee Plan	75236	837	<u> </u>	√ √	-	\vdash	+	·	·		+	+	+	+	+	+	aka TTIIIge benent Group - Trouston
Employer's Direct Health - FI	75235	837	<u></u>	√	Н	\vdash	\rightarrow		+		+						
Employer's Direct Health - SF	75233	837	<i>\</i>	_	П	\vdash	-	_	_	_	+			_	_	_	
Employers Direct Health	75232	837	\checkmark	✓	П				1	1	T						
Employers Health Network	IHS07	837	✓	_	П	\Box	\neg	_	/ /	/	T				_		
Employers Mutual Inc (Jacksonville Florida)	59298	837	✓	✓													
Employers Mutual Inc. (Stuart Florida)	59331	837	✓	✓													
Empower 360	IHS01	837	✓	✓				~	/ /	/							
Empower Healthcare Solutions	12956	835	✓	_	_	✓	✓			\perp							
Empower Healthcare Solutions	12956	837	✓		-	ш	_		/ /	_	_						
EnableComp MVA	ENCMV	837	√	-	_	ш	_		/ /	_	_	_	/	_	_	_	Client must be contracted with EnableComp
EnableComp OOS Medicaid	ENCMD	837	√	_	_	$oldsymbol{oldsymbol{ iny}}$	\rightarrow		/	_	_	√ \ ⁄	_	-	+	+	Client must be contracted with EnableComp
EnableComp VA EnableComp WC	ENCVA	837	_	√ /	_	$oldsymbol{oldsymbol{ iny}}$	_	·	/ /	_	+	√	_	_	+	_	Client must be contracted with EnableComp Client must be contracted with EnableComp
Encircle PPO	ENCMP 35206	837	_	√ /	_	\vdash	\rightarrow	-	+	+	-	<u> </u>	_	-	+	+	Client must be contracted with EnableComp
Encore Health Network	35206 35206	837 837	√ √	_	_	$oldsymbol{oldsymbol{ o}}$	\dashv		+		+				+		
Enstar Natural Gas	91136	837	√	_	-	\vdash	\dashv	-		_	+	\dashv	+	+	+	_	
Enterprise Group Planning, Inc.	EGPIN	835	√	<i>√</i>	_	√	√	1	\top		T				\top		
Enterprise Group Planning, Inc.	EGPIN	837	√	_	-	\sqcap	\top		T		Т						
Enterprise Life Insurance Company	62325	837	✓	_	_				/ /	/							
Enterprise Life Insurance Company	USHA1	835	✓	✓		√	√										
Entrust, Inc	36878	837	✓	✓			\Box	V	/ /	/	I						
Envolve Dental	46278	835	Ш	\Box	√	口	$oldsymbol{oldsymbol{\Box}}$	√			I						
Envolve Dental	46278	837	\Box	لب	✓	Ш	$oldsymbol{\perp}$		Į.	√	<u> </u>		V	/			
Envolve Vision	56190	837	₩	√	ш	ш	_	_	,	_	+	_	+	+	+	_	
Eon Health	85468	837	√	√	-	Н	\rightarrow		/ /		+	_	+	_	+	-	
Epic Assistance	49578	837	√ /	_	_	Н	_	_	/ /	_	+	_	+	+	+	+	
EQUICOR EQUICOR - PPO	62308 62308	837 837	_	_	_	${oldsymbol{ op}}$	\dashv		/	_	+	+	+	+	+	+	
Erie Insurance Medicare Supplement (ERA Only)	IAS06	837	√ √	_	_	√	/	-	<u> </u>		+	+	+	+	+		
ERISA	TH110	837	Ť	√ √	_	\vdash			-		Н	+	+	+	+		
Esperanza PACE	R3465	835	√	_	_	${oldsymbol{ op}}$	\rightarrow	\dashv			+		+		+		
Esperanza PACE	R3465	837	7	V	П	\sqcap	\neg				T	_					
		835	<i>\</i>	_	Н	√	1		+	1	1	-		\top	1		
Essence Healthcare	20818	033	V .	٧,													
Essence Healthcare Essence Healthcare	20818 20818	837	✓	_	_	\Box			/ /	/	_				┱		
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Payer Name	Payer Code	Transaction	Ava	ailable P	e E	nrollm P	nent D		COB		ittachm P			mitter P	Notes
Essential Health Partners IPA	EIPA9	837	✓												
Eternal Health	RP037	837	_	7	_	1	+	_	_	_	_	+	\vdash	_	
Everence I & P	35605	835		√	√	√	\Box								
Everence I & P	35605	837	√				${f au}$	_		_	+	1	П		
Everest Reinsurance (ERA Only)	IAS07	835	√	√	√	√	T								
Evernorth Behavioral Health, Inc	62308	837	√	√			П	✓	√						
Evernorth Network Services	62350	837		√					✓						
Everpointe	32052	837	√	√											
eviCore	62160	837	\checkmark	\checkmark											
EVOLENT SOMOS ANTHEM NY	81508	835	_	√	√	√	Ш								
EVOLENT SOMOS ANTHEM NY	81508	837	√	√				✓	√						
															As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at this
Evolent Specialty (formerly New Century Health)	NCHCA	837	√	√			ш	✓	√			4	ш	_	time.
Evolent Specialty (formerly New Century Health)	NCHINS	837	✓	✓				✓	✓						As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at this time.
Evolent Specialty (formerly New Century Health)	NCHON	837	√	√				√	√						As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at this time.
				T			\Box	7							As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at this
Evolent Specialty (formerly New Century Health)	NCHOR	837	✓	✓				✓	✓						time.
			П	T				丁		Т					Inst: As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at
					1										this time. ; Prof: As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this
Evolent Specialty (formerly New Century Health)	NCHUR	837	✓	√				\checkmark	✓						payer at this time.;
Evolutions Healthcare Systems (New Port Richey FL)	59313	835		√	√	√									
Evolutions Healthcare Systems (New Port Richey FL)	59313	837	_	√											
Exceedent LLC	22344	837	_	√				✓	√						
Excellus - BCBS Utica Watertown	12B38	835	√		√		ш			_			Ш		
Excellus - BCBS Utica Watertown	12B38	837	√	_			ш	√	_	_			ш		
Excellus - BCBS Utica Watertown	SB806	835		√		√	ш						Ш		
Excellus - BCBS Utica Watertown	SB806	837	√	√			ш	✓	√	_			\sqcup		
Excellus - Blue Cross Blue Shield Central NY	12B37	835	√ .	_	√		\bot	_	_						
Excellus - Blue Cross Blue Shield Central NY	12B37	837	√	_			ш	√	_	_			\sqcup		
Excellus - Blue Cross Blue Shield Central NY	SB805	835	-	√ <u> </u>		✓	ш	_	_	_		4	ш	_	
Excellus - Blue Cross Blue Shield Central NY	SB805	837	_	√	4		ш		√ _	_					
Excellus - Blue Cross Blue Shield Rochester Area	12B40	835	V	_	_ ✓	\perp	\vdash	_	_	_	_	_	ш	_	
Excellus - Blue Cross Blue Shield Rochester Area	12B40	837	√	_		_	\vdash	_	_	_			ш		
Excellus - Blue Cross Blue Shield Rochester Area	SB804	835		√		✓	-	_	_	_	_	_	ш	_	
Excellus - Blue Cross Blue Shield Rochester Area	SB804	837		√	_		\vdash	_	✓	_			\vdash		
ExclusiCare Figure 1 to 1 to 1	71412	837	_	√ /		_	+	,	,	_		+	\vdash	_	
Exemplar Health	83383	837		√ /			+	√	√ /	_			\vdash	_	
Extended Care MLTC	46166	837	_	√ /			\vdash	√	√	_			\vdash	_	
Eye Management, Inc. (EMI)	65062 91136	837 837	/	√		+	+	-	-	_		+	Н	-	
F40 Alaska Carpenters Trust FABOH(CHP/RPU)	39112	837	√ √	/			+	√	V						
Facey Medical Foundation	95432	835		√ √	+	√	_	Ť	<u> </u>	+	-	+	\vdash	-	
Facey Medical Foundation	95432	837	_	√ √		Ť	+	_	_	_					
FACS Group	37300	837	_	\	+	+	+	-	_	_	+	+	\vdash	-	
Fallon Community Health Plan	22254	835	_	√ √	./	√	+	-	_	+				-	
Fallon Community Health Plan	22254	837	_	√ √	Ť	Ť	$\boldsymbol{\vdash}$	_		_		+	-		
Family Care Specialists	FCS01	837	<i>\</i>	_			+	-							
Family Care Specialists (FCS)	MPM40	837	_	<i>√</i>	_	+	+	√	√	_	_	+	\vdash	_	
Family Choice Medical Group	CAPMN	835		√ /	√	1	\vdash	Ť	Ť	+		+	\vdash		
Family Choice Medical Group	CAPMN	837	-	√ √	Ť	Ť	+	√	√					_	
Family Choice Medical Group Family Choice Medical Services	FCMS2	835	<i>√</i>		√	√		_	\pm	\top				_	
Family Choice Medical Services	FCMS2	837	Ĭ,		√ .	Ť	\vdash	7							
Family Practice Medical Group	10145	835	<i>\</i>	<u> </u>	√	√	$oldsymbol{ o}$							1	
Family Practice Medical Group	10145	837	V		Ť		$oldsymbol{ o}$	7						_	
Family Seniors Medical Group	HCMG1	837	<i>√</i>	_			\Box	√	√						
Farm Bureau Health Plans (ERA Only)	62045	835	_	√	√	√	_	丁							
Farm Bureau Health Plans & MAPD	RP061	837	√				\Box	1							
FCE Benefit Administrators	33033	835	✓		√	√	\Box	寸	7				П		
FCE Benefit Administrators	33033	837	√	✓				✓	✓					一	
FCL Dental	CX090	837		_	√			_1		√		✓			
FDNY World Trade Center Health Plan	FDNYP	837		√		√		T							
FDNY World Trade Center Health Plan	FDNYU	837	√		√			╗							
Federal Employee Plan of South Carolina (BCBS SC)	00402	835	✓	√	√	√									
Federal Employee Plan of South Carolina (BCBS SC)	00402	837	√	_				╗							
Federated Benefits	37300	837	✓	√										1	
Federated HR Services	37300	837	√	√											
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Service of Colors Service Serv	Payer Name	Payer Code	Transaction			_	_	_	_			_				Р		Notes
Section Sect	Fenix Medical Group	60818	835		_		/	_										
Fig. Co. 24 197 19	·			_	_		T	7		T	_	T	_	1				
Figs Care Revort 1115	Fenyx Health Group MSA	83309		√	✓					Ī		Ī						
File State No. 1975 File State Stat	Fidelis Care EVV	EVVNY	837	✓	\checkmark													Use only for Fidelis Care New York Electronic Visit Verification claims.
Files File						`	/	✓										
Fig. 1 (1992)									V	′ √								
March Marc							_	_				4						
SECOLAM SECOLA	·			-	_	_	_	_				_			\vdash			
Miles							/	/		-	-	-						
Face Continue Conti				-	_	+	/	<u> </u>	-	+	+	+						
Proceedings						-	/	./	-	+	+	+		+	+			
Part Control (Part Part				_	_	+	_	Ť	_	+	+	+						
Process Proc				_	-		/	1	_	+	_	+			1			
Procedure Proc																		
First Crown Membrid Group First Crown Membrid Group Membridge First Crown Membrid Group Memb	First Choice MA Plans	FCMA1	835	✓	✓	,	/	√		1	1	1	1	1				
Part Clove Medical Congal Mentage	First Choice MA Plans	FCMA1	837	✓	✓													
First Choice Noted Comp/Nortrage FF001				_	_				V	′ √		Γ						
PRIC Clocke (Next ISC)																		
First Choice of Market						$\perp \Gamma$	\perp	Д		Ţ		L			\Box			
Part Charles V Part						`	/	\checkmark						4				
First Choice W Fire (SC - 1989) 32866 337						\dashv	4	4	_	_	_	+		1				
Part Charles W De Lee No. 50-2009						_	_	_	V	√		+		-				
First Choice Vin Care Pilus by Select Health of South Carolina First Medical Network (FMM) - Althratio CA First Medical Care First Medi				-	_	—	/	√	_	+		+		+	\vdash			
Fast Checker We Care Flish by Select Health of South Carolina Profit Medical Televinor (AMI) - Attantic A Pro						-	/	./		→	+	+		+				
### Part Mercial Network (FMM) - Albrita GA Face Compensation Dectal Recompensation Dectal Recom				-	_	-	<u> </u>	<u> </u>		+	-	1						
Institution health				_	_	-	+	-	-	, ,/	_	-/	/ /	+	_			
Face Compensation Derival Fire Privals Blue Medicare FibMos Sist V V V V V V V V V									_	_	_	Ť	Ť					
Family F				Ť	Ť	√	+	\dashv	Ť	Ť	_	+	_	1	1			
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Finds Community Care							1	7		1	1	1		1				
FLEPE	Florida Community Care	FLCCR	835	✓	✓	,	/	√										
Find	Florida Community Care	FLCCR	837	✓	\checkmark				٧	′ √	′							
Borlate First	Florida Complete Care	FLCPC		✓	\checkmark	,	<u> </u>	✓										
Bords New Ministrators			-	✓	_				V	` ~								
Bindia Health Administrators					_			_										
Bords Health Care Plan				_	_	`	<u> </u>	√	_		_	4			_			
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Florida PACE Center FLPAC 837	Florida Medicare				_		_	_		√		Т		1				
FMH Benefit Services Inc. 48117 835 V	Florida PACE Center		837	√	✓		1			I		I						
FMH Benefit Services Inc. 48117 837 ✓				_	✓					I		Γ						
For Your Benefit						\	/	√		Į		Į						
Forest County Potawatomi Insurance 25059 835				_	_		Ţ	_[L		L		1	$oldsymbol{oldsymbol{\sqcup}}$			
Forest County Potawatomi Insurance 25059 837	For Your Benefit			√	√		_	_	V	√				4				
Foundation for Medical Care of Tulare & Kings County Foundation for Medical Care of Tulare & Volume &	·						/	√	\bot	+	-	+		1				
Fountain Valley IPA CAPMN 837 √ √ √ √ √ √ ✓ </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>+</td> <td>4</td> <td></td> <td>+</td> <td>√</td> <td>+</td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td>						√	+	4		+	√	+		-				
Fox Valley Medicine Site 199 FVMCH 837 √ √ ✓						+	+	\dashv	+		_	+		+				
Fox-Everett Inc. 64069 835 ✓						-	+	\dashv		→	+	+		+				
Fox-Everett Inc. 64069 837 ✓	·						/	/	+	+		+		1				
Franciscan Purdue FAIPUR 835 √ √ √ ✓ <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>+</td> <td><u> </u></td> <td>+</td> <td>+</td> <td>1</td> <td>+</td> <td></td> <td>+</td> <td></td> <td></td> <td></td> <td></td>							+	<u> </u>	+	+	1	+		+				
Franciscan Purdue FAIPUR 837 ✓ <td></td> <td></td> <td></td> <td></td> <td></td> <td>_</td> <td>/</td> <td>√</td> <td>+</td> <td>+</td> <td>Ť</td> <td></td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td></td>						_	/	√	+	+	Ť			1				
Franciscan Senior Health & Wellness FSHW1 835 ✓										Т		Т		1				
Franciscan Senior Health & Wellness FSHW1 837 \(\sqrt{V} \) \(\sq							T	1		T		T		1				
Freedom Claims Management 67136 837 🗸 🗸 🗸 🗸 🗸				_	_	√	1	7	V	<i>\</i>	′ √			1				
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1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Freedom Health Plan	41212	835	_	_		/	√		I		Ι						
Freedom Health Plan 41212 837 🗸 🗸																		
Freedom Life Insurance 62324 835 🗸 🗸 🗸 🗸 🗸	Freedom Life Insurance	62324	835	√	✓		/	√										

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Payer Name	Payer Code	Transaction	_	_	_	_	_	D I		D		Р	_		Р	_	Notes
Freedom Life Insurance	62324	837	✓	\checkmark													
Friant Water Users	TKFMC	837	✓	✓													
Friday Health Plans	H0657	835				√	√										ormerly known as Colorado Choice Health Plans
Friday Health Plans	H0657	837	_	√	_	_	_	√	√							F	ormerly known as Colorado Choice Health Plans
Fringe Benefit Coordinators	59204	835	√ /	√	_	√	✓			-				_	_		
Fringe Benefit Coordinators Fringe Benefit Group	59204 45289	837 835	√ /	√ √	_	√	√	- √		-	-			_			
Fringe Benefit Group	45289	837	_	√ √	-	v	V	_	+	+-	-			-	-	-	
Fringe Benefit Group	93158	837	√ _	√		+	_										
Fringe Benefit Management	59069	837	√	✓		_	_		1	1	1				_		
FrontPath Health Coalition	34171	837	✓	✓		T											
Galveston County Indigent Health Care	30005	837	✓	✓													
Garden State Life Insurance Company (ERA Only)	IAS24	835	✓	✓		\checkmark	\checkmark										
Gardena Memorial Medical Center	SYMED	837	✓	✓													
Gary and Mary West Pace	GMWP1	837	√	✓		_	_			_							
Gateway Health Plan - Medicare Assured	60550	835	√ /	√ /	-	√ _	✓			_	_			-	_	_	
Gateway Health Plan - Medicare Assured Gateway Health Plan Medicaid PA	60550 25169	837 835	√	√ √	-	√	/	-	+	1	1			-	-		
Gateway Health Plan Medicaid PA Gateway Health Plan Medicaid PA	25169	835	✓ ✓	-		'	<u>√</u>	+	+	\vdash	H			\dashv			
Gateway IPA (Pinnacle Health Resources) (Prospect Medical Group)	PROSP	837	Ť	√ √		+	-		√		Н			\dashv	-	-	
GBS Group Benefit Services, Inc	80241	837	√	√	√	1			Ť					\dashv			
Geisinger Health Plan	75273	835	√	√		√	√				П						
Geisinger Health Plan	75273	837	✓	√		1			✓								
Geisinger Health Plan	GHP22	835			√			√									
Geisinger Health Plan	GHP22	837			√					✓							
GEMCare (Golden Empire Managed Care System)	MCS01	837		✓	_	4					_						
GemCare Health Plan, Kern County EPO	MCS03	837	√	√	_	_	_	_									
Gemcare IPA	27133	837	✓	√ /	_	_	_			_	_			_	_		
General Vision Services Generations Healthcare	GVS01 46050	837 837	/	√ √	-	-	-	_	+	+	-			_	-		
Generations-Hillcrest	46051	835	./	√ ✓	-	+	_		_		-						
Genesee Health Plan (JVHL)	MBJVH	835	√ √	√	_	√	√	_	+	1	_			_			
Genesee Health Plan (JVHL)	MBJVH	837	✓	-	_	_	√	√	√							Р	rovider must be an approved JVHL lab
Genesis Healthcare	PROSP	837	✓	✓				√	√								·
Georgia Health Advantage	31140	837	✓	✓				√	√								
Georgia Medicaid	12K05	835	√			✓											
Georgia Medicaid	12K05	837	✓					√									
Georgia Medicaid	SKGA0	835	Ш	√	_	4	✓		—	_	_			_	_		
Georgia Medicaid	SKGA0	837		✓		_	-		✓	-	-						
Georgia Medicare Georgia Medicare	12M05 12M05	835 837	√			√ √	-		+	-	1			-	-		
Georgia Medicare	SMGA0	835	Ť	√	-	-	√	Ť	+	1	_			_			
Georgia Medicare	SMGA0	837		√		1	√		√								
GHI - New York (Group Health Inc.)	13551	835	√	_	√ ·	√	√	√		т	1				_	t	
GHI - New York (Group Health Inc.)	13551	837	✓	✓	√	T		√	√	√			✓				
GHI HMO	25531	835	✓	✓		√	✓										
GHI HMO	25531	837	✓	_				√	√								
GHP (Group Health Plan) - MULTIPLAN PHCS/GROUP HEALTH	25141	837	L,	√	_	_											
Glendale Adventist Medical Center	NMM01	837	√ /	√	_	,	_	_	-	1	-			_	_		
Global Care Inc. Global Care Inc.	07689	835	√ /	√ /	-	√	✓		√	\vdash	⊢			_	_		
Global Care Medical Group IPA	07689 MPM05	837 837		√ √	-	+	-	√ ./	√	+	+			-			
Global Excel Management	GEM01	835		√		√	1	Ť	Ť								
Global Excel Management	GEM01	837		√		+		\top			П			\dashv			
Global Health	GHOKC	837	√			1		√	√					一			
Global Healthcare Alliance	12X59	837	✓			1											
Global Medical Management	GMICC	837	_	\checkmark													
Global TBSP	MPM64	837	√.	√		Ţ	_[_ √	√		L			[[А	s of October 12, 2023, ERA is not available for this payer.
Globe Life and Accident Insurance Company (ERA Only)	91472	835	✓	√		√	✓		Ι,	-				_		4	
GMP - Employers Retiree Trust	23641	837		√ /	_	/	_	_	√	\vdash	\vdash			_	_		
GMP - Employers Retiree Trust GMR Healthcare	GMPER 85664	835 837	V	√ /	-	√	√	_	+	-				\dashv	-	-	
GMS Inc.	47083	837	√ ✓	√ √		√	√	_						\dashv	-		
GMS Inc.	47083	837	√ √	√ ✓	-	Ť	`	./	√					-	-	-	
Gold Coast Health Plan	77160	835	√	√		√	√	Ť	Ť		T			\dashv			
Gold Coast Health Plan	77160	837	✓	√					I								
Gold Kidney Health Plan	A6865	835	✓	\checkmark		√	√										
Gold Kidney Health Plan	A6865	837	✓	\checkmark		Т											

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Payer Name	Payer Code	Transaction	A)	vailal P	D	Enro	_	_		OB P	_			ts S	ubmit P	ter Id	Notes
Golden Bay Health Plan	GBHP1	837	√	√				,	/	√	7						
Golden Bay Health Plan	NEMS1	835	√		П	√	√		Ť	Ť	7				_	_	
Golden Coast MSO	GCMSO	837	✓	✓				,	/	√							
Golden Shore Medical Group (GSMG)	NMM03	835	✓	✓		\checkmark	\checkmark										
Golden Shore Medical Group (GSMG)	NMM03	837	_	✓				_	_	√							
Golden State Medical Group	MBA01	837	✓	_		_	_	,	/	_	4						
Gonzaba Medical Group	GMGSA	835	✓		ш	√	√		_	_	_				_		
Gonzaba Medical Group	GMGSA	837	✓	√	ш	_	_		+	_	4			_	4		
Good Samaritan Medical Practice Association Good Samaritan Medical Practice Association	IP086 PROSP	837 837	√	√ √	\vdash	-	-	_	/	√	+	_		_	+	+	
Government Employees Health Association (GEHA)	39026	837		·	./	\dashv	_		4		√	√	√	_	+	_	
Government Employees Health Association (GEHA)	44054	835	./	√	ľ	√	√	+	+	+	`	·	·	+	+	+	
Gravie Inc.	GRV01	835	√			_	√		+	_	+				+		
Gravie Inc.	GRV01	837	√			Ť	_		+	_	+				_	_	
Great American Life Ins. Co-Medicare Supplement	13193	837	√	_		7			T	1	1						
Great Southern Life (ERA Only)	IAS09	835	✓	✓		✓	✓			1	T				1		
Great States Health IICT	GSHTX	837	✓	✓				,	/	√							
Great-West Healthcare	62308	835	√			√	√										
Great-West Healthcare	80705	837	✓	_	Ш												
Great-West Healthcare (formerly American General)	63665	837	√	_	ш	[Į.		_[
Greater Covina Medical Group	GCMG1	837	Ļ	√	ш	_	Ļ		_	4	4						
Greater Newport Physicians	GNPMG	835	√ /	√	Н	√	√	_	/	_	4	_		_	_	_	
Greater Newport Physicians	GNPMG	837	√ √		\vdash	4	-	,	/	√	4						
Greater Newport Physicians Medical Group	33010	837	✓ ✓		Н	\dashv	_	_	+	+	+	_		_	+	_	
Greater Orange County Medical Group Greater San Gabriel Med Grp	NMM01 NMM01	837 837	√ √	_	\vdash	-	-	+	+	+	+	-			+	-	
dieater San Gabrier Med Grp	INIVIIVIOI	637		Ť	Н	\dashv	-	_	+	+	\dashv		-	_	+	+	
Greater Valley	HCP01	837	./					Ι.	/								This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
Group Administrators Ltd.	36338	835	√	√		√	√	_	+	_	+	-	_	_	+	+	This payer is now part or optamed a Network rease submit daming payer code oction.
Group Administrators Ltd.	36338	837		√		Ť	Ť		+	1	+						
Group and Pension Administrators	48143	835	✓	_	✓	✓	✓	√	T	_	7	_			1		
Group and Pension Administrators	48143	837	✓	✓	✓				T								
Group Benefit Services Inc.	CB951	835	✓	✓		✓	✓										
Group Benefit Services Inc.	CB951	837	✓	✓													
Group Benefits - Louisiana	72087	837		✓			\checkmark										
Group Health Co-op	12X16	837	✓							_							
Group Health Cooperative of South Central Wisconsin	39167	835	✓			√	✓		4	_	4	_					
Group Health Cooperative of South Central Wisconsin	39167	837	√			_	_		4	_	4				_	_	
Group Insurance Service Center Inc.	37276	837	√ /	_	ш	_	_		+	_	4			_	4		
Group Management Services Inc	OBA16 66701	837 835	√ √	√ √	\vdash	/	√	_	+	+	+	_		_	+	+	
Group Marketing Services, Inc. Group Marketing Services, Inc.	66701	837		√ √		✓	^		+	+	+				+		
Group Resources	28680	837	√ ✓	_		-	-	-	/	√	+	-		-	+	+	
Guarantee Trust Life Insurance	TLW81	835	√			√	√		+	Ť	1						
Guardian Life Insurance Company of America	64246	835	_	✓	√	_	√	√	+	_	+				_	_	
Guardian Life Insurance Company of America	64246	837	✓	✓	✓				T	1	√			√			
Guidant Health Plan	GHP01	837	✓	✓		T				1							
Gulf Guaranty	99943	837	✓	✓				,	/	√							
Gulf Guaranty	99953	835	√	√		✓	✓										
Gulf South	60389	837	✓	_	✓			_	/	√ .	√						
Gulf Stream-General Dynamics	CB624	837	✓	_		_		,	/	√	4						
Gundersen Health Plan / Quartz	39180	835		√	ш	√	√		_	_	4						
Gundersen Health Plan / Quartz	39180	837	√ /	-	Н	_	_	<u> </u>	/	√	4	_		_	+	+	
H.E.R.E.I.U Welfare Pension Funds	37114	837	√ /		\vdash	-	4	-	+	+	4	-			+	-	
HAA Preferred Partners Halcyon Behavioral Health	65101 HALCY	837 837	√	_	H	-	-	\dashv	/	√	+					+	
Halos Systems	HALCY	837	✓	_	\vdash	√	√	+	<u> </u>	<u> </u>	+			-	+	+	
Halos Systems	HALOS	837		√ √	\vdash	Ť	Ť	_	/	√	+						
Hamaspik Choice	47738	835	√	_	_	√	√		+	+	+	\dashv	-				
Hamaspik Choice	47738	837	√	_	П	1	Ť		+	\dashv	1						
Hammerman and Gainer, Inc	97258	837	✓		П	7	7	\neg	1	_	1						
Hanover Insurance Company	WP927	835		√	П	√	√		1	一							
HAP CareSource Michigan Dual Medicare Medicaid	MIMCRCS1	835	√				√					丁				1	
HAP CareSource Michigan Dual Medicare Medicaid	MIMCRCS1	837	✓														
HAP CareSource Michigan Marketplace	MICS1	835	✓			\checkmark	\checkmark										
HAP CareSource Michigan Marketplace	MICS1	837		✓					I		I						
HAP Midwest Health Plan (JVHL)	JBJVH	835	_	√	Ш	√			Ţ		_[
HAP Midwest Health Plan (JVHL)	JBJVH	837	✓	✓		✓	✓	,	✓	√							Provider must be an approved JVHL lab

Month Marked Services 1971	Payer Name	Payer Code	Transaction		_	le D			nt D I	COB				ents D		itter I P	Notes .
1952 1972 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	HAP/AHI/Curanet	38224	835			_	_	_									
Sector March 19				√ ✓	_	-	Ť	Ť								_	
Section Process (1987) 1. Proce				√			√	√	_	1						_	
Security Mark the Williams	Harbor Health Plan								√	√							Provider must be an approved JVHL lab
Second Second Proof Information Second Second Proof Information Secon	Harmony Health Plan of Illinois	14163	835	✓	√		√	√		Т	П					_	
	Harmony Health Plan of Illinois	36406	837	✓	✓				√	✓							ERA Payer Code 14163
Second	Harmony Health Plan of Indiana	36405	835	✓	✓		√	✓									
Secretary Reserved Secretary Secreta	Harmony Health Plan of Indiana	36405	837	√	√					✓							ERA Payer Code 14163
Secretary Reserved Secretary Secreta																	
Secregion Federal Facus (Cornelly Secretary Se	Harrimon Jones			✓			_		√								This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
Part	- U			✓	_												
Post Part				✓	✓												
Post				✓			_										
Section Control Cont	·			✓	_	_	√	√	_	_					_	_	
Secure Spring	·			√	_	_	_	_	√	√							
Service Medical Service				√,	_	_	√	√	4	Ļ ,						_	
Part				✓	✓	_	4	_	. ✓	√					_	_	
				Ш		_	4		<u> </u>	_	_		Ш	$\vdash \vdash$	_	_	
1800 1800				—		√	4	_	_	1	✓		Ш	\vdash		_	
Second Process Seco				√	√	_	,	_		_			Ш	$oldsymbol{\sqcup}$	_	_	
Marie Mari				✓		_	_	_		1		—		$\vdash \vdash$	_	_	
Second Medical Assurance Association (MAAA)-MAMCs 4810 817 7 7 8 8 8 8 8 8 8				_	_	_	_		_	√					_	_	
Second Medicane				√	_	-	√	√		1				\vdash	-		
Second Medicaries				√	_	_	_	_	_					\vdash		_	
MCCL Ministration					_	_	_	_	_	_				\vdash	_	_	
C.C. Ministration				\blacksquare	_	_	_	√	_	√					_	_	
## STATE AND PROVIDED STATES S				_	√	_	-	_	_	-				\vdash	_	_	
HIGS - Header Claims Service (Blotes ID) 4018 \$377 V V V V V V V V V				√		_	_	_	_	-				\Box	_	_	
Name Marian Marian Maria				✓	_	-	-	-		1						-	
Name Part Milliance Part Milliance Part Milliance Part Milliance Part Capitated Contracts) District Milliance Part Part				,	_	_	,	,	+	-				ш		_	
International Princing Capitated Contracts) International Princing Capitated Contracts) International Princing Fee for Service Contracts International Princing Fee for Service Contract				√	_	-	√	√		-						-	
				V	_	_	/	_		√						_	
Halth Allance Plan (Fee for Service Contracts)				V	_	_	_	√ /	- /	/				\vdash		_	Dravidar must be an empressed IVIII lab
Method Mallance Plant (Fee for Service Contracts)				V	_	_	_			√						_	Provider must be an approved JVHL lab
MPM06				V /	_	_	_	_	- /	/				\vdash	_	_	Dravidar must be an empressed IVIII lab
Health Care New (Michael (Michael Michael Mich				√	_	_	_	_		· ·				\vdash		_	Provider must be an approved JVHL lab
Health Care Network of Wisconsin (HCN)				V /	_	-	v	V	- /	/					-	-	
Health Canage Pathway				· /	_		\dashv	_	·	· ·						-	
Health Change Pathway				./	· ·	-	+	+	+	+-		1		\vdash	-	+	
Health Chairs Arthron				_	./	-	./	./							-	-	
Health Choice Arizona				_		./	<u> </u>	`	- /	./	1	1		+	+	+	
Health Choice Airsona Health Choice Generations Utah 13054 8377 V V V V V V V V V V V V V V V V V V				_	$\overline{}$	_	./	./	Ť	Ť						-	
Health Choice Generations				_	_	_	Ť	Ť	+	1		_		-	_	_	
Health Choice Generations Utah 4599 837 450 4510 4529 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 4521 835 450 450 45399 837 450 450 45399 837 450 450 45399 837 450 450 450 450 450 450 450 45				_	_	./	_		/	./							
Health Choice Generations Utah				1	_	Ť	_	√	Ť	Ť		1		-	_	_	
Health Choice Insurance Co 4621 837 7 7 837 7 7 838 7 7 839 837 7 7 837 7 839 837 837				1	_	-	_	_								-	
Health Choice Pathway Health Choice Utah				_	_	_	+	Ť	_	1	т	1	H	-	_	_	
Health Choice Utah				1	_	√	+	1	√	1						1	
Health Choice Utah				<i></i>		_	√	√	Ť	Ė	т			_		_	
Health Cost Solutions 62111 835				_	$\overline{}$	_	_	_									
Health Cost Solutions 62111 837				1	_	_	_	_	_					\blacksquare		_	
Health Design Plus (Hudson OH) 34158 837 7 7 837 7 837 7 837 7 837 7 837 7 837 7 837 7 837 7 837 837 7 837				√	_		1										
Health Excel IPA Health First Health Plan Inc. (ERA Only) Health First Health Plans Health Rist Health Plans Health Rist Health Plans Health Rist Health Plans Health Rist Health Plans Health Net of California and Oregon Health Net of California and Oregon Health Network One Health Network One Health New England Health Options Inc (FL - BCBS HMO) SX030 Hard Sara V V V V V V V V V V V V V V V V V V	Health Design Plus (Hudson OH)						_		_	1						_	
Health Excel IPA Health First Health Plan Inc. (ERA Only) Health First Health Plans Health Rist Health Plans Health Rist Health Plans Health Rist Health Plans Health Rist Health Plans Health Net of California and Oregon Health Net of California and Oregon Health Network One Health Network One Health New England Health Options Inc (FL - BCBS HMO) SX030 Hard Sara V V V V V V V V V V V V V V V V V V	Health Economics Corp	39026	837	√	√		1	1	√	✓		✓	✓				
Health First Health Plans	Health Excel IPA			✓	_		_		_	_				\Box			
Health First Health Plans 95019 837	Health First Health Plan Inc. (ERA Only)	A5234	835	✓	✓		√	✓									ERA Only
Health First Health Plans 95019 837	Health First Health Plans			_	_									T		Т	
Health Net of California and Oregon 95567 835	Health First Health Plans	95019	837	✓	✓		T										For claims with a DOS prior to 01/01/22 and on or after 01/01/2023.
Health Net of California and Oregon 95567 835	Health First TPA Austin						T										
Health Net of California and Oregon 95567 837	Health Net of California and Oregon			✓	-		√	√									
Health Network One 65062 837	Health Net of California and Oregon		837	✓			T		√	✓		✓	✓				
Health New England 04286 837 √ √	Health Network One				_												
Health Options Inc (FL - BCBS HMO) 12B26 837 √	Health New England	04286	835	✓	✓	T	√	√		L		L					
Health Options Inc (FL - BCBS HMO) SX030 837 🗸 💮 🗸 💮 💮	Health New England	04286	837	✓	√												
	Health Options Inc (FL - BCBS HMO)	12B26	837	✓			\Box										
tealth Partners of Philadelphia 80142 835 🗸 🗸 🗸 🗸 🗸	Health Options Inc (FL - BCBS HMO)	SX030	837		✓		\Box			✓							
	Health Partners of Philadelphia	80142	835	✓	✓		√	√									

Davies News	Davies Carle	Transaction	A	vaila	ble	Enr	rollme	ent	C	ОВ		Attach	ments	Su	bmitte	r Id	Makes
Payer Name	Payer Code	Transaction	-1	Р	D		Р	D	1 1	P [D	I P	D	-	Р	D	Notes
Health Partners of Philadelphia	80142	837	_	✓	_												
Health Payment Systems Inc.	20270	835	√	_	_	✓	✓		_	_	_	_					
Health Payment Systems Inc.	20270 76342	837	√ /				/	-	-	-	-	-					
Health Plan of Nevada Health Plan of Nevada	76342	835 837	_	√ √	_	✓	✓		√ ·	√	+						
Health Plan of San Joaquin	68035	837	√ √	_	_	√	√		_	√	+	-		+			
Health Plan of San Joaquin	HPSJ1	835	1	_	_	√	_		Ť	Ť	+						
Health Plan of San Mateo	HPSM1	835	✓	_	_	√	_		_	_	_	1					
Health Plan of San Mateo	HPSM1	837	✓	✓													
Health Plan of San Mateo Dental	HPSMD	837			√					Í	/		✓				
Health Plans Inc.	44273	835	✓	√		✓	✓										
Health Plans Inc.	44273	837	√	_	_												
Health Plus	KEJVH	835	✓	✓	_	✓	✓										
Health Plus	KEJVH	837	√,	_		✓	✓	_	✓ 、	√ _	_	_		_			Provider must be an approved JVHL lab
Health Risk Management	41170	837	√	√	,		Н	_	-	4	-	_		_			
Health Safety Net (HSN) Health Safety Net (HSN)	CKMA1 CKMA1	835 837	-		√ √		Н	√	+	+	/	_	√	+			
Health Services for Children with Special Needs	37290	835	./	√		√	√	-	+	+	'	-	V	+-			
Health Services for Children with Special Needs Health Services for Children with Special Needs	37290	837	√ √	_		V	H		+	_	+						
Health Services Management	41150	837	Ť	√	_		\vdash	_	+	_	+	\dashv	_				
Health Services Preferred (HSP) by Emerald Health	34167	837	√	· ✓		Н	\Box		+		T						
Health Source MSO	HSMSO	837	√			П					\top						
Health Special Risk, Inc	65449	837	✓	√	_				✓ 、	✓							
Health Texas Medical Group	HTHTX	837	√	✓													
Health2Business Inc	55213	837	✓	\checkmark													
HealthBridge	74853	835	✓	_	✓	✓	✓	√			_						
HealthBridge	74853	837	✓		✓				_	_	_						
Healthcare Highways	HCH01	835	_	√	_	√	✓	_	_	_	_	_		_			
Healthcare Highways	HCH01	837	_	√	_		Н	_	-	-	-	_		_			Tff-shire for datas of annihila an anaftan 4 /4 /2020
Healthcare Highways Health Plan Healthcare In Action	HCHHP	837	V	√ /	√			_	_	_	_						Effective for dates of service on or after 1/1/2020
Healthcare Management Administrators (HMA)	MPM56 HMA01	837 835	√ √	√ √		√	√	-	-	-	-	-		+			
Healthcare Management Administrators (HMA)	HMA01	837	√ ✓	_	_	_	Ľ	- 1	✓ 、	√	+						
Healthcare Partners	HCP01	835	1	_	_	√	√		Ť	Ť	+						
			Ė	Ė						1	T						
Healthcare Partners	HCP01	837	✓	✓					√ 、	✓							This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
HealthCare Partners IPA	11328	835	✓	✓		\	\checkmark										
HealthCare Partners IPA	11328	837	✓	✓					_	_	_						
Healthcare Partners of Nevada	20501	835	√,	_	_	✓	✓	_	_	_	_	_		_			
Healthcare Partners of Nevada	20501	837	√				Н	_	√ 、	√	-						
Healthcare Resources NW Healthcare Solutions Group	56731 73147	837 835	√ /	√ √		√	/	-	+	+	+	_		+			
Healthcare Solutions Group	73147	837	√ √	_	_	· ·	·	-	√ ,	√	+	_	_	+			
Healthcare Strategic Initiatives	HSICS	835		√ ✓			H	- 1	<u> </u>	<u> </u>	+						
Healthcare Strategic Initiatives	HSICS	837	V	_			Н	_	_	_	+	_		_			Payer returns ERA automatically.
HealthChoice Oklahoma	71064	837	✓	√	_					_	1						
HealthCosmos Medical Group LLC	COSAZ	837	✓	✓					√ 、	√	1						
HealthCosmos of Nevada PLLC-	COSNV	837	✓	✓					√ ·	√							
Healthease	59608	835	√	✓		\	✓										
Healthease	59608	837	_	✓	_												
HealthEdge Administrators	95213	837	✓	✓				_	_	_	_						
HealthEZ	41178	835	√	√		✓	✓		_	_	_						
HealthEZ	41178	837	√ /				Н	_	√ 、	✓	_	_					
Healthfirst 65 Plus	80141 80141	837 837	√ √			Н	\vdash		+	-	+	-	+				
Healthfirst Family Health Plus (FHP) Healthfirst Health Plan of New Jersey	80141	837	√ √	-		Н		\dashv	+	+	+	+	+				
Healthfirst Inc. (New York)	80141	835	√ √	_		√	√	\dashv	_	-	+	+	+				
	80141	837		√			H			-	+						
Healthfirst Inc. (New York)				Ė			П		_		\top	_					
Healthfirst Inc. (New York) Healthfirst PHSP	80141	837	√						_	_	_	_			_	_	
		837 837	_	√													
Healthfirst PHSP	80141			√ √		√	√				+						
Healthfirst PHSP HealthFirst TPA	80141 34185 75234 75234	837 835 837		✓		√	√		√ ,	√							
Healthfirst PHSP HealthFirst TPA Healthfirst Tyler TX Healthfirst Tyler TX Healthfirst Tyler TX Healthfirst Tyler TX	80141 34185 75234 75234 56144	837 835 837 835	√ √ √	√ √ √		√ √			√ ,	√							
Healthfirst PHSP HealthFirst TPA HealthFirst Tyler TX HealthFirst Tyler TX HealthFirst Tyler TX HealthFirst Tyler TX HealthFirst Nc. HealthFirst Nc.	80141 34185 75234 75234 56144 56144	837 835 837 835 837	\frac{1}{\sqrt{1}}	√ √ √							‡						
Healthfirst PHSP HealthFirst TPA Healthfirst Tyler TX Healthfirst Tyler TX Healthgram Inc. Healthgram Inc. HealthGroup Limited	80141 34185 75234 75234 56144 56144 23274	837 835 837 835 837 837	\ \frac{1}{}	\ \(\)					√ ,	√							
Healthfirst PHSP HealthFirst TPA Healthfirst Tyler TX Healthfirst Tyler TX Healthfirst Tyler TX Healthgram Inc. HealthGroup Limited HealthGroup Limited	80141 34185 75234 75234 56144 56144 23274 23226	837 835 837 835 837 837 837	\ \frac{1}{\sqrt{1}}	\ \ \ \ \ \ \ \ \ \ \ \ \					√ , √ ,	√ √							
Healthfirst PHSP HealthFirst TPA Healthfirst Tyler TX Healthfirst Tyler TX Healthgram Inc. Healthgram Inc. HealthGroup Limited	80141 34185 75234 75234 56144 56144 23274	837 835 837 835 837 837	\frac{1}{\sqrt{1}}	\ \ \ \ \ \ \ \ \ \ \ \ \					√ , √ , √ ,	√							

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Payer Name	Payer Code	Transaction	_	_	_	_	_	D I				Р			P C	
HealthNow - BCBS Northeastern NY	12B68	835	√			√	T		Г							
HealthNow - BCBS Northeastern NY	12B68	837	✓					√								
HealthNow - BCBS Northeastern NY	SB800	835		√			✓									
HealthNow - BCBS Northeastern NY	SB800	837		✓					√							
HealthNow - Blue Cross Blue Shield of Western NY	12B39	835	√		_	✓				_				_		
HealthNow - Blue Cross Blue Shield of Western NY	12B39	837	√	,	_	_	,	- √	-	+-	-			_	_	
HealthNow - Blue Cross Blue Shield of Western NY	SB801	835	Н	√ 	_	_	√	_		4				_	_	
HealthNow - Blue Cross Blue Shield of Western NY Healthnow Division	SB801 55204	837 835	Н	√ √	-	-	/	-	√	+	1			-	-	
Healthnow Division	55204	837		√ ✓	-	-	·	+	+	+				-	+	
Healthpartners	94267	835	1		√	√	√	√	+	+	1	1 1	_	_	_	
Healthpartners	94267	837		-	√					√						
HealthPartners MN Dental	HP001	835	П		√	_	_	√	1	1		1		十	_	
HealthPlan Services	59140	835	✓	✓		✓	√									
HealthPlan Services	59140	837	✓	√				√	✓							
HealthPlex Dental	11271	835			✓			√								
HealthPlex Dental	11271	837			✓					✓			√			
HealthPlus Managed Long Term Care	45302	837	_	√		_		√	√	1	_				4	
HealthScope Benefits (UMR)	40026	835	_		_	√	√		Ļ	4	lacksquare	Щ	_	_	_	
HealthScope Benefits (UMR)	40026	837	✓	-	_	4	4	- √	_	_		\blacksquare		_	+	Only for claims whose patient ID card shows 40026 as the payer ID.
HealthSelect IPA (IL) Healthsmart Accel	SB621	837	/	√ /	\dashv	\dashv	_		√ √	_				+	+	ERA Payer Code 00621
HealthSmart Benefit Solutions	75237 37272	837 835	√ √	√ √	\dashv	√	√	√	V			\vdash		+	+	
HealthSmart Benefit Solutions	37283	835	\ \/	√ √	_	_	√ √	+							+	
HealthSmart Benefit Solutions	37283	837	√ √	√ ✓	_	Ť	Ť	√	√	1		+	-	+	+	
HealthSmart Benefit Solutions fka Wells Fargo TPA.Inc.	87815	835		√		√	√	Ť	Ť							
HealthSmart Preferred Care Inc.	75250	837	✓	_		_			√	1		1 1		_	_	
Healthsource AR (Med) (CIGNA)	71075	837	✓	√				√	√							
Healthsource CMHC	02041	837	✓	✓				√	√							
Healthsource GA (CIGNA)	58210	837	\checkmark	\checkmark				√	√							
Healthsource KY	61127	837	✓	√				√								
Healthsource Massachusetts Inc.	02041	837	_	_				√	✓							
Healthsource ME	01041	837	√	-	_	_			╄.	_				_	_	
Healthsource N. TX (CIGNA)	75255	837	√	√ /	_	_	_	√			-			_	_	
Healthsource NC (CIGNA)	56147	837	✓	√ /	_	_		√	_	_				_	_	
Healthsource NH Healthsource OH	02038 31141	837 837	/	√ √	-	-	-	√	√ √	_	-	+ +	-	-	-	
Healthsource SC	06119	837	./	V	-	_		√	Ť	+				+	_	
Healthsource TN (CIGNA)	62129	837	\ \	√	_	_	_		√	+	1		_	_	_	
HealthSpring HMO/HealthSpring Medicare+Choice	63092	835	<i>\</i>	√		√	√	Ť	Ť							
HealthSpring HMO/HealthSpring Medicare+Choice	63092	837	✓	_					1	1				_		
Healthsun Health Plans	HESUN	835	✓	✓		✓	√									
Healthsun Health Plans	HESUN	837	\checkmark	✓												
HealthTeam Advantage	88250	835	✓	√		✓	✓									
HealthTeam Advantage	88250	837	✓	-				√	✓							
HealthTeam Advantage Diabetes and Heart Care Plan (DOS < 1/1/23)	88350	837	✓	✓	_	_								_		
Healthways WholeHealth Networks	58213	837	H	√ /	_	4		_	Ļ	\vdash		\Box	_	_	_	
Healthy Blue Dual Advantage Louisiana	00551	837	√	√ /	_		/	√	√						+	
Healthy Blue Kansas	00047 00047	835 837	√ √	√ √	\dashv	√	√	+	+	1	√	√		+	-	
Healthy Blue Kansas Healthy Blue Missouri	00047	837		-	\dashv	√	√	+	\vdash	+		V	-	+	+	
Healthy Blue Missouri	00541	837	√ √	_		Ť	Ť	+							+	
Healthy Blue North Carolina	00602	835		√	_	√	√		т					\neg		
Healthy Blue North Carolina	00602	837									√	✓				
Healthy Mississippi Medicare Advantage	99914	837	✓													
Healthy San Francisco	HSF01	837	✓	✓				✓								
Healthy York Network	22251	837	_	✓				√	√							
HealthyBlue LA	00661	835	_	√		√	√		L							
HealthyBlue LA	00661	837	√	√	_	_			L	_	✓	√		_	_	
Hemet Community Medical Group (HCMG)	HCMG1	837	_	-		_	_	√	√						4	
Hennepin Health	60058	835	√,	√ /	_	√	√	_	Ι.	\bot		\Box	_	_	\bot	
Hennepin Health Heritage Consultants	60058	837	√	√ /	_	4	4	√	√			+			+	
Heritage Consultants Heritage Provider Network	59230 DESRT	837 837	Н	√ √	\dashv	\dashv		+	+	+				-		
Heritage Provider Network Heritage Victor Valley	VVMG1	837	\vdash	√ √	\dashv	\dashv	-	+	\vdash	+			-	+	+	
Heritage Victor Valley Medical Group	30862	837	1	√ ✓	\dashv	_								+	+	
Heritage Vision Plans	96462	837	Ħ	√		1			1							
HFN Inc.	36335	835	√	_		√	√									

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Payer Name	Payer Code	Transaction	_	Р	D	1	_	D I	_	D	_		D I	Р	D	Notes
HFN Inc.	36335	837	1	✓	7	7	7	_	т				_	_	_	
High Desert Medical Group	95393	837	_	<i>\</i>	\dashv	\dashv	\dashv	+					+	+	\vdash	
High Desert Medical Group	HDMDG	835	<i>√</i>	_	_	_	_	_	_	\vdash		_	_	+-	+-	
High Desert PACE	R3467	835	-	√		√	√	+								
High Desert PACE	R3467	837	<i>.</i>	-	_	Ť	Ť	_		Н			_	+	+	
Highmark BCBS Delaware Health Options	47181	835	1	<i>\</i>		√	1									
Highmark BCBS Delaware Health Options	47181	837	1	V		Ť	Ť	√	1				_	+		
Highmark Blue Cross & Blue Shield of Pennsylvania	54771	835	H	<i>\</i>	-	1	√	Ť	t							
Highmark Blue Cross & Blue Shield of Pennsylvania	54771	837	Н	V	_	_	<i>√</i>	_	1	т			_	+	1	
Highmark Blue Cross & Blue Shield of Pennsylvania Central	54771C	835	/	H	- t	1	Ť	+	t							
Highmark Blue Cross & Blue Shield of Pennsylvania Central	54771C	837	<i></i>	П	\neg	√	_	√					_	_		
Highmark Blue Cross & Blue Shield of Pennsylvania Southeastern	54771S	835	√		_	√	_	Ť								
Highmark Blue Cross & Blue Shield of Pennsylvania Southeastern	54771S	837	✓	П		√	_	√	т	т				_		For claims with DOS on or after 1/1/2024.
Highmark Blue Cross & Blue Shield of Pennsylvania Western	54771W	835	√		_	√		Ť								
Highmark Blue Cross & Blue Shield of Pennsylvania Western	54771W	837	√	\Box	_	√	_	√					_	_		
Highmark Blue Cross Blue Shield West Virginia	54828	835	√	√	_	√	√	Ť								
Highmark Blue Cross Blue Shield West Virginia	54828	837	✓	_				√	✓					1		Formerly Mountain State Blue Cross Blue Shield of West Virginia
Highmark Health Options Dual	47183	837	V	√		_		Ť	Ė	П						,
Highmark Health Options West Virginia	RP118	837	<i>\</i>	_	_	_	_		П	П				1		This payer is not available for production until August 1, 2024.
Highmark Senior Solutions (PA)	95462	835	V	√		√	√			М						
Highmark Senior Solutions (PA)	95462	837	√	<i>\</i>	_	_	<u>√</u>	√	√	М						(aka Freedom Blue Medicare Advantage)
Highmark Senior Solutions (WV)	95461	835	<i>√</i>	-	_	_	√ 	Ť	Ė							
Highmark Senior Solutions (WV)	95461	837	<i>.</i>	V	_	_	<u>√</u>	√	√							
Hill Physicians Medical Group	00046	837	√	√		Ť	Ť	Ť	Ė							
Hill Physicians Medical Group	HILO1	835	<i>√</i>	<i>\</i>		√	√									
HIP - Health Insurance Plan of Greater New York	55247	835	√	✓	_	_	√									
HIP - Health Insurance Plan of Greater New York	55247	837	<i></i>	√	\neg	Ť		√	1				_	_		
Hispanic Physicians IPA	HPFFS	837		√		_	_	Ť	Ė							
Hispanic Physicians IPA (Encounters Only)	HPIPA	837	Н	√	_	_	_	_	1				_	_		
HMA - Health Management Admin	12T11	837	/	H		_										
HMA Hawaii	86066	835	<i></i>	√	$\overline{}$	√	√	_					_	_		
HMA Hawaii	86066	837	√	✓		Ť	Ť									
HMC HealthWorks aka Health Management Co	75318	837	✓	_		一十		_	1					1		
HMO Louisiana Inc	84555	837	√	√												
HMSO-Highline Medical Service Organization	91164	837	✓	√		一十	_	_	П	П				1		
HN1 Therapy Network (HN1TN)	65062	837		✓												
Hoag Physician Partners	HPPZZ	835	✓	√		√	√	_								
Hoag Physician Partners	HPPZZ	837	√	√												
Holista (Novant Health Direct to Employer)	HLSTA	835	✓	✓		√	✓	-								
Holista (Novant Health Direct to Employer)	HLSTA	837	✓	√												
Holista, LLC	ATHAL	837	✓	_		7	_	√	✓							
Hollywood Presbyterian Global	MPM29	837	✓	✓				√	✓							
Hollywood Presbyterian Medical Center - Preferred	AMM18	837	✓	√		7	_	_								
Hollywood Presbyterian Medical Center - San Judas IPA	AMM17	837	✓	✓												
Hollywood Presbyterian San Judas	MPM49	837	✓	✓		_		√	✓							
																J6 Part A HHH – Contractor Code 06001. For any neighboring states, please reference the
Home Health & Hospice J6 NGS - Wisconsin (06001)	RHHWI	835	✓			✓										NGS Crosswalk to confirm contractor code.
· · · · · · · · · · · · · · · · · · ·						7	_	_								J6 Part A HHH – Contractor Code 06001. For any neighboring states, please reference the
Home Health & Hospice J6 NGS - Wisconsin (06001)	RHHWI	837	✓			✓										NGS Crosswalk to confirm contractor code.
Home Health & Hospice JK NGS	JKHHH	835	√			√										
Home Health & Hospice JK NGS	JKHHH	837	✓			√		√						Т		
Home Health & Hospice Jurisdiction M	12M80	835	✓		_	√										
Home Health & Hospice Jurisdiction M	12M80	837	✓		_	√		√						Т		
			П						П							J6 Part A HHH - Contractor Code 06014. For any neighboring states, please reference the NGS
Home Health Hospice J6 NGS (06014)	12M98	835	✓			✓										Crosswalk to confirm contractor code.
			П			7								Т	П	J6 Part A HHH - Contractor Code 06014. For any neighboring states, please reference the NGS
Home Health Hospice J6 NGS (06014)	12M98	837	✓			✓		✓						1	1	Crosswalk to confirm contractor code.
Homelink	30750	837	√	√		1		√	√							
Hometown Health Plan Nevada	88023	835	_	-		√	✓		П	П						
Hometown Health Plan Nevada	88023	837	_	-												
HOMETOWN HEALTH PLAN NV SENIOR CARE PLUS COMPLETE P3 MCR	58379	835	_	√		√	√		П	П						
HOMETOWN HEALTH PLAN NV SENIOR CARE PLUS COMPLETE P3 MCR	58379	837	√	✓		_										
Hope Select Care Pace	R3499	835	√	_		✓	✓								1	
Hope Select Care Pace	R3499	837	✓	_	√	_										
HORACE MANN LIFE INSURANCE COMPANY	HMLIC	837	√	√				√	✓						1	
Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ)	22099	835	✓		√	\checkmark	√	√								
Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ)	22099	837		_	√	\neg	\neg	√	✓	П		,	/	T		
Horizon Healthcare of NY	22099	837	_	√				√	_				/			
						_										

			A۱	ailab	le	Enro	llme	nt	COE	3	Att	tachme	ents	Subm	nitter	Id	u.
Payer Name	Payer Code	Transaction	_	_	D	_	_	D I		D	- 1	Р	D	1	Р	D	Notes
Horizon New Jersey Health	22326	835	\checkmark	\checkmark		√	\checkmark										
Horizon New Jersey Health	22326	837	✓	√	_	_		√	√					_		_	
Horizon New Jersey Health	HNJ01	835	Ш	_	√	_	_	√						_	_		
Horizon New Jersey Health Horizon PACE	HNJ01 R4569	837 837	√	√	√	-	-	_	-	√			_	-	-	-	
Horizon Valley Medical Group	HVMG1	837	./	√ √	-	-									_		
Horizon Valley Medical Group	HVMG1	837	√ √	√ ✓	_	_	-		√				_	_	-	-	
Hotel Employees & Restaurant Employees Health Trust	91136	837	√	_				Ť	Ť								
HPC	82802	837	✓	√	_	_	_										
HS1 Medical Management	65062	837		✓													
HSA Health Insurance Company	U7632	837	✓	✓													
HSBS Memphis	37224	835	✓	✓		✓	✓										
HSBS Memphis	37224	837		√	_	_	_	_							_	_	
HSBS Oklahoma City	37256	835	√	√ /	_	√	_		+				_	_	_	-	
HSBS World Trade Center Health Program	31172	835	√ √	√ /	-	√	√		,						_		
HSBS World Trade Center Health Program HSHS Medical Group IPA	31172 37137	837 835	✓ ✓	√ √	-	√	√	√	√				-	-	-	-	
HSHS Medical Group IPA	37137	837	√ √	√ √		Ť	Ť										
Humana (JVHL)	KVJVH	835	√ √	√ ✓	_	√	√						-	-	7		
Humana (JVHL)	KVJVH	837	√	√	_	_	√	_	√	П					_	P	Provider must be an approved JVHL lab
Humana Choice Care Network	61101	837	✓	√				√			✓	√			丁		
Humana CompBenefits	CX021	835			√			√									
Humana CompBenefits	CX021	837			√		I			✓					I		
Humana Dental	61101	835			√		Ţ	√							Ţ		
Humana Dental	73288	837	Ш		√	_	_			✓			√		_		
Humana Dermatology - New Century Health	NCH02	837	,	√	-	-	_				_	,	_	_	-	_	
Humana Emphesys Humana Employers Health Insurance	61101 61101	837 837	√ /	√ /	_	_	_	√			√ /	√ /			_		
Humana Employers Health Insurance Humana Inc.	61101	837	√ √	√ √	-	√	√	√	√		✓	√	-	-	-	-	RA Payer Code 61101
Humana Inc.	61101	837	√ ✓		-	<u> </u>	<u> </u>	√	√		√	./			_		rich Payer Code 01101
Humana Long Term Care	61115	837	√ √	√ ✓	_	_	_	Ť	Ť		Ť	·	_	_	_	-	
Humana of Puerto Rico	65018	837	_	✓													
Humana Ohio Medicaid	61103	837	✓	_	T		_		1								
Humana Ohio Medicaid	SKOH0	835	✓	✓		✓	✓									E	ffective 2/1/2023, remittance returned under Ohio Medicaid
Humana Ohio Medicaid Vision	6110V	837	✓	√													
Humana Ohio Medicaid Vision	SKOH0	835	√	✓		√	√									E	ffective 2/1/2023, remittance returned under Ohio Medicaid
Humboldt-Del Norte Foundation for Medical Care	94154	837	√	√	_	_	_	√	√						_	_	
Huron PACE	54750	837	√	√ /	_	-	_		+				_	_	_	_	
Hylton Payroll (Benefit Plan Administrators) I. E. Shaffer (West Trenton NJ)	19753 22175	837 835	√ /	√ √	\dashv	√	√	_	+					_	_	_	
I. E. Shaffer (West Trenton NJ)	22175	837	√ √	√ √	\dashv	V	V	-	+-		1		-	-	-	-	
l'Mcare	41600	835	√ √	√ √	_	√	√		+						_		
l'Mcare	41600	837	<i>.</i>	<u>,</u>	_	Ť	Ť	_	_						_	_	
IAA	37279	835	✓	√		√	√										
IAA	37279	837	✓	✓													
IBC Personal Choice	12X26	837	\checkmark					√								E	RA Payer Code SX055
IBC Personal Choice	SX055	835	✓	_		√	✓										
IBC Personal Choice	SX083	837	.	√	_	_	_		√		_			_		E	RA Payer Code SX055
IBEW Local 1	44602	835	√ /	√ /	_	√	√		,		_		_		_	_	
IBEW Local 1	44602 74234	837 837	√ ./	√ √	\dashv	-	+		√			\vdash		-	+	-	
IBEW Local 640 & Arizona Chapter NECA Health & Welfare Trust IBG Administrators, LLC	81810	837	✓ ✓	√ √	\dashv	\dashv	+	_				\vdash		\dashv	_	_	
IBM Business Transformation Outsourcing Insurance Services Corporate	19028	837	√	·	-	-	+							-	-	-	
iCare Health Solutions	26054	835		√	_		\dashv										
iCare Health Solutions	26054	837		√			7		✓								
ICE Health Services (Immigration)	VAICE	835	✓	\checkmark		✓	\checkmark										
ICE Health Services (Immigration)	VAICE	837	✓	√													
iCircle Care of New York	ICRCL	835	✓	√			Ţ								Ţ		
iCircle Care of New York	ICRCL	837	√	√	_	_	4	_	1	ш	_	Щ	_	_	_	_	
Idaho Medicaid	12K07	835	√ /		\rightarrow	√	4	-					_	_	4	4	
ldaho Medicaid Idaho Medicaid	12K07 SKID0	837	✓	/	-	+	/		-	Н	\vdash	\vdash		_	4	_	
		835 837		√ √	-	\dashv	√		√			\vdash		-	-	-	
Ildano Medicaid	SKIDU																
ldaho Medicaid Idaho Medicare	SKID0 12M07		_/	Ť	_	√								✓			
ldaho Medicaid Idaho Medicare Idaho Medicare	SKID0 12M07 12M07	835 837	√ √		_	√ √	7						_	√ √		+	
Idaho Medicare	12M07	835	√ √	√	_	√	√	_					_	√	√	+	
idaho Medicare Idaho Medicare	12M07 12M07	835 837	√ √		_	√	√ √	✓	√				_	√	√ √		

			Λ	vailabl	o F	inrol	llmen	*	CO	R	Λ+	tachm	onts	Sub	mitte	ar Id	
Payer Name	Payer Code	Transaction	ı		D I	_	_	D I	Р	_	_	_	D	_	Р	D	Notes
IHG Direct	75274	837	√	√	T	T	T	7	T	т	т						
Illinois Complete	MHPIL	837	\checkmark	√				√	√		✓	✓					For DOS on or after 1/1/21
Illinois Health Partners	36364	837	✓	\checkmark													
Illinois Health Partners (DOS < 1/1/23)	66727	835	√	_	٧	/ \	√										
Illinois Health Partners (DOS < 1/1/23)	DMG01	837	✓	-		4	_		_								Claims with DOS after Jan 1 2023, please submit to payer code 36364
Illinois Medicaid	CKIL1	835		\vdash	√ /	4		✓	_	.							
Illinois Medicaid	CKIL1	837	,		√	_	_		Η,	√	_						
Illinois Medicaid	SKILO	837	√ /	✓		/	-	√	√								
Illinois Medicare Illinois Medicare	12M08 12M08	835 837	√ √	Н		_	+		+	+	+						
Illinois Medicare	SMIL0	835		√		_	√		+-	+	+-			-			
Illinois Medicare	SMILO	837		V	_	_	√ √	-	√	+							
Illinois Physicians Alliance IPA	IPA99	837	√	_	_	+	Ť	_	Ť	+	_						
IMA, Inc	64556	837	√	-		+	1		1								
Imagine Health	43123	837	√			+	_	_	1	1	1						
IMPACT HEALTH SHARE INC	IH400	837	✓	✓		T		√	√								
Imperial County Physicians Med Group (SCPMCS)	SCP01	837	✓	✓		T	1		1	1							
				П													
Imperial County Physicians Medical Group	MPM68	837	✓	✓				√	√								As of April 23rd, 2024 Electronic Remittance Advice (ERA) is not available at this time.
Imperial Health Holdings Medical Group	IHHMG	837	✓			Ţ		√	_	_							
Imperial Health Plan of California, Inc.	IHP01	837	√			Ţ		✓	_	_	L						
Imperial Insurance Companies	IICTX	837	√	_		┸		√	√	\bot	_		lacksquare	ш			
Imperial Insurance Companies Inc Exchange AZ	IEXAZ	837	√ /		\bot	+	4	4	-	-		4					
Imperial Insurance Companies Inc Exchange NV	IEXNV	837	√		\bot	+	4	\bot	1	\bot	_	_		Ш			
Imperial Insurance Companies Inc Exchange UT	IEXUT	837		√	+	+	+	4	+	-		+					
Imperial Insurance Inc Exchange TX	IEXTX	837	√ /	√	_	+	+		+	+	_						
IMS Management Svcs - Texas IMS TrialCard	12T64 56155	837 835	√ /	/	_	/	/	_	+	+	-						
IMS TrialCard	56155	835	√ √			4	√	_	1	+	1						
IMX Easy	86070	837	√ √	_	-	+	+	· ·	Ť	+	+						
IN Physicians Associates - ACTY	INP12	837		V	+	+	+	+	+	+	\vdash						
IncentiCare	18151	837	√		_	_	_	_	+	+	1		1				
INDECS Corporation	40585	835	√	_	V	/ 、	√										
INDECS Corporation	40585	837	√	✓		T	\neg		1	1							
Independence Administrators	TA720	835		✓		,	√										
Independence Administrators	TA720	837		✓					√								
Independence American Insurance Company	CB231	837	✓	✓													
Independence Medical Group	MHM01	837		✓		┸											
Independence Medical Group - Kern County	IMG01	837	✓	✓		4	_	√	√								
Independent Health Association	95308	835	√	_		_	√ _		╀.		_			√	√		
Independent Health Association	95308	837	√	_	_	_	√ /	√	√	_	_			✓	✓		
Independent Health Care Plan(ICARE)	11695	835	√ /			<u> </u>	√		٠,	_	_						
Independent Health Care Plan(ICARE)	11695	837	_	√		+		√	√								
Indian Health Services Indian Health Services	12X75 SX171	837 837	√	-		+	+		+	+							
Indiana Childrens Special Health Care Services	35600	835	√	√ √	-	+	+	_	+-	+	-			-			
Indiana Childrens Special Realth Care Services	12K09	835	√ √	ľ	_	/	+		+	+							
Indiana Medicaid	12K09	837	√ √	H	Ť	+	+	1	+	+		+		\vdash			
Indiana Medicaid	SKINO	835	Ė	√	\top	1.	√	Ť	T								
Indiana Medicaid	SKINO	837		√		Т	_	\top	√	1							
Indiana Medicare	12M09	835	√		~	/			T								
Indiana Medicare	12M09	837	√		V	/	I	√	Ι								
Indiana Medicare	SMIN0	835		✓		\	√										
Indiana Medicare	SMIN0	837		√			√		√								
Indiana ProHealth aka Community Health Network	35161	835		√		_	√										
Indiana University Health Plan	95444	835	√		_	4	√		Ļ	_	_		lacksquare	ш			
Indiana University Health Plan	95444	837		√			_	4		_							
Indiana University Health Plan (Commercial)	23253	835		√		/ \	√	_	_	4	_	4	Ш	Ш		_	
Indiana University Health Plan (Commercial)	26212	837		√	_			4						ш			
Individual Assurance Company	30360	835	√ /			/ `	√	_	١,	-		+		Н			
Individual Assurance Company	30360	837		√	_	+	+		√	-				H			
Individual Health Insurance Companies Inetico Inc.	31053 43471	837 835	√ √		_	/ \	√	-	+	1	+	+		Н			
inetico inc.	434/1	835	√ √	_		+	v	_	√			+		H			
Inferico Inc.	52196	837		√ √	+	+	+	+	Ť					\vdash			
Ingham Health Plan Corporation	38343	835		√ √	-	/ ,	/										
Ingham Health Plan Corporation	38343	837	_	<i>√</i>	Ť	+	+	+	√								
Inland Empire Health Plan	99101	837		Ž		\top	+		Ť								
p . *******************************	33101	33,	Ľ	ш.					_		_	-			_	_	

Payer Name	Payer Code	Transaction	A۱	vailab	_	_	ollmer	_	COE			achmer		Submit	_	Notes
			Į.	P	D	1	Р	D I	P	D		Р	D I	Р	D	
Inland Empire Health Plan	IEHP1	835	√		Ш	✓	√		٠,				_	_		
Inland Empire Health Plan	IEHP1	837	_	√	ш	,	,	- √	√	+-			_	_	_	
Inland Empire health Plan (Covered California)	IECCA	835	_	√	-	√	√									
Inland Empire health Plan (Covered California) Inland Faculty Medical Group	IECCA MVMM1	837 835	√ /	√ √	\vdash	√	√		+-				_	+	_	
Inland Faculty Medical Group	MVMM1	837	_	√ √	\vdash	<u> </u>	<u> </u>		+	-			_	+	_	
Inland Valley - (Redlands IPA)	SYMED	837	_	√												
Innermark TPA	98481	837	√	_	√	_	_	_	1	1			_	_	_	
InnovAge	31182	835	_	✓		√	✓									
InnovAge	31182	837	√		_				1	1				_	1	
Innovation Health	40025	837	✓	_												
Innovative Healthware Solutions	04320	837	✓	√					1	1				1		
Innovative Integrated Health, Inc.	IIHPO	835	✓	√												
Innovative Integrated Health, Inc.	IIHPO	837	✓	✓	✓			√	√	✓						
Innovative Partners LP	32324	837	✓	\	>											
INSPIRA HEALTH NETWORK LIFE	R3482	835	✓	_		✓	√									
INSPIRA HEALTH NETWORK LIFE	R3482	837	✓	_												
InStil Health Insurance Company	INSTL	837	Щ	✓	ш	_			✓	_	_			\bot		
InStil Health Insurance Company	UNSTL	837	√	Ļ	Щ	_	_			4				_		
Insurance Design Administrators	13315	835	_	√	${oldsymbol{\sqcup}}$	√	√	_	+	_			_	+	_	
Insurance Design Administrators	13315	837	_	√	Н				-	-				-		
Insurance Management Services Texas	IMSMS	835 837	√ /	_	\vdash	√	√	_	+	1			_	+	-	
Insurance Management Services Texas			√	_	-	-	-		+-	-			_	+	_	
Insurance Services of Lubbock Insurance Systems	TH012 11889	837 837	./	✓ ✓	\vdash	\dashv	-	√	√				-	+	+	
Insurance Systems InsuranceTPA.com	39182	837	√ ✓	√	-	_			_	+				_		
Insurers Administrative Corp.	86304	837	√	√		_	_	Ť	t	\vdash			+	+		
Integra Administrative Group (Seaford DE)	51020	835		· ✓	\vdash	√	√	_	+-	1	1		_	_	_	
Integra Administrative Group (Seaford DE)	51020	837	✓	_			Ť									
Integra Group	31127	837	✓		П				1					_		
Integra Group-CHA	31129	837		✓												
IntegraNet Health	INET1	835	✓	✓												
IntegraNet Health	INET1	837	✓	√	✓											
IntegraNet SCAN	ISCN1	835	✓	\checkmark												
IntegraNet SCAN	ISCN1	837		✓	✓			√	√	√						
Integrated Care Network (ICN) by Emerald Health	34167	837	✓													
Integrated Health Partners (IHP)	MPM26	835	_	✓		✓	√									
Integrated Health Partners (IHP)	MPM26	837	✓.	_	Ш	_			4					_	_	
Integrated Homecare Services	IHCS1	835	√	_	\vdash	_	_		+-	_	_		_	_	_	
Integrated Homecare Services	IHCS1	837	√	_	Н	_	_		+-	-				_		
Integrated Medical Solutions LLC	20050	837	√ √	√	\vdash	-	-		1	1	-		-	+	+	
Integrity Administrators - South Tahoe Refuse Inter Americas Insurance Corp Inc.	28580 92649	837 837	_	✓ ✓	\vdash	-	_	√	✓	-			_	+	+	
Inter County Health Plan	54763	837		√	-	-		√	√				_	_	_	
Inter County Health Plan	IVHPA	837	√			-	+	Ť	Ť					+		
Interactive Medical Systems	56132	835	_	√	\vdash	√	√	_	+	1			_	_	_	ERA Only
InterCommunity Health CCO (IHN)	SAMHP	835	<i>\</i>	√		_	<i>√</i>		1							
InterCommunity Health CCO (IHN)	SAMHP	837	√	-	П	_		√	√	1					1	
InterCommunity Health Network	INTHP	835		✓												
InterCommunity Health Network	INTHP	837		√					✓						1	
Interface EAP (IEAP)	60280	837	✓	✓				√	√							
Intergroup Services Corporation	23287	837	✓	\												
Intermountain Healthcare (now known as SelectHealth)	SX107	837		√												
International Benefit Administrator	11329		√			✓	√									
International Benefit Administrator	11329	837	_	√	Ш											
International Brotherhood of Boilermakers	36609	837	_	√	ш	_			_	_	_			\bot		
International Brotherhood-IBBEHC	48603	837	√		ш	_	_	4	√	-	_		_	_		
International Med	IMGIN	837		√	Ш	_	_	_	\bot	_				+	_	
INTERWEST HEALTH PPO MONTANA	84137	837		√	H	_	/		-	-			_	-		
INTotal Health (claims with DOS on or after 7/01/2016)	35115	835		√ /	\vdash	√	√		-	1	\vdash		_	+	+	
INTotal Health (claims with DOS on or after 7/01/2016)	35115	837	√ /		\vdash	/	/	√	√	-	-		_	+	-	
Iowa Health Advantage Iowa Health Advantage	RP075	835 837	_	√ √	\vdash	√	V			1			-			
lowa Medicaid	12K10	837	√ √	V	\vdash	√	-	+	+				+	+	-	
lowa Medicaid	12K10 12K10	835	,/	Н	\vdash	√ √		√	+	1			_	/		
Iowa Medicaid	CKIA1	835	Ť	Н	√	Ť	-	√ <u>`</u>					-			
lowa Medicaid	CKIA1	837			√	_	_			√			\dashv	+		
Iowa Medicaid	SKIA0	835		√		_	√			Ė			-			
	2		_						_	_						I.

Company Comp				A۱	vailab	le	Enro	llmen	it	СОВ		Atta	achmen	ts S	ubmit	ter Id	
1982 1982	Payer Name	Payer Code	Transaction	_	_									_	_	_	Notes
March Marc	lowa Medicaid	SKIA0	837		✓			√		✓					√		
See See Management (Formers oppose) 1909 183 7 7 7 7 7 7 7 7 7	lowa Medicare	SMIA0	835	✓	✓		✓	√									
Teach Teacher Teache	Iowa Medicare	SMIA0	837	✓	✓		√	√	√	✓		√	✓				
The control of the	Iowa Safety Net Management Information System	18049	835		√			√									
Per Secularizance	Iowa Safety Net Management Information System				-			√							√		
Street S				✓	_				√	_	Ш	✓	✓		<u> </u>		
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Infector Infector Manuel 1997 Li Algory Park 1992 Li Algory Park 1993 Li Algory Park 1993 Li Algory Park 1994 Li Algory Park 1995 Li Algory Par				_	${}$	_	_	_	- /	/					+		chective February 20, 2023, route has changed to EDI Gateway 331
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Perform Mark Colored System 66018 835 7 7 7 7 7 7 7 7 7	JOHN MORRELL COMPANY CO AHPBA			_	-												
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International Proposed Reference Company	•			✓	_												
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Meson Seption Neurolane (1999P) 52139 835 7 7 7 7 7 7 7 7 7	John P Pearl and Associates	37215	837	✓	✓		Ī										
Part	Johns Hopkins Health Advantage	66003	835	✓	>	·	√	√									
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Informs Supplies Haumanger (1949) 52123 327				_	_												
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Digital Claims Sendit Management (no.				✓		_	_								4		
MORADA VALLEY PACE MCR / MCD				_	_	_	_	_	_					_	_	_	
Parley Corporation				√	-	_	_								-		
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PSP Preferred Care - PRESENSEQ CARE				_	-	-	-	+	+					-	+-	+	
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Kalser Foundation Health Plan of Southern CA Region 49.134 837	Kaiser Foundation Health Plan of Northern CA Region	94135	837	✓	✓												
Kalser Foundation Health Plan of the Mid-Atlantic States Inc. S2095 837	Kaiser Foundation Health Plan of Southern CA Region	94134	835	✓	✓		√	√									
Kaiser Foundation Health Plan of the Mid-Atlantic States Inc. 5.2095 837	Kaiser Foundation Health Plan of Southern CA Region	94134	837	✓	√				√	✓							
Kaiser Foundation Health Plan of the Northwest NW002 837 V V NW002 837 V V V V V V V V V V V V V	Kaiser Foundation Health Plan of the Mid-Atlantic States Inc.	52095	835	✓	>	·	√	✓									
Kaiser Foundation Health Plan of the Northwest Kaiser Foundation Health Plan Of Washington 91051 837 V V V V V V V V V V V V V V V V V V	Kaiser Foundation Health Plan of the Mid-Atlantic States Inc.			_	_				√	✓							
Kaiser Foundation Health Plan Of Washington 91051 835	Kaiser Foundation Health Plan of the Northwest			✓	-		√	√		$oldsymbol{\square}$	ш						
Kaiser Permanente of Georgia 21313 835	Kaiser Foundation Health Plan of the Northwest			✓	_		4	_		✓					_		
Kaiser Permanente of Georgia 21313 835				_	_	_	√	√	-	Ļ	ш	Ш		_	4	4	
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Kalos Heath 40137 835 V							V	√	/	./				_			
Kalos Heath 40137 837 ✓				_	_	-	/	1	-	'			\vdash				
Kane County BCBS KCIPA 837 ✓				_	_		٧	,									
Kansas City Life Insurance 44030 837 V				_	_	-	+	-					\vdash				
Kansas Medicaid MDKSI 835 V				H	-	\dashv	+	_		1				+	+		
Kansas Medicaid MDKSI 837 V I V	Kansas Medicaid			√			√	-		Ė							
Kansas Medicaid MDKSP 835 ✓ Image: Control of the	Kansas Medicaid			_			\pm	-	✓								
Kansas Medicaid MDKSP 837 V	Kansas Medicaid			Ħ	√		7	√	Ť								
Kansas Medicare 57324 835 ✓	Kansas Medicaid				-					√							
Kansas Medicare 57324 837 ✓	Kansas Medicare			✓			√			П							
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Kansas Medicare SMKSO 837 √ √ √ √ √ √	Kansas Medicare				✓		_	√		П	П				1	Т	
Kansas Superior Select 71066 835 🗸 🗸 🗸 🗸 🗸 💮	Kansas Medicare	SMKS0	837		✓			√		✓			✓				
	Kansas Superior Select	71066	835	✓	✓		√	√									

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Payer Name	Payer Code	Transaction		vallal P	D	_	_	D	_		D		_	nts D	Jub	P	D	Notes
Kansas Superior Select	71066	837		√														
Kaweah Delta	TKFMC	837	√	_	H	_	_	_	╈	_	+	_	_					
Kaweah Delta Medicare Advantage	IP084	835	✓	✓		✓	✓		Ť									
Kaweah Delta Medicare Advantage	IP084	837	✓	✓	П				T	┰	T							
KB Medical Practice, PC	35463	837	✓	✓					T									
Keenan and Associates	KEE01	837	✓	✓														
Keenan Associates (CA)	95279	837	✓															
Kelseycare	KELSI	837	✓	_	Ш				┸									
KelseyCare	KELSE	835	✓	_	Ш	✓	√		4	4								
KelseyCare	KELSE	837	√	_			_		_	_	_							
Kemberton	KMBTN	837		√		_	_	_	_	_	_	_	_					
Kemper Benefits	61453	837	√	_		_	_	`	4	✓ _	_	_	_	_	_			
Kemper Health (Reserve National Insurance Co.) Kemper Health (Reserve National Insurance Co.)	73066	835	√ /	_		√	√		/	/	+							Formerly known as Reserve National Insurance
Kempton Company	73066 73100	837 835	√ /	√ √		/	/	<u> </u>	4	-	-		_					Formerly known as Reserve National Insurance
Kempton Company Kempton Company	73100	837	√ √	_	/	√	√		-		-		-					
Kempton Group Administrators	73100	837	√		./	_	-	-	+	+	+	-	_					
Kempton Group TPA: Kempton Group Administrators (UCS)	90210	837	√		l ` l	_	-		/ .	/	_	-	-					
Kentucky Medicaid	12K11	835	√	Ť	\vdash	√	_	-+`	T	+	t	-	_					
Kentucky Medicaid	12K11	837	<i>√</i>		\vdash	V	-		/	+	+	\dashv						
Kentucky Medicaid	SKKY0	835	Ė	√	\Box	_	√		\top	\dashv	\top							
Kentucky Medicaid	SKKY0	837		√	П		√		١,	√	1	7						
Kentucky Medicare	12M11	835	✓		П	✓			T									
Kentucky Medicare	12M11	837	√			✓		,	/		1							
Kentucky Medicare	SMKY0	835		✓			✓											
Kentucky Medicare	SMKY0	837		✓			\checkmark		`	√								
Kentucky Spirit Health Plan	68069	837	✓	✓				·	/ \	√		√	✓					
Kern County CDCR	28021	837		✓														
Kern County Hospital Authority KERN	MPM66	835	✓	✓		✓	√		_	_								
Kern County Hospital Authority KERN	MPM66	837	√	_			_	_		_	_		_					
Kern Health Systems	77039	835		√		✓	√		_	_	4							
Kern Health Systems	77039	837	√	_		_	_	`	_		_	_	_	_	_			
Kern Legacy Health Plan	89890	837	√			_	_	`	<u> </u>	√	-		_	_				
Key Benefit Administrators (Indianapolis IN) Key Benefit Administrators (Indianapolis IN)	37217 37217	835 837	√	√ √	/	√	√	_	+	+	+	_	_	_	_			
Key Health Medical Solutions Inc.	95460	837	·	√ √	· ·		-		-	_	-		-					
Key Medical Group	IP082	835	√	_		√	√	-	+	+	+	-						
Key Medical Group	IP082	837	√ √		$\overline{}$	Ť	Ť	_	+	+	+	-	_	_				
Key Medical Group - Medicare Advantage	IP083	835	√	_		1	√		+	+								
Key Medical Group - Medicare Advantage	IP083	837	√		П			_	_	┰	_	_	_					
Key Select	37321	837	√	_				,	/ \	√	1							
Key Solution	37323	835	✓	✓	П	✓	✓		1	1	_							
Key Solution	37323	837	✓	✓				,	/ \	√								
KeyCare of Maryland	KCMD1	835	✓	✓		✓	✓											
KeyCare of Maryland	KCMD1	837	✓						$oldsymbol{\mathbb{T}}$									
Keystone First	23284	835	✓			✓	✓											
Keystone First	23284	837		√	Ш				Į.			✓	✓					
Keystone First CHIP	30070	835	√		ш	✓	√		┸		┸		_					
Keystone First CHIP	30070	837	✓	_	ш	_	_		+	4	_	_						For claims with DOS on or after 07/01/2025.
Keystone First Community HealthChoices	42344	835	√ /	_	Ш	✓	√	\perp	_	_	_	_	_	_				
Keystone First Community HealthChoices	42344	837	√ /	√	\vdash	_	_	`	<u> </u>	√	+	-	-					
Keystone First VIP Choice	77741	835	_	✓	\vdash	√	√	_	+	_	+	_	_	_				
Keystone First VIP Choice	77741	837	√ /	✓	\vdash	/	-	-	/	+	+	-	-	-				
Keystone Health Plan East Keystone Health Plan East	12X25 SX055	837 835	./	√	\vdash	√ √	√	+	+	+	+	-	-					ERA Payer Code SX055 ERA Payer Code SX055
Keystone Health Plan East	SX055	835	V	✓	\vdash	٧	٧	+	+	√	+	-	-	-				LIM Fayer Code Should Lim Fayer Code Should
KG Administrative Services	KGA15	837	√	√ √	\vdash	-	-	_	+	` -	Ŧ	-	-					
Klais & Company	34145	837		√ ✓	\vdash	-	-	+	/ 、	/ 	+	-	-	-				
KM Strategic Management (KMSM)	HCMG1	837		√		1	7		_	<i></i>	+							
Koan Risk Solutions, Inc.	65871	837	√			_			T	\neg	1	_	-					
Kopp Billing Agency	RP091	837		√		√	√	,	/ 、	√	T							
Korean American Medical Group	AMM24	837		√					T	\top	1	7						
Kova Healthcare, Inc.	KOVA1	835		√		✓	✓		T									
Kova Healthcare, Inc.	KOVA1	837	√	_				Ĺ	/ \	√	I							
KPS-Kitsap Physician Services	KPS01	837	✓	√														
N 3 Nicoup i nysician services					_	_	_		,	/	_	/	/	_	_			
KS - Sunflower State Health	68069	837	_	✓	ш			`	<u> </u>	√ _		✓	√					
	68069 IAS11 72107	837 835 835	√	√ √ √		√	√		<u> </u>	<u> </u>		√ 	√ 					

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Payer Name	Payer Code	Transaction	1	Р	D	\perp	Р	D I	Р	D		Р	D	-1	Р	D	Notes
LA Blue Advantage Louisiana	72107	837	_	✓													
LA Care Health Plan	LACAR	835	√	_	Ш	✓	√	_	_	_	_				_		
LA Care Health Plan	LACAR MPM19	837 837	√ /		Н	_	-		, ,		+		-		-		
LACH HealthNet by MedPOINT LADOC CorrectCare	LADOC	837	_	√ √	Н		-		′ √ ′ √	_	+						
Lake County Physicians Association	37116	835	√ ✓	√ √	Н	√	√	Ť	Ť		+		-				
Lake County Physicians Association	37116	837	<i>\</i>	_		Ť											
Lakeside Community Healthcare	LMG01	837	✓	_	П		\neg		_	_	1						
Lakeside Comprehensive Healthcare	66127	837	✓	✓													
Lakeside Health Services	LMG11	837		✓													
Lakeside Medical Group	66125	837	✓	✓	Ш		_										
Lakewood Health Plan	CAPMN	837	√	√	Ш		_				_		ш				
Lancaster General Health Landmark Healthcare Inc	16109 LNDMK	837 835	√	√ /	Н		/	√	′ √		-		-				
Landmark Healthcare Inc	LNDMK	835		√ √			√		./		+						
Las Vegas Firefighters Health & Welfare Trust	77684	837	√	_	/		_		Ť	_	+		\vdash		-		
LaSalle Medical Associates	LSMA2	835	<i>√</i>	✓	H	√	√										
LaSalle Medical Associates	LSMA2	837	✓	✓	П		ヿ	_	′ √		1						
LaSalle Medical Associates	NMM02	835	✓						L								
Lasso Healthcare MSA	10550	835	✓	✓		✓	✓										
Lasso Healthcare MSA	10550	837	√	√	Щ		Ţ	√	′ √		L						
Lawndale Christian Health Center	LAWND	837	√ /	_	ш		_	_	+	\perp	_	\perp	\sqcup		_		
Lawndale Pace	R3466	837	√ /	_	\vdash				+				H		_		
LBA Health Plans LBA Health Plans	52193 52193	835 837	√ √	√ √	Н	✓	V	_	+	-	+		\vdash		_		
Leon Health Plans	A3565	835	\ \	√ √	Н	√	./	_	┿	+	+	+	\vdash		-		
Leon Health Plans	A3565	837	\ \	√ ✓		·	Ť										
Leon Medical Center Health Plan	37316	837	<i>\</i>	_	Н		_	_	+	_	+	+	-	_	_		
Leon Medical Center Health Plan	LMCHP	835	_	✓	_												
Leonard Holding Company	84365	837	✓	_	П			√	′ √								
LHP Claims Unit	37248	837	✓	✓													
LHS Medcost Solutions LLC	90753	837	✓	_													
Liberty Advantage Health Plan (HMO SNP)	LIB01	835	✓	_		√	√		_	_							
Liberty Advantage Health Plan (HMO SNP)	LIB01	837	✓	✓			_	_	_		_		,				
Liberty Dental Plan Liberty Health Advantage	CX083 87071	837 837	√		√		-	_	+	√	+	+	✓		-		
Liberty National Life Insurance Company (ERA Only)	65331	835	_	√	Н	√	√		+	+	+		\vdash				
Liberty Union	37281	837	√	_	Н	·	Ť		+	_	+		\vdash		-		
Life Armstrong	R3476	835	_	√		√	√										
Life Armstrong	R3476	837	✓	✓	П		ヿ		1	1	1						
Life Assurance Company	37281	837	✓	✓													
LIFE BEAVER PACE	R3475	835	✓	✓		✓	√										
LIFE BEAVER PACE	R3475	837	✓	✓	Ш		_										
Life Butler	R3477	835	_	√	Ш	✓	✓	_	_	_	_		\vdash		_		
Life Butler Life Investors Insurance	R3477 12T67	837 837	√ √	✓	Н		-	_	+	-	+	+	-	_	-		
Life Investors Insurance Life Investors Insurance of America - Long Term Care	12T39	837	√ ✓				-		+		+						
LIFE Pittsburgh	25181	835	√	_	Н	√	√	_	+	_	+	+	-		_		
LIFE Pittsburgh	25181	837	√	✓													For claims with DOS on or prior 11/30/2025.
LIFE Pittsburgh (Meridian PACE Solutions)	M7701	837	✓	✓	✓			_	′ √	√							
Life Trac	41136	837	✓	✓													
LifeCircles PACE	71498	837	√	√	Ш		耳		I								
Lifemap	RLH01	837	Ļ	Ļ	✓		_			√			Щ		_		
LifePath Hospice Inc	76870	837				_	-		′ √	1	+		$\vdash \vdash$		_		
LifeShield National Insurance Co Lifetime Benefit Solutions	47865 EBSRM	837 835	√ √	√ √	\vdash	./	√		+				\vdash		-		
LifeWise Health Plan of Washington	91049	835		_		√ √			+		+		\vdash		\dashv		
LifeWise Health Plan of Washington	91049	837	_	√	-			_	<i>'</i>		Т		\Box		_		
LifeWise Healthplan of Oregon	93093	835	√	_	П	√	√	Ť	Ť		T		一				
LifeWise Healthplan of Oregon	93093	837	√						′ √								
Lifeworks Advantage	LWA01	835	✓	√		√	✓										
Lifeworks Advantage	LWA01	837	✓	_													
Lincoln Heritage (ERA Only)	IAS12	835	√	_		√	√		Į		L						ERA Only
Line Construction Benefit Fund	LCB01	835	√	_	ш	√	√	_	_	_	1	\perp	Ш		_		ERA ONLY
Little Company of Mary	LCM01	837	√		\vdash	-	-		\perp			+	\vdash		_		For elaims with a DOS on as often 1/1/17
Little Company of Mary Live Well IPA	LCM1 LWIPA	837 835	√ √	_	-	\dashv	\dashv	_	+	-	+		\vdash		_		For claims with a DOS on or after 1/1/17
Live Well IPA	LWIPA	835	_	√ √	_		-		-	+		+	\vdash		-		
4.00 men n /1	LWIFA	037	٧	٧					_		_						

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Section Control Cont	Payer Name	Payer Code	Transaction			_			_	_	_	_	I		_	I		Notes	
Professor Prof	Local 137 Operating Engineers Welfare Fund	84041	837	✓	√					√	√	T							
Source Control Contr																			
Section Sect							√	√		4	_	4	_	_	_	_	_		
Proceed Section 1				_			_	_		/	4	+	_	-	_	4	4		
Second Second Memory American Engine From Engine Field Reference 1975 197										√	-	-	-		-	-	-		
Second Second Second Second Control Control Representation 1975 1977 19				_	_							-							
March 1998 March 2004 Mar				_						_		_							
See See See See See See See See See Se	Loma Linda University Employee Health Plan	37267	837	✓	\														
Management Man				_															
State				_			_			4	_	4	_	_	_	_	_		
Marie Mari				_			_	_		_	4	+	_	-	_	-	_		
Marie Mari				_			-	_	-	+	+	+	-	-	-	-	-		
Lose of Marchael Group Aust. 1965				_								-							
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Company Parish Prince Company Company Parish Prince Parish Prince Company Parish Prince Parish Prince Company Parish Prince Pari	Long Beach Memorial IPA	IP095	837	✓	✓					√	√								
Segret Principal Princ				_			√	√				I							
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Marganey Margan				_			√	√		+	+	+	+	-	-	+	-		
Months M				_	_		7			1	1	1							
Linguisty Health Plan of New York 1970 837 V V V V V V V V V	Longevity Health Plan of New Jersey	LNJ01	835	✓	\		✓	✓											
Segret yealth Plan of New York 1970 837				✓	\checkmark														
Longery Health Fram of North Carolina				_			√	✓		_	_	_	_		_	_	_		
Monte Mont				_							_	_	-	_	_	_	-		
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Congress Medical Center (LAMC)					_		1	_/		-	_	-	-	-					
Society Soci	0 1			_			Ť	Ť		1		1							
MCDIA 835 V V 1 1 V V 1 V V V	Los Angeles Medical Center (LAMC)	PROSP	837	✓	✓					√	√								
Medical Medi				✓	\checkmark					√	√		✓	√					
Maria Medicar Medica				_			_	_											
Mousian Medicare Mortage				✓	_		√	_		<u> </u>	<u> </u>	4				√	✓		
MCALA S37 V V V V V V V V V				/			/	√ /		+	<u> </u>	+	-			-	+		
12M12 835 V 1 V V V V V V V V				_			_	v _/		/	1	+	-	-	-	-	-		
Southain Medicare SMIAD SSIS V N N V N N V N N N				_	Ť		_	Ť		Ť	Ť	1							
Ousland Medicare SMLOA SMT SMLOA	Louisiana Medicare	12M12	837	✓			√												
Loyal American Life Ins Co-Medicare Supplement 13193 835 7 7 7 7 7 7 7 7 7	Louisiana Medicare				√			\checkmark											
Loyal American Life Ins Co-Medicare Supplement							_	_			√								
Loyola Physician Partners 37175 835 7 7 7 7 7 7 7 7 7	·			_			√	√		4		4	_						
Lucent Health Solutions (LHS GoV Operations) 17380 837				_			_			4	+	+	_	-	4	4	4		
Lucent Health Solutions 88056 837 V				_			٧	V	\vdash	+	+	+	+	-	+	+	+		
				_			_			+	\dashv	+	1			+	1		
Lucentis Copay Program 82694 835 V <td< td=""><td></td><td></td><td></td><td>_</td><td>_</td><td></td><td>√</td><td>√</td><td></td><td>▆</td><td></td><td>▆</td><td></td><td></td><td></td><td>▆</td><td></td><td></td><td></td></td<>				_	_		√	√		▆		▆				▆			
Lucinic Copay Program 82694 837 V V V V V V V V V										√	√							Also Known As Herita	age Health Solutions
Lumino (ERA Only) IAS13 835 V				_		$\overline{}$	√	\checkmark		I		I							
Luminare Health (CoreSource AZ MN) 35182 835 √ √ √ √ √ √ √ √ √ √ √ ✓ <td>. (504.0.1.)</td> <td></td> <td></td> <td>√</td> <td>√</td> <td></td> <td></td> <td>إ</td> <td></td> <td>4</td> <td></td> <td>4</td> <td></td> <td></td> <td></td> <td>4</td> <td></td> <td></td> <td></td>	. (504.0.1.)			√	√			إ		4		4				4			
Luminare Health (CoreSource AZ MN) 35182 837 V								√ /		4	+	4		_	_	4	_	Claim Mailing Address	cc. DO Poy 2020 Clinton Maka Hoalth Ontions Program
Luminare Health (CoreSource OH) 35183 835 V				_	_	_	V	V		+	/	+	-			-	-	Ciairii iviailing Addres	55. FO BOX 2320, CIIIILOII, IAAKA HEAITH OPTIONS PROGRAM
Luminare Health (CoreSource OH) 35183 837 V							√	√		+	<u> </u>	+				\dashv			
Luminare Health Internal (CoreSource-Internal) 35187 835 V V V V V V V V V V V V V V V V V V V V									\dashv	+	十	\top	1	_	_	7	1		
Luminare Health Little Rock (CoreSource Little Rock) 75136 835 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$,						✓	✓				▆							
Luminare Health Little Rock (CoreSource Little Rock) 75136 837 V </td <td></td>																			
Lummi Indian Business Council (PRC) LUMMI 837 V </td <td>Luminare Health Little Rock (CoreSource Little Rock)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>\checkmark</td> <td></td> <td>Į</td> <td>Į</td> <td>Į</td> <td>Į</td> <td></td> <td>\Box</td> <td>Į</td> <td>Į</td> <td></td> <td></td>	Luminare Health Little Rock (CoreSource Little Rock)						√	\checkmark		Į	Į	Į	Į		\Box	Į	Į		
Luninare Health (Coresoure AZ MN) 35182 837							_	_		4	_	4		_	_	4	_		
Luninare Health (Coresoure MD IL PA) 35182 837 \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} \text{ In Interval of the Coresoure NC IN}\$ \$\frac{1}{2} In Interval of the Coresoure NC	, ,			_	_	_	-			+	./	+	+	-	-	+	-		
Luninare Health (Coresoure NC IN) 35182 837 ✓ <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td>+</td> <td></td> <td>_</td> <td></td> <td>H</td> <td>-</td> <td></td> <td></td>							-					+		_		H	-		
LUTHER CARE CB212 837 √ √										_	_	+	1			7			
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	LUTHERAN SERVICES CAROLINAS	LSC01	835							I		I							

Payer Name	Payer Code	Transaction			le D				COB P			chments			er Id	Notes
LUTHERAN SERVICES CAROLINAS	LSC01	837			√	T	_	√	√					т	1	
MacNeal Health Providers- CHS	36334	835	_	_	<u> </u>	/ .	√	Ť	H	_	_		_	_	_	
MacNeal Health Providers- CHS	36334	837	✓	_		T										
Maestro Health Plan	56139	835	√	✓	,	/ \	√		П							
Maestro Health Plan	56139	837	✓	✓												
Magan Medical Clinic	HCP01	837	✓					√								This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
Magellan Complete Care of Arizona	MCC01	835	✓	✓	,	/ \	√									
Magellan Complete Care of Arizona	MCC01	837		✓					Ш							
Magellan Complete Care of Virginia	MCC02	837	_	✓					Ш							
Magellan Health Services	01260	835	_	✓	`	<u> </u>	✓	4						_		
Magellan Health Services	01260	837	√	✓		_	_	√	✓	_				_		
Magnacare	11303	835	√	_	,	<u> </u>	√	+	Н	_			_	_	_	Payer requires EFT in order to receive ERA files
Magnacare	11303	837	√	√		-	-		,	_	_	_	-	-		
Magnolia	68069 45341	837	√ √	√ 		/	,	√	✓	_	✓	√	_	_		
Maine Community Health Options		835	√ √	√ /		<u>/ ·</u>	√	+	Н	-			_	+	-	
Maine Community Health Options Maine Medicaid	45341 12K13	837 835	√ √	√		/	+		H	+	_			+	\vdash	
Maine Medicaid	12K13 12K13	835	√ √		- +	/	+		\vdash	-	-					
Maine Medicaid	SKME0	837	Ý	√	_	+	√		\vdash	+	_					
Maine Medicaid	SKME0	835	\vdash	√ √	-	+	<u> </u>	+	√	-	\dashv		+	1	1	
Maine Medicare	12M13	835	,/	· ·		/	+		Ť	+				1	1	
Maine Medicare	12M13	837	<u>/</u>			/	_	√	Н	-	_		_	_		
Maine Medicare	SMME0	835	H	√		+	<u> </u>	Ť	\vdash	+	\dashv					
Maine Medicare	SMME0	837	Н	√	_	+	✓	_	√	_	_		_	_	_	
Managed Care of North America, Inc. (MCNA)	65030	837		Ť	√	+	_		H	√						
Managed Care Services LLC	35162	837	1	√	_	_	_	_	Н	Ť	_		_	_	_	
Managed Care Systems (Delano Regional Medical Group)	MCS02	835		√		١,	√									
Managed Care Systems (Delano Regional Medical Group)	MCS02	837		√		_		_	П					Т		
Managed Care Systems (Gemcare)	MCS01	835		✓		٦,	√									
Managed Care Systems (Gemcare)	MCS01	837	✓	✓							Ī					
Managed Health Network	22771	837	✓	✓												
Managed Health Services Indiana (Medicaid HMO)	68069	837	\checkmark	√				✓	\checkmark		✓	✓				
Managed Health Services Wisconsin	68069	837	\checkmark	√				✓	\checkmark		✓	✓				
Manhattan Life Assurance Company of America (Manhattan Life)	86253	835	✓	√	,	/ \	√									
Manhattan Life Assurance Company of America (Manhattan Life)	86253	837			√											
Manhattan Life Insurance & Annuity Company	28148	837	_	✓					Ш							
Mapfre (Canada Life)	L0160	837	✓	_		_			Ш					_		
March Vision Care Inc.	52461	835	.	√		<u> </u>	√	4	Ш	_			_	_	_	
March Vision Care Inc.	52461	837	√	√		_	_	_	Ш	_				_	_	
Marquette Life Insurance Company	48055	837	√	√ 		_	_	_	Ш	_			_	_	_	
Marrick Medical Finance LLC.	20805	835	√	√ 	,	<u> </u>	√		_	_	-		_	-	-	
Marrick Medical Finance LLC. MARTINS POINT HEALTH CARE	20805	837	√ /	√ 		/	/	√	✓				_	_		
MARTINS POINT HEALTH CARE	53275 53275	835 837	√ √	_	- '	<u> </u>	√	+	Н	-	-		_	+	_	
Mary Washington Health Plan	83269	835	√ ✓	✓		/ ,	./	+	Н	-			+	+		
Mary Washington Health Plan	83269	837	√ √	√ √	- F	+	`		Н	-	-				1	
Maryland Medicaid	MCDMD	835	√ √	√ ✓		/ ,	/		\vdash	+	\dashv		√			
Maryland Medicaid	MCDMD	837	V	√ ✓	_	_	√ ✓		H	7	_		<i>√</i>	√		
Maryland Medicare	12010	835	<i>√</i>		_	/	+		\vdash	 	_		Ť	Ť		
Maryland Medicare	12010	837	V		_	/	+	√	Н	7	_					
Maryland Medicare	SMMD0	835	H	√		_	√			7	_					
Maryland Medicare	SMMD0	837	П	√			<i>\</i>	1	√	7			1		1	
Maryland Physicians Care	76498	835	✓		,					寸						
Maryland Physicians Care	76498	837	✓	√		┱	\top	✓	✓	7	√	√		Т	1	For DOS on or after 1/1/21
Maryland Physicians Care (DOS < 1/1/21)	22348	835	✓	_	,	/ 、	√			寸						
Maryland Physicians Care (DOS < 1/1/21)	22348	837	✓	✓		T										
Maryland Public Behavioral Health	BHOMD	835	✓	√		/ 、	√									
Maryland Public Behavioral Health	BHOMD	837	✓	√				√	✓							New Payer ID effective 12/22/2024.
Mashantucket Pequot Tribal Nation	37121	835	✓	✓	,	/ \	√									
Mashantucket Pequot Tribal Nation	37121	837	✓	✓												
Masonary Welfare Trust Fund	60230	835	✓	_	,	/ \	√									
Masonary Welfare Trust Fund	60230	837	✓	✓		I										
Mass Advantage	86220	835	✓	✓												
Mass Advantage	86220	837	✓	√		L			Ш							
Mass Behavioral Health Partnership	BHOMA	837	_	✓		L		✓	✓							
Mass General Brigham Health Plan	04293	835	✓	✓	,	/ \	√									

Devel Maria	Davier Carlo	T	A۱	vailab	le I	Enroll	llment		СОВ		Atta	chment	s Sı	bmitt	er Id	Market
Payer Name	Payer Code	Transaction	-1	Р	D	l F	P D) [Р	D	-1	P C		Р	D	Notes
																557 11 2022
Mass General Brigham Health Plan	04293	837	./	./												Effective 2023, payer has changed their name to Mass General Brigham Health Plan. Previously known as Allways Health Partners and Neighborhood Health Plan.
Massachusetts Medicaid	12K14	835	√ ✓	Ť	-	/	_									Freviously known as Anways health Farthers and Neighborhood health Flan.
Massachusetts Medicaid	12K14	837	<i>\</i>		_	/		√								
Massachusetts Medicaid	SKMA0	835		✓		_	√	1								
Massachusetts Medicaid	SKMA0	837		✓		V	√		✓							
Massachusetts Medicaid - Health Safety Net	HSNMI	835	✓		\ \	/										
Massachusetts Medicaid - Health Safety Net	HSNMI	837	✓		`	/	_	✓								
Massachusetts Medicaid - Health Safety Net	HSNMP	835		√			_	_								
Massachusetts Medicaid - Health Safety Net Massachusetts Medicare	HSNMP 12M14	837 835	/	√		/ ×	<u>√</u>	_	√					+		
Massachusetts Medicare	12M14	837	\ \			/		√								
Massachusetts Medicare	SMMA0	835	Ť	√		,	/	Ť	М					1		
Massachusetts Medicare	SMMA0	837		√					√							
Massachusetts Mutual	WLPNT	837	✓	✓		┱		✓	✓	\Box	✓	✓				
Masters Mates and Pilots Plan	MMPHB	837	✓	√												
Max Specialty Benefits	27320	837		√												
Maxor Administrative Services	92805	837	√	√		4										
Mayo Clinic FL/GA	88090	837	√	√				_					_	_		
MBA Benefit Administrators Inc (Salt Lake UT)	83028 83028	835 837	√ √	√ /	`	/ \	<u> </u>	-					-	-		
MBA Benefit Administrators Inc (Salt Lake UT) MCA ADMINISTRATORS	25160	837		√ √		/ \	/		Н					\vdash		
MCA ADMINISTRATORS	25160	837	\ \/	√ √	-	Ŧ										
MCA-Sedgwick WTCHP	LV371	837	✓	${}$		/ \	/	√	√							
Mcare Advantage Plan	12M85	837	√					Ť					_	1		
McLaren Advantage SNP	38338	835	√	✓	\	/ \	√									
McLaren Advantage SNP	3833R	837	✓	✓				✓	✓							
McLaren Health Advantage	38338	835	✓	\checkmark	\	/ v	√									
McLaren Health Advantage	3833A	837	✓	-				✓	✓							
McLaren Health Plan	K7JVH	835	_	✓.	_	/ \	_	٠,						_		
McLaren Health Plan	K7JVH	837	_	-	_	_	√	✓	✓							Provider must be an approved JVHL lab
McLaren Health Plan (Commercial) McLaren Health Plan (Commercial)	38338 38338	835 837	√ /	_	`	/ \	√	√	√					-		EFT enrollment required
McLaren Medicaid McLaren Medicaid	3833C	835	√ √	√ √	-	/ v	/	Ť	V							
McLaren Medicaid	3833C	837	<i>\</i>	_	- `	' `	`	√	1		-		_	+		
McLaren Medicare Supplement	38335	837	✓	√		+		√								Effective September 19th, 2023,ERA is not available at this time
MD Anderson Physician Network	MDAPN	835	✓	_	`	/ \	√									
MD Anderson Physician Network	MDAPN	837	✓	\				✓	✓							
MD Senior Care Medical Group	MSCMG	835	✓	\checkmark	\	/ v	√									
MD Senior Care Medical Group	MSCMG	837	✓	✓		_										
MDSave	MDSAV	835	_	_	`	/ \	<u> </u>	_	Ш	_			_			
MDSave	MDSAV	837	√	√		-										
Mdwise Healthy Indiana Plan Mdwise Healthy Indiana Plan	31354 31354	835 837	√ √	√ √		+	+	√	1				+	\vdash		
MDWise Healthy Indiana Plan	31354 3135M	835	<i>y</i>	√ √	-	/ 、	/	·	ľ							
MDWise Healthy Indiana Plan	3135M	837	<i>.</i>	√		Ť		√	√							
Mdwise Hoosier Healthwise	35191	835	√	_		T										
Mdwise Hoosier Healthwise	35191	837	✓	√		I		√	√							
MDWise Hoosier Healthwise	3519M	835	✓	_	`	/ \	√									
MDWise Hoosier Healthwise	3519M	837	√	-				√	✓							
MDWise Medicare Advantage	MDADV	835	√	√	`	/ \	<u> </u>	,					_	_		
MDWise Medicare Advantage MDX Hawaii	MDADV MDXHI	837 835		√ √		/ ,	/	√	✓					1		
MDX Hawaii	MDXHI	835	√ √		+	+	+							\vdash		
MED PAY	88058	835	√ √	-	٠,	/ \	/	+			-					
MED PAY	99999-0733	837	√	-		Ť	\top									
MedAdmin Solutions	58202	837	_	√		T										
MedBen (Newark OH)	74323	835	✓	✓		/ v	✓									
MedBen (Newark OH)	74323	837	✓	✓		Ţ										
MedCare Partners	MCP01	837	✓	-		Ţ		_	✓							
MedCom	59231	837	√	√		┸	\bot	✓	✓					_		
Medcore HP	31057	837	_	-					ш					-		
MedCost Benefit Services MedCost Benefit Services	56205	835	_	√ /	<u> </u>	<u> </u>	<u> </u>	-/	/							
MedCost Benefit Services MedCost Inc.	56205 56162	837 835	√ √	√ √		/ \	/	√	√							
MedCost Inc.	56162	837	✓ ✓	√ ✓	-	Ŧ	+	√	√							
Medfocus	95321	837	H	√ ✓		+	+	Ť								
								_	_	-				-	_	

Payer Name	Payer Code	Transaction			ole					ОВ			hments				Notes
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Medi-cal Dental	94146	835			√ /	_	_	√	4	_	4	_		_	-		
Medi-cal Dental Medi-Share	94146 59355	837 837	√	√	√	-	-	-	+	+	+				+		
Medica	39113	837		√	\vdash	-	_	_	/ ,	7	+	-	-	-	+		
Medica	94265	835	√ ✓			√	√	- 1	`	`+	+				+		
Medica	94265	837	<i>\</i>		\vdash	Ť	Ť	_	/ 、	/	+	_	_	+	_		
Medica	MEDM1	835	1	√		√	√		Ť						1		Payer Code Effective 1/1/21
Medica	MEDM1	837	√	✓	П			_	/ 、	7	+	_		_	_		Payer Code Effective 1/1/21
Medica Health Plan Solutions	71890	835	√			√	√		1		1				t		.,
Medica Health Plan Solutions	71890	837	✓	_	П				_	┰	T			1			
Medica HealthCare Plan of Florida	78857	835	✓	✓		✓	√										
Medica HealthCare Plan of Florida	78857	837	✓	✓							T						
MEDICA of Minnesota	07031	837			✓					٧	/		✓	′			
Medica2	12422	835	√	√		√	✓										
Medica2	12422	837	✓	√					√ \	√							
Medicaid of New Jersey	CKNJ1	835			✓			√									
Medicaid of New Jersey	CKNJ1	837			✓			_		V	/		4		_		
Medicaid of New York (UHC Community Plan)	GP133	835	Ш		✓	_	_	√	_	_	4				_		
Medicaid of New York (UHC Community Plan)	GP133	837	ш		√				4		/		✓				
Medicaid of Texas - MCNA	MCNA1	837	\blacksquare		√	_	_	_	_	_	/	_	_	_	_		
Medicaid of Texas (UHC Community Plan)	GP133	837		,	✓	_	-	_	-		4		√		-		
MEDICAL ASSOCIATES HEALTH PLAN Medical Benefits Administration	MAHC1 MBA01	837 837	√	√ √	H	-		_	-	+	+				1		
			/		Н	-	-	-	+	+	+	_	-		+		
Medical Benefits Administrators Inc. (Newark OH) Medical Benefits Companies (Newark OH)	74323 74323	837 837	\ \/	√ √	\vdash	-	-	-	+	+	+	-	+	+	\vdash		
Medical Benefits Mutual (Newark OH)	74323	837	✓	_	-	-	-	-	+	+	+	-	-	+-	+	1	
Medical Benefits Mutual Life Insurance Co.	74323	837	✓						+	+	+						
Medical Card System	66039	835	V		Н	√	√	-	+	+	+	-	-		1		
Medical Card System (MCS)	L0170	837	_	√		Ť	Ť	_	+	+	+				1		
Medical Mutual of Ohio	29076	835	<i>\</i>	_	т	√	√	_	_	_	_	_	_	+	_		
Medical Mutual of Ohio	29076	837	√	-					/ 、	/	1	√	√				
Medical Reimbursements of America	62177	837	✓	✓	П	_	_		T	Т	_				т		
Medical Services Initiative	12057	837	✓	✓					√ \	√							
Medical Value Plan - Ohio (MVP)	38224	837		✓													
Medicare DME - All Jurisdictions	SDMEB	835		✓			✓										
Medicare DME - All Jurisdictions	SDMEB	837		✓			\checkmark		`	√							
Medicare Part A Legacy - JH	04911	835	✓			✓											
Medicare Part A Legacy - JH	04911	837	✓			✓			√								
Medicare Part A Legacy (CA, HI, NV)	12M65	835	✓		Ш	✓			4								
Medicare Part A Legacy (CA, HI, NV)	12M65	837	✓.		Ш	✓	_		✓ _	_	4			√	_		
Medicare Plus Blue Michigan	00210	837	✓			_			_	_	4				-		
Medicare Plus Blue Michigan	00710	837	,	√ /	Ш	,	,	_	_	_	_	_	_		_		
Medicare PPO (BCBS SC)	00C63	835	√ /	√		√	√	-	4	-	+	_	-		-		
Medicare PPO (BCBS SC)	00C63	837	_	√ /	\vdash	_		_	_	_	+	_			_		
Medicare y Mucho Mas (MMM) MediChoice IPA	L0210 AMM11	837 837	√	√	Н	-	-	-	+	+	+	-	-	-	+		
Medico Insurance Company	23160	835	./	✓	./	√	./	./	+	+	+				1		
Medico Insurance Company Medico Insurance Company	23160	837	_	_	<i>√</i>	<u> </u>		<u> </u>	+	_	/			,	+		
MediGold	95655	835	<i>√</i>	√	H	√	1	_	+	Ť	+	_	Ť		+		
MediGold	95655	837	<i>\</i>	√	\vdash	Ť	Ť	_	/ 、	/	+	_	_	+	+	1	
MediGold PPO	13123	837	_	-					Ť	Ì	+						
MediView Curative	CURTV	835	√	✓	т	√	√		_	_	+				_		
MediView Curative	CURTV	837	√	√					1	1	1						
Mediview Inc.	STAR1	837	✓	✓	П				_	┰	T		$\neg \vdash$	_	Т		
Medlytix	MEDLX	837	✓	✓							1				1		
MedPartners - Mary Black Health Network	412MP	835	✓	\checkmark		✓	✓		ᆂ		I			\mathbf{I}			
MedPartners - Mary Black Health Network	412MP	837	✓	\checkmark													
MedPartners Administrative Services	35205	835	_	\checkmark		\checkmark	✓				I						
MedPartners Administrative Services	35205	837		√													
MedSolutions Inc	62160	835	_	√	ш	✓	√				Ţ						
MedSolutions Inc	62160	837	_														
Medstar Family Choice Maryland Healthchoice	RP063	837	_	-	Ш	[[Ļ		<u> </u>				
Medstar Family Choice, Inc (DC)	RP062	835	_	√	ш	✓	√		_		4						
Medstar Family Choice, Inc (DC)	RP062	837	√	√	Ш	_	_		√ \	√	_	_	_	_	_		
Medstar Family Choice, Inc (MD)	RP063	835	√	_	ш	✓	√	_	-	_	+				-		
Medstar Family Choice, Inc (MD)	RP063	837	√ √	✓	Н	-	_	_	_	+	+	_	+	+	\vdash		
MEGA Life & Health (United Ins. Div)	97055	837	_		H	-	-	-	+	+	+	-	+		\vdash	-	
Memorial Clinical Associates/ SelectCare of Texas (MCA)	62181	837	✓														

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Payer Name	Payer Code	Transaction	Ξ	Р	D	1	Р	D		P [)	1	P	D		P [Notes
Memorial Healthcare IPA	IP095	837	_	√	_				/ \	/							
Memorial Herman Health Network Providers	37330	837	√	<u> </u>	_		_	_	/ \	/	4	_			_	_	
Memorial Hermann Health Insurance Company	MHHNP	837	√	√	-		_	-	_	_	+	-	_	-	_	-	
Memorial Medical Group	HCP01	837	./						,								This payer is now part of OptumCare Network. Please submit claims using payer code OCN01
MemorialCare Medical Foundation	MMFMC	835	\ \	√		V	√	-	+		+		-	-		+	This payer is now part of Optunicare Network. Flease submit claims using payer code OCNOT
MemorialCare Medical Foundation	MMFMC	837	V	-		Ť	Ť	_	/ ,	7	+	_		_	_	_	
MemorialCare Medical Foundation UCI	MMFUC	835	✓	√	_	✓	✓		T		T		T	7		1	
MemorialCare Medical Foundation UCI	MMFUC	837	✓	√					/ \	/	T						
MemorialCare Select Health Plan	46187	835	✓	\checkmark		\checkmark	✓										
MemorialCare Select Health Plan	46187	837	✓	_	_		_		4		4		_		_		
Menifee Valley Community Medical Group	HCMG1	837	√	_	_		_		/ ,	<u> </u>	4			_	_	_	
Mental Health Consultants Inc.	37050 86087	837 835	\ /	√ /	_			_	_	_	+	_	_	_	_	_	
Merchants Benefit Administration Merchants Benefit Administration	86087	835	√ ./	√ √	-	√	√	+	+	-	+	-		+	+	+	
Merchants Benefit Administration, Inc.	MBAM1	837	√	-	_				+		+						
Merchants Benefit Administrator	IHS24	837	<u>√</u>	-	_		_	_	/ ,	7	+	_	_	_	_	_	
Mercy Benefit Administration	37264	837	✓	√	_			1									Formerly known as St. John's Claims Administration
Mercy Care Plan (AHCCCS)	86052	835	√	√		✓	√		┚		ፗ	1	╧	┚	I		
Mercy Care Plan (AHCCCS)	86052	837	√	÷	_						I						
Mercy Maricopa Integrated Care	33628	837	√	√	_			\Box	/ ,	/	┰			$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	Ţ		
Mercy Physicians Medical Group (MPMG) (NAMM Southern CA)	IP079	837	√	_	_				4	_	4		4	_	_	┸	
Mercy Provider Network	43185	837	√ /	√	-		_	_	+	+	+	\perp	_	4	+	\bot	
MercyCare Insurance	39114 39114	835	√	√	_	√	√		_	_	+	_		_	_	_	
MercyCare Insurance Meridian Health Plan Michigan Complete	MHPMI	837 835	√	√ √	_	√	√	+	+	+	+	+		+	+	+	Payer Requires EFT in order to receive ERA
Meridian Health Plan Michigan Complete Meridian Health Plan Michigan Complete	MHPMI	837	1/	√	_	·	Ť	-	+	+	+	+	+	-	+	+	rayer requires Err in order to receive Erra
Meridian Health Plan of Illinois Complete	MHPIL	837	√	-	_				/ 、	/	+	/	/				For DOS on or after 1/1/21
Meridian Health Plan of Michigan (JVHL)	J2JVH	835	<i>√</i>	√	_	✓	√	_	T		T	Ť	_	_	_	_	
Meridian Health Plan of Michigan (JVHL)	J2JVH	837	✓	-	_	√	✓		/ 、	/	T			7		1	Provider must be an approved JVHL lab
Meridian PACE Solutions	24201	837			✓					`	/						
Meridian PACE Solutions	MPSAB	835	✓	✓		\checkmark	√										
Meridian PACE Solutions	MPSAB	837	✓	-	_						_				_		
MeridianComplete - Illinois	MHPIL	837	√	√			_	_	✓ 、	/	_	✓	✓	_	_	_	For DOS on or after 1/1/21
MeridianComplete - Michigan	МНРМІ	837	✓	√			_	_	_	_	+	_		_	_	_	TDA II
Maridian Lagith Illingia	13189	835	1,	Ι,		,	,										ERA enrollment is done under payer name "CENTENE". Payer Requires EFT in order to receive ERA.
MeridianHealth Illinois MeridianHealth Illinois	13189	837	√ √	√ √	1	V	<u> </u>	-	/ ,	/	+	-		-	+	+	For claims with a DOS before 07/01/2021
MeridianHealth Illinois	MHPIL	837	_	√	_		_		_	7	+	/	/	_	+	+	For DOS on or after 1/1/21
MeridianTotal	68069	837	√	√	_		_		/ ,	_	_	_	/	_	_		
											T						
	08003																ERA enrollment is done under payer name "CENTENE". Payer Requires EFT in order to receive
MeridianTotal - Illinois	MHPIL	835	✓	✓		✓	✓										ERA enrollment is done under payer name "CENTENE". Payer Requires EFT in order to receive ERA
	MHPIL MHPIL	837	√ √	√		√	√		/ ,	/		/	/				
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network	MHPIL MHPIL IP097	837 835	√ √	√ √		√ √	√ √		/ ,	/	Ī	√ 	√	ŧ	ŧ	ŧ	ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network	MHPIL MHPIL IP097 IP097	837 835 837	\ \(\)	√ √ √		√ √	√ √		/ ,	/		√	/				ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health	MHPIL MHPIL IP097 IP097 38232	837 835 837 837	√	\ \ \ \		√ √	√ √		/ ,	/		/	/				ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health	MHPIL MHPIL IP097 IP097 38232 41124	837 835 837 837 835	\ \(\)	\ \ \ \ \ \		√ √ √	√ √		/ ,	/		/	/				ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health	MHPIL MHPIL IP097 IP097 38232 41124 41124	837 835 837 837 835 835	√	\ \ \ \	√	√ √ √	√ √		/ ,	/			/				ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Meritain Health Meritain Health	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978	837 835 837 837 835 837 835	√	\ \ \ \ \ \		√ √ √	√ √	✓	/ ,	/	/			/			ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health	MHPIL MHPIL IP097 IP097 38232 41124 41124	837 835 837 837 835 835	√	\ \ \ \ \ \	\frac{1}{}	√ √ √	√ √ √	✓	/ ,	/	/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metlife Dental	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978 65978	837 835 837 837 835 837 835 837	√	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\frac{1}{\sqrt{1}}		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	✓	/ ,		/			/			ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metilfe Dental Metilfe Dental Metrolus Health Plan Metrolus Health Plan Metrolus Health Plan MetrOlus Health Plan MFC & HealthPlus Peoria	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978 65978 65978	837 835 837 837 835 835 837 835 837 835	\ \frac{1}{3} \fra	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\frac{1}{\sqrt{1}}		√	✓	/ ,	/	/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metilife Dental Metilife Dental MetroPlus Health Plan MetroPlus Health Plan MerC & HealthPlus Peoria MFC & HealthPlus Peoria	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978 65978 13265	837 835 837 837 835 835 837 835 837 835 837	\ \frac{1}{\sqrt{1}} \frac{1}{\s	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\frac{1}{\sqrt{1}}	✓	√	✓	/ ,	/ 	/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MetroPlus Health Plan MerC & HealthPlus Peoria MHP Systems	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068	837 835 837 837 835 835 837 835 837 835 837 837 837	\frac{1}{\sqrt{1}}	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\frac{1}{\sqrt{1}}	√ √	√ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Meritain Health Meritain Health Metific Dental Metific Dental Metific Pental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan	MHPIL MHPIL IP097 IP097 38232 41124 41124 65978 65978 65978 23550 23550 23550 64068 82832	837 835 837 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}	\frac{1}{3} \frac\	\frac{1}{\sqrt{1}}	√ √ √	√	<i>√</i>			/			/			ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metifie Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	√ √ √	√ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois MeridanTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metidie Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37	837 835 837 837 835 837 835 837 835 837 835 837 835 837 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	√ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MFP Systems Miami Children's Health Plan Michigan Medicaid Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1	837 835 837 837 835 837 835 837 835 837 835 837 835 837 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	√ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metife Dental Metife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid Michigan Medicaid Michigan Medicaid Michigan Medicaid Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	√ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MFP Systems Miami Children's Health Plan Michigan Medicaid Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1 SKMI0	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	√ √ √	<i>y</i>			/			/			ERA
MeridianTotal - Illinois MeridianTotal - Illinois Meritage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metifie Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	<i>y</i>			/			/			ERA
MeridianTotal - Illinois MeridanTotal - Illinois Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metifie Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1 SKMI0 SKMI0	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835	\frac{1}{\sqrt{1}}		\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	<i>J</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MetroPlus Health Plan MerC & HealthPlus Peoria MFC & HealthPlus Peoria MFP Systems Miami Children's Health Plan Michigan Medicaid	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1 CKMI1 SKMI0 SKMI0 SMMI0	837 835 837 837 835 837 835 837 835 837 837 835 837 835 837 835 837 835 837 835			\frac{1}{2}	\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	<i>J</i>			/			/			ERA
MeridianTotal - Illinois Meridage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metifie Dental Metlife Dental Metlife Dental MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MFD systems Miami Children's Health Plan Michigan Medicaid Michigan Medicare Michigan Medicare Michigan Medicare Michigan Medicare Michigan Medicare Michigan Medicare Mid American Benefits Mid American Benefits	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1 SKMI0 SKMI0 SMMI0 SMMI0 SMMI0 22823	837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	<i>y</i>	// · · · · · · · · · · · · · · · · · ·		/			/			ERA
MeridianTotal - Illinois Meridiage Medical Network Meritage Medical Network Meritage Medical Network Meritain Health Meritain Health Meritain Health Metife Dental Metife Dental Metife Dental MetroPlus Health Plan MetroPlus Health Plan MetroPlus Health Plan MFC & HealthPlus Peoria MFC & HealthPlus Peoria MHP Systems Miami Children's Health Plan Michigan Medicaid Michigan Medicare Mid American Benefits	MHPIL MHPIL IP097 IP097 IP097 38232 41124 41124 65978 65978 65978 13265 13265 23550 23550 64068 82832 12K37 12K37 CKMI1 CKMI1 SKMI0 SKMI0 SMMI0 SMMI0 SMMI0	837 835 837 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835 837 835				\frac{1}{\sqrt{1}}	\frac{1}{\sqrt{1}}	<i>y</i>	// · · · · · · · · · · · · · · · · · ·		/						ERA

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Payer Name	Payer Code	Transaction	1	Р	_	_	Р	_	_	D)	1	P D	1	Р	D	Notes
Mid-County Physicians Medical Group	SCP01	837	\checkmark	\checkmark													
Midland National Life Insurance Company	90956	837	_	√					_	_	4				<u> </u>		
Midlands Choice Inc. Midwest Health Partners	47080	837	√	✓				`	/ /	4	+				1		
Midwest Operating Engineers Welfare Fund	76079 45979	837 837	√ √	√ √		Н		-	/ /	/	+			+	1		
Midwest Physicians Administrative Services	TH088	837	Ť	✓				+	Ť		+						
Millette Administrators, Inc (Millette Administrators)	MAI58	837	√	Ė	√	Н			+	_	T				1		
Millette Administrators, Inc. (Michigan)	MAI60	835	√	✓		√	√			1	Ť						
Millette Administrators, Inc. (Michigan)	MAI60	837	✓	✓	✓												
Mills Peninsula Medical Group	SC050	837	✓	✓				·	/ /	/							
Minnesota Department of Health	MNDH1	835	✓.	_		✓	✓		_		4				_		
Minnesota Department of Health	MNDH1	837	√	✓			_	_	_	_	4						
Minnesota Medicaid Minnesota Medicaid	12K16 12K16	835 837	√ √			√ √			/	_	+				-		
Minnesota Medicaid	SKMN0	837	· ·	√		√	./	-		+	+			-			
Minnesota Medicaid	SKMN0	837		√ ✓			√			/	+						
Minnesota Medicare	12M16	835	√	Ė		√	Ť		Ť	_	T			_	1		
Minnesota Medicare	12M16	837	✓			√		`	/								
Minnesota Medicare	SMMN0	835		✓			✓										
Minnesota Medicare	SMMN0	837		✓			✓		√								
Mission (St. Joseph Heritage Healthcare)	STJOE	837	√	√	Ĺ	Щ		$\perp \Gamma$	Ţ		Ĺ				Ľ		
Mission Community IPA	PHM10	837		√		Ш	\blacksquare			_	4					_	
Mississippi Health Partners	64068	837	√ ,	✓				_	/	\perp	+	_		+	_		
Mississippi Medicaid Mississippi Medicaid	12K17 CKMS1	837 835	✓		√	H	\vdash	✓ \	+	-	+				1		
Mississippi Medicaid	CKMS1	837			✓			V	+	-/	/				\vdash		
Mississippi Medicaid	SKMS0	837		√	Ť	Н		_		/ <u> </u>	+			1	1		
Mississippi Medicaid	SKMS1	835	√	· ✓		√	√		Ť	1	+						
Mississippi Medicare	12M17	835	✓			✓		_	_	_	7	_		_	1		
Mississippi Medicare	12M17	837	✓			√		`	/								
Mississippi Medicare	SMMS0	835		✓			✓										
Mississippi Medicare	SMMS0	837		✓			✓		✓	/							
Mississippi Physicians Care Network	64084	837	✓.	<u> </u>		Ш			_		_				<u> </u>		
Mississippi Public Entity Employee Benefit Trust	37233	837	√	√				_	+	4	+	_			-		
Mississippi Select Health Care Missoula County Medical Benefits Plan	64088 37275	837 837	'	√ √		Н		_	+	+	+				-		
Missouri Medicaid	12K15	835	√	· ·		1	-	-	+	+	+	_		+	+-		
Missouri Medicaid	12K15	837	1			Ť			/		+						
Missouri Medicaid	SKM00	835	Ť	√		Н	√	T	_	_	T				1		
Missouri Medicaid	SKM00	837		✓					√	/							
Missouri Medicare	12M15	835	✓			√											
Missouri Medicare	12M15	837	✓			√		·	/			✓					
Missouri Medicare	SMM00	835	Ш	✓		Ш	✓				_				<u> </u>		
Missouri Medicare	SMM00	837	_	√		Ш	✓		√	_	4	`	/				
Missouri Medicare Select	MMS01	837	√	√			,	_	+	+	+	_			4		
MMM Florida MMM Florida	MMMFL MMMFL	835 837	√ √	√ √		✓	✓	٠,	/ /	/	+				1		
MMSI (Mayo Clinic Health Solutions)	71890	837	✓	_		H		\pm	Ť		+						
MO - Missouri Home State Health Care	68069	837	<i>\</i>	√ √				١,	/ /	/	\top	√ ·	/		П		
Moda Health	13350	835	✓	_		✓	✓		Ť		1						
Moda Health	13350	837	√	✓													
Molina Complete Care of Virginia (Medicare & Medicaid)	MCC02	835		✓		✓	✓										
Molina Complete Care of Virginia (Medicare & Medicaid)	MCC02	837		✓		Щ	Ш	Ţ	F	L	Ĺ				Ľ		
Molina Healthcare Dental	SKYGN	835			_	Ш	\blacksquare	√	-	_							
Molina Healthcare Dental	SKYGN	837			✓	Н		_	+		4	_	✓		1		As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of California	38333	835	./	./		1	1										provider's payment solutions needs
Molina Healthcare of California Molina Healthcare of California	38333	837	√ ✓	√ √		Ý	·	-	+	+	+	-					provider 3 payment solutions needs
Molina Healthcare of California Encounters	33373	837	<i>\</i>	√ ✓		\vdash			+		+				T		
		-57	Ė	Ė					Т		\top				П		As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Florida	51062	835	✓	✓	L	✓	✓	[⅃				\perp	L	L	L	provider's payment solutions needs
Molina Healthcare of Florida	51062	837	✓	√					/ /								
						Π									Π		As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Idaho	61799	835	✓	✓		✓	✓		_		ᆚ				_		provider's payment solutions needs
Molina Healthcare of Idaho	61799	837	✓	√		Ш	\blacksquare			_	1					_	As af 0/20/22 Maline has designed at FCHO H. H
Molina Healthcare of Illinois	20024	025	,	,		,	,		1					1	1	I	As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Illinois Molina Healthcare of Illinois	20934	835	V	√ /		√	V	_	+	+	+				\vdash		provider's payment solutions needs
Monta reacticale of fillinois	20934	837	V	V													

Maria Mari	Payer Name	Payer Code	Transaction	_	/ailab	ole D		llmen P [i t D I	COB				ents D			Notes
Marie Mari	Molina Healthcare of Iowa	MINIA	835				_	1									
March Marc				<i>\</i>	-		Ť	Ť	√	√							
Separate process of Management (1982) 1985 1985 1985 1985 1985 1985 1985 198							_										As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Some studies of Michigan 1901	Molina Healthcare of Michigan	38334	835	✓	✓		√ .	✓									
State self-through (Missel) 780	Molina Healthcare of Michigan	38334	837	✓	✓		1										
Marie Francisco Marie Marie Francisco Marie Marie Francisco Marie Franci	Molina Healthcare of Michigan	JIJVH	835	✓	✓		√ ·	√									
Many International Control of Many 1985 1895 18	Molina Healthcare of Michigan	JIJVH	837	✓	✓		√ ·	✓	√	✓							Provider must be an approved JVHL lab
Marie Numbers of Michael Marie Numbers M	Molina Healthcare of Mississippi	77010	835	/	1		/	✓ 									
Miles washings Mile				√	√		Ť										F
Mode				√	_		√ ·	√	_	1				П	_	_	
Models Sear-Blacked Models - Sales - Models Sear-Blacked Models - Sales - Models - Models - Sales - Models - Sales - Models - Sales - Models - Sales - Models	Molina Healthcare of Nebraska	MLNNE	837	✓	✓		1		√	✓							
Motion Seculation of Monators (American of Monators Californian Control of Monators California (American of Monators California (Ame																	As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Motion Machines of Now Motion - Salated Methods Secure - Salated Metho	Molina Healthcare of Nevada	MLNNV	835	✓	✓		✓ .	✓									provider's payment solutions needs
Motion Machines of Moreone South	Molina Healthcare of Nevada	MLNNV	837	✓	✓												
Main Medica - Stude -																	As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Modes seatthour of New Mesco -5C3 OLG 12 12 12 12 12 12 12 12 12 12 12 12 12	Molina Healthcare of New Mexico - Salud	09824	835	✓	✓		√ .	✓									provider's payment solutions needs
Motion Selablacine of More Motion Sci J 1982 1982	Molina Healthcare of New Mexico - Salud	09824	837	\checkmark	✓												
Motion Selectification of New Mexicol - SQ 1				ΙĪ			Τ	T		1			1	T	П	T	
Motion Seathbrace of New York 11446 252 V V V V V V V V V V V V V V V V V V				✓	√		√ <u> </u>	√		1	ш	_		Ш			provider's payment solutions needs
Monits National conditions with the wron's work of	Molina Healthcare of New Mexico -SCI	04423	837	✓	✓		4		√	✓							
Modes Neutrone of Othe								Ţ		1			1				
Modita seathcare of Chis 2014 835 V V V V V V V V V V V V V V V V V V V				√.	√.	Ш	√ <u> </u>	√ _	4	L	ш		1	Ш		ļ	provider's payment solutions needs
Modern Melethracer of Ohio Modern Melethracer of Ohio Modern Melethracer of Ohio Modern Melethracer of Neurito Nace 1519	Molina Healthcare of New York	16146	837	✓	✓		4	_	√	✓						_	
Modina Healthclare of Oliko 2019				١,	,			,									
Molica Healthcare of Puerto Rico 81794 8155 7 7 7 8170 81704 8170				√	√	_	√ ·	√	_	_		_		\vdash	_	_	provider's payment solutions needs
Motine Neithburger of South Carolina AG199	Molina Healthcare of Unio	20149	837	√	√		-	_	_						_	-	A = 5 0/20/22 MA-line has designed at FCHO Hardth as Abril FDA = 44 - 12 FDA
Molina Healthcare of South Carolina 46299 835 V V V V V V V V V V V V V V V V V V V	Marking Hardaharan of Duranta Disa	04704	025	,	,		,	,									
Molina Neathbrane of South Carolina Molina Neathbrane of South Carolina Molina Neathbrane of Texas	Molina Healthcare of Puerto Rico	81794	835	V	V	-	<u> </u>	V	+	┢				\vdash	_	-	
Molina Halathcare of Teas Molina Halathcare of Ush Molina Halathcare of Washington Molina Hal	Molina Healthcare of South Carolina	46300	925	,	,		,	,									
Molina Healthcare of Teas 2554 335 V V V V V V V V V V V V V V V V V V				./	./		<u> </u>	<u> </u>	+	1		 			_	-	provider 3 payment solutions needs
Molina Healthcare of Treas	Wolling Healthcare of South Carolina	40233	637	·	V		\dashv	_	_	1						-	As of 8/29/22 Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Vitath Molina Healthcare of Utath Molina Healthcare of Washington Molina Healthcare of	Molina Healthcare of Teyas	20554	835	./	./		./	./									
Molina Healthcare of Utah 1209				1	./		Ť	Ť	-/	1				$\overline{}$		_	provider 5 payment solutions needs
Molina Healthcare of Utah Molina Healthcare of Utah Molina Healthcare of Utah Molina Healthcare of Utah Molina Healthcare of Washington Molina Healthcare (Washington Moli				1	•		/	_	Ť	Ť							
Molina Healthcare of Utah SX109 SX1				<i>\</i>		_	+	_	_	1			1	$\boldsymbol{\top}$	_	_	
Molina Healthcare of Utah							1										As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Washington 38336 3835 3837 3837 3837 3838 3838 3838 3839 3839	Molina Healthcare of Utah	SX109	835		✓			✓									
Molina Healthcare of Washington 38336 837					√	_	_		_	1			1	П		_	p
Molina Healthcare of Washington							1										As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Healthcare of Washington ABRI1 B33 ABRI1 B37 V V V V V V V V V V V V V	Molina Healthcare of Washington	38336	835	✓	✓		✓ .	✓									
Molina Healthcare of Wisconsin Molina Healthcare of Wisconsin Molina Healthcare of Wisconsin Molina Ohio Medicaid		38336	837	✓	✓												
Molina Healthcare of Wisconsin ABRII 837																	As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Molina Ohio Medicaid	Molina Healthcare of Wisconsin	ABRI1	835	✓	✓		✓ .	✓									provider's payment solutions needs
Molina Ohio Medicaid Vision	Molina Healthcare of Wisconsin	ABRI1		√	✓												
Molina Ohio Medicaid Vision	Molina Ohio Medicaid		837	✓	√												
Molina Ohio Medicaid Vision				✓			√ .	√									Effective 2/1/2023, remittance returned under Ohio Medicaid
Monarch Healthcare IPA IPO95							_										
Monarch Healthcare IPA Monitor Life - Cruma & Forster (ERA Only) Monitor Life - Cruma & Forster (ERA Only) Monitor Life Insurance Company (Secondary claims only) Montana Medicaid Montana Medicaid Montana Medicaid Montana Medicaid SKMTIO				_		_	_	_		<u> </u>							Effective 2/1/2023, remittance returned under Ohio Medicaid
Monitor Life - Crum & Forster (ERA Only)				_	-		√ ·	√ _	_	_							
Monitor Life Insurance Company (Secondary claims only) 16098 835 ✓				L√.	i -		_	_		√	ш			ш			
Monitor Life Insurance Company (Secondary claims only) 16098 837 ✓ I	Monitor Life - Crum & Forster (ERA Only)			√,	√		√ <u> </u>	√ /								_	
Montana Medicaid 12K77 835 ✓ I ✓ I			-	_	✓		√ <u> </u>	√ _	_	_	ш	_	_	\vdash	_	_	
Montana Medicaid 12K77 837 √ I I V I				_		-	/	+	_	1				\vdash	_	_	
Montana Medicaid SKMT0 835 V				V			V	+	-	+					_	_	
Montana Medicaid SKMT0 837 V				√	/	-	+	/		1		H		\vdash	-	-	
Montana Medicare 12M77 835 ✓ I ✓ I				\vdash			+	٧		/					-	-	
Montana Medicare 12M77 837 √ I √ I √ I √ I √ I √ I √ I ✓ I ✓ I ✓ I ✓ I I ✓ I I ✓ I I ✓ I				./	V	-	/	-	_	·				\vdash	-		
Montana Medicare SMMT0 835 V				·/		_	_	_	./						1	-	
Montana Medicare SMMTO 837 V				Ý	/		_	/	Ť						·	1	
Montefiore Contract Management Organization 13174 835 ✓ <td< td=""><td></td><td></td><td></td><td>Н</td><td>_</td><td></td><td>_</td><td>_</td><td></td><td>1</td><td>Н</td><td></td><td></td><td></td><td>\dashv</td><td>_</td><td></td></td<>				Н	_		_	_		1	Н				\dashv	_	
Montefiore Contract Management Organization 13174 837 \$\sqrt{2}\$ \$\sqrt{2}\$ <td></td> <td></td> <td></td> <td>/</td> <td>_</td> <td>-</td> <td>_</td> <td>_</td> <td></td> <td>Ť</td> <td></td> <td>Н</td> <td></td> <td>\vdash</td> <td>-</td> <td>Ť</td> <td></td>				/	_	-	_	_		Ť		Н		\vdash	-	Ť	
Montifiore HMO 46161 837 🗸 🗸 📗 🗸 🗸 💮				1			+	+	_/	1	Н				\dashv	\dashv	
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	Monumental Life Insurance Company	MMLIC	837	H	√		+	+	Ť	Ė						_	

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Payer Name	Payer Code	Transaction	_					D I					D	_	P I	Notes
Monumental Life Insurance Company (TX)	TRLTC	837	\checkmark	✓				√	✓							
MORRIS ASSOCIATES	35092	835		✓												
MORRIS ASSOCIATES	35092	837	√	✓		_	,	_	_				_	_	_	
MotivHealth Mark death	U7632	835	_	√		√	√	_	-	-	_	++	_	-	-	
MotivHealth Mountain Health CO-OP	U7632 MHC01	837 835	√ √	√ √		√	/	+	+		-		-	+	+	
Mountain Health CO-OP	MHC01	837	√ √	√ ✓		Ť	<u> </u>							_	_	
Mountain State Blue Cross Blue Shield of West Virginia	SB941	837	Ė	√			√		√							
Mountain States Administrative Services	86040	837	✓	✓		7										
MPE Services Inc.	37233	837	\checkmark	√												
MPEEBT	37233	837	✓	✓												
MPM Prospect Medical Group	MPM16	837	√	✓		_	_		√		_	\perp	_	_	_	
MSA Care Guard	20572	837 837	√ /	√ /	_	4	4	√	√	4	_	+	-	+	_	
MSC (Medical Service Company) Group, Inc. Mt. Carmel Health Plan	80019 95655	837	√ ./	√ √		-	-	→	./				-	+	+	
Multicare	R3457	837	√	√		_	_	Ť	Ť							
Multicare Connected Care (MCC)	RP036	835	√	√	_	√	√	_	_			T		_	_	Payer name listed at ECHO under 'NCAS'
Multicare Connected Care (MCC)	RP036	837	✓	√				√	✓							
Multiplan Wisconsin Preferred Provider Network	34080	837	✓	√												
Municipal Health Benefit Fund	81883	837	✓	-		Ţ										
Mutual Health Services	34192	835	√	√		√	√	\perp	Ļ			Ш	_			
Mutual Health Services	34192	837	√ /	√	,	_	,	_ √	✓	-		1		_	_	
Mutual of Omaha Insurance Company Mutual of Omaha Insurance Company	71412 71412	835 837	√ ./	√ √	✓	√	√ ·	V	\vdash	\vdash		\vdash		+	+	
Mutual of Omaha Insurance Company Mutual of Omaha Insurance Company	CX087	837	V	V	1	\dashv	-	_	+	√	1	+ +	-	-	-	
Mutually Preferred	71412	837	√	√	_	_	_			Ť				_		
MVP Health Plan (Mohawk Valley)	14165	835	√	√		√	√		1	1		1 1				
MVP Health Plan (Mohawk Valley)	14165	837	√	✓				√	√							
MVP Health Rochester	12X04	837	✓													
My Choice Wisconsin	27004	835	✓			√	√									
My Choice Wisconsin	27004	837	√	√		_	_	_	_	_	_		_	_	_	
My Choice Wisconsin BadgerCare Plus	62777	835	_	√		√	√	_		-		+		_		
My Choice Wisconsin BadgerCare Plus My Family Medical Group	62777 33020	837 837	√	√ √		-	\dashv	_						+	+	
MyDecision HealthSmart	18840	837	√	√	-	_	_	√	V	1	_		_	_	_	
myPlace Health	MPH01	835	√	✓				Ť	Ė							
myPlace Health	MPH01	837	✓	✓	✓			√	✓	√						
MyTruAdvantage	MTAMA	837	✓	✓				√	✓							
MyTruAdvantage	SIHOMA	835	_	_	✓	√	√ 、	√								
MyTruAdvantage	SIHOMA	837	√		√	_		√	√		_			_		
N.W. Ironworkers Health & Security Trust Fund	91136	837	✓	_		-	4	+	_	+	_		_	4	_	
N.W. Roofers & Employers Health & Security Trust Fund N.W. Textile Processors	91136 91136	837 837	./	√ √		-	-	-	+		1		-	+	-	
NAA (North America Administrators L.P.) (Nashville TN)	65085	835	√			√	1	+	+					+	+	
NAA (North America Administrators L.P.) (Nashville TN)	65085	837		$\overline{}$	_	Ť	Ť	_	Н	1	_	1 1	_	_	_	
NALC/Affordable	53011	837	_	√										1	1	
NAMCI/Global Care	L0110	837	✓	✓				√	✓							
NAMM-IL (Senior Care Partners) (ERA Only)	NANPR	835	✓	_		√	✓									ERA Only
NAPHCARE INC.	58182	837	√	√	✓	[√	✓			Ш	_			
Nascentia Health Plan	45529	835	_	√		√	✓	+				\vdash	_	_	_	Payer requires EFT Enrollment in order to receive ERA
Nascentia Health Plan	45529	837	√ /	√ /		/	/	+	1	1		\vdash	_	+	_	
National Accident and Health General Agency Inc. (NAHGA) National Accident and Health General Agency Inc. (NAHGA)	67788 67788	835 837	✓ ✓	√ √		√	√	→	√			++		-	-	
National Association of Letter Carriers/NALCHBP	53011	837				\dashv						++		\dashv		
National Capital Preferred Provider Organization (NCPPO)	90001	837	√			_		√								
National Elevator Industry Benefit Plan (ERA Only)	CX045	835	√	√		√	✓									
National Financial Insurance Company	90956	837		√												
National Foundation Life Insurance	98205	837	_	√		Ţ										
National Foundation Life Insurance	USHA1	835	√	✓		√	√	_	<u> </u>	_	L	Ш		_		
National General	ASHC1	837	√	-		_	_		√ /			\vdash	_	\perp	_	
National Guardian Life Insurance Co.	87020 SV100	837	_	√ /		+	\blacksquare		√	1		\vdash	_	+	+	
National Imaging Associates National Imaging Associates	SX190 SX190	835 837	√	√ √	-	-	-	+				++		+	+	
National Rural Electric Coop (NRECA)	39026	837	√	✓		\dashv		√	√		√	√				
National Telecommunications Cooperative Association	52120	835	√	√		√	√	Ť	T	1			_		_	
National Telecommunications Cooperative Association	52120	837	_	_	✓											
National Telecommunications Cooperative Association (NTCA - Staff)	52104	837	✓	✓												
National Telecommunications Cooperative Association (NTCA)	52103	837	\checkmark	√												

Months M	Payer Name	Payer Code	Transaction	_		e D				COB P			chments P D			Notes
Section Medical 1717	National Vision Administrators	NVADM	837													
Service Methods				✓		<u> </u>	√		✓							
Service And Andrews	Nebraska Medicaid	SKNE0		✓	√		√ ,	√		П				П		
Section 1985 1987 1985 1987	Nebraska Medicaid				_		_	√		√						
with marked relations whether the marked plant is a second plant of the marked plant is a second plant of the marked plant is a second pla	Nebraska Medicare	12M19	835	✓	_		√	\neg	_	П				П		
Section Michael Control Contro	Nebraska Medicare	12M19	837	✓		1	√		√			✓				
Marie Mari	Nebraska Medicare	SMNE0	835		✓		Τ,	√		П						
Selection (see Name Personal Processor (see Name Personal	Nebraska Medicare	SMNE0	837		✓		,	√		✓			✓			
Wilst Control Charles The Back Interest Control Charles	Nebraska Total Care	68069	837	✓	✓				✓	√		✓	✓			
	Neighborhood Health Partnership (NHP)	96107	837	✓	✓				√	✓						
Seed	Neighborhood Health Plan Rhode Island	05047	835	✓	✓		√ ,	√		П						
Seed Service Control Princip Princip Control Cachings Units, Princip Control Cachings Units, Princip Control Caching Units, Princip Caching Units, Princip Control Caching Units, Princip	Neighborhood Health Plan Rhode Island	05047	837	✓	✓				√	\checkmark						
Second Second Principal	Neighborhood Health Plan Rhode Island - Exchange, Unity, Integrity	96240	835	✓	✓		√ 、	√								
	Neighborhood Health Plan Rhode Island - Exchange, Unity, Integrity	96240	837	✓	✓											
Service of Medicare	NEIGHBORHOOD HEALTHCARE PACE	R3456	837	✓	✓											
## Select of Table State	Netcare Life and Health Insurance (Hagatna Guam)	66055	837	✓	✓											
### Propries March March Modername 7,970 927	NetWell	27726	837	✓	✓											
### Annual Processor Comp Medicine ### Annual Proce	Network Health Insurance Corp-Medicare	77076	835	✓	✓	[√ 、	√								
### APPENDER PROFIT MICHIGAN INC. 1914 357 V V V V V V V V V	Network Health Insurance Corp-Medicare	77076	837	✓	✓											
Selection Final Wilsonson Inc. 3914 877 7 7 8 9 9 9 9 9 9 9 9 9	Network Health Plan of Wisconsin Inc.		835	✓		1	√ ,	√								
## State of Management (Management (Manage	Network Health Plan of Wisconsin Inc.			√	_	\neg				П		1		П		
Miles Mile	Network Solutions IPA				_					✓						
MILLIAN MILL	Network TPA LLC			✓	_					П				\Box		
Months	NEUEHEALTH			√	_	1	√ ,	√		П				\Box		
November				<i></i>	_	\neg	+	_	_		_			-		
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None of Medicare				<i>'</i>	_	_	_	_	/	1			_			
None				H	_				Ť	H						
NEW ATTEMPS INC.				Н		_			_	./	_	_		-		
No. Centrol Health - Visita Cardiology No. Centrol N				./	_	-	+	Ť	./	_						
Note Proceedings Pethanoger Note Pethanoger P				·	_	-	+	_	·	H	-	-+		_		
New Flamphore Medicare New Hamphore Medicare No Hamphore Medicare				./	_				./	./						
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SKNHO				Ť	./	-	_	./	Ť	H						
New Hampshire Medicare				Н	_	-	_		+	./	-	-		1		
12M21 837 V V V V V V V V V				/	Ť	_	_	<u> </u>	+	Ľ						
New Hampshire Medicare				7	-	_	_	-	7	Н	-	_		-		
New Horizon PACE	·			·	/	-	_	/	·	Н				-		
New Horizon PACE R3481 R35 V V V V V V V V V				Н		-	_	_	+	/	-	-		-		
R3481 837 V V V V V V V V V				/	_	-	_	_	+					-		
New Jersey Medicaid				V /		_	<u> </u>	<u> </u>	+	Н	-	-		-		
New Jersey Medicaid MDNJI 837				_	<u> </u>		/	+	+	H				-		
New Jersey Medicaid MDNJP 835 V New Jersey Medicaid-Charity Care CKN12 837 V New Jersey Medicaid-Charity Care CKN12 837 V New Jersey Medicaid-Charity Care CKN12 837 V New Jersey Medicare CKN12 837 V New Jersey Medicare 12005 835 V New Jersey Medicare 12005 835 V New Jersey Medicare SMNJO 835 V New Jersey Medicare SMNJO 835 V New Jersey Medicare SMNJO 837 V New Mexico Medicaid SKNMO SMNO				V /	-	_	_	-	-	H	-	-+		-		
New Jersey Medicaid				V	_	—	V	/		Н	\dashv	\dashv	_	\vdash		
New Jersey Medicaid-Charity Care				H		+	——	V	-	, I	-	-	_	+		
New Jersey Medicare	·				V	_	_	V	_	√	-	_	-	+		
New Jersey Medicare				√	_			_	-	H	-	-		+		
New Jersey Medicare					-			+		Н	-	_	-	+		
SMNJO	,			-		_		_	-	Н		4		\vdash		
New Jersey Medicare				✓	_		_		✓	Ш	\Box	_		\Box		
New Mexico Medicaid 12K22 837 √ I </td <td></td> <td></td> <td></td> <td></td> <td>_</td> <td>+</td> <td>_</td> <td>_</td> <td>_</td> <td></td> <td>\rightarrow</td> <td>_</td> <td></td> <td>+</td> <td></td> <td></td>					_	+	_	_	_		\rightarrow	_		+		
New Mexico Medicaid SKNM0 835 ✓ <td></td> <td></td> <td></td> <td></td> <td>√</td> <td>_</td> <td>L</td> <td>√</td> <td>_</td> <td>✓</td> <td>$oldsymbol{\perp}$</td> <td>_</td> <td></td> <td>lacksquare</td> <td></td> <td></td>					√	_	L	√	_	✓	$oldsymbol{\perp}$	_		lacksquare		
New Mexico Medicarid SKNM0 837 ✓ </td <td></td> <td></td> <td></td> <td>✓</td> <td>_</td> <td>_</td> <td></td> <td>_</td> <td></td> <td>Ш</td> <td>4</td> <td>_</td> <td></td> <td>+</td> <td></td> <td></td>				✓	_	_		_		Ш	4	_		+		
New Mexico Medicare SMNM0 835	New Mexico Medicaid			ш	_		_	_		ш			ļ	$oldsymbol{\sqcup}$		
New Mexico Medicare SMNM0 837 ✓ <td>New Mexico Medicaid</td> <td></td> <td></td> <td></td> <td>_</td> <td></td>	New Mexico Medicaid				_											
New York City Retirees CX076 837	New Mexico Medicare			Ш	_		_	_		Ш	\Box			$oldsymbol{oldsymbol{oldsymbol{\sqcup}}}$		
New York Hotel Fund 7707C 837 🗸 📗 💮 💮 💮 💮 💮 💮 💮	New Mexico Medicare				_		,	√		√						
New York Life 12T69 837 ✓	New York City Retirees			Ш		√				Ш	\checkmark					
	New York Hotel Fund				√											
New York Medicaid 12K35 835 √ √ √	New York Life		837	\checkmark						ШΊ				\Box		
	New York Medicaid	12K35	835	✓			√									

			Av	vailab	ole	Enro	ollmei	nt	COE	3	At	tachme	ents	Subr	mitter		
Payer Name	Payer Code	Transaction	_	Р	_	_	_	D I	_	_	_		D	_	_	Notes	
																	payer code if you began submitting claims after April 1, 2025, as you will nique payer code associated with your ETIN. If you are unsure of your
New York Medicaid	12K35	837	✓			✓		✓								assigned payer of	ode, please contact your Client Manager for assistance.
New York Medicaid	SKNY0	835		√	√		√	√									
				,												instead have a u	payer code if you began submitting claims after April 1, 2025, as you will nique payer code associated with your ETIN. If you are unsure of your
New York Medicaid	SKNY0 NY7G6	837		√	√	_	√	√		-	_				-	assigned payer o	ode, please contact your Client Manager for assistance.
New York Medicaid Legacy Mount Hood Medical Center 7G6 New York Medicaid Legacy Mount Hood Medical Center 7G6	NY7G6 NY7G6	835 837	✓ ✓		-	√	-		+	+			-	-	-		
New York Medicaid - Legacy Emanuel Hospital - 7G3	NY7G3	835	✓			√	\dashv	Ť	+	\vdash	-				\dashv		
New York Medicaid - Legacy Emanuel Hospital - 7G3	NY7G3	837	√ ✓			Ť	-		+	1	1		-	-	-		
New York Medicaid - Legacy Emanuel Hospital - 7G5	NY7G5	835	<i>\</i>			√	_	Ť	+						_		
New York Medicaid - Legacy Emanuel Hospital - 7G5	NY7G5	837	✓			Ť	一十		1	1				_	一		
New York Medicaid - Legacy Good Samaritan Hospital - 1390	NY390	835	✓			✓											
New York Medicaid - Legacy Salmon Creek Hospital - ADYJ	NYDYJ	835	✓			✓			1						T		
New York Medicaid - Northwell - 05L	NY05L	835	\checkmark			√											
New York Medicaid - Northwell - 05L	NY05L	837	✓			Д		_			匚						
New York Medicaid - Northwell - 0T6	NY0T6	835	√			√	_					Ш			[
New York Medicaid - Northwell - 0T6	NY0T6	837	√,	Ш	Щ	_	_		_			ш	ļ	_	_		
New York Medicaid - Northwell - 1RS	NY1RS	835	√		-	√	\dashv	_	-			\vdash		_	\rightarrow		
New York Medicaid - Northwell - 1RS New York Medicaid - Northwell - 4NT	NY1RS	837	√ /		\vdash	√	_		_			\vdash	_	_	-		
New York Medicaid - Northwell - 4NT New York Medicaid - Northwell - 4NT	NY4NT NY4NT	835 837	√ √	-	-	√	-		+	₩	-		-	-	-		
New York Medicaid - Northwell - 4N1 New York Medicaid - Northwell Health Inc - AKGL	NYKGL	835		√		\dashv	√	Ť	+	\vdash	-				\dashv		
New York Medicaid - Northwell Health Inc - JOT	NYJOT	835	./			√	<u> </u>	-	+	1	1		-		-		
New York Medical Indemnity Fund	NYDFS	837	√	√		Ť	_	_	V						_	As of October 3r	d, 2023, this payer does not accept ERA at this time.
New York Medicare	12M35	835	✓	Ť		√	_	Ť	Ť	1	_		_	_	_	7.5 0.7 00.050.7 5.1	a, 2025, this payer does not decept 210 fat this time.
New York Medicare	12M35	837	√		_	✓		_									
New York Medicare Downstate	SMNY0	835		√		_	√		1								
New York Medicare Downstate	SMNY0	837		✓			√		√								
New York Medicare Queens	SMNY2	835		\checkmark			√										
New York Medicare Queens	SMNY2	837		√			√		√								
New York Medicare-Upstate	SMNY1	835		✓		_	√										
New York Medicare-Upstate	SMNY1	837		✓		_	√		√								
New York Network Management	11334	837	_	\checkmark		_	_	_		_	_		_	_	_		
NEXCALIBER	ADSL1	837	√	√		-	-	√	√	-	-		_	_	-		
Next Level Health Partners	69821 81085	837 835	√ /	✓ ✓		√	√	_	+	-					-	Former never se	do C0021
Next Level Health Partners Next Level Health Partners	81085	837	√ ./	✓		<u> </u>	V	+	+	-	1		-	_	-	Former payer co	ue 69821
Next Level Health Falthers NextBlue of North Dakota	55892	835	√	_		√	√								_		
NextBlue of North Dakota	55892	837	√ √	√		Ť	Ť	+	+	1	_		_	_	_		
Nexus Health Medical Group	NEX01	837	✓	_		_	_										
NGS American Inc	38225	835	✓	√		√	√	\neg	т		Т				一		
NGS American Inc	38225	837	✓	✓					1								
NH Healthy Families	68069	837	✓	✓				_	✓		✓	✓					
NH Healthy Families' Behavioral Health	68068	837	√	\checkmark				✓	√								
NHBCAUX	88050	837	✓	✓													
NHC Advantage	NHC01	837	√			_	_	_				\square		_	_	As of January 23	, 2024, the payer does not offer an electronic remittance.
Nippon Life Insurance Company of America	81264	835	√ /	-	_	√	✓	√	_	_				_	_		
Nippon Life Insurance Company of America	81264 MBA01	837	V	√	√	4	-	-				\vdash		-	-		
Nivano Physicians Group NJ Carpenters Health Fund	MBA01 22603	837 837		✓ ✓		\dashv	\dashv	√ ./	√					-	\dashv		
Noble AMA Select IPA	PDT01	837	_	-	\vdash	-	\dashv		· ·	1			-	-	-		
Nomi Health	1NOMI	835	√	-	\vdash	√	√								\dashv		
Nomi Health	1NOMI	837	√	√									-				
North American Medical Management - Southern California	IP079	837	✓	√		1	_		T					_			
North Carolina Department of Public Safety Correctional Claims	38520	835	П		√	寸		√		Т	Г			寸			
North Carolina Department of Public Safety Correctional Claims	38520	837	✓	√				√	√								
North Carolina Medicaid	12K23	835	✓			√											
North Carolina Medicaid	12K23	837	✓			√		√								Encounter Claim	s Accepted
North Carolina Medicaid	CKNC1	835			✓	I		√									
North Carolina Medicaid	CKNC1	837			√	Д			L								
North Carolina Medicaid	SKNC0	835		✓		_	√		┺	_	_						
North Carolina Medicaid	SKNC0	837		✓		_	√		√	1						Encounter Claim	s Accepted
North Carolina Medicare	12M23	835	√	ш	-	√	_	_	_	_	_	\sqcup	_	_	_		
North Carolina Medicare	12M23	837	\checkmark			√											

Payer Name	Payer Code	Transaction			ble D				CO P			Attachi I P					Notes
North Carolina Medicare	SMNC0	835		√		_	√										
North Carolina Medicare	SMNC0	837		✓	Ħ		√		1	1	T		1	1			
North County Health Services	SCP01	837	✓	✓							1						
North Dakota Medicaid	12K78	835	✓			√			1								
North Dakota Medicaid	12K78	837	✓			√		_			Т			✓			
North Dakota Medicaid	SKND0	835		✓			\checkmark										
North Dakota Medicaid	SKND0	837		✓			√		√	/					✓		
North Dakota Medicare	12M82	835	√			√								✓			
North Dakota Medicare	12M82	837	✓		Ш	√			′					✓			
North Dakota Medicare	SMND0	835		✓		_	√		4								
North Dakota Medicare	SMND0	837		✓	ш	_	√		√	_	┸				√		
North East Medical Services	NEMS	835	✓			√	√										
North East Medical Services	NEMS	837	✓	✓	✓	_	_		′ √		4						
North West Orange County Medical Group	PROSP	837	١,	√	ш	4	4	_	√	_	_						
Northbay Healthcare	NB123	837	√	_	ш	4	_	_	4	_	_	_	_		4	_	
Northeast Georgia Health Services	58169	837	✓	√		_	_	_	_	_	_	_	_	_			
Northern California Advantage Medical Group	NCA01	837	,	√	Н	\dashv	_	+	+	+	+	+	-	+	\vdash	\vdash	
Northern California Physicians Group	NCPG1	837	√	√ /	H	-	-	+	+	-	H	-		-			
Northern Illinois Health Plan	36347	837	√	√ /	Н	\dashv	_	+	+	+	+	+	+	+	\vdash	\vdash	
Northern Nevada Trust Fund	88027 NMG01	837	V	√ /	H	+	+	+	+	+	+	+		-	-		
Northridge Medical Group NorthShore Physician Associates	NMG01 36364	837 837	/	√ /		\dashv	_	+	+	+	+	_					
NorthShore Physician Associates NorthShore Physician Associates (DOS < 1/1/23)	36364 48026	837	√ √	√ √	H	√	√	+	+		H						
NorthShore University Health System Medical Group	36364	835	./	✓	\vdash	Ť	٧	_	+	+	-	+		1	1		
Northwell Direct	88987	837	/	√ √		-			+	-	-			_			
Northwest Administrators Inc (ERA Only)	91068	835	./	√		√	√	+	+	+	+	_	+		\vdash		ERA Only
Northwest Community Health Partners	36364	837	✓	_	\vdash	Ť	<u> </u>	-	+	+	+	-	+	+-	1		ERA Offiy
Northwest Community Health Partners (DOS < 1/1/23)	NWCHP	835	<i>\</i>	_		√	./	+	+	+	+						
Northwest Community Health Partners (DOS < 1/1/23)	NWCHP	837		√ ✓	\vdash	Ť	Ť	+	+	+	+	+	+	+-	+-	—	Claims with DOS after Jan 1 2023, please submit to payer code 36364
Northwest Diagnostic Clinic/SelectCare of Texas (NWDC)	62119	837	<i>\</i>	_													Claims with 503 after 3an 1 2023, piease sabinit to payer code 50304
Northwest Physicians Network	LIFE1	837	<i>√</i>	_		_	_		∕ √	/	+	_	+	+	1		For claim Dates of Service on or after 01/01/21.
Northwest Physicians Network	NPN11	837	1	√		_	-	Ť		_	+						Use NPN11 for Dates of Service prior to 01/01/21
Northwest Suburban IPA (Illinois)	36346	835	<i>\</i>	✓	H	√	√	Ť	Ť	_	_	_	+	+	1		550 H H22 161 54105 61 561 H62 \$1161 16 52/52/22
Northwest Suburban IPA (Illinois)	36346	837	√	_	H	Ť	Ť		+	\top	1						
Northwood Healthcare	NWOOD	835	✓	✓	П	√	√		1	_	1		1				
Northwood Healthcare	NWOOD	837	✓	✓				_	′ √	/							
Novasys Health Network	71080	837	✓	✓	П	7	_		T	╅	┰		_	1			
NP Providence Health Plan Commercial	PHMD1	837		✓					√	/	1						
NP Providence Health Plan Medicare	PHMD2	837		✓													
NP Providence Health Plan OHP	PHMD3	837		\checkmark													
NP Yamhill County CCO	PHMD4	837		✓													
Nuestra Familia Medical Group (Prospect Medical Group)	PROSP	837		✓					√	/							
Nyhart	37299	837	✓	✓	Ш												
NYLCARE CA	91135	837	✓														
NYS DOH UCP	14142	835	_	✓	_	_	√			┸							
NYS DOH UCP	14142	837	√		Ш	√	√	√	′ √	_	_						
Oak Street Health	OAKST	837	√	_	Н	_	_	_	+	_	_	_	_	_	_	\vdash	
Oak West Physician Association	36400	835	√	_	Н	\dashv	-	\perp	+	\perp	+				-		
Oak West Physician Association	36400 DESPT	837	√	√	Н	\dashv	_	+	+	+	+	+	-	+	\vdash	\vdash	
Oasis IPA OCCUPATIONAL EYEWEAR NETWORK INC	DESRT 50653	837 837	V	√ √	H	\dashv	+	+	+	+	+	+		+	1		
Octobrier Health Plan	A5236	835	V	_	\vdash	/	/	+	+	+	+	_					
Ochsner Health Plan Ochsner Health Plan	A5236 A5236	835	√ √	√ √	H	√	√	+	+		H			-			
OCRW Orange County Health Services Dept - Ryan White Program	69879	837		√ √		\dashv	-	-	+	+	+						
Ohio Health Choice PPO	34189	837	√ √	_	\vdash	\dashv	-	+	_	_	+			+			
Ohio Medicaid	SKOH0	835	<i>\</i>	_		√	√	+	+		T						
Ohio Medicaid	SKOH0	837	√	-	H	_		_	′ √	/	Т				1		
Ohio Medicare	12M24	835	√		\Box	√	_	T	Ť		T				t		
Ohio Medicare	12M24	837	✓		_	√	7	_		Т	Т				1		
Ohio Medicare	SMOH0	835		✓	П		✓		T		T						
		837		✓	П		√		√		Т						
Ohio Medicare	SMOH0	037					_				_				_	_	
Ohio Medicare Ohio PPO Connect	SMOH0 74431	835	√	_		✓	√										
			√ √	√		√	√		′ √	/	ł						
Ohio PPO Connect	74431	835	_	√		√ √	√ √	~	/ /	/	+				E		
Ohio PPO Connect Ohio PPO Connect	74431 74431	835 837	_	√ √ √		コ	√ √	√	′ √	/							
Ohio PPO Connect Ohio PPO Connect OhioHealthy	74431 74431 48116 48116 61101	835 837 835 837 837	√ √	\ \ \ \		コ	√ √	√	′ √			√ √	/				
Ohio PPO Connect Ohio PPO Connect OhioHealthy OhioHealthy	74431 74431 48116 48116	835 837 835 837	√ √ √	\ \ \ \ \		コ	√ ✓		′ √	/	_	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_				Effective 1/1/23, ERA enrollment completed under UMR (39026).

			Ava	ilable	F	nrolln	ment		СОВ		Attack	hments	s Su	bmitte	er Id	
Payer Name	Payer Code	Transaction	I I	_	D I	_	_		_	D				Р	D	Notes
Oklahoma DRS DOC	71065	837	√			Ŧ					-					
Oklahoma Medicaid	12K25	835	V	· l	./	/	+	Н		_						
Oklahoma Medicaid	12K25	837	V	_	Ť	_	_	√	-	_	_		_	_		
Oklahoma Medicaid	731476619	837	Ť	-	/	+	√	Ť		√						
Oklahoma Medicaid	SKOK0	835	\vdash	√	_	√	_	Н		- -			_	_		
Oklahoma Medicaid	SKOK0	837	_	<u>√</u>		Ť		Н	1							
Oklahoma Medicare	12M37	835	√		_	/	_			_	_	_	_			
Oklahoma Medicare	12M37	837	1		√	_		√								
Oklahoma Medicare	SMOK0	835	H	√	T	√	1	H		_			_			
Oklahoma Medicare	SMOK0	837		√		√			√							
Old Surety Life Insurance Company (ERA Only)	29237	835		√		′ √		П								
Olympus Managed Health Care	65074	837	_	√		+										
OMNI Administrators	OMNIA	835		√		√	1	П								also known as Leading Edge Administrators
OMNI Administrators	OMNIA	837		√												
Omni IPA	36090	837	√	√	\neg	Т		П								
Omnicare Medical Group (OMNI)	OMN02	837	✓	√												
Oncology Physicians Network CA PC	OPNC1	837	√	√												
One Call Medical	22321	835	√	√	√	′ √										
One Call Medical	22321	837	√	✓												
OnLok Senior Health Services, Inc.	99485	837	✓	√												
OODA Health	OODAH	837	√	√						\Box						
OPEIU LOCALS 30 AND 536	BPA01	837		√												
Operating Engineers Locals 302 & 612 Health & Security Fund	91136	837	✓	√												
OptiCare Managed Vision	56190	835		✓		✓				[
OptiCare Managed Vision	56190	837		√												
Opticare of Utah	OPCAU	837		√												
Optima Insurance Company	54154	837	√	√				✓	✓							
Optimed Health Plans	96277	837	✓	√												
Optimum Healthcare Inc.	20133	835	✓	✓	√	′ √										
Optimum Healthcare Inc.	20133	837	✓	✓												
Optum Care Network	OCN01	835	√	√	✓	′ √										
																1/1/2024 to EXC01, PMGSJ. Please submit all claims with Date of Service 1/1/2024 and onward to OCN01, Optum Care Network.Formerly Healthcare Partners California; Prof: Effective January 1st, 2024, please submit all claims with Date of Service prior to 1/1/2024 to EXC01, PMGSJ. Please submit all claims with Date of Service 1/1/2024 and onward to OCN01,
Optum Care Network	OCN01	837	√	√				✓	✓							Optum Care Network.Formerly Healthcare Partners California;
Optum Care Network - Inland Faculty Medical Group	MPM70	837	√	_	_			Ш		_	_					
Optum Maryland Behavioral Health	OMDBH	835		√	- √	′ √			_	_						
Optum Maryland Behavioral Health	OMDBH	837	_	√ /		, ,		✓	√	_	_			_		
Optum Medical Network / AZ, UT (formerly Lifeprint Arizona)	LIFE1	835	√	_	√	′ √		,		-						5 1 2 2 5 5 1 6 04/04/04
Optum Medical Network / AZ, UT (formerly Lifeprint Arizona)	LIFE1	837 835		√ /	_			✓	√	_	_					For claim Dates of Service on or after 01/01/21.
Optum MedicalRx Optum MedicalRx	ORXM1 ORXM1	835		√ √	_		+	Н		-						For claims with DOS on or after 1/1/2024.
Optum Public Sector	OSDPS	837		√ √	-	+				_						For claims with DOS on or after 1/1/2024.
OptumCare Network of CT	E3287	835		√ √	./	/ /	+	Н		-			+	1		
OptumCare Network of CT	E3287	837	√ ✓	_	Ť	Ť		Н		_	-					
OptumHealth	87726	837	_	<u>√</u>	_	_	_		√	_	✓ .	√	_	_		
OptumHealth Behavioral Solutions (formerly Pacificare Behavioral Health)	87726	837	_	<u>√</u>				1	√	_	_	<i>/</i>				
OptumHealth Behavioral Solutions (formerly United Behavioral Health)	87726	837	-	<i>√</i>	_	_	1	<i>\</i>	<i>√</i>	_		<i>-</i>		1		
OptumHealth Care Solutions (formerly United Resource Networks)	41194	835	_	<u>√</u>		/ /		H	Ť		Ť	Ì				
OptumHealth Care Solutions (formerly United Resource Networks)	41194	837	√	_	Ť	Ť		✓	✓	_						
OptumHealth Physical Health	41161	835		√ 	\top	✓		М	\Box	_						
OptumHealth Physical Health	41161	837		√	_	_		П	√	_			_			Former payer codes 41159, 41160 (includes Oxford)
OptumHealth Physical Health - includes Oxford (formerly ACN & ACNIPA)	41160	837	_	√	\top				\Box	十						
OptumHealth Vision	00773	835		<u>√</u>		√		П		\neg	_					
OptumHealth Vision	00773	837	_	√					√							
Orange Coast Memorial IPA	IP095	837		√				✓	√	_						
Orange County Health Care Agency	65021	837		√				✓	√	一						
Oregon Medicaid	12K41	835	√		√	′										
Oregon Medicaid	12K41	837	√		√	_		✓		一						
Oregon Medicaid	SKOR0	835		✓		√										
Oregon Medicaid	SKOR0	837		√		✓			√							
Oregon Medicare	12M41	835	√		√			\Box		$\Box \Gamma$						
Oregon Medicare	12M41	837	√		√	′		✓					✓			
Oregon Medicare	SMOR0	835		√		√								√		
Oregon Medicare	SMOR0	837		√		√			√					✓		

			Av	/ailabl	le	Enro	ollmen	nt	CO	В	A	ttachn	nents	Sul	bmitt	er Id	
Payer Name	Payer Code	Transaction	_	_	D	_	_	D I				Р		_	Р	D	Notes
Orthonet - Uniformed Services Family Health Plan	13382	837		√			I										
Orthonet- Aetna	13383	835	✓	_													
Orthonet- Aetna	13383	837	_	✓	_	4	_	✓	′ ✓	_							
Oscar Health	OSCAR	835	√	_	4	√ ·	<u>√</u>	4			4						
Oscar Health OSF Healthcare Central	OSCAR OSFC9	837 837	√ /	_	_	+	_		<u> </u>		_						
OSF Healthcare East I & P	OSFE9	837	·/	√ √	+	+	+	+	+	+	+	_	+	-			
OSU Aetna Better Health	OSUAE	837	H	√ ✓	+	十	+	+	√	/	+						
OSU Centene Oklahoma Complete Health	OSUCE	837	П	√	\neg	十	T	一	_	_	T	1	1				
OSU Center For Health Sciences	76619	837		✓					√	'							
OSU Humana Healthy Horizons	OSUHU	837		✓	ı	ı	\Box	ı									
Outpatient Services/ZeroOutofPocket	04430	837	✓	✓	4	4	4	Щ.									
Oxford Life Insurance Company (ERA Only)	76112	835	\checkmark	√	-	√ ·	✓	_	_	_	4	_	4	_			
P3 Health Partners Arizona P3 Health Partners of Nevada	58375 P3HNV	837 835	√ √	√ √	—	√ ,	√	+	+	+	+	_	+	-			
P3 Health Partners of Nevada	P3HNV P3HNV	837	√ √	√ √	Ŧ,	¥	$\stackrel{\checkmark}{+}$		/ /	,	+						
PA Health and Wellness	68069	837	_	√	一	十	op	Ť		_	_	/ /		1			
PACE	IMP01	837	-	√	十	十	\blacksquare		Ť		Ť						
Pace at Hudson Headwaters	R3469	835	-	_		√ 、	√	\Box			Ι						
Pace at Hudson Headwaters	R3469	837	✓	_													
PACE Central Iowa	IMP01	837	_	√	工	工	工	工厂	Ţ		Ţ			$oxed{\Box}$	$ldsymbol{ldsymbol{ldsymbol{eta}}}$		
PACE CNY	70454	837	√	√ /	4	4	4	4	_		-						
PACE KC	R3462	835	√ /	√ /		<u>√</u> ,	√	+	+	_	+			1			
PACE KC PACE Nebraska	R3462 IMP01	837 837	√ √	√ √	√	+	+	+			-						
PACE of Southwest Michigan	R3484	835	_	√ √	+	√ ,	√	+	+		+						
PACE of Southwest Michigan	R3484	837	<i>\</i>	√	7	Ŧ	Ť	一	+	+	+			1			
Pace of Southwest Michigan, Inc.	45114	837	√	_	\neg	\pm	\pm	√	/ /								
PACE of the Triad	TRIA01	835	✓	√		工	\Box										
PACE of the Triad	TRIA01	837	\checkmark	✓	√			✓	′ √	′ √							
PACE Southeast Michigan	86711	835	√	✓	_	4	4	丄			_						
PACE Southeast Michigan	86711	837	-	√	-	+	+	+	4	+	4	4-	4-	-	_	-	
PACE Southeast Michigan	R3460	835	✓	$\stackrel{\checkmark}{-}$	-+`	√ ·	√	_	+	+	+						Claims previously submitted to payer code 86711 prior to DOS 2/1/2024. Effective February
PACE Southeast Michigan	R3460	837	1	√					, ,	,							1st, 2024, please submit all claims to R3460, PACE Southeast Michigan.
PACE Southwest Iowa	IMP01	837	<i>\</i>	√	一	十	o	一	Ť	_	+	+	+				234) 202 i) prease sautine an claims to its 189) i rice southeast intelligant
Pace Suburban Bus Service (submitted via IDPA)	PACE1	837	Ħ	√	\neg	\top	\neg	\neg									
PACE Your Life	98472	837	\checkmark	✓		1	\Box										
Pacific Alliance Medical Center	SYMED	837	\checkmark	✓													
Pacific Alliance Medical Group	SYMED	837	√	✓	_	4	4	丄			_						
Pacific IPA	NMM01	837	√	√	4	7	+	4			4						
Pacific Southwest Administrators	75309	835	✓	_	——`	<u>√</u> ,	\checkmark	_	,	_	+	4	4	-			
Pacific Southwest Administrators Pacifica of the Valley Hospital	75309 MPM50	837 837	√ √	√ ./	+	+	+	- ✓	<u> </u>	-	+			1			
PacificSource Community Solutions	20416	837	<u>\</u>	√ ✓	\rightarrow	+	+	+									
PacificSource Health Plans	93029	835	<i>√</i>	√	一	√ ,	√	十	_	_	+	_	_				
PacificSource Health Plans	93029	837	-	✓		十	1	1			T						
PacificSource Medicare	20377	837	✓	✓		$oldsymbol{ol}}}}}}}}}}}}$											
Painter Local 155 Welfare	CX076	837			√	$oldsymbol{\perp}$	$oldsymbol{\perp}$			√							
Painters Union Insurance Fund	53483	837	✓		\bot	ユ	\dashv	√	\ \								
Palo Alto Medical Foundation	94115	835	_	√ /	-	√ ,	✓	+		_	4	4	4				
Palo Alto Medical Foundation	94115	837	√		_	+	+			_	+		-				
Pan American Life Insurance Co. Pan American Life Insurance Group	87020 04218	837 835	√ √	√ √	+	√ ,	/	✓	′ √	+	+						
Pan American Life Insurance Group	04218	837	√ ✓	✓	一	十	+	+	+		+						
Paragon Benefits Inc.	58174	835	√ √	_	√ ,	7	√ .	√	Т	1	т			1			
Paragon Benefits Inc.	58174	837	_		√	力		· /	/ √	′ √							
Paramount Dental	CX019	837		コ	√	工	ユ	工		✓	Ι						
Paramount Health	PARHC	835	✓	✓			✓										
Paramount Health	SX158	837	-	√	_	√ ·	_	Щ	L		L						ERA Payer Code PARHC
Paramount Healthcare Services	PARHC	835	√	_	_	√ ·	_	4	+		+						
Parkland Community Health Plan Parkland Community Health Plan	66917 66917	835 837	√ √	√ √	+	<u>√ </u>	√	+	+	+	+			\vdash			
PARTNERS BEHAVIORAL HEALTH MANAGEMENT	13141	835	_	_	+	√ ,	√	+	+								
	52613	837	√ ✓	✓	一	十	+	√	/ /	<i>'</i>	+						
PARTNERS BEHAVIORAL HEALTH MANAGEMENT																	
PARTNERS BEHAVIORAL HEALTH MANAGEMENT Partners Health Plan Dental	CX014	837	П	\Box	√	Т	T	Т									
		837 837	√	_	<u> </u>	\pm	\pm	\pm									

Payer Name	Davier Code	Transaction	A۱	/ailab	ole	Enro	ollme	nt	CO	В	Att	tachmen	nts	Subm	itter Id	Notes
Payer Name	Payer Code	Transaction	1	Р	D	\perp	Р	D I	P	D	1	Р	D	L	P D	Notes
Partnership Health Plan Of California	12M81	837	\checkmark			\checkmark										Claim Enrollment AND Testing is Required for Every NPI.
Partnership Health Plan Of California Partnership Health Plan Of California	SX140 SX140	835 837		✓ ✓		_	√ √	+	+	-	₩		_	_	_	Claim Enrollment AND Testing is Required for Every NPI.
Passport Advantage	66008	835	./	√ ✓	-		√ √	-	+	-		-	-	_		Claim Enrollment AND Testing is Required for Every NPT.
Passport Advantage	66008	837	√ √	√		Ť	Ť	_	+					+		
			Ė			_	一	-	_	1	т			_		As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet
Passport Health Plan by Molina Healthcare	61325	835	✓	✓		✓	✓									provider's payment solutions needs
Passport Health Plan by Molina Healthcare	61325	837	✓	✓												
PATH Administrators	25172	837	✓	✓			_		′ √		_					
Patient Advances LLC	10525	835			√ /	-	-	√	+	+				+	-	
Patient Advocates LLC Patient Advocates LLC	10525 55489	837 835	√	√	√	√	√		+							
Patient Advocates LLC	55489	837	√ √	√		•	Ť	_	/ /	+		 	_	+	_	
PATIENTPAY	26335	837		√						1				1		
Payer Compass	PA331	837	✓	✓				>	′ √							
Payer Fusion	27048	837	✓	✓												
Peach State Health Plan	68069	837	✓	✓			_		′ √		✓	✓				
Peak Health	PEAKO	835	√ /	√	H	√	√		-					+		
Peak Health PEF Clinic	PEAKO PEF01	837 837	√ √	√		+	_		+					+		
Pegasus Medical Group	PROSP	837		✓ ✓		+	+		1					+		
Pegasus Medical Group	SMG01	837	√	√		┪	7		Ť					+		
PEHP - Utah Public Employee Health Plan	SX106	835	✓	√		✓	√		1					_		
PEHP - Utah Public Employee Health Plan	SX106	837	✓			_	√	V	′ √							
Pekin Insurance	37086	835		\checkmark		\checkmark	✓									
Pekin Insurance	37086	837	_	✓			_	_	_	_	_			_		
Penn Behavioral Health	53226	837	√	-		,	_	_	+		_	 	_	_		FDA Ozlu
Pennsylvania Health Care Plan (ERA Only) Pennsylvania Medicaid	VALHLTH 12008	835 835	√ /	✓		√ √	√	_	+	+	-	-	-	+		ERA Only
Pennsylvania Medicaid	12008	837	√ √			_		_	/	+				+		
Pennsylvania Medicaid	SKPA0	835	Ť	√		_	√	Ť	+					_		
Pennsylvania Medicaid	SKPA0	837		√	√				√					1		
Pennsylvania Medicare	12M60	835	✓			✓										
Pennsylvania Medicare	12M60	837	✓			✓		V								
Pennsylvania Medicare	SMPA0	835		√		_	√	_	+		_	\vdash	_	_	_	
Pennsylvania Medicare	SMPA0	837 837	/	√	-	-	√	_	√	-				_		
Pennsylvania Pace Pennsylvania Preferred Health Network (PPHN)	20172 06161	837	·/	✓ ✓		_	\dashv	_	/ /	+			+	+		
Pequot Pharmaceutical Network	37121	837	V	_		_	_	Ť	Ť		1	 	_	+		
Perennial Advantage CO	PACO1	837	√	√										1		As of January 23, 2024, the payer does not offer an electronic remittance.
Perennial Advantage OH	PAOH1	835	✓	✓		✓	√									
Perennial Advantage OH	PAOH1	837	✓	√												
Perlman Medical Group	73275	835	√	√	,	_	_	_	, ,		_	\perp	_	_		
Perlman Medical Group	73275 MLMDP	837 837	√ /	√	✓	-	-	V	′ √	-		 	_	_	_	
Perlman Medical Group Personal Insurance Administrators Inc. (Agoura Hills CA)	95397	835	·/	√		√	./	+	+	+			-	+		
Personal Insurance Administrators Inc. (Agoura Hills CA)	95397	837	√			Ť	Ť		+					_		
PersonifyHealth formerly Healthcomp North	36149	835	√	-		√	✓									
PersonifyHealth formerly Healthcomp North	36149	837	✓	-	✓											
PersonifyHealth formerly Healthcomp South	07205	835	_	√		√	✓		Į							
PersonifyHealth formerly Healthcomp South	07205	837	√	√		_			_					4		
PersonifyHealth formerly Healthcomp West PersonifyHealth formerly Healthcomp West	85729 85729	835 837	√ √	√		√	√							+		
PHCS Claims (formerly American LIFECARE)	72099	837		✓		+	-						-	+		
Philadelphia American Life Insurance Company	98798	837	√		\vdash	┪	7		1				-	+		
Phoenix Mutual Life	67814	837	√	√		一										
PHP Management System	PHPMSI	837	√	\checkmark												
Physician Associates of Louisiana	58204	837	✓	√		J	Į		I					Ţ		
Physician Associates of the Greater San Gabriel Valley	PA513	837	L ,	√	Ш	4	_		+	_	_	\sqcup	_	4	_	
Physician Care Network LLC Physician Health Partners	58204	837	√ /	_	\vdash	-			, ,	-		\vdash		+		
Physician Health Partners Physician Healthcare Integration IPA	PHPMC POP10	837 837	✓	√		+	+		′ √					+		
PHYSICIAN'S ACCOUNTABLE CARE ORG	28943	837		√ ✓	\dashv	┪	-	-	+					+		
Physician's Data Trust	PDT01	835	√	-		√	√		\top					+		
Physician's Data Trust	PDT01	837	√	√		┚		▆	I					ᆂ		
Physician's Health Choice	PHCS1	837		√												Effective 1/30/23, please submit claims to payer code WELM2.
Physicians Care Network (Rockford IL only)	36345	835	√	-		√	✓		工			Щ	$\Box \Gamma$	Ţ		
Physicians Care Network (Rockford IL only)	36345	837	✓	\checkmark												

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Section Mode Medial Ground State State (1985) - Section State Sta	Payer Name	Payer Code	Transaction	_	_						_	_		_		_	Notes
The comment of the state of the comment of the comm	Physicians Care Network / The Polyclinic			\checkmark	\checkmark												
The property of the Control of Co	Physicians Choice Medical Group of San Luis Obispo			_	_		√	√		_	_			_	_		
Progress (Control Month (Control Month) (Contr				_	_		,	_	_	_	_						
Program Processor of History 1998				_	_	-	√	√	_	-	-				_	_	
Topics Anthologous Authorized Services (1998) 1999 1999				_	_		./	./									
Margan M				_	_	-	Ť	Ť	_	+	+		+ +	-	_	+	
Mindress	·			_	_		7										
Margins 1987	Physicians Health Network				_		7	\neg		_							
Migratin Health Migratin Hea	Physicians Health Plan	37330	835	✓	✓		✓	✓									
Missing Miss	Physicians Health Plan								√	√							
	Physicians Health Plan					_	_	_									
Section Sect	·			_	-		_	_	√	√							Provider must be an approved JVHL lab
Proceedings 1985				_	_		-	√		_	-			_	_	_	
Proceedings Procedure Pr				_	_		_	_		_	_				_		
Market M				_	_		√	<u> </u>		+	+		+ +		_		
Proceedings Proceedings Process Proces				_	_												
Proceeding Content of Sear Description 1972 1				_	_		√	√						-			
### Process Mutual Invarience Company ### (2017) 155 7 7 7 7 7 7 7 7 7	Physicians Medical Group of San Jose			_	_		+						T				
### Processor of Southwest Washington \$1171 \$155 \$7 \$7 \$7 \$7 \$7 \$7 \$7	Physicians Mutual Insurance Company			_	_		√	√									
Page	Physicians Mutual Insurance Company	47027	837	✓	√		┚										
Proceedings 1935 1937 7 7 7 8 8 8 8 7 7	Physicians of Southwest Washington			√	✓		√	√		Π							
Personal Content (Content Plane)	Physicians of Southwest Washington			✓	_		Ţ			Į							
PERMONE COMMUNITY HEALTH PLAN	Physicians Plus Insurance Corporation			_	_	Ш	_	_		_	_		$oldsymbol{\sqcup}$	_	_	_	
## NEADON TO KOMMUNITY NEAT IN PLAN 19 10 18 17 7 7 7 7 7 7 7 7				_	_		,	_	√	√	1	-		_	_	_	
Milestable Mil				_	_	_	√	√	_	_	_		-	_	_		
Per Feath Sept Se				_	-	-	7	/	-	+	₩		+ +	-	+	+	
Pile Fall Michael (RSA Only)				_	_		Ť	Ť		+	+			-	+		
Page				<u> </u>	_	_	/	√	_	+	_		+ +	-	_	+	ERA Only
Procedure Proc				√	_												
Proceed Medical Group	Pinnacle Health Resources (Prospect Medical Group)	PROSP	837		_					√							
Profest Prof	Pinnacle Medical Group	95271	835	✓	✓		✓	✓									
Provider Network (for claims with DOS prior to 3/31/19)	Pinnacle Medical Group	95271	837	√	\checkmark												
Provider Network (for claims with DOS prior to 3/31/19)	Pioneer Medical Group				_												
New York 1997 1998 1999 199					_		_	√	_	٠,	_			_	_		
Pittsburgh Care Partnership Inc. 2328 837							_	_	_	√	_			_	_	_	
Plan de Salud Hospital Menonita				√	_		√	√	_	_	_			_	_	_	
Planed Administrators, Incorporated (PA) 37287 835 7				./		-	-	+	-	+	+	-	+ +	-	-	_	
Planed Administrators, Incorporated (PAI) 37387 837 7 7 8 8 7 7 8 8 8				_	_		√	√							+		
PAINTIN				<i>\</i>	_		Ť	Ť		√					_	_	
Position	PLANSTIN	65241	835	√	√		√	✓									
PODIATY NETWORK FL	PLANSTIN	65241	837	✓	✓				√	√							
Point C	Podi Care Managed Care	58204	837	✓	\checkmark												
Point C	PODIATRY NETWORK FL			✓	_												
Point Comfort Underwriters PCU01 837 V V V V V V V V V V V V V V V V V V V	Point C			_	_	_	_	_	_	_				_			
PCU02 837 V V V V V V V V V V V V V V V V V V V				_	_	✓	_	√	_	_	_		-	_	_	_	
Polish Falcons of America 87020 837				_	_	-	-	-	-	+	+-	-	-	-	_	+-	
Pomona Valley Medical Group				_			\dashv	\dashv	./	./			++		_		
PROSP 837 V V V V V V V V V				Ť	_		+	-	Ť	Ť				-			
Palo Administrators, Inc. (PAI) Palo 835							+			√							
PAID 837	Pool Administrators, Inc. (PAI)									Ť				_			
Positive Healthcare Florida (FL MCO PHC/PHP) 95411 837	Pool Administrators, Inc. (PAI)				_					√							
Prairie States Enterprises Inc. 36373 837	Positive Healthcare - California			_	_												
Prairie States Enterprises Inc. 36373 837 7 7 7 7 7 837 7 7 837 7 7 837 7 7 837 7 7 837 7 7 837 7 7 837 7 837 7 837 7 83	Positive Healthcare Florida (FL MCO PHC/PHP)			_	_		Ţ	Į	√	√							
Claims previously submitted to payer code 88057. Effective June 30th, 2023, please submit all claims to 60338. September 4 Administrators September 4 Admin	Prairie States Enterprises Inc.						√	√					Ш				
Perferred Administrators 60338 837 ✓ <td< td=""><td>Prairie States Enterprises Inc.</td><td>36373</td><td>837</td><td>✓</td><td>√</td><td>√</td><td>4</td><td>_</td><td></td><td></td><td>_</td><td></td><td>++</td><td></td><td></td><td></td><td>Claims and and an invitable and a control of the co</td></td<>	Prairie States Enterprises Inc.	36373	837	✓	√	√	4	_			_		++				Claims and and an invitable and a control of the co
Perferred Administrators EPF10 835 ✓ <td< td=""><td>Drofovod Administrators</td><td>60220</td><td>027</td><td>,</td><td>,</td><td></td><td></td><td></td><td>- L.</td><td>,</td><td>1</td><td>1</td><td></td><td></td><td></td><td></td><td></td></td<>	Drofovod Administrators	60220	027	,	,				- L.	,	1	1					
Perferred Administrators EPF10 837 √ √ ✓ <t< td=""><td></td><td></td><td></td><td>V</td><td>√ /</td><td></td><td>/</td><td>/</td><td></td><td>—</td><td>\vdash</td><td></td><td>++</td><td></td><td>_</td><td>+</td><td>CIdIIIS LO DOSSO.</td></t<>				V	√ /		/	/		—	\vdash		++		_	+	CIdIIIS LO DOSSO.
Perferred Benefit Administrators (Longwood FL)				_	_	-	٧	·	-		1		++	-		_	
Perferred Blue (BCBS SC) 00481 835 √ √ √ √ √ ✓ <t< td=""><td></td><td></td><td></td><td>_</td><td>_</td><td></td><td>\dashv</td><td></td><td></td><td>√</td><td></td><td></td><td>t</td><td></td><td></td><td></td><td></td></t<>				_	_		\dashv			√			t				
Preferred Blue (BCBS SC) 00481 837 ✓ ✓							√	√	Ť	Ť							
	Preferred Blue (BCBS SC)			_	-		十										
	Preferred Care Partners Florida			_	_		√	✓									

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Payer Name	Payer Code	Transaction	1	Р	_	_	_	D I	_	_	_	I P	_	_	Р	D	Notes
Preferred Care Partners Florida	65088	837	_	√					′ √								
Preferred Community Choice/PCCSelect/CompMed	73145	837	✓	_	Ш		_		_		┸						
Preferred Health Care (PHC)	33898	837	√		Н	_	_	√	′ √		+	_					
Preferred Health Partners Preferred Health Plan of the Carolinas	14966	837	_	√	Н	_	/		4	4	+						
Preferred Health Plan of the Carolinas	CB404 CB404	835 837	./	√	\vdash	√	√	-	+	+	+	_	_		-		
Preferred Health Professionals	31478	837	√	√							+						
Preferred Health Systems A Coventry Health Care Plan	61665	837	Ť	<i>\</i>	\blacksquare		_		_	1	т		_				
Preferred IPA	PFIPA	835	√	√		✓	✓				T						
Preferred IPA	PFIPA	837	✓	\													
Preferred Medical Claim Solutions (PMCS) (ERA Only)	21524	835	✓	✓		✓	✓										
PreferredOne (MN)	41147	835	✓	\		\checkmark	√										
PreferredOne (MN)	41147	837	✓	✓	Ш												
Premera BCBS of Washington	00430	837	✓	✓		_	_	, v	′ √	4	┺						
Premera BCBS of Washington Dental	47570	835			√ /	_	-	√	-	-	+						
Premera BCBS of Washington Dental Premera Blue Cross Blue Shield of Alaska	47570 00430	837 835	/	/	✓	/	/	+	+	√	╆	_	_				
Premera Blue Cross Blue Shield of Alaska	00430	837	./	√	\vdash	√	√	_	/ /	+	┿	-	+-		-		
Premier a dide cross dide shield of Alaska Premier Administrative Solutions	65415	837	\ \/	✓	\vdash	┪	-	Ť	Ť								
Premier Care IPA	PCMSO	837	Ť	√	\vdash	+	_		√	1	Н	_			\vdash		
Premier Dental Group	CX029	837			√	寸	_		Ť	✓	Т			П			
Premier Eye Care	65054	835		√		7	✓		Т		Т						
Premier Eye Care	65054	837		✓		コ			√								
Premier Health Systems Inc.	29076	837	✓	✓				_	′ √		V	/ /					
Premier HealthCare Exchange	88056	835	✓			✓	√										
Premier HealthCare Exchange	88056	837	✓	_	Ш		_		_		┸						
Premier HealthCare Exchange, Inc. (PHX)	88051	837	✓	_		_					4						
Premier Patient Care IPA	PPCIP	835	√		ш	_	_	_	_	_	_	_					Payer returns ERAs automatically once electronic claim submission begins.
Premier Patient Care IPA	PPCIP	837	_	√	-				/ /		╀	_	_				
Premier Physician Network Premiercare Health Network	MPM22 PHNPA	837 835	✓	√	Н	√	√		·	+	+						
Premiercare Health Network	PHNPA	837	✓	_	Н	_	·	-	+	+	╫	_					
Presbyterian (NM)	05003	837	_	√			_	_	/ /		t						
Presbyterian (NM)	TH061	835	√	√		✓	✓		Ť	1	T		_				
Presbyterian Health Plan	PREHP	837	✓	✓							ı						
Presence ERC	46311	835	✓	✓		✓	√				Т						aka Amita ERC
Presence ERC	46311	837	✓	✓													
Presence Health Partners	36396	837	✓	_													
Prevea 360 Health Plan	39113	837	✓					√		_	4						
Prevea360 Health Plan	39113	837	✓	✓	Ш	_	_		′ √	4	╄						last As of law and 2024 this area of a few flasters in Desitted and Advisor/FDA) at
																	Inst: As of January 1, 2024, this payer does not offer Electronic Remittance Advice (ERA) at
Decree 200 Health Diag	44022	027	,	,					, ,								this time.; Prof: As of January 1, 2024, this payer does not offer Electronic Remittance Advice
Prevea360 Health Plan Primary Care Associates Medical Group (PCAMG)	41822 IP079	837 837	√ √	✓ ✓	Н	-	-		-	+	₩						(ERA) at this time.;
Primary Care Associates Medical Gloup (PCAMIG)	PCACZ	837	·/	√		-	-	+	+	+	H						
Primary Care Practices Of Sacramento - EHS	SYMED	837	<i>\</i>	√	\vdash	_	_	_	+	+	٢		_				
Primary Care Services	MSO44	837	✓								t						
Primary Health Network	82048	837	✓	√	П				_	1	т						
Primary PhysicianCare Inc.	56144	837	✓	✓							Т						
Prime Community Care Central Valley	MVCV1	835	√	✓		\checkmark	√										
Prime Community Care Central Valley	MVCV1	837	✓	\													
Prime West Health Plan	61604	835	✓	✓		✓	√		_	_	┸						
Prime West Health Plan	61604	837	√		\vdash				+	-	+	_					
PrimeCare Medical Network	IP079	835		√	\vdash	√	√	_	+	+	+	+		\vdash			
PrimeCare Medical Network Primewell Health Services	IP079 77701	837 835	√ √	√ √	\vdash	_	1	-	+	-	+	-			\vdash		Formerly known as Vantage Health Plan
Primewell Health Services Primewell Health Services	77701	835	·/	✓ ✓	\vdash	√	Ý	_	+	+		+		\vdash	\vdash		Formerly known as Vantage Health Plan Formerly known as Vantage Health Plan
PrimeWest Health Dental	LX049	837	'		√	-			+	√	Н						Tomany another as variage medicination
Principal Financial Group (Dental claims only)	61271	835	Н		√ ✓	1		√	t	Ť							
Principal Financial Group (Dental claims only)	61271	837			√	7			Т	✓	Т		√				
Principal Life (ERA Only)	IAS14	835	✓	√	_	√	✓		T		Т						
Priority Health	38217	835	✓	√		✓	√										
Priority Health	38217	837	✓	✓				√	′ √								
Priority Health (JVHL)	JZJVH	835	✓	\		✓	\checkmark		I								
Priority Health (JVHL)	JZJVH	837	✓	\		√	√	^	′ √		F						Provider must be an approved JVHL lab
Prism Network Inc.	37268	837	Ļ	✓	Щ	_	_		\bot	4	_	\bot	4	ш	Ш		
Prism-Univera	37315	837	✓	√	ш	_	4		Ψ,	_		_		\blacksquare	Щ		
ProCare (Prospect)	PROSP	837	ш	√	Ш				√								

			۸۰	vailak	ble	Enre	ollmer	at	COE	,	A++-	achmon	+c (Lubmi	ttor Id	
Payer Name	Payer Code	Transaction	_	P	D	Enire		D I		D		achmen ⁱ P	D :	l F		Notes
ProCare Advantage of TX	PTX01	835		√	П	√	√	_	_	П			_	_		
ProCare Advantage of TX	PTX01	837	<u>√</u>	_	\blacksquare	Ť	Ť	_	_	т				_	_	
Prodegi Corporate Benefit Services	87065	837	√	_												
Professional Benefit Administrators Inc. (Oak Brook IL)	36331	835	✓	✓	✓	√	✓	√	1					┰	_	
Professional Benefit Administrators Inc. (Oak Brook IL)	36331	837	✓	✓	✓					✓						
Professional Benefit Services Inc	56724	837	✓	\checkmark												
Professional Health Care Network (PHCN)	26748	837	✓	\checkmark												
Progyny	PROGY	835	✓	_		✓	✓									
Progyny	PROGY	837	✓	✓												
Prominence Administrative Services	88022	835	✓	_	ш	✓	√		_					_	_	
Prominence Administrative Services	88022	837	✓			_		_	_				_		_	
Prominence Health Plan of Nevada	93082	835	_	√.		✓	√	_	4	ш				_	_	
Prominence Health Plan of Nevada	93082	837	_	√		_	_	_	_				_	_	_	
Prominence Health Plan of Texas	80095	837	√	√		_	_	_	_					_	_	
Prominence Healthfirst	83352	837	✓	√	Н	-	-	-	+ ,					+	_	
Prospect Health Network	PROSP	837	,	√ /		_	_	_	- √					+	_	
Prospect Medical Group	PROSP	835	√	√ /	\vdash	√	✓	+	, ,	\vdash		$\vdash\vdash$	-	+	_	
Prospect Medical Group Prospect Shorman Oaks Medical Group (Prospect Medical Group)	PROSP PROSP	837 837		√ /	Н	\dashv			′ √ √	\vdash			-	+	_	
Prospect Sherman Oaks Medical Group (Prospect Medical Group) Prosperity Life	89486	837	./	√ ./	\vdash	-	-	+	-	\vdash		\vdash	-	+	+	
Prosperity Life Protective Life Insurance Company	37309	837	Ý	√ /	\vdash	\dashv	-	+	+	\vdash				+	_	
Protective Life insurance Company Providence Facility Claims	37309 PROV1	837	1	√ √	\vdash	-		+	+					+		
Providence Health Assurance Medicaid	77350	837	· /	_				_	, ,					-		
Providence Health Assurance Medicaid	77350 PHP01	837	√ √	√ √	\vdash	√	√		· ·			$\vdash\vdash$	-	+		
Providence Health Plan	PHP01	837	7	√ ✓	Н	Ť	Ť	_	/ /	\vdash			_	+	+	
Providence of Oregon Health Plan	PHP01	835	./	√ ✓	\vdash	√	√	Ť	Ť	1			-	+	+	
Providence PACE CA	77240	837	√	_		Ť	Ť									
Providence Preferred	PHP00	837	·	√ √	\vdash	-	-	+	+	1			+	+	_	
Provident American Life & Health Ins Co-Medicare Supplement	13193	837	./	√												
Provider Network of America	MPJVH	835	√ ✓			√	√		+					_	_	
Provider Network of America	MPJVH	837	√	_		_	√	_	' \					+		Provider must be an approved JVHL lab
Provider Partners Health Plan	31406	835	1	√		_	√ /	Ť	Ť				_	+	_	Trovaci mast se an approved Tribias
Provider Partners Health Plan	31406	837	<u>√</u>	_	H	Ť	Ť		+				-			
Provider Partners Health Plan Illinois	31401	835	√	√	П	✓	√	\neg	+				_	┰	_	
Provider Partners Health Plan Illinois	31401	837	√	_	H			_	′ √						1	
Provider Partners Health Plan Indiana	31407	837	√		П	_	_	_					_	十	_	
Provider Partners Health Plan Missouri	31404	835	√	√		√	✓									
Provider Partners Health Plan Missouri	31404	837	✓	_	П	\neg		_	′ √					┰	_	
Provider Partners Health Plan Ohio	31402	835	√	✓		√	√									
Provider Partners Health Plan Ohio	31402	837	✓	✓	П				T							
Provider Partners Health Plan Pennsylvania	31400	837	✓	✓				_	′ √							
Provider Partners Health Plan Texas	31405	835	√	\checkmark		\checkmark	✓									
Provider Partners Health Plan Texas	31405	837	✓	✓				>	′ √							
ProviDRs Care Network	48100	837	✓	✓				>	′ √							
Prudent Medical Group	MPM25	837	✓	✓				V	′ √							
Prudential	68241	837		✓												
Pruitt Health Premier	PH001	835	√	✓	ш	✓	√									
Pruitt Health Premier	PH001	837	✓.	√.	ш	_			_	ш		oxdot		_	_	
Pruitt Health Premier NC & SC	PHPC1	835	✓	_	ш	✓	√			\blacksquare						
Pruitt Health Premier NC & SC	PHPC1	837	√	√	ш	_	_	_	_	\blacksquare		lacksquare	_	+	_	
PSKW Physician Reimbursement Program	PSKW0	835	√	√	\vdash	✓	√	_	,			\vdash		+		
PSKW Physician Reimbursement Program	PSKW0	837	√ /	_	ш	_	_		′ √	\vdash		\blacksquare	_	+	+	
Psychoalth Care Management LLC	A2797	835	√	7	H	√	√	\perp	-	\vdash		H		+		
Psychealth Care Management LLC	A2797	837	√	_	ш	_		_	+	\vdash		-	_	+	-	
PTS Sidecar Health Puorte Rico Medicare	99999-0BHT	837	✓	_	\vdash	-	/	+	+			$\vdash\vdash$	_	+		
Puerto Rico Medicare	SMPR0 SMPR0	835 837		√ /	Н		√ √	+	+	\vdash			-	+	_	
Puerto Rico Medicare Puerto Rico Medicare Part B (J9-First Coast)	SMPR0 SMPR0	837		√ √	H		√ √	-	+							
Puget Sound Benefits Trust	91136	837	√	_	_	\dashv	v	_	+	\blacksquare			_	+		
Puget Sound Benefits Trust Puget Sound Electrical Workers Trust	91136	837		✓ ✓	\vdash	-		+	-			H		+		
Puritan (formerly Admiral Life) (ERA Only)	IAS15	835		✓	\vdash	√	1	+	+	\vdash			_	+		ERA Only
Pyramid Life Insurance Company	48055	837	_	√ √	_	Ť	v	+	+			\vdash	-	+		LIVYORIY
Quad City Community Healthcare (QCCH)	40437	837		✓	H				′ √	\vdash				+		
QuadMed (West Allis, WI)	39197	837	√ ✓	_		-		Ť	Ť							
Qual Choice of Arkansas	35174	835		_		√	1	+	1	\vdash				+		
Qual Choice of Arkansas Qual Choice of Arkansas	35174	837		√ √		Ť	-		<i>'</i>			\vdash				
	331/4	33,	Ť	H	\vdash	_	\dashv	Ť	Ť					+		Note: As of January 30, 2024, Electronic Remits Advice (ERA) is not available for this payer at
QualCare Alliance Networks, Inc. (QANI)	22312	837	1	/					/							this time.
		55,	·	_				V								

			A۱	/ailab	le	Enrol	llmer	nt	CO	В	At	tachm	ents	Subr	nitter	ld	
Payer Name	Payer Code	Transaction	_	_	D	_	Р			D		Р			_	_	Notes
QualCare IPA	QCP01	837	✓	✓		T	T	√	√							T	
Quality Care IPA	POP07	837		✓													
Quality Care Partners	89461	837	\checkmark	✓													
Quest Behavioral Health	44219	837		√				✓	√								
QuikTrip	73067	835	√	√		/ \	√										
QuikTrip	73067	837	✓	✓		_	_	_									
QVI Risk Solutions Inc.	57117	837		✓	_	4	4	_	4	_	<u> </u>			_	4	_	
R&N Market	TKFMC	837		√	-	+	-		+	-	-			-	-	-	
Rady Children's Health Network	RCHN1 CSSD2	837 837	✓	√ √	-	+	-	+	+	+	1			-	-		
Rady Children's Specialists of San Diego Railroad Medicare (PGBA)	SRRGA	835		√ √	_	+	√	+	+-	+-	-		\vdash	-	-	-	
Railroad Medicare (PGBA)	SRRGA	837		√	-		√ √	_	√						-		
Ravenswood Physician Associates Inc	RPAWC	835	√	√	_		· √	-	Ť	1	1	1		_	_	_	
Ravenswood Physician Associates Inc	RPAWC	837		✓			Ť										
Reading Hospital Employer Group	44219	837	√			_	_		√							_	
Redirect Health Administration	86145	837	✓	✓													
Redlands Community Hospital	RCH23	837	\checkmark														
Redlands-Yucaipa Medical Group	18247	837		✓					√								
Redwood Coast PACE	R3483	837		✓			_[[[
Redwood Community Health Coalition	MPM17	837		✓		4	_	√	√		_			_			
Regal Medical Group	95449	837	√		_	4	4	_	1	_	1	_	Ш	_	_	4	
Regal Medical Group	REGAL	837	√	_		/	/		-					\dashv		4	
Regence Blue Cross Blue Shield of Oregon	00851 00851	835 837	√ ✓	_	-	<u> </u>	√		√	-	1			-	+	-	
Regence Blue Cross Blue Shield of Oregon Regence Blue Cross Blue Shield of Oregon	00851 12B41	837	✓ ✓	✓	-	+	+		-			-	H	\dashv	-	\dashv	
Regence Blue Cross Blue Shield of Oregon Regence Blue Cross Blue Shield of Oregon	SB850	837		√	-	+	-		./		1				-	- 1	
Regence Blue Cross Blue Shield of Utah	00910	835	√	√	_	/ ,	√	_	Ť	+				_	_	-	
Regence Blue Cross Blue Shield of Utah	00910	837	·				Ť	√	√								
Regence Blue Cross Blue Shield of Utah	SB910	837		✓	_	_	_		✓	_	1	1			_	_	
Regence Blue Shield of Idaho	00611	835	√	√		/ ,	√										
Regence Blue Shield of Idaho	00611	837	✓	✓				√	√								
Regence Blue Shield of Washington	00932	835	√	√		/ \	√										
Regence Blue Shield of Washington	00932	837	\checkmark	√				✓	√								
Regence Blue Shield of Washington	SB931	837		✓		_	_	_	✓								
Regence Group Administrators	RGA01	835	√	-		<u> </u>	√	_	—					_	_		
Regence Group Administrators	RGA01	837		√	_	_	_	√	√	_	-			_	_	_	
Regency Employee Benefits	38221	835	√		_	<u>/ ·</u>	√	_	4					_	_		
Regency Employee Benefits Regional Care Inc.	38221 47076	837 837	√		-	+	-	-	+	+	1			-	-	-	
Rehn and Associates	REHNA	837	✓		-	+	-		+						-		
Reliance Community Care Partners	79846	837	√		_	+	-	_	+	1	1			_	_	t	
Reliance Health Plan	RHP01	835	✓		<u> </u>	/ ,	√										
Reliance Health Plan	RHP01	837	√	√		_	7	√	√			1			_		
Reliance Standard Life	36088	835			√			√									
Reliance Standard Life	36088	837			✓					√			✓				
Religious Order of Jehovah's Witness	ROJW1	837		√					√								
Renaissance Life & Health Ins Co	87020	837		✓		_		✓	√								
Resource One Administrators	20333	835		✓		✓ ,	√		_						_		
Resource One Administrators	66456	837	√		_	,	,	_	_	1	_	\bot		_	_	4	
ResourceOne Administrators/AdminOne	37278	835		√ /		_	√ /		-		-			\dashv		4	alia Amita Haalth Caint Jaconh Hasnital Chicago
Resurrection Healthcare Preferred Resurrection Healthcare Preferred	36396 36396	835 837	√ ✓	√ √	-	<u>/ `</u>	√	+	-					\dashv	+	- 1	aka Amita Health Saint Joseph Hospital Chicago
Resurrection Physician Provider Group	RPPG1	835		√ √	+	/ ,	√	+	+	+	1			-	-	+	
Resurrection Physician Provider Group	RPPG1	837												\dashv		+	
RevClaims	RVC01	837	√ ✓		_	+	+		_		1			-	_	+	
Rhode Island Medicaid	12K74	835	√	Ħ	- 1	/	1	Ť	Ť					\dashv		\dashv	
Rhode Island Medicaid	12K74	837	√			T	T	√	Т		Т			\neg		T	
Rhode Island Medicaid	SKRI0	835		✓			√		L								
Rhode Island Medicaid	SKRI0	837		✓					✓								
Rhode Island Medicare	12M74	835	✓		_	/											
Rhode Island Medicare	12M74	837	√			/	I	✓								I	
Rhode Island Medicare	SMRI0	835		✓			√		Į							J	
Rhode Island Medicare	SMRI0	837		√			√		√				Ш	[_[
Right Care from Scott & White	74205	835	√	√		/ ,	√		μ.					_		4	
Right Care from Scott & White	74205	837	√ 	√ /	_	+	_		✓	1	_	\bot		_	_	4	
RightChoice Benefit Administrators	37331	837	√ /	_	-	/	/	+		-				\dashv	-	+	
Rios Arizona IPA	RIOSA	835		√ /	-	<u> </u>	√	+	+	+	_		\vdash	-	+	4	
Rios Arizona IPA	RIOSA	837	V	✓													

Payer Name	Payer Code	Transaction		/ailab P	le D				CO			ttachn P			omitte P	-	Notes
RIOS SOUTHWEST MEDICAL GROUP	RIOS1	837	_	· ✓		7											
RIVER CITY MEDICAL GROUP	RCMG1	835	<i>\</i>	√		√ .	√										
RIVER CITY MEDICAL GROUP	RCMG1	837	✓	_		1	_		1	1	1	1	1				
River City Medical Group Senior	AMM23	837	✓	✓													
Riverside Health Inc.	45281	835	✓	✓		√ .	√										
Riverside Health Inc.	45281	837	✓	\checkmark													
Riverside Medical Clinic	RMC01	837		√					√	_							
Riverspring Health Plans (ElderServe)	05178	835	✓	✓		√ .	√										
Riverspring Health Plans (ElderServe)	05178	837	✓	_	_	_	_		4_	_							
Rocky Mountain PACE	93142	835	✓	-		_	_	_									
Rocky Mountain PACE	93142	837	_	✓	✓	_	_	√	′ √	′ √							
Rosemont of Des Plaines IL	36215	837	√		_	4	4	_			4						
Royal Health Care	73780	837	_	✓		_	_		′ √	1	4	4	4	_			
Royal Neighbors of America (ERA Only)	IAS16	835	√		_	√ ·	√ /	_	+	_	_						
RPS Sports and Leisure	BOLL1	835	✓	✓		√ ·	√	_	4	_	4	4	4	_			D 10 0014 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1
DDC Coasts and Laisure	DOLL1	027		,													Payer ID BOLL1 should no longer be used for any medical claims for School K-12 accident and College accident claims. Please use payer ID 11370 for these claims. If you have any questions regarding RPS Sports and Leisure claims, please contact RPS Sports and Leisure at
RPS Sports and Leisure Rural Carrier Benefit Plan (for claims after to 12/31/17)	BOLL1 60054	837 837	✓ ✓	√	-	+	+	_	/ /		→	/ /			Н		866-267-0093.
Rush Prudential Health Plans (HMO Only)	36389	837	✓	✓	-	+	+	Ť	Ť	+	Ť	· ·			H		
Ryan White Network	AMM03	837	√ √	-	-	+	\dashv	+		_	_						
S & S Healthcare Strategies	31441	835	√	-	-	√ .	√		+		+				H		
S & S Healthcare Strategies	31441	837	Ţ	√	-		+	+		_	1						Also known as Piedmont Community Health Plan
Sagamore Health Network	35164	837	√	√	-	\dashv	\dashv	+	1		t						22 . Icamone community region (dil
Saint Johns Health Clinic	SJHC1	837	<i>\</i>		_	_	_	_	+	_	+	+	+	1	Н		
Saint Mary's Health Plan	88082	837	H	√	1	+	1	_	+		+						Encounters Only
SAINT MARY'S HEALTH PLAN	88029	837	√	√	_	+	_	_	+	+	+	+	+	1			Encounters only
Salvasen Health	CB122	837	_	√		+	1	_	/ /	_	+		1				
Samaritan Health Plans	CP001	835	√	✓	_	√ .	√	_	Ť	_	+	+	+	1			
Samaritan Health Plans	CP001	837	√	√		1	1										
Samera Health	U8053	837	√	_		_	_	_	_	_	_	_	_				
San Bernardino Medical Group	SBMED	837		√		1		1	1	1	1						
San Diego County Medical Services (CMS)	MSO11	837	✓	√		7	7		1	_	1	1					
San Diego County Physician Emergency Services	MSO22	837	✓	\checkmark					√								
San Diego County Ryan White Care Act	MSO33	837	√	✓													
San Diego PACE	96400	837	✓	✓													
San Diego Physicians Med Group (SCPMCS)	SCP01	837	\checkmark	\checkmark													
San Francisco County Physician Emergency Service	UCSF	837		\checkmark													
San Francisco Health Plan	SFHP1	835	√	✓		√ .	✓										
San Francisco Health Plan	SFHP1	837	\checkmark	√				√	/ √	′							
San Joaquin Health Administrators	68035	837		√		,	\checkmark		√	′							
San Louis Obispo Select	33072	837	✓	\checkmark													
Sana Benefits	50114	835	✓	✓		√ .	√										
Sana Benefits	50114	837	✓	✓				✓	′ √	_							
Sanford Health Plan	91184	835	✓	-		√ ·	√										
Sanford Health Plan	91184	837	_			4	_										
Sanford Health Plan Medicare Advantage	RP035	835	√	-	_	√ ·	✓ _			_	_	4	4—	\vdash	Ш		
Sanford Health Plan Medicare Advantage	RP035	837	✓	✓	_	4	4	✓	′ √	Ъ,	4	4	4	4			
Sanitation Officers Local 444	CX076	837	Ш	,	√	_	_	_	_		_	_	4				
Sansum Clinic-	SAN01	837		√	-			+	-		+						Dever is listed as "Makkassan Tashnalagias Ing /AAFD3000 CAN with in Dever-
Santa Barbara Select IPA	SBIPA	835	√	√ 	-	<u>√</u> .	√	_	+	_	+						Payer is listed as "McKesson Technologies Inc. (MED3000 CA)" within PaySpan
Santa Barbara Select IPA	SBIPA	837	√	✓	+	+	+				Н				Н		
Santa Clara County IPA HMO	10378	835	Шl	✓			✓		L				L	L	<u>L</u>		Within Payspan's portal, the payer is listed as Pacific Partners Management Services, Inc.
Santa Clara County IPA HMO	10378	837	✓	✓													
SANTA CLARA FAMILY HEALTH PLAN	24077	835	✓	✓		√ .	√				\mathbf{I}^{-}						
SANTA CLARA FAMILY HEALTH PLAN	24077	837	✓	✓													
Sante Community Medical Center	SNTCC	837	✓	✓													
Sante Community Physicians Medical Group Corp	SNTMC	837	✓	\checkmark													
Sante Health System and Affiliates	77038	837		\checkmark													
		835	✓	\checkmark		√ .	√										
Sante Health System and Affiliates	SANTE										T						
Sante Medi-Cal	SNTMC	837	✓	\checkmark			L										
Sante Medi-Cal Satellite Health Plan, Inc.	SNTMC 45552	837 837	✓	\checkmark													
Sante Medi-Cal Satellite Health Plan, Inc. Saudi Health Mission	SNTMC 45552 SHM01	837 837 837	√ √	√													
Sante Medi-Cal Satellite Health Plan, Inc. Saudi Health Mission SCAN ENCOUNTERS	SNTMC 45552 SHM01 99157	837 837 837 837	√ √	√ √ √				√	/ /								
Sante Medi-Cal Satellite Health Plan, Inc. Saudi Health Mission	SNTMC 45552 SHM01	837 837 837	\ \ \ \	√ √ √		√ .	√	✓ ✓									

Payer Name	Payer Code	Transaction					rollme			OB				Su			Notes
			_	Р	_		Р	D	_	PL		I F	ע		Р	_	
SCAN Health Plan - California	SCAN1	835	_	√	Ш	✓	√		,	,	_		_	_			ERA Payer Code SCAN1
SCAN Health Plan - California	SCAN1	837	√				-		✓ \	/	+	_			+		
Scan Health Plan Arizona	73172	837	✓			Н			_	,	_		_	_	_		
SCAN1	72261	837	√	√		ш	_		√ \	_	_	_	4	_	4		
SCAN1	SCAN1	837	√	√	ш	Ш			✓ \	✓	_		4	_	4	_	
SCHS ALTA Global Care Medical Group	MPM54	837	✓	√	.	ш		_	_	_	_	_	4	_	4		
Scion Dental	SCION	835			✓			√	_		_		4		_		
Scion Dental	SCION	837	_		✓			_	_		/		√				
Scott & White Health Plan	12T05	837	✓	_					_						_		
Scott & White Health Plan	TH002	835	✓	_		\checkmark	✓										
Scott & White Health Plan	TH002	837		✓													
Scripps Health Plan MSO	SHPM1	835	✓	✓		\checkmark	✓										
Scripps Health Plan MSO	SHPM1	837	✓	✓					/ \	/							
Scripps Health Plan Services	SHPS1	835	√	√		\	\										
Scripps Health Plan Services	SHPS1	837	✓	√				•	\ \	/							
Scripps Physicians Medical Group	SCP01	837	✓	✓													
Seaview IPA	SVIPA	835	✓	✓		✓	✓								L		Payer is listed as "McKesson Technologies Inc. (MED3000 CA)" within PaySpan
Seaview IPA	SVIPA	837	✓	✓													
SECUR Health Plan	SECUR	835	✓	✓	П	✓	✓			T					П		
SECUR Health Plan	SECUR	837	√	√							\top				1		
Secure Health	42561	837	√	_	_				\neg	一	\neg						
SecureOne Benefits Administrators	86242	837	√	_	H						+						
Security Administrative Services	35202	837	_	√		Н			_	_	_		+	_			
Security Health Plan	39045	835	./	✓		√	1		+		+				\vdash		
Security Health Plan	39045	837	√ √	√ √	/	·	·		/ 、	/	/		+	_	+		
		835	_	_		/	/	- 1	'	'	+	-	-	+	+		
Sedgwick Managed Care Ohio (formerly Careworks)	10010		✓	_	-	✓	✓		_	_	_		-	_	-		
Sedgwick Managed Care Ohio (formerly Careworks)	10010	837		√		Н		_	_	_	_	_	4	_	-		
Sedwick Managed Care Ohio (formerly CompManagement)	15243	837	√	√		H			_	_	_	_	4	_	-		
Select Administrative Services (SAS)	64088	835	_	✓		✓	✓		_	_	_				_		
Select Administrative Services (SAS)	64088	837	✓	_													
Select Benefit Administrators Inc.	93031	837	✓	✓													
Select Benefit Administrators of America	37282	835	✓	✓		✓	✓										
Select Benefit Administrators of America	37282	837	✓	√													
Select Health of South Carolina	23285	835	✓	✓		✓	✓										
Select Health of South Carolina	23285	837	✓	✓							Т						
SelectCare	00014	837	✓	✓							T						
SelectCare of Texas (Kelsey-Seybold)	61225	835	√	✓		√	✓		_	\neg	_		1				
SelectHealth	SX107	835	√	√	_	√	✓				1						
SelectHealth	SX107	837	1	✓				_	_	_	┰		_	_	1		
Self Insured Plans (Naples FL)	36404	837	√	_						_	1						
Self Insured Services Company (SISCO) Dental	CX020	837	Ė	Ė	./	Н		_	_	_	+	_	+	_	+		
Self-Funded Plans Inc.	34131	837	√	√	Ť					_	+						
Selman Tricare Supp	52214	835	√	_		Н			_	_	_		+	_	_		
	52214	837	√ ✓	_					_		_						
Selman Tricare Supp			٧		Н	Н	/	-	+	+	+	-	-		-		
Sendero IdealCare	MV440	835		√ /	Н	Н	√		_	+	+	_	+	_	-		
Sendero IdealCare	MV440	837	,	√	Н	,	\blacksquare		_	+	+		-	_	-		
Sendero IdealCare	UV440	835	√.	Ш	ш	\checkmark	ш	_	_	\bot	_	_	4	_	_	_	
Sendero IdealCare	UV440	837	√		ш	ш	Щ			4	_				-		
Sendero Star and CHIP	SCS17	835	✓	_	ш	✓	√		ᆚ	ᆚ	ᆚ			_	_		
Sendero Star and CHIP	SCS17	837	✓	✓													
SENIOR CARE PARTNERS PACE MI MCR	R3496	835	✓	_	_	✓	✓		┸	┸	丄				丄		
SENIOR CARE PARTNERS PACE MI MCR	R3496	837	✓														
Senior Health Partners (SHP)	80141	837	✓								工						
SENIOR WHOLE HEALTH	83035	837	✓	✓													
										Т	Т						
Senior Whole Health Massachusetts	SWHMA	835	✓	✓		✓	✓				1				1	l	Effective 2022, the payer has transitioned to ECHO for their ERA/EFT gateway vendor
Senior Whole Health Massachusetts	SWHMA	837	✓	✓													
					П					1	\top		1		т		
Senior Whole Health of New York	SWHNY	835	/	1		✓	1				1				1	l	Effective 2022, the payer has transitioned to ECHO for their ERA/EFT gateway vendor
Senior Whole Health of New York	SWHNY	837	./	√	М	H	H		/ \	/	+						, and page that the state of th
Sentara Family Care	54154	837	./	√ √	Н	Н	\dashv		7		+	-	_	_	1		
Sentara Health Management	54154	837	√	_	Н	H	H		/ \	_	+				\vdash		
Sentara Health Management Sentara Health Plans	54154	835	_	_		7	./		` `		+		-	-			
Sentara Health Plans	54154	837	√ √		Н	√	√		/ \	/	+		+		-		
			_	_	Н	\vdash	\vdash	-	<u> </u>	<u> </u>	+	-	-	_	-		
SENTARA PACE MCR	SENT1	837	√ /	_	Н	Н			_	+	+	_	+	_	-		
Sentinel Management Services	23249	837	√		Н				_	\perp	+		-		-		
Sentinel Security Life Insurance Company	87020	835	√.	✓	ш	✓	✓		_	_	_		4	_	4	_	
Sentinel Security Life Insurance Company	87020	837	✓ /	✓					∕ √								

						_							-				
Payer Name	Payer Code	Transaction	A۱	vailat P	DIE D	Enre	ollme P	D	CO	D DR	_	_	nments	_	i bmit i P	er Id	Notes
Seoul Medical Group	AMM07	837	· ✓	√					T		T				Ť		
Sequoia Beverage	TKFMC	837		✓							t						
Sequoia Health IPA	CAPMN	837	✓	✓				,	/ /	′							
Seton Health Plan (CHIP)	SHPCH	837	✓	✓													
Seven Corners	25404	837	✓	✓													
SGIC	11789	837	_	✓													
Share Healthcare	52876	837	✓.	_			_		_	_	_			_	_	_	
Shared Health Mississippi	SHMS1	835	√	√	ш	✓	√	_			_		_	_	_	_	
Shared Health Mississippi	SHMS1	837	_	_	\blacksquare	/	_	`	′ √	4	4				-		
Sharp Community Medical Group	SCMG1 SCMG1	835 837	√ √	_	Н	√	√	-	+	+	+	+	_	_	+-	-	
Sharp Community Medical Group Sharp Health Plan	SHP01	835		✓	\vdash	√	./	-	+	+	+				+		
Sharp Health Plan	SHP01	837	√ √	_	\vdash	·	•	-	+	+	+	-	_	_	+	1	
Sharp Rees-Sealy Medical Group	SRS83	835		√		√	√										
Sharp Rees-Sealy Medical Group	SRS83	837	_	_	\blacksquare			_	_	_	_	_	_	_	1	1	
Sheakley Unicomp	10002	837	_	_													
Sheet Metal Workers Local 104 Health Care Plan (San Ramon CA)	38238	837	✓	✓					1	1	1				1		
Shenandoah Life (ERA Only)	IAS17	835	✓	✓		√	\checkmark										
Sherman Choice - BLUE CROSS SHERMAN CHOICE	SC359	837	✓	√													
Show Me Health Administrators, LLC (SMHA)	98578	837	_	√					Ţ		I						
Sidecar Health	SDCAR	835	_	✓	Ш	✓	√		L		Ļ						
Sidecar Health	SDCAR	837	✓	√	H		_	`	′ √	_	_	4					
SIDS (Self Insured Dental Services)	CX076	837	Ļ	L ,	✓		_	_	_	- ✓	4	_	+	_	_	\vdash	
Sieba	03699	835	_	√ /	Ш	✓	√	_			+	-			-		
Sieba	03699	837	✓	_	\blacksquare		_	`	/ /	_	4				-		
Sierra Family Network (Prospect Medical Group) Sierra Medical Group	PROSP 30891	837 837	/	√ √	\vdash	-	-	-	√	+	+	+	-	_	+-	+-	
Sierra Medical Group	SMG01	837	./	✓	\vdash		-	-	+	+	+				+		
Sierra Nevada Medical Association	MBA01	837	·	√ ✓	\vdash	-	-	-	+	+	+	+	_	+	+	+	
Signature Advantage	SA001	835	√	_		√	√										
Signature Advantage	SA001	837	<i>\</i>		\blacksquare	Ť	Ť	٠,	/ /	/	+	_	_	_	+	1	
Silicon Valley Medical Development	S9637	837	✓	_					/ /	_							
Silver Cross Health Connection	65093	837	✓	_						1	1				1		
Silversummit Healthplan	68069	837	✓	✓				,	/ /		~	/ \	/				
SimplePay	27905	835	✓	✓		✓	\checkmark										Formerly known as Community Health Alliance TN
SimplePay	27905	837	✓	✓													
Simplified Benefits Administrators	89789	835	_	✓		✓	✓										Formerly known as UC Health Plan Administrators
Simplified Benefits Administrators	89789	837	✓														Formerly known as UC Health Plan Administrators
Simply Healthcare	SMPLY	835	√	_	ш	✓	√	_	_	_	_	,	,		4		Mailing Address: PO Box 61010, Virginia Beach, VA 23466
Simply Healthcare	SMPLY	837	√	_	ш		_	`	′ ✓	4	V	/ \	/	_	_	_	Mailing Address: PO Box 61010, Virginia Beach, VA 23466
Simpra Advantage Inc.	SIM01	835	_	_	ш	✓	✓	_	+	+	+	_		_	+	-	
Simpra Advantage Inc. Simpra Advantage Inc. (DOS > 12/31/2022)	SIM01 SIM02	837 835	√ √	_	Н	√	/	-	+	+	+	+	_	_	+-	-	
Simpra Advantage Inc. (DOS > 12/31/2022) Simpra Advantage Inc. (DOS > 12/31/2022)	SIM02	837		✓	\vdash		√	-	+	+	+				+		
Sinclair Health Plan	84076	837	_	√ √	\vdash	-	-	-	+	+	+	-	_	_	+	1	
SisCo Benefits	00540	835	_	√ √		√	√										
SisCo Benefits	00540	837	<i>\</i>	_	т	Ť	Ť	_	_	+	+	_	_	_	+	1	
SisCo Benefits	44827	835	_	_		√	✓				T						
SisCo Benefits	44827	837	_	_	П				/ /		T	T		1	1	1	
Smith Administrators	02057	837		✓					/ /	′							
Snedeker Risk Management (Hope Trust)	A7637	835	✓	√		✓	√										
Snedeker Risk Management (Hope Trust)	A7637	837		✓					I		I						
Solidarity Healthshare	77721	837	\checkmark	✓							工						Claim Mailing Address: PO Box 26967, Tempe, AZ 85285
Solidarity Healthshare	SH777	835	✓	✓		✓	√				L						
Solis Health Plans	73581	837	_	√	ш	_	_	_	_	_	+		_	4	_	1	
SOMOS Emblem IPA	81336	835	_	√ /	Ш	✓	√	_			+	_	_				
SOMOS Emblem IPA	81336	837	√ /		\vdash	_		—	′ √	+	+	+	+	_	+	\vdash	
Sonder Health Plans Sonder Health Plans	A0339 A0339	835 837	_	√ √		√	√		/ /		+	+			+		
Sound Health (now known as First Choice Health Network)	91131	837	-	✓ ✓	\vdash		\dashv	+	Ť	+	+	+	+		+		
South Atlantic Medical Group IPA	SAMG1	835		√		√	√	-		+	+						
South Atlantic Medical Group IPA	SAMG1	837		√ ✓	\vdash	Ì	÷	-	/ /	/	+						
South Carolina Medicaid	12K55	835	<i>√</i>	_		√	_		Ť		т						
South Carolina Medicaid	12K55	837	√			√	一	,	/		T						
South Carolina Medicaid	SKSC0	835	П	✓	П		✓		Т	Т	T	T		1	1	1	
South Carolina Medicaid	SKSC0	837		√		_	√		√	′	I				L		
South Carolina Medicare	12M55	835	✓			✓											
South Carolina Medicare	12M55	837	\checkmark			\checkmark											

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Payer Name	Payer Code	Transaction	1	Р	D	1	Р	D I	P	D		Р	D	Τ.	Р	D	Notes
South Carolina Medicare	SMSC0	835		✓			✓										
South Carolina Medicare	SMSC0	837		√		_	√				╄						
South Central Preferred	23266 23266	835 837	√	√		√	✓			_	╄	-			_		
South Central Preferred South Country Health Alliance	81600	835	_	√ √	-	√	√		√	-	+				-		
South Country Health Alliance	81600	837	<i>√</i>	√		Ť	Ť	_	√								
South Dakota Medicaid	12K36	835	Ţ	Ť		√	_	Ť	Ť	_	+		H		_		
South Dakota Medicaid	12K36	837	√			√		_			T						
South Dakota Medicaid	SKSD0	835		✓			✓										
South Dakota Medicaid	SKSD0	837		✓			✓		✓								
South Dakota Medicare	12M83	835	√			√					╄						
South Dakota Medicare	12M83	837	✓	_		√		✓			╄						
South Dakota Medicare South Dakota Medicare	SMSD0 SMSD0	835 837		√ /		_	√ √	_		_							
South Florida Musculoskeletal Care	06294	837	./	√ √		-	√	_	√	-	+				_		
South Indiana Health Operations - HMO	77153	835	<i>\</i>	_		√	1				+						
South Indiana Health Operations - HMO	77153	837	<i>√</i>	✓	\neg	Ť	Ť	_	√	_	T	_			_		
South Point Hotel & Casino	35227	837		✓							T						
SouthCare/Healthcare Preferred	25147	837	√	_				✓	√		L						
Southeast Community Care (Arcadian)	77045	837	✓	✓							Г						
Southern Benefit Administrators (ERA Only)	38242	835	√	√		Ţ	$\perp \Gamma$		L		Ļ						ERA Only
Southern California Healthcare System	MPM20	837	√	_	\blacksquare	4		√	√								
Southern California Physicians Managed Care Services	SCP01	837	✓	√ /		_		+	_		+				_		
Southern California UFCW Unions & Food Employers	SCUFW SIH99	837 837	/	√	-	-	-	_	+	+-	╇				-		
Southern Illinois Health Care Association Southern Illinois Health Care Association	SIHCA	837		√		\dashv	_		./	-	+						
Southland BCBS	SIPA1	837	1	√ ✓		-	_	_	Ť	_	╈				_		
Southland Benefit Solutions, LLC (Dental)	26374	837	Ť	Ť	√	_				√	t						
Southland Benefit Solutions, LLC (Vision)	V47936	837		✓	Ť	_	_	_	_	Ť	т						
Southland San Gabriel Valley Medical Group, Inc	PHM11	837		✓							T						
Southwest Service Administrators	CX100	835	✓	✓		✓	✓										
Southwest Service Administrators	CX100	837	✓	✓													
Southwest Service Life	37266	837	✓	_		_	_				┺						
Southwestern Health Resources (DOS > 12/31/22)	RP085	835	√	_		✓	✓	_	_		╄						
Southwestern Health Resources (DOS > 12/31/22)	RP085 SAMBA	837	√ /	_		/	/	_	4	_	+	-			_		
Special Agents Mutual Benefits Association (SAMBA) (ERA Only) Spectera	00773	835 837	V	√ √	-	√	V	-	1	-	╄						
Spectrum Administrators Inc TPA Allentown PA (IHS Gateway Payer)	23253	835	1	√ √		√	1		Ť		+						
Spectrum Administrators Inc TPA Allentown PA (IHS Gateway Payer)	23253	837	<i>√</i>			_	Ť	_	_	_	т				_		
Spencer Stuart (ARM, LTD)	38416	837	✓	✓				✓	√		t						
Spina Bifida - VA HAC	84146	837	✓	✓							V	/ /					
St Francis IPA	STFMC	835	✓	✓		√	✓										
St Francis IPA	STFMC	837	√	√		_			_		╄						
St Lukes Health Plan Inc	92170	837	_	√	_	_	_	_			╄						
St. Francis IPA St. Joseph Heritage Healthcare	APP01 STJOE	837 835	√ √	_		/	/		√	-	+						
St. Joseph Heritage Healthcare	STJOE	837	√ √	_	-	✓	·	_	+	-	+				_		
St. Joseph IPA	STJOE	837	√	_		1		+			t						
St. Jude (St. Joseph Heritage Healthcare)	STJOE	837	√	√		7		\top			Т						
St. Jude Yorba Linda	STJOE	837	✓	✓							T						
St. Mary's IPA	CAPMN	837	✓					√	√								
St. Paul 's PACE	SPPCA	835				J			Ţ		F						This payer is not available for production until May 16, 2025.
St. Paul 's PACE	SPPCA	837		√		_			✓	✓	\bot		Ш	Щ	_		This payer is not available for production until May 16, 2025.
St. Vincent IPA	PDT01	837					_	+			+		\vdash		_		
Staff Benefits Management Administration (SBM) Staff Benefits Management Administration (SBM)	SBMCO SBMCO	835 837	√ √	√ √		✓	✓		√		+				_		
Standard Life and Accident (Secondary claims only)	73099	835		√ √	\vdash	√	/	Ť	Ť		т				-		
Standard Life and Accident (Secondary claims only)	73099	837	_	√ √		Ť	Ť	+			Т						
StandardHealth with Health Choice (HCS)	RP105	837	√	_	✓	寸					Т						
Stanford Healthcare Advantage	46407	837	√	√							Ι						
Starmark	61425	837	✓	√													
State Employee Plan (BCBS SC)	00400	835	_	_		√	✓										
State Employee Plan (BCBS SC)	00400	837	√	_	Щ	_	_	_	_	_	┺		Ш	Щ	_		
State Farm (Casualty & Property Claims)	31059	835	_	√ /		√	√	+	_	_	+				_		
State Farm (Casualty & Property Claims)	31059	837	√ /	_	Н	,	_	+	_	_	+		Н		_		
State Farm Insurance Companies State Farm Insurance Companies	31053 31053	835 837	_	√ √	_	√	√	+			Н		\vdash		-		
State Mutual (ERA Only)	IAS18	835	_	√	_	√	√	+			+				-		ERA Only
otate matau (Euri Omy)	17710	033	٧	٧		٧	v										

Payer Name	Payer Code	Transaction			le D			nt D I	COE			achme P			itter Id	
State Mutual LH Novated (ERA Only)	IAS19	835	√		_	_	√									ERA Only
State of Idaho Department of Health & Welfare	12113	837	_	√	_	_	√ /	√	√							Women's Health Check and Children's Special Health Program
State of Idaho Women's Health Check	IDWH01	837	✓	_					1					_		·
State of Texas Dental Plan	57254	835	✓	✓		✓	√									
State of Texas Dental Plan	57254	837	✓	✓	✓					✓						
Stirling Benefits	06089	835	✓	\checkmark	✓	\checkmark	✓	√								
Stirling Benefits	06089	837	√	√	√											
Stonebridge Life Insurance Company (TX)	TRP1P	837	✓	✓				√	_							
Stones River IPA - Amerivantage	57492	837		✓					√							
Stones River Regional IPA/BCBST	15750	837		✓	_	_		_	_					_	_	
Stones River Regional IPA/BHFG	15754	837		√	_	_			↓					_		
Stones River Regional IPA/Humana	57549	837	Ш	√	_	_			√					_	_	
Stones River Regional IPA/Windsor	15752	837		√	_	_	_	_	+-					_	_	I Tour of I
Student Assurance Services (ERA Only)	SAS01	835	✓	✓	_	√	√	_	+	_			_	_	_	ERA Only
Suffolk County Municipal Employees Benefit Fund	CX076	837	,	,	√	_			+	✓				_	_	
SummaCare Health Plan	95202	837	√ √	√ /	_	_	_	_	+					-		FDA Device Code AF202
SummaCare Health Plan	A5202	835	√	_	_	_	√ /	_	+	\vdash				+	+	ERA Payer Code A5202
Summit Administration Services Inc. Summit Administration Services Inc.	86083 86083	835 837	·/	√ √		√	V							-	-	
Summit Administration Services Inc. Summit America Insurance Services Inc.	37301	837	·/	√ √	\dashv	√	√	_	+					+	+	
Summit America Insurance Services Inc. Summit America Insurance Services Inc.	37301	835	'	√ √	-	٧	V	_						-	+	
Summit America insurance Services IIIc. Summit Community Care	PASSE	837	./	√ √	_	√	√	_	+					-	+	
Summit Community Care Summit Community Care	PASSE	835	√ √	_	-	V	v	+	+		√	√	-	+	+	
SunAmerica Life Insurance Company	90956	837	Ť	√ √	-	-	-		1		Ť	Ý		-	+	
Sunrise PACE	R3498	835	/	√ √	\dashv	√	/							+	+	
Sunrise PACE	R3498	837	./	√ ✓	./	<u> </u>	Ť	_	+					+	+	
Sunshine State Health Plan	68069	837	./	√ ✓	<u> </u>	-	-	√	√		1	√	-	+	-	
Superior Choice Medical Group	SCPR1	835	<i>\</i>	√ ✓	-	√	√	Ť	Ť		Ľ	·		+	+	
Superior Choice Medical Group	SCPR1	837		√ ✓	-	•	<u> </u>	+	╁		-		-	+	+	
Superior Health Plan Texas	68069	837	1	√ ✓				√	√		√	√				
Superior Vision Services	13305	837	ľ	√ ✓		_		Ť	Ť		ľ	·		_		
Superior Vision Services	13374	835		√ ✓			√							_		
Surest	25463	835	1	√ 	_	_	√ √	_	+		1		_	_	_	
Surest	25463	837	√	✓												
Sutter Connect - Solano Regional Medical Foundation (SRMF)	77306	835	H	√	_	_		_	1	т				_	_	
Sutter Connect - Solano Regional Medical Foundation (SRMF)	77306	837		√		_								\dashv		
Sutter Connect (SIP/SMG/SWMG)	SC004	837		✓	_	_	_	\neg	1	т			_	\neg	_	
Sutter East Bay Medical Foundation	94269	837	√	√										1		
Sutter East Bay Regional Hospital	96176	837	✓	√		\neg			Т	П		П		\neg	\neg	
Sutter East Bay Regional Hospital- Affinity	94119	837		√												
Sutter Gould Medical Foundation	77302	837	✓	✓												
Sutter Medical Group of the Redwoods	77304	837	✓	✓				√	√							
Sutter Medical Group of the Redwoods	SC008	835	✓	✓		✓	✓									
Sutter Senior Care	56621	837	\checkmark	\checkmark				√	✓							
SVS Vision Inc.	SVSVN	837		\checkmark												
Swedish Covenant Hospital	36411	837	✓	\checkmark												
Symetra Select Benefits	37282	837	✓	✓												
SynerMed	SYMED	837	✓	✓												
TakeCare Insurance Company	98022	835	✓	√		✓	√									
TakeCare Insurance Company	98022	837	✓	✓												
Talbert Medical Group	TALMG	837	Щ	√						lacksquare						
Tall Tree Administrators	88067	835	√.	√		√	√		_	\vdash						
Tall Tree Administrators	88067	837	√.	√	_		_		_	lacksquare		Щ		_		
TASEBA	TKFMC	837	✓	√			_									
Taylor Benefits	TAYLR	835	ш	√ ,	_	_	√	_	4	\vdash		Щ		_	_	
Taylor Benefits	TAYLR	837	_	√	_		_	_	-				_	_	_	
Taylor Benefits	UAYLR	835	_		_	✓	_	_	\bot	\vdash	_		_	_	_	
Taylor Benefits	UAYLR	837	√		-	_	_		-			H		-	+	
TCC Benefits Administrator - Pre-Med Defender	SX160	835	_	√ /	_	√	✓	_	+	\vdash			_	+	_	
TCC Benefits Administrator - Pre-Med Defender	TCC13	837	_	_	-	_		√	√			H		_	+	
TCC Benefits Administrator - Self Funded	SX160	835	_	-	-	√	V	4	-	\vdash		-		+	_	
TCC Benefits Administrator - Self Funded	TCC93	837	√	_	-	4	_		√					_	\perp	
Teal Premier	88300	837	√	-	-	_	_	_	+	\vdash		1		\dashv	_	
Team Choice PNS	75133	837	V	√ /	-	-	-	_	-			\vdash	-+	+	+	
Teamcare Teamchard Level Union 201	36215	837	√ /	√	_	_	\dashv	+	+	\vdash			_	+	_	
Teamsters Local Union 301 Teamsters Medicare Trust for Petirod Employees	36612	837	√ √	/	-+	\dashv	+	+	+	\vdash		-	-	+	+	
Teamsters Medicare Trust for Retired Employees	43619	835	-	√ /	_	_	\dashv	_	+	\vdash			_	+	_	
Teamsters Medicare Trust for Retired Employees	43619	837	✓	\checkmark												

Control Model Grow				A	/ailab	le	Enro	llme	nt	COB	3	Atta	achmen	nts S	ubmi	ter Id	
Sement Montane Marie 1 1900	Payer Name	Payer Code	Transaction	_	_	_	_	_	_								Notes
Grosses Mighigle 1980 1980	Temecula Valley Medical Group	HCMG1	837	√	√				√	✓							
STATE	Tennessee Medicaid	12K46	835	✓			✓										
STATE STATE OF THE PROPERTY OF				✓			√										
Service Medical Programme Medi							_	_									
Service Medical Process Service Servic					✓	_	_	✓							_		
Section Control Professor Control Profes				√ /		_		_		-			-	_	+	4	
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Seed Section 1975 The Seed Section 1975 The Seed Seed Seed Seed Seed Seed Seed Se	Texas Childrens Health Plan (Medicaid)	75228	835	✓	✓												
State Stat	Texas Childrens Health Plan (Medicaid)	75228	837	✓	✓												
Second confidence of teach Plan	Texas Christus			✓	√				√	✓							
The Marketon Series Medical Series M				✓											_		
Teach Medical 1,204	·			√	_		√	√		1							
Teach Medical				√	√	_	,	4	_	1	Ш		\vdash	_	+	_	
Second Section				√ /			√	4	-		Н		\vdash	-			
Second			-	√	/		_	/	_				\vdash		+		
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Treat Medicane				./	v	Ť	1	+		Ť	Н						This Payer ID is for TX Medicaid MAP Attachments only
Teas Medicine				Ť	√	_		7			М						· · ·
Track Medicare				✓		_	✓								+		
Section Sect				✓		_	_		√						1	1	
inas Memira Plane 1969		SMTX0	835		✓			√									
Tross	Texas Medicare	SMTX0	837		✓			√		√							
Page	Texas Mutual Insurance Company	WK002	837	✓	✓												
Transfers Leath Plan (PKX) The Bearfiel Group Inc B					_			✓									
The Allance				✓	_												
The Beamer Group inc The Car Network (1964) Say				√	_	_		_					ш		_	_	
The Care Network/me Savannah alsuiness Group 6843 837 V V V B V V V V V V V V V V V V V V V				√ /		-	-	_		-				_	4	4	
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The Distributions Group Substance Su				V	_	-	-	-	_	+-			-	_	+	+-	
The Health Plan of West Vergins, inc				./	_	-	_	-		-					+	+	
The Health Plan Pla						_	-	_							+	+	
The Health Plan of West Wigning, Inc \$9677				<i>\</i>	_												
The Health Plan of West Virginia, Inc 95677 837 V V V V V V V V V				✓		_	√	✓							1	1	
The Lornis Company - TPA Wyomissing PA (HIS Gateway Payer) 23223 835 7		95677	837	✓	✓												
The Lossing Company - TPA Wyomsking PA (HS Gateway Payer) 23223 837	The Healthcare Group	35206	837	\checkmark	√												
The Motegan Tribe of Indians of Connecticut		23223	835	✓	√		✓	✓									
The Mohegan Tribe of Indians of Connecticut MOHEG 837				✓	✓				√	✓							
The Mothegan Tribe of Indians of Connecticut MOHEG 837 V V V V V V V V V V V V V V V V V V V					_		_	_							_		
The National Radiology Network				√,	_	_	4	4	—	Ι,	Ш		lacksquare	_	+		
The New England 6893 837 7 7 837 7 7 837 7 7 837 7 7 837 7 7 837 7 837 7 837 7 837 7 837 8				√ /	_		-	4		√	Н		\vdash				
The Oaks PACE 57034 835				V	_	\dashv	\dashv	\dashv		\vdash	Н		\vdash		+		
The Oaks PACE 57034 837				,/	_	\dashv	+	+	_		H		\vdash	-	+		
The Physicians Assurance Corp (TPAC) /Employee Benefit Management Corp (EBMC) 31074 837				√ √		1	1	+			Н						
The Standard Insurance Dental 93024 837						_		7			М						
The Standard Insurance Dental 93024 837 V V V V V V V V V V V V V V V V V V V	The Standard Insurance Dental					√			√								
Third Party Administrators	The Standard Insurance Dental					_					✓		_	✓		1	
Thomas H. Cooper & Company Thomas H. Cooper & Co	The Zero Card			✓	√												
Thome Pace RP044 837				✓				\Box									
Three Rivers Preferred	Thomas H. Cooper & Company			Щ	_			Ţ		√							Equivalent to payer code 315
Thrivent Financial For Lutherans 30167 837				√		_				<u>Ļ</u>			lacksquare		_		
Thrivent Financial For Lutherans THRIV 835 V V V V V V V V V V V V V						_	4	4		√	Н		\vdash	_	_		
TLC Advantage of Sioux Falls TLC 9835				_	$\overline{}$	-	/	/	_		Н		\vdash	_	+		
TLC Benefit Solutions				_		\dashv	V	V	-	1	\vdash		\vdash	-	+		
TLC Benefit Solutions						\dashv	/	/			Н		\vdash		+		
Today's Options (American Progressive and Pyramid Life) 48055 835				./	_	-	<u> </u>	*									
Today's Options (American Progressive and Pyramid Life) 48055 837 🗸 🗸 📗 📗				<i>\</i>	_	_	√	√			Н						
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	Today's Options powered by CCRX			_	_	1											

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Payer Name	Payer Code	Transaction	_	Р	D	_	_	D I		D	- 1	P	D	1	Р	D	Notes
Together with Children's Community Health Plan of Wisconsin	251CC	835	\checkmark	\checkmark		√	√										
Together with Children's Community Health Plan of Wisconsin	251CC	837	✓	√													
Tooling & Manufacturing Association	61425	837	√,		Ш	_	_		_		_				_		
Torrance Hospital IPA	THIPA	837	_	√	\vdash	_	-	_	, ,	-	-	_		_	-		
Torrance Memorial Medical Center Total Broker Benefits	TMMC1 36342	837 837	√	√ √		_	-		′ √		-				_		
Total Dental Administrators	CX112	837	·	V	√	-	-	-	+	./	+			-	-		
Total Plan Concepts	80900	837	1	√	Ť					Ť	+				_		
Total Plan Services	41202	835	√	✓		√	✓		1	1	1				_		
Total Plan Services	41202	837	✓	√													
Total Scholastic Solutions	68251	837	✓	✓	✓												Formerly Global Benefits Group
Total Senior Care	12268	837	✓	✓													
Total Senior Care	R3474	835	✓	√		√	√										
Total Senior Care	R3474	837	_	✓	\checkmark	_	_		_								
Touchstone Health PSO	23856	837	√	_	Ш	_	_	_	_	_	_			_	_		
Town & Country	TKFMC	837	√	_	-				-		-	+	-		_		
TPAC/Employee Benefit Management Corp TR Paul Inc.	31074 37230	837 837	·/	√ √	\vdash	\dashv	\dashv	-	+	-	\vdash		Н		\dashv		
Transact RX	PARTD	837	Ý	√ √	\vdash	\dashv	√	-	+	+	┢		\vdash	\dashv	\dashv		
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TransAmerica Financial Life Insurance Company (TX)	TRP1P	837	√	√	П	_			<i>'</i>		Т			_	_		
TransAmerica Life Insurance Company (AR)	TLINS	835	√	_		√	√	T	Ė								
TransAmerica Life Insurance Company (TX)	TRP1P	837	✓	√	П			_	′ √		Т						
TransAmerica Premier Life Insurance Company (TX)	TRP1P	837	✓	√				√									
TransChoice-Key Benefit Administrators	37284	837	✓	✓				V	_								
Transwestern Insurance Administrators, Inc	TRAN1	837		✓					√								
Travis County Healthcare District dba Central Health	TCMAP	837	✓	✓	Ш		_		┸		<u> </u>						
Trellis Health Partners	36397	837	_		ш	_	_		_	4	_				_		
Tri-Valley Medical Group	20538	835	_	√	\Box	√	✓		_						_		
Tri-Valley Medical Group Triad Healthcare	20538	837 837	√ /	_	\vdash	-	-	_	+	+	+	+		-	-		
Triada Assurance	39181 CB733	837	√ √	√ √		_	_	_	′ √	+	+				\dashv		
Tribado	32691	837	<i>\</i>	_	H	-	_	Ť		+	+		\vdash	_	-		
Tribute /SelectCare of Oklahoma	73117	835	✓	√				Ť	Ť								
Tribute /SelectCare of Oklahoma	73117	837	✓	_					1		1				T		
Tribute Health Plan	31118	835	✓	✓		✓	✓										
Tribute Health Plan	31118	837	✓	√													
Tricare Active Reservists Dental	DXTAS	835			√			√									
Tricare Active Reservists Dental	DXTAS	837	Ш		√	_	_		_	√	_		✓		_		
Tricare Dental Program	TDPC1	835			√	_	_	√	_	Ψ,	_	_		_	_		
Tricare Dental Program	TDPC1	837	/	,	✓	/	_		_	✓	_		✓		_		
Tricare East Tricare East	99727 99727	835 837	√ /	√ √	Н	√	<u> </u>	_	/ /	+	+	+		-	-		
Tricare for Life	TDDIR	835	\ \	√		√	√	Ť	Ť	+	+			-	-		
Tricare for Life	TDDIR	837	V		-	_	√ 	_	<i>'</i>	+	+	+		_	_		
Tricare for Overseas	12X46	835	√	-		√											
Tricare for Overseas	12X46	837	✓		П	√	_		1	Т	Т				一		
Tricare for Overseas	SX163	835		✓			✓										
Tricare for Overseas	SX163	837		✓			√										
Tricare Retiree Dental Program	DDPFS	837	لبا		✓	_[[✓			✓		[
Tricare West	99726	835	√,	√	Щ	√	√	_		_	_	\perp	Ш		_		
Tricare West	99726	837	√		Н	_	_		′ √	-	\vdash	+	\vdash	\rightarrow	\rightarrow		
TriCities IPA Trigon Blue Cross and Blue Shield (Virginia)	PDT01	837		√ ./		+	\dashv	-	-	-	\vdash			_	\dashv		
Trigon Blue Cross and Blue Shield (Virginia) TRIHEALTH PHYSICIAN SOLUTIONS	SB924 31144	837 837	√		\vdash	-	-		-				H	\dashv	-		
Trillium Community Health Plan	68069	837	√ ✓	✓	\vdash	\dashv		_	′ √		√		\vdash		\dashv		
Trillium Health Resources	43071	835		√	П	√	√	Ť	Ť		Ť			_	_		
Trillium Health Resources	56089	837	_	✓													
Trinity Health Pace	TRNPC	837	✓	√							Γ						
Trinity HealthShare	TRIN1	835	✓	\checkmark		√	√										
Triple-S Advantage	973MA	835	_	√		√	√										
Triple-S Advantage	973MA	837	✓	✓					Į		L						
Triple-S Inc.	12B48	837	✓	Ļ	Щ	_	_	_	_	_	_		Ш		_		
Triple-S Inc.	SB980	835	Н	√	ш	_	✓		_	_		\blacksquare	Щ		4		
Triple-S Inc.	SB980	837	√	√ /	\vdash	_	_	_	+	1	\vdash	+	Ш	_	-		
TRIPLEFIN LLC TRISTAR Benefit Administrators	64300 42137	837 835	√ √	√ √	\vdash	√	√	-		+			H	\dashv	-		
TRISTAR Benefit Administrators	42137	837	_	✓	\vdash	Ť	Ť	-	+		+		\vdash	-	\dashv		
The Francisco Parishing dutors	72137	037	٧	٧													

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Payer Name	Payer Code	Transaction	_	_	_	_	_	D I	F		_	I F		3 3	P	D	Notes
TriValley Medical Group Corporation	TVMG1	837		√													
Troy Medicare	TRYMC	835	_	√	—	√	✓		T	1	T				1		
Troy Medicare	TRYMC	837	✓	✓				~	′ ∨	/							
Tru Blue TPA	83413	837	✓	\checkmark				٧	/ v	/							
TruAssure Insurance Company	ILDTA	837			✓					√			~	/			
True Blue / Blue Cross of Idaho	12B84	835	✓	ш	_	√	_		_		4						
True Blue / Blue Cross of Idaho	12B84	837	✓			√ _	_		4	_	_			✓			
True Blue / Blue Cross of Idaho	SB612	835		√ /	_	_	√	_	+	_	+	_	4	_	_	_	
True Blue / Blue Cross of Idaho	SB612	837	√	√ √	_	_	√ /	_		4	+			_			
TrueCare TrueCare	MSMCDCS1 MSMCDCS1	835 837	✓	_	- +	<u> </u>	√	-	╫	+	╫			-	+	+	
Truli for Health	TRULI	835		√ √	_	√	√	_	+	+	+				+		
Truli for Health	TRULI	837	√ ✓			Ť	Ť	_	/ ,	/	_				_		
TRUSTED HEALTH PLAN	L0230	835	√	-			_	Ť	Ť		+						
TRUSTED HEALTH PLAN	L0230	837	✓		_	_	_	_	/ _	/	+	_	+	_	_	_	
Trusteed Insurance (FCHN)	91131	837	✓	✓					T		Ť						
Trusteed Plans Service Corporation	91078	835	√	√		√	√		I		I						
Trusteed Plans Service Corporation	91078	837	✓														
Trustmark Insurance Company	61425	835	√			√	√		Ţ								
Trustmark Insurance Company	61425	837	√			Į	Ţ		Į		I				Į	Į.	
Tufts Health Plan	04298	835	√		_		√		_	_	┸				_	_	
Tufts Health Plan	04298	837		√	_	√	√	V	′ √	/	1						
U.S. Family Health Plan Northwest Region	87347	837	√ /		_	4	4	_		/	+		4	4	_	_	
U.S. Network and Administrative Services	USN01	837	√	_	-	4	-	V	_	_	+	-			+	-	
UC Irvine UC-Davis Health	UCI01 94603	837 837	√ √		-	+	+		<u> </u>	+	+				+	+	
UCARE Individual and Family Plans	55413	835	✓	_		√	√		+	-	+				-		
UCARE Individual and Family Plans UCARE Individual and Family Plans	55413	835	✓ ✓	-	+	٧	Y		/ /	/	+	+	+	+	+	+	
UCare Minnesota	55413	837	√			_	_	7	_	_	_				_		
Ucare Minnesota (DOS > 1/1/22)	12X50	837	<i>\</i>	H		_	_	V	_		+				+		
Ucare Minnesota (DOS > 1/1/22)	SX178	837		✓		_	_	_	_	/	_	_	_	_	_	_	
UCare Minnesota Senior Health Options	55413	837	√	√			1	V	/ _v	/	T				1		
UCare Minnesota Senior Health Options (DOS > 1/1/22)	52629	837	✓	✓					T						1		
UCLA Health Medicare Advantage Plan	28189	837	\checkmark	✓													
UCLA Medical Group	USMBP	835	✓	✓	,	√	√										
UCLA Medical Group	USMBP	837		✓													
UCS (The City of East Chicago)	56001	837	✓			_	_		′ _ ∨	4	4				_		
UCS BASI Hotstart	19450	837	√	_		_	_	_	4	4	4			_	_		
UCS BASI: Meter Group USA	16025	835	√ ′		_	✓ _	√	_	_	_	_				_		
UCS BASI: Meter Group USA	16025	837	_	√		_	-		/	/	╫			_	-	-	
UCS Insight Benefit Administrators UCS PBS Oregon	96436 56724	837 837	√ √	_	_	+	_		′ ∨	+	+				+	_	
UCS Seminole Tribe of Florida	78702	837	√ √		_	+	-	-	+	+	+	_	-	_	+	+	
UCS Wagner Meinert	36150	837	_	<i>√</i>		-	-	_	/ _	/	+				+	+	
UCS: CAM Administrative Services, INC.	63985	837	√	_		_	_	7	_	_	+	_	_	_	+	_	
UCSD Managed Care	UCSDH	835	✓					T	+		1				1		
UCSD Managed Care	UCSDH	837		√		7	7		T		Т						
UFCW Local 1000 and Kroger Dallas Health & Welfare Plan	99843	837	✓	√	√												
UHP Management	UHP01	837	✓	√		I		~	′ √	/	Ι						
Ullico Inc.	ULLIC	837	✓	_					I								
Ultimate Health Plan	77022	835	√	√		√	√		Ţ		L						
Ultimate Health Plan	77022	837		√		4	_[Į.		L						
Ultra Benefits Inc.	41206	835	√	√	_	√	√	\bot	+	+	+	4	_	_	_	\perp	
Ultra Benefits Inc.	41206	837	√ /			/	_		+	-	+				_	-	
Umass Medical School and Criminal Justice Program Umass Medical School and Criminal Justice Program	UMHCI	835		√ /	+	√	√	+	+	+	+	+		+	_	+	
Umass Medical School and Criminal Justice Program UMC HEALTH PLAN	UMHCJ 75130	837 837	√ √	√ √	-	+	+	-	+	+	+	-			+	+	
Umpqua Health Alliance	77503	837		√ √	\dashv	√	√	+	+	+	+	+	+	+			
Umpqua Health Alliance	77503	837	√ √		-	╁	Ť	_	/ ,	/	╈	+			_	1	
UMR (formerly Lexington / CommonWealth Administrative Group)	39026	837	√ √		\dashv	+	\dashv	· ·			+	/ v	/				
UMR (formerly UMR Onalaska)	79480	837		<i>√</i>		7	7		/ ,		Т	T			1		
UMR (formerly UMR San Antonio Benefit Planners)	39026	837		√			T	· ·			,	/ v	/				
UMR Wausuau	39026	835	√		√ .	√	√	√	Ī								
UMR Wausuau	39026	837	√		√			V	/ v	/ /	′ \	√ v	/				
UMR Westerville (formerly Harrington Benefit Services - Columbus)	39026	837	\checkmark	√				V	′ v	/	\	√ v	/				
UMWA Health & Retirement Funds	52180	835	_	√		√	\checkmark		I								ERA enrollment under payer name Healthsmart Benefit Solutions
UMWA Health & Retirement Funds	52180	837	√			$oldsymbol{ol}}}}}}}}}}}}}}}$	\Box	~		_							
Unicare Life & Health/Wellpoint	WLPNT	837	\checkmark	✓				~	/ \	/	\	✓ v	/				

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Payer Name	Payer Code	Transaction	-	Р	_	_	_	D I	_	_	_	I P		T	_	_	Notes
Unified Group Services	35198	835	√	√		√	\checkmark		T	T	Т						
Unified Group Services	35198	837	✓	\checkmark	✓												
Unified Health Services	62170	837	✓	√													
Unified Health Services	62710	835	✓	✓		✓	✓										
			l .l														
Unified IPA	HCP01	837	√	,		_	_			_	╄			_	<u> </u>	_	This payer is now part of OptumCare Network. Please submit claims using payer code OCN01.
Unified Life	RP064	837	_	√		-	-	_	′ √	_	+	,					
Uniform Medical Plan	39026	837	_	√	/	_			′ √	4		/ /					
Unify HealthCare Administrators Union Pacific IPA (SCPMCS)	84962 SCP01	837 837		-	√	-	-	_	+	+	╄		-	+	-		
Union Pacific Railroad Employees Health Systems	87042	835	_	√		√	√		+	+	٠						
Union Pacific Railroad Employees Health Systems	87042	837	Ť	√		Ť	Ť		-	+	+		_	_			
Unison Health Plan/Better Health Plans	87726	837	√	√				_	_		_	/ /					
United Administrative Services, Inc. (ERA Only)	94174	835	✓	√						1	т						ERA Only
United Agriculture Benefit Trust	UABT1	837		✓					√								
United American Insurance	92916	835	✓	\checkmark		\checkmark	✓										
United American Insurance	92916	837	✓	√													
United Americhoice of Nebraska (ERA Only)	UFNEP	835	√	_	Ш	√	✓		Į		L				$ldsymbol{oxed}$	$ldsymbol{oxed}$	
United AmeriChoice of Wisconsin (ERA Only)	WID01	835	_	√		\checkmark	✓										
United Benefit Advisors	38260	837	√	-	Ш	4	_	_	_	\perp	_		_	_		_	
United Care Medical Group	ADCUC	837	✓	✓	_	4	-	/	′ √	-	+						
United Concordia United Concordia	89070	835	Н		√ /	\dashv		√	+	/	-		/	-			
United Concordia United Food & Commercial Workers Midwest Unions	89070 36659	837 837	Н	√	✓	+		-	+		+		√				
United Food & Commercial Workers Midwest Unions United Group Programs	UGP19	837	√	_	\vdash	\dashv			+	+	+			-			
United Healthcare (Golden Rule)(JVHL)	KRJVH	835		√		√	√	-	+	+	٠		+	+			
United Healthcare (Golden Rule)(JVHL)	KRJVH	837	1	√		√	1	_	/ /		+						Provider must be an approved JVHL lab
United Healthcare (non-Golden Rule)(JVHL)	J5JVH	835	<i>\</i>			_	<i>√</i>	Ť	Ť	_	т		_				
United Healthcare (non-Golden Rule)(JVHL)	J5JVH	837	√	√		_	√	_	′ √								Provider must be an approved JVHL lab
United Healthcare Arizona Physicians IPA	GP133	837			✓				1	√	T		✓				
United Healthcare Community Plan	GP133	837			✓					√			✓				
United Healthcare Community Plan - New Mexico EverCare	GP133	837			\checkmark					√			√				
United Healthcare Community Plan - NJ (Formerly Americhoice)	GP133	837			✓					√			✓				
United Healthcare Community Plan - NY (Formerly Americhoice)	GP133	837			✓					√	_		✓	_			
United Healthcare Community Plan - PA (Formerly Americhoice)	GP133	837	Ш		✓	_	_		_	√	_		√				
United Healthcare Community Plan - RI (Formerly Americhoice)	GP133	837			√ /	_			_	√	_		√	_			
United Healthcare Community Plan - TN (Formerly Americhoice)	GP133 GP133	837 837	Н		√ √	-	-	_	+	√ √	╄	_	√ √		-	-	
United Healthcare Community Plan - TX (Formerly Americhoice) United Healthcare Community Plan – MS	GP133	837			√ √	_	_	_	+	√	+	_	√ √				
United Healthcare Community Plan (AHCCCS)	GP133	837			√ ✓	_	-	_	+	Ť.	_	_	√	_			
United Healthcare Community Plan (AZ Healthnet)	GP133	837	Н		√	_	_			<i>√</i>	_		· √				
United Healthcare Community Plan (FL)	GP133	837			√				_	√	_		√	_			
United Healthcare Community Plan (GA Medicare)	GP133	837			√					√	T		√				
United Healthcare Community Plan (Great Lakes Health Plan)(JVHL)	JRJVH	835	✓	✓		✓	✓				Т						
United Healthcare Community Plan (Great Lakes Health Plan)(JVHL)	JRJVH	837	✓	✓		✓	✓	√	′ √								Provider must be an approved JVHL lab
United Healthcare Community Plan (HI Medicare)	GP133	837			\checkmark					√			√				
United Healthcare Community Plan (KS)	GP133	837			✓					√	_		✓				
United Healthcare Community Plan (MA)	GP133	837			√				_	√,	-		√				
United Healthcare Community Plan (MI Medicare)	GP133	837	Ш		✓	_	_		_	√	_		√	_			
United Healthcare Community Plan (Oxford)	GP133	837			√ ,	_	_	_	_	√	_		√	_			
United Healthcare Community Plan (Special Handling)	GP133	837			√ √					√	_		√	_			
United Healthcare Community Plan (Unison Health Plan) United Healthcare Community Plan (WA Medicare)	GP133 GP133	837 837	Н		√ √	-	_	-	+	√ √	_		√ √				
United Healthcare Community Plan (Wa Medicare) United Healthcare Community Plan (Wash. DC Medicare)	GP133	837	Н		√ √	-	-	_	+	√ √	_	_	√ √		-		
United Healthcare Community Plan (WI)	GP133	837	Н		✓	_	\dashv		+	·/	Т		√	_			
United Healthcare Community Plan AZ-Evercare	GP133	837			√	7			т	V	т		√	_			
United Healthcare Community Plan Louisiana-Medicaid (Healthy Louisiana)	GP133	837			√	1			T	√	_		√				
United Healthcare Dental	52133	837			✓					√	_		√				
United Healthcare Dental	87726	835			✓			√	I								
United Healthcare NDC Claims	UHNDC	837		✓					√	_							
United Healthcare/ Peoples Health	87726	837	✓	_				✓	′ √		V	/ /					
United Medical Alliance	84132	837	✓	√		J			Ţ		L				oxdot		
United of Omaha	71412	837	✓	✓			_			_					_	_	
United Physicians International	SANDS	837	√	_	Ш	_	_	_	4	\bot	_	_	_	_	\vdash	\vdash	
United Teacher Assoc Ins Co-Medicare Supplement	13193	837	√	√		_		_	_	-	-			-			
UnitedHealthcare UnitedHealthcare	87726	835 837	√ /	√ /	Н	√	√		,	+	-	/	+	-	\vdash	\vdash	
UnitedHealthcare (Definity Health Plan)	87726 87726		_			-		√ ./	_	_	_	/ /	-				
оппечнения (решику пенки мын)	87726	837	✓	\checkmark				√	′ √		V	/ /					

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Payer Name	Payer Code	Transaction	-	Р	_	_	_	D I			\perp	Р	D	1	Р	D	Notes
UnitedHealthcare (Empire Plan)	87726	837		\checkmark					\checkmark		\checkmark	✓					
UnitedHealthcare (MAHP MD IPA Optimum Choice MAMSI)	87726	837	√	√		_	_	√	✓		✓	✓		_	_	4	
UnitedHealthcare (Oxford Health Plans)	06111	835	√	-	-	√ ·	√ _				_		\vdash	_	-	_	
UnitedHealthcare (Oxford Health Plans) UnitedHealthcare / MAHP - MD IPA Optimum Choice MLH (formerly MAMSI)	06111	837 837	_	✓ ✓		_	+	√ √	√ √		√ √	√ √		_	_		
UnitedHealthcare / UHIS - UnitedHealth Integrated Services	87726 39026	837	·/	✓		+	-	√	_		√ √	_		_	\dashv	+	
UnitedHealthcare / UnitedHealthcare StudentResources	74227	835	√ √	√		√ ·	√	Ť	Ť		Ť	Ť			_	_	
UnitedHealthcare / UnitedHealthcare StudentResources	74227	837	<i>√</i>	<i>\</i>		Ť	Ť	√	√				H	\neg	_	7	
UnitedHealthcare / UnitedHealthcare West (formerly PacifiCare)	87726	837		✓					✓		✓	✓					
UnitedHealthCare Community Plan (KS / KanCare)	96385	835	√	\		√ .	√										
UnitedHealthCare Community Plan (KS / KanCare)	96385	837	✓	✓				√	✓		✓	√					
UnitedHealthcare Community Plan / AZ (formerly AZ Physicians IPA APIPA)	03432	835	✓	\		√ ·	√										
UnitedHealthcare Community Plan / AZ (formerly AZ Physicians IPA APIPA)	03432	837	√	✓		_	_	√			√				4	_	
UnitedHealthcare Community Plan / FLHI LA MD MS CAN OH RI WAWI	87726	837	√ /	√			_	√	_			√			_		
UnitedHealthcare Community Plan / IA, hawk-I UnitedHealthcare Community Plan / MI (formerly Great Lakes Health Plan)	87726 95467	837 835	√ √	√ √		√ ·	√	√	√		✓	✓		-	-	-	
UnitedHealthcare Community Plan / MI (formerly Great Lakes Health Plan)	95467	837	·/	✓		<u> </u>	<u> </u>	√	√		√	V		\dashv	\dashv	\dashv	
UnitedHealthcare Community Plan / MS CHIP	87726	837	<i>√</i>	√		_	+	√			√ ✓	_	+	_	_	7	
UnitedHealthcare Community Plan / NJ (formerly Americhoice NJ Medicaid)	86047	835	<i>√</i>			√ ·	√	Ť	Ė		Ė	Ė			_	寸	
UnitedHealthcare Community Plan / NJ (formerly Americhoice NJ Medicaid)	86047	837	✓	√		T		√	√		✓	√			\neg	T	
UnitedHealthcare Community Plan / NY	NYU01	835	√	√		√ ·	√										
UnitedHealthcare Community Plan / PA (formerly AmeriChoice PA Medicaid&CHIP	86049	837		√													
UnitedHealthcare Community Plan / SC (formerly Unison)	25175	837	√	√		Ţ										Į	
UnitedHealthcare Community Plan / TN (formerly AmeriChoice TN: TennCare)	95378	835	√	✓	Ш	√ ·	√	4	L		L .	<u> </u>	Ш	_	_	_ļ	
UnitedHealthcare Community Plan / TN (formerly AmeriChoice TN: TennCare)	95378	837	√ /	_	\vdash	_	_	√	✓		√	✓		\dashv	-	4	
UnitedHealthcare Community Plan / TX	TEX01	835	√	√		√ <u> </u>	√		,		,	,			_	4	
UnitedHealthcare Community Plan / UnitedHealthcare Dual Complete UnitedHealthcare Community Plan / UnitedHealthcare Long Term Care	87726 87726	837 837	√ √	√	-	-	-	√			√	√ √	\vdash	-	-	-	
UnitedHealthcare Community Plan / WI	WID01	835	_	√		√ ·	./	Ť	Ť		Ť	·		_	\dashv	+	
UnitedHealthcare Community Plan of Missouri	86050	835	_	√	_	_	√ √	_	1					_	_	7	
UnitedHealthcare Community Plan of Missouri	86050	837	✓	✓				√	✓		✓	√					
UnitedHealthcare Medicare Solutions / UnitedHealthcare Chronic Complete	87726	837	✓	√			_	√			✓		П	\neg	\neg	7	
UnitedHealthcare Medicare Solutions / UnitedHealthcare Group Medicare Advan	87726	837	✓	✓				√	✓		✓	✓					
UnitedHealthcare Medicare Solutions / UnitedHealthcare MedicareComplete	87726	837	✓	\				✓	_		✓	_					
UnitedHealthcare Medicare Solutions / UnitedHealthcare MedicareDirect	87726	837	√	✓				√	_		✓	_					
UnitedHealthcare Medicare Solutions / UnitedHealthcare Nursing Home Plan	87726	837	√	√		_	_		✓		✓	✓			_	4	
UnitedHealthcare Ohio Medicaid UnitedHealthcare Ohio Medicaid	88337 SKOH0	837 835	√	√ √		√ ·	/	_	-				\vdash	-	-	-	Effortive 3/1/2022 remittance returned under Ohio Medicaid
UnitedHealthcare Ohio Medicaid Vision	8357V	837	√ √	-		<u> </u>	<u>√</u>		-						-		Effective 2/1/2023, remittance returned under Ohio Medicaid
UnitedHealthcare Ohio Medicaid Vision	SKOH0	835	<i>√</i>	√		√ ·	√	_	1			1		_	-	_	Effective 2/1/2023, remittance returned under Ohio Medicaid
UnitedHealthcare West	87726	837	✓	✓		Ť	1	√	✓		✓	√			1	T	
UnitedHealthcare West	95959	835	√	✓		√ ·	√									T	
UnitedHealthcare West	95959	837	✓	✓													
UnitedHealthcare West Encounters	95958	837		✓													
UnitedHealthOne	81400	837	✓	✓				√	✓								
UnitedHealthOne (formerly Golden Rule)	37602	835	√	√		√ ·	✓		—					_	_	_	
UnitedHealthOne (formerly Golden Rule)	37602	837	√	_	+	+	-	√	_		/	,	H	-	-	4	Formerly Golden Rule
UnitedHeathcare Community Plan Univera Healthcare	87726 UNINW	837 835	./	✓ ✓	\vdash	√ ·	1	✓	√		✓	_	\vdash	\dashv	\dashv	4	
Univera Healthcare	UNINW	837	√ √	_		<u> </u>	<u> </u>	+	√					_	+	+	
Universal Care - California	33001	837	_	√		T			Ė						_	寸	
Universal Fidelity Administrators Company	93220	835		√		√ ·	√								二十		
Universal Fidelity Administrators Company	93220	837		✓		1		√	√								
Universal Health Fellowship	53684	837	_	_	✓	Ţ											
Universal Healthcare IPA	UHIPA	835	√	_		√ ·	√		Ļ						4	_	
Universal Healthcare IPA	UHIPA	837	√	√	\perp	/	,	√	√			_	Ш	_	_	4	
University Family Care	09830 09830	835 837	√ ./	√ √	\vdash	√ ·	√		-					\dashv	+	+	
University Family Care University Family Care - Maricopa Health Plan	09830	837	./	✓ ✓	\vdash	√ ·	√	+				1	\vdash	\dashv	\dashv	4	
University Family Care - Maricopa Health Plan	09908	837	√ √		+	'	'	+						\dashv	+	+	
University Health Alliance	99026	837	Ė	√		+			√						_	7	
University Health Care Advantage	46407	835	✓	√		√ ·	√		Ė					_	\dashv	7	
University Health Care Advantage	46407	837	√	√													
University Healthcare Marketplace	45437	837	✓	\checkmark													
University of Illinois	UIC67	835	√	√		√	√								Į		
University of Illinois	UIC67	837	✓	-	ш	_		\bot				1	Ш	_	_	_ļ	
University of Illinois at Chicago Div of Specialized Care for Children	37601	837	√	-	+		_	_						_	_	4	
University of Maryland Health Advantage	45282	835	√	✓		√ ·	√					1					

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Payer Name	Payer Code	Transaction	_	_	D	_	_	_				_	_	_	P [Notes .
University of Maryland Health Advantage	45282	837	✓	✓				√	√							
University of Utah Health Plans	SX155	835	✓	✓		√	√		i i							
UNUM Dental	STR01	837			✓					✓			√			
Upland Medical Group	IP056	837		√												
UPMC Health Plan	23281	835	✓	√		✓	√									
UPMC Health Plan	23281	837	✓	✓		_	_	√	✓							
UPMC Health Plan	UPMCD	835			√	_	_	√		.						
UPMC Health Plan	UPMCD	837	,	,	✓	,	,	_	_	√			✓	_		
UPMC Vision Advantage	25184 25184	835 837	√ √	√		√	√	_				+				
UPMC Vision Advantage Upper Peninsula Health Group (TPA)	00446	835	_	√ √		√	√									
Upper Peninsula Health Group (TPA)	37324	837	√ ✓	√ √	_	<u> </u>	·	_	-			+ +	-	-	_	
Upper Peninsula Health Gloup (17 A)	38337	835	\ \	√		√	√	+						-	-	
Upper Peninsula Health Plan (Medicaid)	38337	837	<i>\</i>	_	_	Ť	Ť	_	1	т		1	_	_	_	
US Benefits	93092	835	√	√		√	√									
US Benefits	93092	837	√	_		7			1							
US Department of Labor	77044	835	✓	✓		√	√									
US Department of Labor	77044	837	✓	√												
US Department of Labor - Black Lung	77104	835		√			√									
US Department of Labor - Black Lung	77104	837		\checkmark		\Box			✓							
US Department of Labor - Energy	77103	835		√			√									
US Department of Labor - Energy	77103	837	Щ	√		_[_	✓	Ш	_	Ш				
US Engagement, LLC	50443	837	√	√	4	_		-	-					4	_	
US Family Health Plan	90551	835	V	√	_	√	√	+	1					_	_	
US Family Health Plan	90551	837	√ √	√		/	/	_	-					_		
US Family Health Plan (USFHP) TX AND LA US Family Health Plan (USFHP) TX AND LA	USFHP	835 837	√	√ √		√	V	+	-				_	_	_	
US Imaging Network	50383	835	√ √	-		√	√	_	+		-	+ +	-	+	+	
US Imaging Network	50383	837	_	-		Ť	Ť	+						_	_	
USAA (United Services Automobile Association)	74095	835	√	_	-	√	√	_	1					+	-	
USAA-Medicare Supplemental (ERA Only)	USAAM	835	<u>√</u>	√	_	_	√ ✓									
USFHP - St. Vincent Catholic Medical Centers of New York	13407	835	<i>\</i>	√			<i>√</i>	_	1		1	1 1	_	-	_	
USFHP - St. Vincent Catholic Medical Centers of New York	13407	837	_	√		Ť										
USHealth Group	USHA1	835	√	√		√	√									Claims for this remit code are submitted under one of the family companies: Freedom Life Insurance Company of America, National Foundation Life Insurance Company or Enterprise Life Insurance Company
USHL	38261	837	✓	\checkmark												
Utah Medicaid	12K42	837	✓			\checkmark										
Utah Medicaid	SKUT0	837		✓		_	√									
Utah Medicaid	UTMCD	835	✓	✓		_	√									Effective October 21st, 2024, Route has change to EDI Gateway with "Optum"
Utah Medicare	12M84	835	√			√									_	
Utah Medicare	12M84	837	✓	,		_	,	√	-					_	,	
Utah Medicare	SMUT0 SMUT0	835 837	Н	√ √		_	√ √	_	1	Н	-	+	-	_	√ √	
Utah Medicare UTMB Correctional Managed Care	UTMBC	835	./	√ ✓		\dashv	<u> </u>	+	· ·					+	<u> </u>	
UTMB Correctional Managed Care	UTMBC	837	\ \	√ ✓		-	_	_	+			+ -		_		
UW Graduate Appointee Plan	91136	837	<i>,</i>	√		\dashv	-	+						-	-	
VA Community Care Network Region 1	VACCN	835	<i>\</i>			√	√			П		\Box		-	_	
VA Community Care Network Region 1	VACCN	837	√	√	√	1		√	√	✓						For DOS after 7/29/19
VA Community Care Network Region 2	VACCN	837	✓	✓	√			√		√						For DOS after 7/29/19
VA Community Care Network Region 3	VACCN	837	✓	✓	✓			√	✓	√						For DOS after 7/29/19
VA Community Care Network Region 4	VACCN4	835	✓			√	✓									
VA Community Care Network Region 4	VACCN4	837	✓			Ţ		√	√							
VA Community Care Network Region 5	VACCN5	835		\		√	√					Ш				
VA Community Care Network Region 5	VACCN5	837	√	√		_	_	√	√					4		
VA Fee Basis Programs	12115	835	√	√ /	_	√	√	+	_		.	1	_	_	_	
VA Fee Basis Programs	12115	837	√	✓		4	-	-		,	_	√		-		
VA Financial Continue Contar (Dialysis)	12116	837		Н	✓	\dashv	_	-	_	✓				_	_	
VA Financial Services Center (Dialysis) Valenz	VAFSC 94749	837 837	·/	√		+	-	√						-		
valenz Valenz-Auxiant	92645	837	√ √	_		+	+			Н			-	+	+	
Valir Pace	64009	837	Ť	√ √		-	-			М				-		
Valir Pace Medicare Advantage	R3463	835	√	-		√	√	+						_	_	
Valir Pace Medicare Advantage	R3463	837	_	<i>\</i>		7	-			П		\Box		-	_	
Valley Care IPA	VCIPA	835	✓	√		√	√									
Valley Care IPA	VCIPA	837	✓	✓		T		√	✓							
Valley Health Plan (Commercial)	VHP01	835	✓	√		√	✓									
Valley Health Plan (Commercial)	VHP01	837	✓	√		√	√	√	√							

			A۱	vailab	le	Enro	ollmer	nt	COB	3	Att	tachme	nts	Submi	tter Id	
Payer Name	Payer Code	Transaction	_	_	_	_		D I		D		Р	_	I F	_	Notes
Valley Health Plan (Medi-Cal)	VHP02	835	√	√		√	√									
Valley Health Plan (Medi-Cal)	VHP02	837		✓		√	√	√	✓					_		
Valley Health Plan Encounter	VHP03	837	✓	√		✓	√	√	✓							
Valley Mental Health	94293	837		\checkmark												
Valley Preferred - PPO Allentown PA (IHS Gateway Payer)	23253	837		✓		_										
Valley Presbyterian Hospital	MPM53	835	√ /	√ /		✓	√	_						_		
Valley Presbyterian Hospital	MPM53 MPM61	837	√	√												
Valley Presbyterian Hospital Community Family Care VPRESCFC Valley Presbyterian Hospital Preferred IPA VPRESPREF	MPM60	837 837	./	✓ ✓		_	-	√	√					+		
Valley Presbyterian Hospital SERRA MG	MPM67	837	<i>√</i>	√ ✓	_	-	-	Ť	Ť			1		_	_	
Valor Health Plan	43259	835	<i>\</i>	_		√	√									
Valor Health Plan	43259	837	✓	√		_	十	\top	1					_	_	
Valor Medicare Advantage	43259	837	✓	✓												
Van Lang IPA	77036	837	✓	\checkmark												
Vanderbilt University Medical Center	BPSLLC	835	✓	√		✓	√									
Vanderbilt University Medical Center	BPSLLC	837	√		_		_	√								
Vantage Medical Group	PROSP	837	√	√		_	_	√						_	_	
Variable Protection Administrators (VPA)	VPA18 72187	837	√ √	√ /		_	\dashv	√	√					+	+	
Varipro Vault Administrative Services	72187 VS402	837 835		√ √	-	√	√	+				┝	-	+	+	
Vault Administrative Services Vault Administrative Services	VS402 VS402	837	,/	√ √		Ť	Ť							+	+	
Vaya Health	13010	835	√ √	_	_	√	√							+		
Vaya Health	13010	837	√	_	_	_	√ ✓	√	√					\top		
Ventura County Health Care Plan	VCHCP	837	✓	√		1		√		П						
Verda Healthcare Texas	VERTX	835	√	√		✓	√									
Verda Healthcare Texas	VERTX	837	✓	\checkmark												
Vermont Medicaid	12K26	835	✓			√										
Vermont Medicaid	12K26	837	✓	-		✓								_		
Vermont Medicaid	SKVT0	835		√,	_	_	√							_		
Vermont Medicaid	SKVT0	837	,	✓	_	_	√	+	-				_	+		
Vermont Medicare Vermont Medicare	12M26 12M26	835 837	V /	Н		√ √	-	√	+	Н			-	-	+	
Vermont Medicare	SMVT0	835	·	√		_	√	·	1					+	+	
Vermont Medicare	SMVT0	837		√		_	√ √	_	√					_	_	
VESTACARE	VESTA	837	✓	√					Ė							
VGM Homelink	50701	835		✓		T	√								1	
VGM Homelink	50701	837		√												
Via Christi HOPE	48123	837	✓	√												
Vibra Health Plan	15976	835	✓	✓		✓	√									ERA Only
Vibra Health Plan	15976	837	√	√	_	_	_	_	_		_		_	_	_	
VieCare Life and Beaver and Life Lawrence Counties	25924	835	√			-	-							-	-	
VieCare Life and Beaver and Life Lawrence Counties VieCare Life Armstrong	25924 25922	837 835	√ /	√ √	-	-	-	+	1				-	+	-	
VieCare Life Armstrong	25922	837	·/	√ √	-	+	-	_	-				-	_	+	
VieCare LIFE Butler	25923	835	√ √	√		_	_							+		
VieCare LIFE Butler	25923	837	√	_		_	一	\top	1					_	_	
Village Practice Management Company	36477	837	✓	✓												
VillageCareMAX	26545	835	✓	\checkmark		✓	√									
VillageCareMAX	26545	837	✓	✓												
Virgin Islands Medicare	12M52	835	√	-	_	√	_							_		
Virgin Islands Medicare	12M52	837	√	-	_	√	_	_	-					_	_	
Virgin Islands Medicare Virgin Islands Medicare	SMVI0 SMVI0	835 837		√	_		√ /							_		
Virginia Health Network, Inc.	54138	837		√ √		-	√	_	√					+	_	
Virginia Mason Group Health	91131	837	√			1	\dashv	+	Ť					+		
Virginia Medicaid	12003	835	√			√	_			П				\top		
Virginia Medicaid	12003	837	√			T		√								
Virginia Medicaid	SKVA0	835		\			√							╧		
Virginia Medicaid	SKVA0	837		√					√							
Virginia Medicare	SMVA0	835		√		_	√									
Virginia Medicare	SMVA0	837	Щ	√		_	√		√							
Virginia Premier Health Plan	VAPRM	835	√,	√ /	_	√	√	+	L ,		\vdash	\sqcup	_	_	+	
Virginia Premier Health Plan	VAPRM	837	√	√ /	-	4		√	√					-	_	
Vision Service Plan (VSP) Vista Oncology - New Century Infusion Solutions	94163 NCH08	837 837		√		\dashv	\dashv	+	\vdash					+	+	
Vista Oncology - New Century Infusion Solutions VitalCore Milette	MAI58	837	√	_	√	+	+	+				+ +	+	+	+	
Vitori Health	IHS25	837	√	_	Ť	1	\dashv							+		
Vitruvian Care IPA	VUIPA	837	√	-	-		\dashv	√	√					\top		
			•						_	_				_		

Payer Name	Payer Code	Transaction			ole					СОВ			chme					Notes
	*****			Р				υ	_	۲	ע	_	Р	υ	_	Р	ט	
Viva Health Plan	63114	835	√	√	-	√	✓	-	_	-	_			_				
Viva Health Plan	63114	837	Ľ	✓	\rightarrow	\dashv	\rightarrow	+	+	-	-							For claim DOS on or after 1/1/21. Claims with DOS prior to 1/1/21 should be sent using payer
Vivida Health	A0102	837	./	/														code 45488
Vivida Health (for DOS prior to 1/1/21)	45488	837	Ì	√	o	十	\dashv	_	√	√	_			_				500C 1510C
VMD Primary Providers of AZ	84213	835	✓	_		\dashv	\neg	1	Ť									
VMD Primary Providers of AZ	84213	837	\checkmark	✓	\neg	T	一	_	7	_	7							
VNA Homecare Options	31626	837	✓	✓														
VNS CHOICE Medicare	77073	835	✓	✓	ш	✓	√											
VNS CHOICE Medicare	77073	837	\checkmark	\checkmark					√	√								
Volunteers of America National Services	VNSPC	835	✓	_	\Box	✓	✓											
Volunteers of America National Services	VNSPC	837	✓		Щ.	4	_											
VOLUSIA HEALTH NETWORK	59266	835	√	_	_	√	✓		_	_	_			_				
VOLUSIA HEALTH NETWORK	59266	837	✓	✓	\rightarrow	4	$\boldsymbol{\dashv}$	_	_	_	_			_				. (5)
			1 .!		.				,	,								As of February 20, 2024, Electronic Remits Advice (ERA) is not available for this payer at this
Vxtra Health Plan Inc.	99915	837	\downarrow	\checkmark	_	_	_	_	√	√	_			_				time.
Vytalize Health (ERA Only)	RP042 22264	835 835	√ /	√		_	√ /	-	+	-	-	_	-	-				
Vytra Healthcare Vytra Healthcare	22264	835	√ √	-	+	√	√	\dashv	√	√	\dashv		_	-				
wytra Healthcare WA - Washington Coordinated Care	68069	837	✓ ✓	_	+	+	+		√ √	_	\dashv	√	√	-				
Wabash Memorial Hospital Association	85256	835	1	✓	o	√	<u> </u>	-	1	Ť	\dashv	·	·					
Wagner Meinert	31650	837	1	√ √	+	十		+	√	√	+		_	-				
Washington County General Fund	77111	837	\checkmark	√	\dashv	+	\dashv		_	<i>√</i>	1		_					
Washington Medicaid	12K27	835	\checkmark	\Box	o	√	一	_	1	_	7		_	_				
Washington Medicaid	12K27	837	√	\Box	_	√			√									
Washington Medicaid	SKWA0	835	П	✓	\neg	_	✓	_	7	_	7							
Washington Medicaid	SKWA0	837	П	✓			✓		T	✓								
Washington Medicare	12M45	835	\checkmark	П	\Box	✓												
Washington Medicare	12M45	837	\checkmark			√			✓						√			
Washington Medicare	SMWA0	835		\checkmark	П		✓									✓		
Washington Medicare	SMWA0	837		\checkmark			√			√						√		
Washington National	70319	835	_	-	_	_	_		_									ERA Only
Washington State Dept of Labor and Industry	SX063	835	✓	_		_	✓		4		_							
Washington State Dept of Labor and Industry	SX063	837	√	-	_	✓	✓	_	_	_								
Waterstone Benefit Administrators (Oklahoma Providers)	73155	837	V.	√	$oldsymbol{+}$	4	_		4		_							
Waterstone Benefit Administrators (Outside Oklahoma)	23051	837	\downarrow	√ ′	_	_	_	_	,	,	_			_				
Watts Health Care	MPM09	837	✓	✓	$\overline{}$	4	$\boldsymbol{\dashv}$	_	√ _	√	_			_				Per the payer's request, the payer's name has been updated to WebTPA Employer Services
WebTPA Employer Services LLC	75261	835		/	.	,	_ /											LLC.
WebTPA Employer Services LLC WebTPA Employer Services LLC	75261	837	✓	✓	√		Ť		-	-								Electronic Remittance Advice (ERA) will continue to be routed through SDS
Weiss Health Providers	36337	837	Ť	√	Ť	7	\dashv	_	-	-	-	_	_					Electronic Remittance Advice (ERA) will continue to be routed through 303
WelbeHealth	WBHCA	835	Ţ	√ √	o	1	1	_	\dashv	_	_							
WelbeHealth	WBHCA	837	<i>\</i>		-	Ť		_	√	√	_							
Welcome Health	MPM57	837	✓	-		\dashv	\neg	1	Ť									
Welfare and Pension Administrators	91136	835	✓	_	\neg	√	✓		_	_	_							
Welfare and Pension Administrators	91136	837	√	√	√	\neg			7									
Well Sense Health Plan	13337	837	✓	✓	\neg	T	\Box		√	√								
Well-Med	WELM2	835	\checkmark	✓		✓	✓											
Well-Med	WELM2	837	✓	\checkmark					\checkmark	✓								
WellCare (JVHL)	MMJVH	835	_	_	_	√	_											
WellCare (JVHL)	MMJVH	837	✓	✓	ш	√	✓			√								Provider must be an approved JVHL lab
Wellcare by Allwell	68069	837	✓			_	_			√		✓	✓					
Wellcare Complete	68069	837			_	4			√	✓		✓	✓					
Wellcare Health Plan, Inc. (Encounters only)	59354	835		√	4	\checkmark	✓		4	_	4		_					
Wellcare Health Plan, Inc. (Encounters only)	59354	837	√ /	_	_	_	<u> </u>	_	√	√	4		_	_				
Wellcare Health Plan, Inc. (Fee-for-Service)	14163	835 837	√ /	√	-	√	√	+	/	/	4	,		-				
Wellcare Health Plan, Inc. (Fee-for-Service) WellCare of North Carolina	14163 14163	837 837	√ √	-	_	+	\dashv		√ √			√ √		_				
WellChoice of NJ	00803	837		✓ ✓	+	+	√	+	<u> </u>	v	+	V	V	-				
WellChoice of NJ	SB803	837	\vdash	✓	o	+	\dashv	-	+	√	\dashv		-					ERA Payer Code 00803.
Wellmark BCBS - Medicare COB	12B92	837	V		-	十	\dashv	_	√	÷	┪	-	-	-				
Wellnet Health Plans	25711	837		√	\dashv	十	\rightarrow		_	√	\dashv		\dashv					
Wellnet Healthcare Administrators, Inc.	93669	837		√	√	十	\dashv	\neg	+	Ť	7							
WellPay/Inssolen	95729	837	_	_	\dashv	十	一		1		一							
			√	_	-	√	√		-	-	7			_				
WellSpace Nexus LLC	NEXUS	835	V .	✓	· I	٧.	V											
WellSpace Nexus LLC WellSpace Nexus LLC	NEXUS NEXUS	837	✓	-		Ť	_											
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Payer Name	Payer Code	Transaction	_	_	_		_	D I					_	1		D Notes
West Covina Medical Group	66124	837	✓	✓		T										
West Suburban Health Providers	80942	837	✓	✓												
West Virginia Family Health Plan	45276	835	✓	√												
West Virginia Family Health Plan	45276	837		√												
West Virginia Medicaid	12K28	835	✓			√										
West Virginia Medicaid	12K28	837	✓			_	_	√						_		
West Virginia Medicaid	SKWV0	835		√	_	_	√ _		<u> </u>	Ш			_	_	4	
West Virginia Medicaid	SKWV0	837	,	✓	_	_	-	_	√				_	-	-	
West Virginia Medicare	12M28 SMWV0	837 835	√	√	-	√	/	_	-	Н			_	\dashv	-	
West Virginia Medicare West Virginia Medicare	SMWV0	837	Н	√ √	-	+	√ √	_	-	Н			-	+	-	
West Virginia Medicare West Virginia Senior Choice	WVS01	835	/	√		_	√ ✓						-	-	-	
West Virginia Senior Choice	WVS01	837	✓	√	_	Ť	÷	√	√	Н			_	_	_	
Western Grower's Insurance Company	24735	837	✓	-					t							
Western Growers Assurance Trust	24735	837	√	√		\neg				П				\neg		
Western Health Advantage	68039	837	✓	✓												
Western Health Advantage by Ayin	77225	835	✓	√		√	✓									
Western Health Advantage by Ayin	77225	837	✓	✓												
Western Mutual Insurance	37247	837	✓	-	$oldsymbol{\bot}$	$oldsymbol{\perp}$				Ш	匚					
Western Oregon Advanced Health	DOCSO	835		√		4	√							_		
Western Oregon Advanced Health	DOCSO	837	لبا	✓	_	_	_	_	✓	ш		Щ	_	_	_	
Western Oregon Advanced Health	UOCSO	835	√			√	_		-	ш				_	_	
Western Oregon Advanced Health	UOCSO	837	√	,		_		√ /		Ш				_	_	
Western Reserve Life Insurance Company (TX)	TRLTC	837	√	√ /	-	+		√ √			,	_		-		
Western Sky Community Care Western Southern Financial Group (Cincinnati OH)	68069	837	√ /	_	_	+	_		√	Н	✓	✓	_	\dashv	-	
	31048 31048	835 837	√ √	_	-	-	-		+	Н			-	-	-	
Western Southern Financial Group (Cincinnati OH) White Memorial Altamed Medical Group	MPM55	837	_	-	-	+	-	√	√				-	-	+	
White Memorial Medical Center	NMM01	837	_	-	_			·	·						_	
Willamette Valley Community Health	WVCH5	835	√	-		√	√						-	-	-	
Willamette Valley Community Health	WVCH5	837	√ ✓	√	_	Ť	Ť						_	_	_	
William C. Earhart	93050	835	_	_		√	√							_		
William C. Earhart	93050	837	√	-		Ť	Ť		1	П				_	_	
Willow Health	WHLTH	837	√	√				√	√							
Wilson McShane Dental	R7002	837			√					✓			√			
Wilson-McShane	41095	837	✓	✓												
Windsor Medicare Extra	62153	837	✓	√				√	✓							
WINHealth	27327	835	✓	√		\checkmark	√									
WINHealth	27327	837	✓	_				√	√							
Wisconsin Chronic Disease Program (WCDP)	SKWID	835	✓	✓		√	√							_		
Wisconsin Chronic Disease Program (WCDP)	SKWID	837	✓	-	_	_	_	√	✓	Ш			_	_	_	
Wisconsin Department of Corrections	74101	835	√	√	_	√	√	_	1				_	-	-	
Wisconsin Department of Corrections	74101 CKWI1	837	√	✓	/	4	_	/					_	_	_	
Wisconsin Medicaid Wisconsin Medicaid	CKWI1	835 837			√ /	+	+	√	+-				-	-	-	
Wisconsin Medicaid Wisconsin Medicaid	SKWI0	837	√	√	√	√	√		+	Н				\dashv	-	
Wisconsin Medicaid Wisconsin Medicaid	SKWIO	837	√	-	-	<u> </u>	<u> </u>	√	√	Н			-	+	-	
Wisconsin Medicare	12M29	835	<i>'</i>	H		√		Ť	Ť					\dashv		
Wisconsin Medicare Wisconsin Medicare	12M29	837	<i>√</i>			√ /		√		П				_	_	
Wisconsin Medicare	SMWI0	835		√		_	√									
Wisconsin Medicare	SMWI0	837		✓		_	✓		√							
Wisconsin Well Woman Program (WWWP)	SKWIW	835	✓	√		√	√									
Wisconsin Well Woman Program (WWWP)	SKWIW	837				$\Box T$		√								
Women's Integrated Network Inc. (WIN Fertility)	13413	837		√												
World Insurance Company	75276	835	✓	-		√	√			Ш		Щ				ERA Only
WPP-ElderCare Wisconsin	77080	837	√	✓		_			1					_		
WPS Commercial	12X29	835	√	ш	_	√ /	_		1	Н	_			_	_	
WPS Commercial	12X29	837	✓	_		√	_		-	\vdash			-	\dashv	-	
WPS Commercial WPS Commercial	SX022 SX022	835 837	\vdash	√ /	_		√ /	_	√	Н			_	\dashv	_	
WPS Commercial WPS Medicare Part A National - Legacy Claims - J5	52280	837	√	√		√	√		·	\vdash				-	-	
WPS Medicare Part A National - Legacy Claims - J5 WPS Medicare Part A National - Legacy Claims - J5	52280	837	✓		_	√ √	_	√	+					\dashv	\dashv	
Wyoming Medicaid	12K30	835	✓ ✓			√ √	-	Ť		Н			-	\dashv	-	
Wyoming Medicaid	121/30		√			√ √		√						\dashv		
	12K30	837														
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Wyoming Medicaid Wyoming Medicaid	12K30 SKWY0 SKWY0	837 835 837	·	√ √	4	1	√ √		√						\exists	
Wyoming Medicaid	SKWY0	835	V	√	√	1	√	/	√							

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Payer Name	Payer Code	Transaction		Р	D	1	Р	D		P [D	1	Р	D	L	_	D	Notes
Wyoming Medicare	12M30	835	✓			\checkmark									√			
Wyoming Medicare	12M30	837	✓			✓			/						√			
Wyoming Medicare	SMWY0	835		✓			√											
Wyoming Medicare	SMWY0	837		√			✓		,	/						✓		
Yale University Heath Plan	60646	835	✓	✓		\checkmark	\checkmark											
Yale University Heath Plan	60646	837	✓	✓					/ \	/								
Yamhill CCO	YAMHL	835	✓	✓		\checkmark	✓											
Yamhill CCO	YAMHL	837	✓	√														
Yamhill CCO Physical Health	77943	835	✓	√		✓	✓											
Yamhill CCO Physical Health	77943	837	✓	✓					/ \	/								
Yerington Paiute Tribe	51350	837	✓	✓					/ \	/								
YesCare	43160	837	\checkmark	√														
YourCare Health Plan	15003	835	✓	✓		\checkmark	\checkmark											
YourCare Health Plan	15003	837	✓	✓														
YouthCare	68069	837	✓	√					/ \	/	Т	✓	√					
YouthCare Healthchoice Illinois	MHPIL	837	✓	✓					/ \	/		√	√					For DOS on or after 1/1/21
Zenith Administrators (MN) Dental	R7001	835			✓			✓										
Zenith Administrators (MN) Dental	R7001	837			✓					`	/			√				
Zing Choice IL (HMO)	83248	835	✓	✓		✓	✓											
Zing Choice IL (HMO)	83248	837	$\sqrt{}$	\checkmark														