CLAIMS & ERA PAYER LIST
November 06, 2026

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	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
052 Franciscan HMND	FRN01	835	✓	✓														ERA's are automatically returned upon electronic claim submission.
052 Franciscan HMND	FRN01	837	✓	✓														
1199 National Benefit Fund	13162	835	✓	✓		✓	✓											
1199 National Benefit Fund	13162	837	✓	✓														
1st Medical Network - Atlanta GA	29076	837	✓	✓					✓	✓		✓	✓					
1st MN--Atlanta GA	29076	837	✓	✓					✓	✓		✓	✓					
21st Century Health and Benefits	59069	837	✓	✓														
374 Franciscan CNPT	FRN02	835	✓	✓														ERA's are automatically returned upon electronic claim submission.
374 Franciscan CNPT	FRN02	837	✓	✓														
6 Degrees Health	20446	837	✓	✓														
90 Degree Benefits	72091	835	✓	✓		✓	✓											
90 Degree Benefits	72091	837	✓	✓														
A & I Benefit Plan Administrators	93044	837	✓	✓														
A-G Administrators LLC	11370	837	✓	✓					✓	✓								
A.G.I.A. Inc.	95241	837	✓															
AAG Benefit Plan Administrators Inc.	75240	837	✓	✓					✓	✓								
AAG-American Administravie Group	37283	837	✓	✓					✓	✓								
AARP - UnitedHealthcare Insurance Company	36273	835	✓	✓		✓	✓											
AARP - UnitedHealthcare Insurance Company	36273	837	✓	✓					✓	✓								
AARP Dental Insurance Plan	AARP1	835			✓			✓										
AARP Dental Insurance Plan	AARP1	837			✓						✓							
AARP MedicareComplete through UnitedHealthcare/AARP MedicareComplete	87726	837	✓	✓					✓	✓		✓	✓					
AblePay Health	ABLPY	835	✓															

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
AblePay Health	ABLPY	837	✓	✓														
Abrazo Advantage Health Plan	03443	837	✓	✓					✓	✓								
Absolute Total Care	68069	837	✓	✓					✓	✓		✓	✓					
Accelerated Claims Inc.	99999-0748	837	✓	✓					✓	✓								
Access Administrators	AHS01	837	✓	✓														
Access Community Health Network	ACCOM	835	✓	✓		✓	✓											
Access Community Health Network	ACCOM	837	✓	✓														
Access Integra	INTEG	835		✓			✓											
Access Integra	INTEG	837		✓														
Access IPA	ACC01	835	✓	✓														
Access IPA	ACC01	837	✓	✓														
Access Primary Care Medical Group (APCMG)	NMM01	837	✓	✓														
Access to Care Health Plan/Sendero	ACHP1	835	✓	✓		✓	✓											
Access to Care Health Plan/Sendero	ACHP1	837	✓	✓					✓	✓								
Acclaim IPA	IP095	837	✓	✓					✓	✓								
Accountable Care management Group LLC (ACMG)	ACMG1	837	✓	✓														
Accountable Care Management Group, LLC	45328	837	✓	✓	✓													
Accountable Healthcare IPA (AHCIPA)	AHIPA	837	✓	✓					✓	✓								
Ace Property & Casualty Ins - MedSup (ERA Only)	IAS21	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
ACMG	37118	837	✓	✓														
ACS Benefit Services Inc.	72467	835	✓	✓		✓	✓											
ACS Benefit Services Inc.	72467	837	✓	✓														
ACTIN Care Groups	24585	837	✓	✓					✓	✓								Also known as Clifton Health Systems
Activa Benefit Services LLC	38254	837	✓	✓														
Actuarial Management Resources	56693	835	✓	✓		✓	✓											
Administration Systems Research Corporation	38265	837	✓	✓														ERA Payer Code TLU02
Administration Systems Research Corporation	TLU02	835	✓	✓		✓	✓											
Administrative Concepts Inc.	22384	835	✓	✓		✓	✓											
Administrative Concepts Inc.	22384	837	✓	✓														
Administrative Services Inc.	59141	837	✓	✓														
AdminOne, LLC	87871	837	✓	✓														
ADVANCED DATA SOLUTIONS	58202	837	✓	✓														
Advanced Medical Doctors of California	AMDC1	837	✓	✓														
Advanced Medical Management	AMM03	837	✓	✓														
Advanced Physicians IPA	NMM01	837	✓	✓														

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			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Advantage by Bridgeway Health Solutions	68069	837	✓	✓					✓	✓		✓	✓					
Advantage by Buckeye Community Health Plan	68069	837	✓	✓					✓	✓		✓	✓					
Advantage by Managed Health Services	68069	837	✓	✓					✓	✓		✓	✓					
Advantage by Peach State	68069	837	✓	✓					✓	✓		✓	✓					
Advantage by Sunshine State	68069	837	✓	✓					✓	✓		✓	✓					
Advantage by Superior HealthPlan	68069	837	✓	✓					✓	✓		✓	✓					
Advantage Care IPA	ACIPA	837	✓	✓					✓	✓								
Advantage Medical Group	NMM01	837	✓	✓														
Advantek Benefit Administrators	83077	835	✓	✓		✓	✓											
Advantek Benefit Administrators	83077	837	✓	✓														
ADVANTICA BENEFITS	59374	835	✓	✓		✓	✓											
ADVANTICA BENEFITS	59374	837	✓	✓					✓	✓								
Advanzeon Solutions	59314	837	✓	✓														
Adventist Hanford	MPM36	837	✓	✓					✓	✓								
Adventist Health Care Network	MPM51	835	✓	✓		✓	✓											
Adventist Health Care Network	MPM51	837	✓	✓					✓	✓								
Adventist Health Plan (AHP)	MPM37	837	✓	✓					✓	✓								
Adventist Health System West - Roseville CA	95340	835	✓	✓		✓	✓											
Adventist Health System West - Roseville CA	95340	837	✓	✓														
Adventist White Memorial - Crown City Medical Group	MPM33	837	✓	✓					✓	✓								
Adventist White Memorial - Southland Gabriel Valley	MPM34	837	✓	✓					✓	✓								
Advisory Health Administrators	CB159	837	✓	✓														
Advisory Health Administrators (formerly Kentucky Health Administrators)	82357	835	✓	✓	✓	✓	✓	✓										
Advisory Health Administrators (formerly Kentucky Health Administrators)	82357	837	✓	✓	✓													
Advocate Medical Group - AMG (Legacy AHC)	36320	835	✓	✓		✓	✓											
Advocate Medical Group - AMG (Legacy AHC)	36320	837	✓	✓														
Advocate Physician Partners	65093	835	✓	✓		✓	✓											
Advocate Physician Partners	65093	837	✓	✓														
Aegis Administrative Services	CB637	837	✓	✓														
Aetna	60054	835	✓	✓	✓	✓	✓	✓										
Aetna	60054	837	✓	✓	✓				✓	✓		✓	✓	✓				
Aetna (Professional Encounter Claims - Not BULK)	60054	837		✓						✓		✓	✓	✓				
Aetna Affordable Health Choices (SM) - SRC	57604	835	✓	✓		✓	✓											
Aetna Affordable Health Choices (SM) - SRC	57604	837	✓	✓					✓	✓								
Aetna Affordable Health Choices (SM) - SRC	60054	837	✓	✓					✓	✓		✓	✓	✓				

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			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Aetna Better Health of California	128CA	835	✓	✓		✓	✓											
Aetna Better Health of California	128CA	837	✓	✓														
Aetna Better Health of Florida	128FL	835	✓	✓		✓	✓											
Aetna Better Health of Florida	128FL	837	✓	✓														
Aetna Better Health of Illinois	68024	835	✓	✓		✓	✓											
Aetna Better Health of Illinois	68024	837	✓	✓														
Aetna Better Health of Kansas	128KS	835	✓	✓		✓	✓											
Aetna Better Health of Kansas	128KS	837	✓	✓					✓	✓								
Aetna Better Health of Kentucky	128KY	835	✓	✓		✓	✓											
Aetna Better Health of Kentucky	128KY	837	✓	✓					✓	✓								
Aetna Better Health of Kentucky (SKYGEN TPA)	ABHK1	837			✓						✓			✓				For claims with DOS on or after 10/01/2025, use payer id 86098 for claims prior to 10/01/2025.
Aetna Better Health of Louisiana	128LA	835	✓	✓		✓	✓											
Aetna Better Health of Louisiana	128LA	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 New Jersey	46320	835	✓	✓	✓	✓	✓	✓										
Aetna Better Health of New Jersey	46320	837	✓	✓	✓				✓	✓								
Aetna Better Health of New York	34734	835	✓	✓		✓	✓											
Aetna Better Health of New York	34734	837	✓	✓														
Aetna Better Health of Ohio	50023	835	✓	✓		✓	✓											
Aetna Better Health of Ohio	50023	837	✓	✓					✓	✓								
Aetna Better Health of Oklahoma	128OK	835	✓	✓		✓	✓											
Aetna Better Health of Oklahoma	128OK	837	✓	✓					✓	✓								
Aetna Better Health of Pennsylvania	23228	835	✓	✓		✓	✓											
Aetna Better Health of Pennsylvania	23228	837	✓	✓					✓	✓								
Aetna Better Health of Texas (Medicaid & CHIP)	38692	835	✓	✓		✓	✓											
Aetna Better Health of Texas (Medicaid & CHIP)	38692	837	✓	✓					✓	✓								
Aetna Better Health of Virginia	128VA	835	✓	✓		✓	✓											
Aetna Better Health of Virginia	128VA	837	✓	✓					✓	✓								
Aetna Better Health of West Virginia	128WV	835	✓	✓		✓	✓											
Aetna Better Health of West Virginia	128WV	837	✓	✓					✓	✓								
Aetna Better Health Premier Plan (JVHL)	M5JVH	835	✓	✓		✓	✓											

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			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Aetna Better Health Premier Plan (JVHL)	M5JVH	837	✓	✓		✓	✓		✓	✓								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			✓									✓				
Aetna Medicare	60054	837	✓	✓					✓	✓		✓	✓	✓				
Aetna OhioRISE	45221	837	✓	✓														
Aetna OhioRISE	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Aetna Senior Supplement/American Continental	62118	835	✓	✓		✓	✓											
Aetna U.S. Healthcare (JVHL)	J1JVH	835	✓	✓		✓	✓											
Aetna U.S. Healthcare (JVHL)	J1JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Affiliated Doctor's of Orange County	ADOCS	837	✓	✓														
Affiliated Partners IPA	POP09	837		✓														
Affiliated Physicians IPA	POP06	837		✓														
Affinity by Molina Healthcare	16146	837	✓	✓					✓	✓								
Affinity Health Plan	13334	835	✓	✓		✓	✓											
Affinity Health Plan	13334	837	✓	✓														
AFFINITY MEDICAL GROUP	46594	837	✓	✓														
AFLAC (ERA Only)	52080	835	✓	✓		✓	✓											
Aflac Benefits Solutions, Inc	ABS01	837		✓	✓													
AFTRA Health Fund (claims with DOS on or after 1/1/2015)	62308	837	✓	✓					✓	✓								
AGA	37280	837	✓	✓														
Agate Resources Inc. (LIPA)	20048	837		✓														
Agency Services Inc	64158	837	✓	✓														
AgeRight Advantage	ARA01	835	✓	✓		✓	✓											
AgeRight Advantage	ARA01	837	✓	✓														As of January 23, 2024, the payer does not offer an electronic remittance.
Agewell New York	AWNY6	837	✓	✓														
AHP Provider Network	MPM38	837	✓	✓														
AHPO (Cleveland OH)	31138	837	✓	✓														
AHS Plans	91026	837	✓	✓	✓				✓	✓								
AIDS Healthcare Foundation	95422	837	✓	✓														
AIDS Healthcare Foundation RW	95433	837	✓	✓														
Aither Health	64884	835	✓	✓		✓	✓											
Aither Health	64884	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
AKM Medical Group	CAPMN	837	✓	✓					✓	✓								
Alabama Medicaid	12K01	835	✓			✓												
Alabama Medicaid	12K01	837	✓						✓									
Alabama Medicaid	SKAL0	835		✓	✓		✓	✓										
Alabama Medicaid	SKAL0	837		✓	✓					✓	✓							
Alabama Medicare	10111	835	✓			✓												
Alabama Medicare	10112	835		✓			✓											
Alabama Medicare	10112	837		✓			✓			✓								
Alabama Medicare	12M25	837	✓			✓			✓									
Alameda Alliance for Health	95327	835	✓	✓		✓	✓											
Alameda Alliance for Health	95327	837	✓	✓		✓	✓											
Alamitos IPA	AIPAZ	837	✓	✓					✓	✓								
Alamitos IPA	CAPMN	837	✓	✓					✓	✓								
Alan Sturm & Associates Dental	R7003	837			✓						✓			✓				
Alaska Carpenters Trust	91136	837		✓														
Alaska Children's Services Inc.	91136	837	✓	✓														
Alaska Electrical Trust Funds	60054	837	✓	✓					✓	✓		✓	✓	✓				
Alaska Laborers Construction Industry Trust	91136	837	✓	✓														
Alaska Medicaid	77200	835	✓	✓		✓	✓											
Alaska Medicaid	77200	837	✓	✓		✓	✓		✓	✓								
Alaska Medicare	02001	835	✓			✓												
Alaska Medicare	02001	837	✓			✓			✓						✓			Payer requires the provider's NPI(s) and Provider (submitter) ID(s) be set up in the provider table at the clearinghouse prior to claim submission.
Alaska Medicare	SMAK0	835		✓			✓											
Alaska Medicare	SMAK0	837		✓			✓			✓						✓		
Alaska Pipe Trades Local 375	91136	837	✓	✓														
Alaska United Food & Commercial Workers Health & Welfare Trust	91136	837	✓	✓														
Alexian Brothers Community Services of TN	44423	837	✓	✓														
ALICARE	13550	837	✓	✓														
Align Senior Care (CA)	ASCA1	835	✓	✓		✓	✓											
Align Senior Care (CA)	ASCA1	837	✓	✓														
Align Senior Care (FL)	ASFL1	835	✓	✓		✓	✓											
Align Senior Care (FL)	ASFL1	837	✓	✓														
Align Senior Care (MI)	ASMI1	835	✓	✓		✓	✓											
Align Senior Care (MI)	ASMI1	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Align Senior Care (VA)	ASVA1	835	✓	✓		✓	✓											
Align Senior Care (VA)	ASVA1	837	✓	✓														
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	✓	✓		✓	✓											
Alignment Health Plan	CCHPC	837	✓	✓														
Alignment Healthcare	AHCA1	835	✓	✓		✓	✓											
Alignment Healthcare	AHCA1	837	✓	✓														
Alivi health	ALIVI	837		✓														
All Savers/UHC	81400	835	✓	✓		✓	✓											
All Savers/UHC	81400	837	✓	✓					✓	✓								
All United Medical group	AUMG1	835	✓	✓														
All United Medical group	AUMG1	837	✓	✓														
AllCare Advantage	MRCHP	835	✓	✓		✓	✓											
AllCare Advantage	MRCHP	837	✓	✓														Former payer ID 26160
Allcare Health CCO	MRIPA	835	✓	✓		✓	✓											
Allcare Health CCO	MRIPA	837	✓	✓														
AllCare IPA	AC101	835		✓			✓											
AllCare IPA	AC101	837		✓														
Allegiance Benefit Plan Management Inc.	81040	835	✓	✓	✓	✓	✓	✓										
Allegiance Benefit Plan Management Inc.	81040	837	✓	✓	✓						✓							
Alliance Behavioral Health	23071	835	✓	✓		✓	✓											
Alliance Behavioral Health	23071	837	✓	✓		✓	✓		✓	✓								
Alliance Coal Health Plan	93658	835	✓	✓		✓	✓											
Alliance Coal Health Plan	93658	837	✓	✓														
Alliance Physicians High Desert	22417	835	✓	✓		✓	✓											EFT enrollment is required in order to obtain ERA's
Alliance Physicians High Desert	22417	837	✓	✓														
Alliance Physicians Medical Group	APP01	837	✓	✓					✓	✓								
Alliant Health Plans of Georgia	58234	835	✓	✓		✓	✓											
Alliant Health Plans of Georgia	58234	837	✓	✓														
Allianz Global Assistance	50749	837	✓	✓														
Allied Benefit Systems	37308	835	✓	✓		✓	✓											
Allied Benefit Systems	37308	837	✓	✓	✓													837D Only: Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Allied Healthcare	ALLCA	835	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Allied Healthcare	ALLCA	837	✓	✓														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	✓	✓					✓	✓								
Allwell of Arkansas Health & Wellness	68069	837	✓	✓					✓	✓		✓	✓					
Aloha Care	99030	835	✓	✓		✓	✓											
Aloha Care	99030	837	✓	✓		✓	✓											
Alpha Care Medical Group	NMM04	835	✓	✓		✓	✓											
Alpha Care Medical Group	NMM04	837	✓	✓														
Alpha MSO	ALPHA	837	✓	✓														
Alta Bates Medical Group	A0701	837	✓	✓														
AltaMed	ALTAM	835	✓	✓		✓	✓											
AltaMed	ALTAM	837	✓	✓					✓	✓								
Alterwood Advantage	RP016	837	✓	✓														
Altrua HealthShare	12175	837	✓	✓														
Altus Dental	50503	837			✓									✓				
Alvarado IPA	SYMED	837	✓	✓														
Always Care Benefits	STR01	837			✓						✓			✓				
Always Care Vision	ATR01	837		✓														
AMA Insurance Agency	AMAIA	835	✓			✓												
AMA Insurance Agency	AMAIA	837	✓															
AMA Insurance Agency	TH071	835		✓			✓											
Amada Health	AMDA1	835	✓	✓		✓	✓											
Amada Health	AMDA1	837	✓	✓					✓	✓								
Amada Health Alameda	AMDA3	835	✓	✓														
Amada Health Alameda	AMDA3	837	✓	✓														
Amada Health South	AMDA2	835	✓	✓														
Amada Health South	AMDA2	837	✓	✓					✓	✓								
Amalgamated Life	13550	835	✓	✓		✓	✓											
Amalgamated Life	13550	837	✓	✓														
AMBETTER OF ARKANSAS	68069	837	✓	✓					✓	✓		✓	✓					
Ambetter of Illinois	68069	837	✓	✓					✓	✓		✓	✓					
AMCO	62176	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Ameri-West Health Associates	PROSP	837	✓	✓					✓	✓								
AmeriBen Solutions Inc.	75137	835	✓	✓		✓	✓											
AmeriBen Solutions Inc.	75137	837	✓	✓														
America's Choice Health Plans	20029	835	✓	✓		✓	✓											
America's Choice Health Plans	20029	837	✓	✓														
America's TPA	41178	837	✓	✓					✓	✓								
Americaid Community Care (New Jersey)	27516	837	✓	✓					✓	✓								
American Administrative Group	75240	837	✓	✓					✓	✓								
American Behavioral	63103	835	✓	✓		✓	✓											
American Behavioral	63103	837	✓	✓														
American Benefit Plan Administrators	95170	835	✓	✓		✓	✓											
American Family Insurance	12T31	837	✓															
American Family Insurance	TH095	837	✓	✓														
American Family Medicare Sup and PPO Policies Administered by Am Rep	56071	837	✓	✓														
American Fidelity Assurance Company	60801	837	✓	✓														
American General	62030	837	✓	✓														
American Health Advantage of Florida	31150	837	✓	✓														
American Health Advantage of Indiana	RP115	837	✓	✓														
American Health Advantage of Louisiana	83247	835	✓	✓		✓	✓											
American Health Advantage of Louisiana	83247	837	✓	✓					✓	✓								
American Health Advantage of Mississippi	31135	835	✓	✓		✓	✓											
American Health Advantage of Mississippi	31135	837	✓	✓					✓	✓								
American Health Advantage of Oklahoma	31125	835	✓	✓		✓	✓											
American Health Advantage of Oklahoma	31125	837	✓	✓					✓	✓								
American Health Advantage of Pennsylvania	PA901	837	✓	✓														
American Health Advantage of Tennessee	31130	837	✓	✓														
American Health Advantage of Texas	31155	835	✓	✓		✓	✓											
American Health Advantage of Texas	31155	837	✓	✓					✓	✓								
AMERICAN HEALTH ADVANTAGE UTAH	31145	835	✓	✓		✓	✓											
AMERICAN HEALTH ADVANTAGE UTAH	31145	837	✓	✓					✓	✓								
American Healthcare Alliance	01066	835	✓	✓		✓	✓											
American Healthcare Alliance	01066	837	✓	✓					✓	✓								
American Heritage	77083	837		✓														
American Income Life Insurance Company (ERA Only)	60577	835	✓	✓		✓	✓											
American Insurance Administrators (AIA) (ERA Only)	26119	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
American Insurance Co. of Texas	81949	837	✓	✓														
American National Ins. Co. (ANICO)	74048	835	✓	✓		✓	✓											
American National Ins. Co. (ANICO)	74048	837	✓	✓														
American National Life Insurance Company of Texas (ERA Only)	IAS23	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
American Postal Workers Union Health Plan	44444	835	✓	✓		✓	✓											
American Postal Workers Union Health Plan	44444	837	✓	✓														
American Progressive Life and Health Insurance Company	48055	837	✓	✓														
American Republic Insurance	42011	835	✓	✓		✓	✓											
American Republic Insurance	42011	837	✓	✓														
American Sentinel Co.	17965	837		✓						✓								
American Specialty Health Plans	43146	835		✓			✓											
American Specialty Health Plans	43146	837		✓														
American Specialty Health Plans	ASH01	835		✓			✓											
American Specialty Health Plans	ASHP1	837		✓														
AMERICAN THERAPY ADMINISTRATORS	ATHAL	837	✓	✓					✓	✓								
American Trust Administrators Inc.	56195	837	✓	✓														
American West Health Care Solution	AWHCS	837	✓	✓														
Americas Health Plan	AHP01	835	✓	✓														
Americas Health Plan	AHP01	837	✓	✓					✓	✓								
Americhoice Maryland and Washington (ERA Only)	04567	835	✓	✓		✓	✓											
Americo (ERA Only)	IAS01	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Amerigroup Community Care - Iowa/Maryland	26375	835	✓	✓		✓	✓											
Amerigroup Florida	27519	837	✓	✓					✓	✓								
Amerigroup Georgia	26375	835	✓	✓		✓	✓											
Amerigroup Illinois	27518	837	✓	✓					✓	✓								
Amerigroup/Wellpoint Arizona	WLPDEN	835			✓			✓										
Amerigroup/Wellpoint Arizona	WLPNT	835	✓	✓		✓	✓											
Amerigroup/Wellpoint Arizona	WLPNT	837	✓	✓	✓				✓	✓		✓	✓					
Amerigroup/Wellpoint Iowa	WLPNT	837	✓	✓					✓	✓		✓	✓					
Amerigroup/Wellpoint New Jersey	WLPNT	837	✓	✓					✓	✓		✓	✓					
Amerigroup/Wellpoint Tennessee	WLPNT	837	✓	✓					✓	✓		✓	✓					
Amerigroup/Wellpoint Texas	WLPNT	837	✓	✓					✓	✓		✓	✓					
Amerigroup/Wellpoint Washington	WLPNT	837	✓	✓					✓	✓		✓	✓					
AmeriHealth Administrators	54763	835	✓	✓		✓	✓											
AmeriHealth Administrators	54763	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
AmeriHealth Caritas Delaware	77799	835	✓	✓		✓	✓											
AmeriHealth Caritas Delaware	77799	837	✓	✓					✓	✓		✓	✓					
AmeriHealth Caritas Florida	77003	835	✓	✓		✓	✓											Formerly Prestige Health Choice
AmeriHealth Caritas Florida	77003	837	✓	✓														
Amerihealth Caritas Louisiana (LACare)	27357	835	✓	✓		✓	✓											
Amerihealth Caritas Louisiana (LACare)	27357	837	✓	✓					✓	✓								
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	✓	✓		✓	✓											
AmeriHealth Caritas Next - A Product of AmeriHealth Caritas VIP Next, Inc.	47073	837	✓	✓					✓	✓								
AmeriHealth Caritas Next A Product of AmeriHealth Caritas Florida, Inc.	45408	835	✓	✓		✓	✓											
AmeriHealth Caritas Next A Product of AmeriHealth Caritas Florida, Inc.	45408	837	✓	✓														
AmeriHealth Caritas Next North Carolina	83148	835	✓	✓		✓	✓											
AmeriHealth Caritas Next North Carolina	83148	837	✓	✓														
AmeriHealth Caritas Next, A Product of AmeriHealth Caritas Louisiana	75066	835	✓	✓		✓	✓											
AmeriHealth Caritas Next, A Product of AmeriHealth Caritas Louisiana	75066	837	✓	✓					✓	✓								
AmeriHealth Caritas North Carolina	81671	835	✓	✓		✓	✓											
AmeriHealth Caritas North Carolina	81671	837	✓	✓														
AmeriHealth Caritas of Ohio Medicaid MCE	35374	835	✓	✓		✓	✓											
AmeriHealth Caritas of Ohio Medicaid MCE	35374	837	✓	✓					✓	✓								
AmeriHealth Caritas Ohio	84243	837	✓	✓					✓	✓								
AmeriHealth Caritas Ohio	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
AmeriHealth Caritas Ohio Transportation	42435	837	✓	✓														
AmeriHealth Caritas Ohio Transportation	SKOH0	835	✓	✓		✓	✓											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	✓	✓		✓	✓											
AmeriHealth Caritas VIP Care	77062	837	✓	✓														
AmeriHealth Caritas VIP Care - Delaware DSNP	87406	835	✓	✓		✓	✓											
AmeriHealth Caritas VIP Care - Delaware DSNP	87406	837	✓	✓														
AmeriHealth Caritas VIP Care - Florida DSNP	88232	835	✓	✓		✓	✓											
AmeriHealth Caritas VIP Care - Florida DSNP	88232	837	✓	✓														
AmeriHealth Caritas VIP Care - Michigan HIDE SNP	90689	835	✓	✓		✓	✓											
AmeriHealth Caritas VIP Care - Michigan HIDE SNP	90689	837	✓	✓														
Amerihealth Caritas VIP Care Plus (JVHL)	MDJVH	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Amerihealth Caritas VIP Care Plus (JVHL)	MDJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
AmeriHealth Caritus VIP Care Plus (Michigan)	77013	835	✓	✓		✓	✓											
AmeriHealth Caritus VIP Care Plus (Michigan)	77013	837	✓	✓														
AmeriHealth Delaware (Non-HMO)	93688	837	✓	✓					✓	✓								ERA Payer Code SX055
AmeriHealth Delaware (Non-HMO)	SX055	835	✓	✓		✓	✓											
Amerihealth District of Columbia	77002	835	✓	✓		✓	✓											
Amerihealth District of Columbia	77002	837	✓	✓														
AmeriHealth New Jersey (Non-HMO)	60061	835	✓	✓		✓	✓											
AmeriHealth New Jersey (Non-HMO)	60061	837	✓	✓					✓	✓								
Amerihealth NJ/DE HMO	95044	835	✓	✓		✓	✓											
Amerihealth NJ/DE HMO	95044	837	✓	✓					✓	✓								
AmeriHealth NorthEast	77001	835	✓	✓		✓	✓											
AmeriHealth NorthEast	77001	837	✓	✓					✓	✓								
Ameritas Dental	47009	835			✓			✓										
Ameritas Dental	47009	837			✓						✓			✓				
Ameritas Life Insurance Corp of New York	72630	835			✓			✓										
Ameritas Life Insurance Corp of New York	72630	837			✓						✓							
AmFirst Insurance Company (payer only accepts Secondary claims)	64090	835	✓	✓		✓	✓											
AmFirst Insurance Company (payer only accepts Secondary claims)	64090	837	✓	✓														
AMG IPA Medicare Advantage	AMIPA	835	✓	✓		✓	✓											
AMG IPA Medicare Advantage	AMIPA	837	✓	✓														
Amica Mutual Insurance	12287	835	✓	✓		✓	✓											
Amica Mutual Insurance	12287	837	✓	✓														
Amida Care	24818	837	✓	✓														
Amida Care Medicare	79966	835	✓	✓		✓	✓											
Amida Care Medicare	79966	837	✓	✓														
Amplifon	72947	835	✓	✓		✓	✓											
Anaheim Memorial IPA	IP095	837	✓	✓					✓	✓								
Anchor Benefit Consulting Inc.	53085	837	✓	✓					✓	✓								
Ancillary Care Services (ERA Only)	A2004	835	✓	✓		✓	✓											ERA Only
Angel Medical Group	SCPR1	837	✓	✓														
Angeles IPA	HSM01	837	✓	✓														
Angle Health	39856	835	✓	✓		✓	✓											
Angle Health	39856	837	✓	✓														
Antelope Valley Medical Associates	SMG01	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Anthem BCBS Dental	84015	835			✓			✓										
Anthem BCBS Dental	84105	837			✓													
Anthem BCBS Maine Dental	AD180	835			✓			✓										
Anthem BCBS Maine Dental	AD180	837			✓													
Anthem Blue Cross and Blue Shield of New York	00303	837	✓						✓			✓						
Anthem Blue Cross and Blue Shield of New York	00803	835	✓	✓		✓	✓											ERA Payer Code 00803.
Anthem Blue Cross and Blue Shield of New York	00803	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Colorado	00050	835	✓			✓												
Anthem Blue Cross Blue Shield of Colorado	00550	835		✓			✓											
Anthem Blue Cross Blue Shield of Colorado	12B03	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Colorado	AD050	835			✓			✓										
Anthem Blue Cross Blue Shield of Colorado	AD050	837			✓													
Anthem Blue Cross Blue Shield of Colorado	SB550	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Connecticut	00060	835	✓	✓		✓	✓											
Anthem Blue Cross Blue Shield of Connecticut	12B04	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Connecticut	SB560	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Georgia	00101	835	✓			✓												
Anthem Blue Cross Blue Shield of Georgia	00601	835		✓			✓											
Anthem Blue Cross Blue Shield of Georgia	12015	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Georgia	SB600	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Indiana	00630	835	✓	✓		✓	✓											
Anthem Blue Cross Blue Shield of Indiana	12B09	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Indiana	SB630	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Kentucky	00160	835	✓			✓												
Anthem Blue Cross Blue Shield of Kentucky	00660	835		✓			✓											
Anthem Blue Cross Blue Shield of Kentucky	12B11	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Kentucky	SB660	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Maine	00180	835	✓			✓												
Anthem Blue Cross Blue Shield of Maine	00680	835		✓			✓											
Anthem Blue Cross Blue Shield of Maine	12B13	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Maine	SB680	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Missouri	00241	835	✓			✓												
Anthem Blue Cross Blue Shield of Missouri	00741	835		✓			✓											
Anthem Blue Cross Blue Shield of Missouri	12B65	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Missouri	SB741	837		✓						✓			✓					

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Anthem Blue Cross Blue Shield of Nevada	00265	835	✓			✓												
Anthem Blue Cross Blue Shield of Nevada	00765	835		✓			✓											
Anthem Blue Cross Blue Shield of Nevada	12B20	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Nevada	SB765	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of New Hampshire	00270	835	✓			✓												
Anthem Blue Cross Blue Shield of New Hampshire	00770	835		✓			✓											
Anthem Blue Cross Blue Shield of New Hampshire	12B21	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of New Hampshire	SB770	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Ohio	00332	835	✓	✓		✓	✓											
Anthem Blue Cross Blue Shield of Ohio	12B24	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Ohio	SB338	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Ohio Dental	AD332	835			✓			✓										
Anthem Blue Cross Blue Shield of Ohio Dental	AD332	837			✓													
Anthem Blue Cross Blue Shield of Virginia	00423	835	✓	✓		✓	✓											
Anthem Blue Cross Blue Shield of Virginia	12002	837	✓						✓			✓						
Anthem Blue Cross Blue Shield of Virginia	SB923	837		✓						✓			✓					
Anthem Blue Cross Blue Shield of Wisconsin	00450	835	✓			✓												
Anthem Blue Cross Blue Shield of Wisconsin	00950	835		✓			✓											
Anthem Blue Cross Blue Shield of Wisconsin	12B29	837	✓						✓			✓						ERA Payer Code 00450
Anthem Blue Cross Blue Shield of Wisconsin	AD450	835			✓			✓										
Anthem Blue Cross Blue Shield of Wisconsin	AD450	837			✓													
Anthem Blue Cross Blue Shield of Wisconsin	SB950	837		✓						✓			✓					ERA Payer Code 00950
Anthem Maine Health	00958	835	✓	✓		✓	✓											
Anthem Maine Health	00958	837	✓	✓					✓	✓		✓	✓					
Anthem Ohio Medicaid	29370	837	✓	✓					✓	✓								
Anthem Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Anthem Ohio Medicaid Vision	2937V	837	✓	✓					✓	✓								
Anthem Ohio Medicaid Vision	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Antidote Health Plan	IHS05	837	✓	✓														
Apex Benefit Services	34196	835	✓	✓		✓	✓											
Apex Benefit Services	34196	837	✓	✓														
ApolloCare Partners of Nevada	NMM08	837	✓	✓					✓	✓								
AppleCare Medical Management	APP01	835	✓	✓		✓	✓											
AppleCare Medical Management	APP01	837	✓	✓					✓	✓								
AppleCare Medical Management	APP01	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Apricus	00318	835	✓	✓		✓	✓											
ARC Administrators	CXARC	837	✓	✓														
Arcadia Healthcare Solutions - IPG	11081	835	✓	✓		✓	✓											
Arcadia Healthcare Solutions - IPG	11081	837	✓	✓														
Arcadia Healthcare Solutions - NPA	36364	835	✓	✓		✓	✓											
Arcadia Healthcare Solutions - NPA	36364	837	✓	✓														
Arcadia Methodist IPA	NMM01	837	✓	✓														
Arch Health Partners	ARCH1	835	✓	✓														
Arch Health Partners	ARCH1	837	✓	✓														
Archcare Senior Life	R3495	835	✓	✓	✓	✓	✓	✓										
Archcare Senior Life	R3495	837	✓	✓	✓				✓	✓	✓							
Argus Dental Plans	ARG01	835			✓			✓										
Argus Dental Plans	ARG01	837			✓													
Argus Vision and Dental Plans, Inc.	ARGUS	837	✓	✓														
ARISE (Now WPS Health Insurance)	39185	835	✓	✓		✓	✓											
ARISE (Now WPS Health Insurance)	39185	837	✓	✓														
Arizona Medicaid	AZMCD	837	✓	✓					✓	✓								ERA Payer Code MCDAZ
Arizona Medicaid	MCDAZ	835	✓	✓		✓	✓											
Arizona Medicare	SMAZ0	835		✓			✓											
Arizona Medicare	SMAZ0	837		✓			✓			✓						✓		
Arizona Medicare Part A \ Jurisdiction JF	03101	835	✓			✓												
Arizona Medicare Part A \ Jurisdiction JF	03101	837	✓			✓									✓			
Arizona Priority Care Plus	27154	837	✓	✓														
Arizona Priority Care Plus	AZPCP	835	✓	✓														Payer returns ERAs automatically once electronic claims submission begins.
Arkansas Best Corporation - Choice Benefits	62308	837	✓	✓					✓	✓								
Arkansas Medicaid	12023	835	✓			✓												
Arkansas Medicaid	12023	837	✓						✓									
Arkansas Medicaid	SKAR0	835		✓			✓											
Arkansas Medicaid	SKAR0	837		✓						✓								
Arkansas Medicare	07101	835	✓			✓												
Arkansas Medicare	07101	837	✓			✓			✓									
Arkansas Medicare	SMAR0	835		✓			✓											
Arkansas Medicare	SMAR0	837		✓			✓			✓								
Arkansas Superior Select	61184	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Arkansas Superior Select	61184	837	✓	✓														
ARLO	ARLO1	835	✓	✓		✓	✓											
ARLO	ARLO1	837	✓	✓														
ARM, Group	88035	837	✓	✓					✓	✓								
ARM, Ltd	63240	835	✓	✓		✓	✓											
ARM, Ltd	63240	837	✓	✓														
Arroyo Vista Family Health Center	NMM01	837	✓	✓														
Arta Health Network	WMM01	837		✓						✓								
ASAGEHA	06603	837	✓	✓														
Ascension Complete	68069	837	✓	✓					✓	✓		✓	✓					
Ascension Living Alexian PACE	R3471	835	✓	✓		✓	✓											
Ascension Living Alexian PACE	R3471	837	✓	✓														
Ascension Living Pace Michigan	R3458	837	✓	✓					✓	✓								
Ascension Living St. Vincent PACE	R3459	837	✓	✓														
Asian American Medical Group	AAMG1	835	✓	✓		✓	✓											
Asian American Medical Group	AAMG1	837	✓	✓														
Asian Community Medical Group, Inc.	HSM01	837	✓	✓														
ASONET	CX076	837			✓						✓							
Aspen Medical Associates	16180	837	✓	✓					✓	✓								
Aspire Health Plan	46156	835	✓	✓		✓	✓											
Aspire Health Plan	46156	837	✓	✓					✓	✓								
Aspirion	99999-0ASU	837	✓	✓														
Aspirus Medicare Advantage	36483	835	✓	✓														
Aspirus Medicare Advantage	36483	837	✓	✓														
ASRM LLC	ASRM1	837	✓	✓														
ASRM LLC	TLU02	835	✓	✓		✓	✓											
Asserta Health	IHS14	837	✓	✓					✓	✓								
Associated Dignity Medical Group Professional Corp	HSM01	837	✓	✓														
Associated Hispanic Physicians	AHPSC	837	✓	✓					✓	✓								
Associated Hispanic Physicians of Southern CA	MPM44	837	✓	✓					✓	✓								
Associated Hispanic Physicians of Southern California IPA	AHPSC	837	✓	✓					✓	✓								
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	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Assurecare, Inc	88035	837	✓	✓					✓	✓								
Assured Benefits Administrators	74240	835	✓	✓		✓	✓											
Assured Benefits Administrators	74240	837	✓	✓														
Astiva Health	84320	837	✓	✓														
Astrana Care	NMM12	837	✓	✓														
Astrana Care TX IPA	NMM13	837	✓	✓														
Astrana Health Management	NMM01	835	✓	✓		✓	✓											
Astrana Health Management	NMM01	837	✓	✓														
Asuris NW Health	93221	835	✓	✓		✓	✓											
Asuris NW Health	93221	837	✓	✓					✓	✓								
Athens Area Health Plan Select	95691	837	✓	✓														
Atlantic Medical Insurance	22285	837	✓	✓														
Atlas Life Insurance Company	90956	837		✓														
ATRIO Health Plans	ATRIO	835	✓	✓		✓	✓											
ATRIO Health Plans	ATRIO	837	✓	✓														
Aultcare	341488123	835	✓	✓		✓	✓											
Aultcare	341488123	837	✓	✓														
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	✓	✓		✓	✓											
Auxiant	AUX01	837	✓	✓					✓	✓								
Auxiant (Wisconsin)	CX024	837			✓													
Avalon Healthcare Solutions Capital Blue Cross	AVA03	835		✓			✓											
Avalon Healthcare Solutions Capital Blue Cross	AVA03	837		✓			✓			✓								
Avalon Healthcare Solutions North Carolina	AVA02	835		✓			✓											
Avalon Healthcare Solutions North Carolina	AVA02	837		✓			✓			✓								
Avalon Healthcare Solutions South Carolina	AVA01	835		✓			✓											
Avalon Healthcare Solutions South Carolina	AVA01	837		✓						✓								
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)	VCH01	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Avera Health Plans	46045	835	✓	✓		✓	✓											
Avera Health Plans	46045	837	✓	✓														
Avera Health Plans-Non-Contracted Providers	AH002	837	✓	✓														
AveraAdvantage	48055	837	✓	✓														
Avesis (Vision)	87098	835		✓			✓											
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	835	✓	✓														
Axminster Medical Group	AXM01	837	✓	✓														
AZ Complete Health (for claim DOS on or after 10/01/18)	68069	837	✓	✓					✓	✓		✓	✓					
Azeros Health Plans Inc.	16644	835	✓	✓		✓	✓											
Azeros Health Plans Inc.	16644	837	✓	✓														
Bakersfield Family Medical Center	BKRFM	837	✓	✓					✓	✓								
Bakery & Confectionery Union and Industry International Health	BCTF1	837	✓	✓														
Banker's Life	36066	835		✓			✓											
Banker's Life	99999-0178	837	✓	✓					✓	✓								
Banker's Life & Casualty (ERA Only)	36066	835		✓			✓											
Bankers Fidelity Life Insurance Company (ERA Only)	30152	835	✓	✓		✓	✓											
Banner - University Family Care	66901	835	✓	✓		✓	✓											
Banner - University Family Care	66901	837	✓	✓					✓	✓								
Banner Aetna	67895	835	✓	✓		✓	✓											
Banner Aetna	67895	837	✓	✓					✓	✓								
Banner Health	12X42	835	✓	✓		✓	✓											
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	✓	✓														
Banner Medicare Advantage Prime HMO	84323	835	✓	✓		✓	✓											
Banner Medicare Advantage Prime HMO	84323	837	✓	✓					✓	✓								
Basic Plus	41204	837	✓	✓					✓	✓								
Basics at Jan Werner	R3493	835	✓	✓	✓	✓	✓	✓										
Basics at Jan Werner	R3493	837	✓	✓	✓													

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Bay Bridge Administrators	06941	837	✓	✓					✓	✓								
BayCare Select Health Plans	81079	835	✓	✓		✓	✓											
BayCare Select Health Plans	81079	837	✓	✓														
Baylor Scott & White Health Plan	88030	837	✓	✓					✓	✓								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 Payer ID 94999.
BCBS Excellus Dental	00802	837			✓													
BCBS Federal Employee Program (FEP) Dental	BCAFD	835			✓			✓										
BCBS Federal Employee Program (FEP) Dental	BCAFD	837			✓													
BCBS Texas Medicaid Star Chip	66002	835	✓	✓		✓	✓											
BCBS Texas Medicaid Star Chip	66002	837	✓	✓					✓	✓								
BCBSAZ ACA Standard Health With Health Choice	RP105	835	✓	✓		✓	✓											
BCBSAZ ACA Standard Health With Health Choice	RP105	837	✓	✓	✓													
BCBSIL Community Health Plans	66012	835	✓	✓		✓	✓											
BCBSIL Community Health Plans	66012	837	✓	✓								✓	✓					
BCBSMI Medicare Plus Blue PPO (JVHL)	KCJVH	835	✓	✓		✓	✓											
BCBSMI Medicare Plus Blue PPO (JVHL)	KCJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
BCBSMN Blue Plus Medicaid	00562	835	✓	✓		✓	✓											
BCBSMN Blue Plus Medicaid	00562	837	✓	✓					✓	✓		✓	✓					As of January 1, 2024, use new payer code 00726 regardless of date of service
BCBSMN Blue Plus Medicaid	00726	835	✓	✓		✓	✓											
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		✓														
BCBSNE Medicare Advantage (P3 Health)	A6492	837	✓	✓					✓	✓								For claims with DOS on or after 01/01/2027
BCS Insurance Company	44443	837	✓	✓														
Beacon Health Options	BEACON963116116	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	✓	✓														
Behind the Lines Medical Trust	ATH01	837	✓	✓														
Bella Vista Medical Group	MPM10	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Ben-e-lect (ERA Only)	EDHP1	835	✓	✓		✓	✓											ERA Only
BeneBay	23243	837	✓	✓					✓	✓								
BeneCare Dental Plan	23210	837			✓						✓							
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	52682	837	✓	✓														
Benefit Management Admin (BMA)	BMATP	835	✓			✓												
Benefit Management Admin (BMA)	BMATP	837	✓															
Benefit Management Administrators	84566	837	✓	✓														
Benefit Management Group-NV	36459	837	✓						✓									
Benefit Management Inc. of KS	48611	835	✓	✓		✓	✓											
Benefit Management Inc. of KS	48611	837	✓	✓														
Benefit Management LLC/VBA	88092	837	✓	✓					✓	✓								
Benefit Management Systems Inc	37212	837	✓	✓														
Benefit Plan Administrators	88052	837	✓	✓														
Benefit Plan Administrators Co. (Eau Claire WI)	39081	835	✓	✓		✓	✓											
Benefit Plan Administrators Co. (Eau Claire WI)	39081	837	✓	✓														
Benefit Plan Administrators Co. (Eau Claire WI)/UCS	46891	835	✓	✓		✓	✓											
Benefit Plan Administrators Co. (Eau Claire WI)/UCS	46891	837	✓	✓					✓	✓								
Benefit Plan Administrators Inc.	37118	837	✓	✓														
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	✓	✓	✓													
Benefit Systems & Services Inc.	36342	835	✓	✓		✓	✓											
Benefit Systems & Services Inc.	36342	837	✓	✓														
Benesight	87265	837	✓	✓					✓	✓								
Benesys	37248	837	✓	✓														
Benesys Inc.	37248	835	✓	✓		✓	✓											
Benesys Inc.	37248	837	✓	✓														
BeneSys, Inc.	38238	835	✓	✓		✓	✓											
BeneSys, Inc.	38238	837	✓	✓														
BeniComp	18151	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Benveo - MultiPlan	76253	837	✓	✓														aka One Share Health
Berkshire Intergroup	10956	837	✓	✓					✓	✓								
Berkshire Lehigh Partners	95606	837	✓	✓														
Best Life & Health Insurance Co.	95604	837	✓	✓	✓				✓	✓								
Better Health Plan of Florida	20488	837	✓	✓														
BEVERLY ALIANZA IPA	NMM06	837	✓	✓														
Beverly Hospital BEVAHISP	MPM42	837	✓	✓					✓	✓								
Bienvivir Senior Health Plan	BSHS1	837		✓														
Black Hawk	CB987	835	✓	✓		✓	✓											
Black Hawk	CB987	837	✓	✓														
Block Vision, Inc.	BV001	837		✓						✓								
Blue Benefit Administrators of MA	03036	835	✓	✓		✓	✓											
Blue Benefit Administrators of MA	03036	837	✓	✓														
Blue Care Network (BCN Commercial Labs) (JVHL)	JJJVH	835	✓	✓		✓	✓											
Blue Care Network (BCN Commercial Labs) (JVHL)	JJJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Blue Care Network (BCN Reimbursable Labs) (JVHL)	JQJVH	835	✓	✓		✓	✓											
Blue Care Network (BCN Reimbursable Labs) (JVHL)	JQJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Blue Care Network (JVHL)	J9JVH	835	✓	✓		✓	✓											
Blue Care Network (JVHL)	J9JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Blue Care Network Advantage of Michigan	00210	837	✓															
Blue Care Network Advantage of Michigan	00710	837		✓														
Blue Care Network of Michigan	00210	837	✓															
Blue Care Network of Michigan	00710	837		✓														
Blue Cross Blue Shield of Alabama	12B54	835	✓			✓												
Blue Cross Blue Shield of Alabama	12B54	837	✓						✓									
Blue Cross Blue Shield of Alabama	SB510	835		✓			✓											
Blue Cross Blue Shield of Alabama	SB510	837		✓						✓								
Blue Cross Blue Shield of Alabama Dental	CBAL1	835			✓			✓										
Blue Cross Blue Shield of Alabama Dental	CBAL1	837			✓													
Blue Cross Blue Shield of Arizona	53589	835	✓	✓	✓	✓	✓	✓										
Blue Cross Blue Shield of Arizona	53589	837	✓	✓	✓				✓	✓	✓							
Blue Cross Blue Shield of Arkansas	00520	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Arkansas	12021	837	✓						✓			✓						
Blue Cross Blue Shield of Arkansas	SB520	837		✓						✓			✓					
Blue Cross Blue Shield of Delaware	12B76	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Blue Cross Blue Shield of Delaware	12B76	837	✓			✓			✓			✓						
Blue Cross Blue Shield of Delaware	SB570	835		✓			✓											
Blue Cross Blue Shield of Delaware	SB570	837		✓			✓			✓			✓					
Blue Cross Blue Shield of District of Columbia (Carefirst)	12000	835	✓			✓												
Blue Cross Blue Shield of District of Columbia (Carefirst)	12000	837	✓															
Blue Cross Blue Shield of District of Columbia (Carefirst)	SB580	835	✓	✓		✓	✓											
Blue Cross Blue Shield of District of Columbia (Carefirst)	SB580	837	✓	✓														
Blue Cross Blue Shield of Florida (Florida Blue)	00590	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Florida (Florida Blue)	00590	837	✓	✓					✓	✓								
Blue Cross Blue Shield of Hawaii (HMSA)	12B62	837	✓			✓												
Blue Cross Blue Shield of Hawaii (HMSA)	HIBLS	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Hawaii (HMSA)	SB971	837		✓			✓			✓								
Blue Cross Blue Shield of Illinois	00621	835	✓	✓	✓	✓	✓	✓										
Blue Cross Blue Shield of Illinois	00621	837			✓													
Blue Cross Blue Shield of Illinois	12B08	837	✓						✓									ERA Payer Code 00621
Blue Cross Blue Shield of Illinois	SB621	837		✓						✓								ERA Payer Code 00621
Blue Cross Blue Shield of Iowa (Wellmark)	88848	837	✓	✓					✓	✓								
Blue Cross Blue Shield of Iowa (Wellmark)	88851	835			✓			✓										
Blue Cross Blue Shield of Iowa (Wellmark)	88851	837			✓													
Blue Cross Blue Shield of Kansas	47163	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Kansas	47163	837	✓	✓					✓	✓		✓	✓					
Blue Cross Blue Shield of Kansas	CBKS1	835			✓			✓										
Blue Cross Blue Shield of Kansas	CBKS1	837			✓						✓							
Blue Cross Blue Shield of Kansas City	47171	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Kansas City	47171	837	✓	✓					✓	✓								
Blue Cross Blue Shield of Louisiana	53120	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Louisiana	53120	837	✓	✓		✓	✓		✓	✓								
Blue Cross Blue Shield of Maryland (Carefirst)	12011	837	✓															
Blue Cross Blue Shield of Maryland (Carefirst)	SB690	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Maryland (Carefirst)	SB690	837		✓														
Blue Cross Blue Shield of Massachusetts	12B14	835	✓			✓												
Blue Cross Blue Shield of Massachusetts	12B14	837	✓						✓									
Blue Cross Blue Shield of Massachusetts	CBMA1	835			✓			✓										
Blue Cross Blue Shield of Massachusetts	CBMA1	837			✓						✓							
Blue Cross Blue Shield of Massachusetts	SB700	835		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Blue Cross Blue Shield of Massachusetts	SB700	837		✓						✓								
Blue Cross Blue Shield of Michigan	00210	835	✓			✓												
Blue Cross Blue Shield of Michigan	00210	837	✓															
Blue Cross Blue Shield of Michigan	00710	835		✓			✓											
Blue Cross Blue Shield of Michigan	00710	837		✓														
Blue Cross Blue Shield of Minnesota	00720	835	✓	✓		✓	✓											Payer Requires Copy of EOB for Missing ERAs
Blue Cross Blue Shield of Minnesota	00720	837	✓	✓					✓	✓								
Blue Cross Blue Shield of Mississippi	12B17	835	✓			✓												
Blue Cross Blue Shield of Mississippi	12B17	837	✓			✓			✓									
Blue Cross Blue Shield of Mississippi	CBMS1	837			✓			✓			✓							
Blue Cross Blue Shield of Mississippi	SB730	835		✓			✓											
Blue Cross Blue Shield of Mississippi	SB730	837		✓			✓			✓						✓		
Blue Cross Blue Shield of Montana	00751	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Montana	00751	837	✓	✓	✓				✓	✓								
Blue Cross Blue Shield of Nebraska	00760	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Nebraska	00760	837	✓	✓					✓	✓								
Blue Cross Blue Shield of Nebraska	CBNE1	835			✓			✓										
Blue Cross Blue Shield of Nebraska	CBNE1	837			✓						✓							
Blue Cross Blue Shield of New Mexico	00790	835	✓	✓		✓	✓											
Blue Cross Blue Shield of New Mexico	00790	837	✓	✓					✓	✓								
Blue Cross Blue Shield of North Carolina	12B23	835	✓			✓												
Blue Cross Blue Shield of North Carolina	12B23	837	✓						✓									
Blue Cross Blue Shield of North Carolina	61473	837			✓													
Blue Cross Blue Shield of North Carolina	SB810	835		✓			✓											
Blue Cross Blue Shield of North Carolina	SB810	837		✓						✓								
Blue Cross Blue Shield of North Dakota	12B78	837	✓	✓					✓	✓								
Blue Cross Blue Shield of North Dakota	55891	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Oklahoma	00840	835	✓	✓		✓	✓											As of 4.11.2025 Electronic Remittance Advance is not offered at this time.
Blue Cross Blue Shield of Oklahoma	00840	837	✓	✓	✓				✓	✓	✓							
Blue Cross Blue Shield of Oklahoma	SB840	837		✓														
Blue Cross Blue Shield of Rhode Island	12B74	835	✓			✓												
Blue Cross Blue Shield of Rhode Island	12B74	837	✓						✓									
Blue Cross Blue Shield of Rhode Island	SB870	835		✓			✓											
Blue Cross Blue Shield of Rhode Island	SB870	837		✓						✓								

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			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Blue Cross Blue Shield of South Carolina	12B55	835	✓			✓												
Blue Cross Blue Shield of South Carolina	12B55	837	✓						✓									
Blue Cross Blue Shield of South Carolina	SB880	835		✓			✓											
Blue Cross Blue Shield of South Carolina	SB880	837		✓						✓								
Blue Cross Blue Shield of South Dakota (Wellmark)	88848	835	✓	✓		✓	✓											
Blue Cross Blue Shield of South Dakota (Wellmark)	88848	837	✓	✓					✓	✓								
Blue Cross Blue Shield Of Tennessee	00390	835	✓	✓		✓	✓											
Blue Cross Blue Shield Of Tennessee	00390	837	✓	✓		✓	✓		✓	✓								
Blue Cross Blue Shield of Tennessee Dental	CBTN1	837			✓													
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	✓	✓		✓	✓											
Blue Cross Blue Shield of Vermont	BCSVT	837	✓	✓														
Blue Cross Blue Shield of Wyoming	53767	835	✓	✓		✓	✓											
Blue Cross Blue Shield of Wyoming	53767	837	✓	✓					✓	✓								Prof:Former payer code SB960
Blue Cross Community Health Plans	66005	837	✓	✓														
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	✓	✓		✓	✓											
Blue Cross Complete (JVHL)	KPJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Blue Cross Medicare Advantage (IL, MT, NM, OK, TX)	66006	835	✓	✓		✓	✓											
Blue Cross Medicare Advantage (IL, MT, NM, OK, TX)	66006	837	✓	✓														
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	✓	✓					✓	✓								
Blue Medicare Advantage	00772	835	✓	✓		✓	✓											
Blue Medicare Advantage	00772	837	✓	✓					✓	✓								
Blue Ridge Independence At Home Pace	R3464	835	✓	✓	✓	✓	✓	✓										
Blue Ridge Independence At Home Pace	R3464	837	✓	✓	✓													
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.

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
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	✓			✓												
Blue Shield Of California (Claims and Encounters)	BSCAI	837	✓						✓									
Blue Shield of California Promise Health Plan	C1SCA	835	✓	✓		✓	✓											Formerly Care1st HP of California
Blue Shield of California Promise Health Plan	C1SCA	837	✓	✓					✓	✓								
BlueChoice Health Plan of South Carolina (Medicaid)	00403	835	✓	✓		✓	✓											
BlueChoice Health Plan of South Carolina (Medicaid)	00403	837	✓	✓					✓	✓								For claims with DOS on or after 1/1/2024.
BlueChoice HealthPlan	00922	835	✓	✓		✓	✓											
BlueChoice HealthPlan	00922	837	✓	✓					✓	✓								
BlueCross BlueShield of Western New York Medicaid/CHP	00246	835	✓	✓		✓	✓											
BlueCross BlueShield of Western New York Medicaid/CHP	00246	837	✓	✓					✓	✓		✓	✓					
Boilermakers National Health & Welfare	36609	837	✓	✓														
Boldage PACE	BOLD1	835	✓	✓	✓													
Boldage PACE	BOLD1	837	✓	✓	✓				✓	✓	✓							
Boon Administrative Services	BOONG	835	✓	✓		✓	✓											
Boon Administrative Services	BOONG	837	✓	✓														
Boon-Chapman Benefit Administrators Inc.	74238	835	✓	✓		✓	✓											
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	18768	837	✓	✓					✓	✓								
BPS First Health	67707	837	✓	✓														
Brain and Spine Network	BSN01	835	✓	✓		✓	✓											
Brain and Spine Network	BSN01	837	✓	✓														
Brand New Day (Encounters)	UC002	837	✓	✓														For Encounter Submissions Only
Brand New Day (FFS)	UC001	837	✓	✓														
Braven Health	84367	835	✓	✓		✓	✓											
Braven Health	84367	837	✓	✓					✓	✓								
Bravo Health	52192	837	✓	✓														
Bravo Health Star Plus	52192	837	✓	✓														
Breckpoint	BRKPNT	837	✓	✓	✓													
BridgeSpan	BRIDG	835	✓	✓		✓	✓											
BridgeSpan	BRIDG	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
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	✓	✓														
Brodart	35182	837	✓	✓						✓								
Brokerage Concepts	51037	835	✓	✓		✓	✓											
Brokerage Concepts	51037	837	✓	✓														
Brookshire IPA	BIPAZ	837	✓	✓					✓	✓								
Brookshire IPA	CAPMN	837	✓	✓					✓	✓								
Broward Health	37314	837	✓	✓					✓	✓								
Broward PACE	FLBPP	837	✓	✓														
Brown & Toland Medical Group	94316	835	✓	✓		✓	✓											
Brown & Toland Medical Group	94316	837	✓	✓					✓	✓								
Brown and Toland Health Services	BTHS1	837	✓	✓					✓	✓								
Brown and Toland Sutter Select	BTSS1	837		✓														
BSI Companies	25916	837	✓	✓	✓													
Buckeye Community Health	68069	837	✓	✓					✓	✓		✓	✓					
Buckeye Next Generation Mycare Ohio	0021583	835	✓	✓		✓	✓											
Buckeye Next Generation Mycare Ohio	0021583	837	✓	✓					✓	✓								For claims with DOS on or after 01/01/2026.
Buckeye Ohio Medicaid	42020	837	✓	✓														
Buckeye Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Buckeye Ohio Medicaid Transportation	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Buckeye Ohio Medicaid Vision	4202V	837	✓	✓					✓	✓								
Buckeye Ohio Medicaid Vision	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Buenaventura Affiliated Physicians Inc.	BVAP1	837	✓	✓					✓	✓								
Business Administrators & Consultants	49984	837	✓	✓	✓													
Butler Benefit	42150	837	✓	✓					✓	✓								
Bywater	12090	837	✓	✓														
BZ Health Marina	AMG02	835	✓	✓														
BZ Health Marina	AMG02	837	✓	✓														
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	✓	✓					✓	✓								Encounters

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Cal Viva Health	95567	837	✓	✓					✓	✓		✓	✓					
California Health and Wellness	68047	837	✓	✓					✓	✓		✓	✓					
California Health and Wellness	68069	835	✓	✓		✓	✓											
California Hospital Medical Center	HSM01	837	✓	✓														
California IPA (Capital MSO)	CTPL1	837	✓	✓														
California Kids Care (CKC)	CKC01	835	✓	✓		✓	✓											
California Kids Care (CKC)	CKC01	837	✓	✓														
California Medicaid - Medi-Cal	57016	837	✓	✓														
California Medicaid (Medi-Cal)	CAMC1	835	✓			✓												
California Medicaid (Medi-Cal)	CAMC1	837	✓			✓						✓						
California Medicaid (Medi-Cal)	SKCA0	835		✓			✓											
California Medicaid (Medi-Cal)	SKCA0	837		✓			✓			✓			✓					
California Medicare	12M64	835	✓			✓												
California Medicare	12M64	837	✓			✓			✓									
California Medicare - Northern Region	SMCA1	835		✓			✓											
California Medicare - Northern Region	SMCA1	837		✓			✓			✓								
California Medicare - Southern Region	SMCA2	835		✓			✓											
California Medicare - Southern Region	SMCA2	837		✓			✓			✓								
California Pacific Medical Center	94056	837	✓	✓					✓	✓								
California Pacific Physicians Medical Group, Inc.	HSM01	837	✓	✓														
CalOptima Direct	CALOP	835	✓	✓		✓	✓											
CalOptima Direct	CALOP	837	✓	✓														
Calvo's SelectCare	CALSC	835	✓	✓														
Calvo's SelectCare	CALSC	837	✓	✓	✓				✓	✓	✓							
Camp Lejeune Family Member Program	CLFM1	837	✓	✓					✓	✓								
Cannon Cochran Management Services Inc. Metairie LA	71057	837	✓	✓														
Canopy Health	CNPY1	835	✓	✓		✓	✓											
Canopy Health	CNPY1	837	✓	✓														
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	✓															
Capital District Physicians Health Plan	SX065	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Capital District Physicians Health Plan	SX065	837		✓														
Capital Health Partners	CAHP1	835	✓	✓														
Capital Health Partners	CAHP1	837	✓	✓					✓	✓								
Capital Health Plan	95112	835	✓	✓		✓	✓											
Capital Health Plan	95112	837	✓	✓														
Capitol Administrators-Lucent Health	68011	835	✓	✓		✓	✓											
Capitol Administrators-Lucent Health	68011	837	✓	✓														
Caprock Health Plans	CAPHP	835	✓	✓		✓	✓											
Caprock Health Plans	CAPHP	837	✓	✓														
Captrue Benefits	34242	835	✓	✓		✓	✓											
Captrue Benefits	34242	837	✓	✓														
Cardinal Innovations	13010	837	✓	✓		✓	✓		✓	✓								
Cardiovascular Care Provider, INC	GCVCP	835	✓	✓		✓	✓											
Cardiovascular Care Provider, INC	GCVCP	837	✓	✓														
Cardon Outreach	99999-0911	837	✓	✓		✓	✓											
Care Access Health Plan (CAHP)	12K89	837	✓															
Care Access Health Plan (CAHP)	65062	835	✓	✓		✓	✓											
Care Access Health Plan (CAHP)	65062	837		✓														
Care Access PSN	65063	837		✓														
Care Around the Clock (CAREATC)	57721	837	✓	✓					✓	✓								
Care Improvement Plus	77082	835	✓	✓														ERA Payer Code 87726.
Care Improvement Plus	77082	837	✓	✓														
Care Improvement Plus (For DOS on or after 1/1/16.)	87726	837	✓	✓					✓	✓		✓	✓					
Care N' Care	66010	835	✓	✓		✓	✓											
Care N' Care	66010	837	✓	✓														
Care To Care	41222	837	✓	✓														
Care1st Health Plan Arizona - Medicaid (DOS > 12/2/22)	68069	837	✓	✓					✓	✓		✓	✓					
Care1st Health Plan Arizona - Medicare	14163	837	✓	✓					✓	✓		✓	✓					
Care4Kids (WI Medicaid)	39113	837	✓	✓					✓	✓								
CAREAssist	PAIOR02	835	✓	✓														
CAREAssist	PAIOR02	837		✓														
CareCentrix	11345	835	✓	✓		✓	✓											
CareCentrix	11345	837	✓	✓														
CareCore National	14182	837	✓	✓														
CareCore National LLC (Aetna Radiology Claims)	14179	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
CareCore National LLC (Oxford Radiology Claims)	14180	837	✓	✓														
CareCore/WCNY RAD	14188	837	✓	✓														
CareFirst Administrators/NCAS (Charlotte, NC)	75191	835	✓	✓		✓	✓											
CareFirst Administrators/NCAS (Charlotte, NC)	75191	837	✓	✓														
CareFirst Administrators/NCAS (Fairfax, VA)	75190	835	✓	✓		✓	✓											
CareFirst Administrators/NCAS (Fairfax, VA)	75190	837	✓	✓														
CareFlorida	65088	837	✓	✓					✓	✓								
Careington Benefit Solutions	60601	837			✓						✓							
Carelink	80133	837	✓	✓														
Carelon Aetna Home Health	34010	835	✓	✓		✓	✓											
Carelon Aetna Home Health	34010	837	✓	✓					✓	✓								
Carelon Anthem Home Health	34009	835	✓	✓		✓	✓											
Carelon Anthem Home Health	34009	837	✓	✓														
Carelon Behavioral Health	BHOVO	835	✓	✓		✓	✓											
Carelon Behavioral Health	BHOVO	837	✓	✓					✓	✓								Previously known as Beacon Health Options / Value Options
Caremore (ERA Only)	CM001	835	✓	✓		✓	✓											ERA Only
Caremore Health Plan	CARMO	837	✓	✓					✓	✓								
CareOregon Behavioral Health	VMMH1	837	✓	✓					✓	✓								
CareOregon Inc.	93975	835	✓	✓		✓	✓											
CareOregon Inc.	93975	837	✓	✓	✓													
CarePartners of Connecticut	16307	835	✓	✓		✓	✓											
CarePartners of Connecticut	16307	837	✓	✓														
CarePlus Health Plans, Inc.	95092	835	✓	✓		✓	✓											
CarePlus Health Plans, Inc.	95092	837	✓	✓					✓	✓								
CareSource Arkansas	ARCS1	835	✓	✓		✓	✓											
CareSource Arkansas	ARCS1	837	✓	✓					✓	✓								
Caresource GA	GACS1	835	✓	✓		✓	✓											
Caresource GA	GACS1	837	✓	✓					✓	✓								
CareSource Indiana	INCS1	835	✓	✓		✓	✓											
CareSource Indiana	INCS1	837	✓	✓					✓	✓								
Caresource Kentucky	KYCS1	835	✓	✓		✓	✓											
Caresource Kentucky	KYCS1	837	✓	✓					✓	✓								
CareSource Military & Veterans	MVCS1	835	✓	✓		✓	✓											
CareSource Military & Veterans	MVCS1	837	✓	✓														
Caresource MyCare Ohio	0021599	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Caresource MyCare Ohio	0021599	837	✓	✓					✓	✓								For claims with DOS on or after 01/01/2026.
CareSource NC	NCCS1	835	✓	✓		✓	✓											
CareSource NC	NCCS1	837	✓	✓														
Caresource Nevada Marketplace	NVCS1	835	✓	✓		✓	✓											
Caresource Nevada Marketplace	NVCS1	837	✓	✓														
Caresource Nevada Medicaid	NVMCDCS1	835	✓	✓		✓	✓											
Caresource Nevada Medicaid	NVMCDCS1	837	✓	✓														
CareSource of Michigan Medicaid	MIMCDCS1	835	✓	✓		✓	✓											
CareSource of Michigan Medicaid	MIMCDCS1	837	✓	✓														Effective for dates of service starting on October 1, 2023, and forward.
CareSource OH	31114	835	✓	✓		✓	✓											
CareSource OH	31114	837	✓	✓					✓	✓								As of 2/1/23, all Medicaid claims should be submitted to payer code 31500.
CareSource Ohio Medicaid	31500	837	✓	✓														
CareSource Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
CareSource Ohio Medicaid Vision	3150V	837	✓	✓					✓	✓								
CareSource Ohio Medicaid Vision	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
CareSource West Virginia	WVCS1	835	✓	✓		✓	✓											
CareSource West Virginia	WVCS1	837	✓	✓					✓	✓								
CareSource Wisconsin	77170	835	✓	✓		✓	✓											
CareSource Wisconsin	77170	837	✓	✓														
Cariten Senior Health	61101	835	✓	✓		✓	✓											
Cariten Senior Health	62072	837	✓	✓					✓	✓								ERA Payer Code 61101
Carolina Behavioral Health Alliance	56215	837	✓	✓														
Carolina Benefit Administrators	00498	837	✓	✓														
Carolina Care Plan	29076	837	✓	✓					✓	✓		✓	✓					
Carolina Complete Health	68069	837	✓	✓					✓	✓		✓	✓					
Carolina SeniorCare	71499	837	✓	✓														
Carpenters Health and Welfare Fund of Philadelphia	CX101	837		✓														
CAS Benefits	CAS89	837	✓	✓	✓													
Cascade Health Alliance, LLC	CHA01	835	✓	✓														
Cascade Health Alliance, LLC	CHA01	837	✓	✓	✓													
Catholic Health LIFE	R3486	835	✓	✓		✓	✓											
Catholic Health LIFE	R3486	837	✓	✓	✓													
Cavalry Direct	CAV63	835	✓	✓		✓	✓											
Cavalry Direct	CAV63	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
CBA Blue	03036	837	✓	✓														
CBHNP - HealthChoices	65391	835	✓	✓		✓	✓											
CBHNP - HealthChoices	65391	837	✓	✓														
CCA Health California FFS Claims	TU127	837	✓	✓														
CCA-Reliance (JVHL)	MKJVH	835	✓	✓		✓	✓											
CCA-Reliance (JVHL)	MKJVH	837	✓	✓		✓	✓		✓	✓								Provider has been approved per JVHL lab
Cedar Valley Community HealthCare (CVCH)	42558	835	✓	✓		✓	✓											
Cedar Valley Community HealthCare (CVCH)	42558	837	✓	✓					✓	✓								
Cedars Sinai Medical	95164	837	✓	✓														
Cedars Towers Surgical Medical Group (Encounters Only)	HPIPA	837		✓														
Cedars-Sinai Medical Network Services	95166	835	✓	✓		✓	✓											
Cedars-Sinai Medical Network Services	95166	837	✓	✓														
Cedars-Sinai Medical Network Services	95167	837	✓	✓														
CEHAS Plan Administrators LLC	91888	837	✓	✓														
Celtic Insurance	68063	835	✓	✓		✓	✓											
Celtic Insurance	68063	837	✓	✓					✓	✓								
CeltiCare	68069	837	✓	✓					✓	✓		✓	✓					
Cement Masons & Plasterers Health & Welfare Trust	91136	837	✓	✓														
Cencal Health	95386	835	✓	✓		✓	✓											
Cencal Health	99111	837	✓	✓					✓	✓								
Cenpatico - Arizona (for DOS prior to 10/01/18)	68068	837	✓	✓					✓	✓								
Cenpatico - Florida	68068	837	✓	✓					✓	✓								
Cenpatico - Georgia	68068	837	✓	✓					✓	✓								
Cenpatico - Illinois	68068	837	✓	✓					✓	✓								
Cenpatico - Indiana	68068	837	✓	✓					✓	✓								
Cenpatico - Kansas	68068	837	✓	✓					✓	✓								
Cenpatico - Kentucky	68068	837	✓	✓					✓	✓								
Cenpatico - Massachuetts	68068	837	✓	✓					✓	✓								
Cenpatico - Mississippi	68068	837	✓	✓					✓	✓								
Cenpatico - Missouri	68068	837	✓	✓					✓	✓								
Cenpatico - Ohio	68068	837	✓	✓					✓	✓								
Cenpatico - South Carolina	68068	837	✓	✓					✓	✓								
Cenpatico - Texas	68068	837	✓	✓					✓	✓								
Cenpatico - Wisconsin	68068	837	✓	✓					✓	✓								
Cenpatico Behavioral Health	68068	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Cenpatico Behavioral Health	68068	837	✓	✓					✓	✓								
Centene Medical	68069	835	✓	✓		✓	✓											
Centene Medical	68069	837	✓	✓					✓	✓		✓	✓					
Center for Elders Independence	94312	837	✓	✓					✓	✓								
Center IPA	POP01	837		✓														
CenterLight Healthcare	13360	835	✓	✓		✓	✓											
CenterLight Healthcare	13360	837	✓	✓														
Centers Plan for Healthy Living	CPHL1	835	✓	✓		✓	✓											
Centers Plan for Healthy Living	CPHL1	837	✓	✓					✓	✓								
Centinela Valley IPA	MPM03	837	✓	✓														
Centivo	45564	835	✓	✓		✓	✓											
Centivo	45564	837	✓	✓														
CentraCare	66698	837	✓	✓														
Central & Southwest Services	75177	837		✓						✓								
Central Alliance Physicians - Guidant	CAP01	837	✓	✓														
Central California Alliance for Health (CCAH)	CCA01	835	✓	✓		✓	✓											
Central California Alliance for Health (CCAH)	CCA01	837	✓	✓					✓	✓								
Central California Physician Partners Astrana	NMM10	835	✓	✓		✓	✓											
Central California Physician Partners Astrana	NMM10	837	✓	✓					✓	✓								
Central Health Medicare Plan	CHCPI	835	✓	✓		✓	✓											
Central Health Medicare Plan	CHCPI	837	✓	✓					✓	✓								
Central Health MSO	CHCPI	837	✓	✓					✓	✓								
Central Mass Heath Care	02041	837	✓						✓									
Central Reserve Life Ins Co-Medicare Supplement	13193	837	✓	✓														
Central States Health & Welfare Funds	36215	837	✓	✓	✓						✓							
Central States Health & Welfare Funds	36215	837			✓						✓							
Central States Indemnity (ERA Only)	IAS02	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Central Susquehanna Healthcare Providers (CSHP)	55731	837	✓	✓					✓	✓								
Central Valley Medical Group	CVH01	837	✓	✓					✓	✓								
Central Valley Medical Providers CVMEDPRO	MPM59	837	✓	✓														
Centrix Benefit Administrators	95599	837	✓	✓														
Centurion Health of Indiana, LLC	IHS11	837	✓	✓														For claims with DOS on or after December 1, 2023 (IN Only)
Century PHO	36393	837	✓	✓					✓	✓								
Cerner HealthPlan Services	20356	835	✓	✓		✓	✓											
Cerner HealthPlan Services	20356	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
CG United (Barbados Eastern Caribbean)	22287	837	✓	✓														
Chaffey Medical Group	49533	835	✓	✓		✓	✓											EFT enrollment is required in order to obtain ERA's
Chaffey Medical Group	49533	837	✓	✓														
Champion Payer Solutions	CPS01	835	✓	✓														
Champion Payer Solutions	CPS01	837	✓	✓	✓													
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	835	✓	✓	✓	✓	✓	✓										
Cherokee Nation Comprehensive Care Agency	CHERO	837	✓	✓	✓													
Chesterfield Resources Inc.	34154	835	✓	✓		✓	✓											
Chesterfield Resources Inc.	34154	837	✓	✓	✓						✓							
Childhealth Plus by Healthfirst (CHP)	80141	837	✓															
Children First Medical Group	94321	837		✓						✓								
Children of Women Vietnam Veterans-VA HAC	84146	837	✓	✓					✓	✓		✓	✓					
Children's Community Health Plan	39113	837	✓	✓					✓	✓								
Children's Community Health Plan - Wisconsin	39113	837	✓	✓					✓	✓								
Children's Hospital Orange County (CHOC) Health Alliance	CHOC1	835	✓	✓		✓	✓											
Children's Hospital Orange County (CHOC) Health Alliance	CHOC1	837	✓	✓														
Children's Medical Security Plan of Massachusetts	12K14	837	✓			✓			✓									
Children's Medical Security Plan of Massachusetts	SKMA0	837		✓			✓			✓								
Childrens Medical Center Health Plan	CMCHP	835	✓	✓		✓	✓											
Childrens Medical Center Health Plan	CMCHP	837	✓	✓														
Chinatown Service Center	R3478	835	✓	✓	✓	✓	✓	✓										
Chinatown Service Center	R3478	837	✓	✓	✓													
Chinese Community Health Plan	94302	835	✓	✓														
Chinese Community Health Plan	94302	837	✓	✓														
CHOC - Children's Hospital Of Orange County Health Alliance	33065	837	✓	✓														
Choice Medical Group	CMG01	835		✓														
Choice Medical Group	CMG01	837	✓	✓					✓	✓								
Choice Physicians Net First Choice	CPNFC	837	✓	✓					✓	✓								
Choice Physicians Network	CPN01	835	✓	✓		✓	✓											
Choice Physicians Network	CPN01	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Choice Physicians Network - Amada Health	CPNA1	835	✓	✓														
Choice Physicians Network - Amada Health	CPNA1	837	✓	✓														
Choice Physicians Network- MD Senior Care	CPNMS	837	✓	✓														
Chorus Community Health Plans	29123	835	✓	✓		✓	✓											
Chorus Community Health Plans	29123	837	✓	✓														
Christian Brothers Services	38308	835	✓	✓		✓	✓											
Christian Brothers Services	38308	837	✓	✓														
Christian Care Ministries	59355	835	✓	✓		✓	✓											
Christian Care Ministries	59355	837	✓	✓														
Christian Health Aid	98628	837	✓	✓														
Christiana Care VBR	VB002	837	✓	✓					✓	✓								
Christus Health Medicare Advantage	10629	835	✓	✓		✓	✓											
Christus Health Medicare Advantage	10629	837	✓	✓														
Christus Health TX HIX	52106	837	✓	✓														
Christus Spohn Health Network	SPOHN	837	✓	✓														
Christus Texas Medicaid	45210	837	✓	✓					✓	✓								
CIGNA	62308	835	✓	✓	✓	✓	✓	✓										
CIGNA	62308	837	✓	✓	✓				✓	✓	✓							
CIGNA - (Health Partners) (JVHL)	KQJVH	835	✓	✓		✓	✓											
CIGNA - (Health Partners) (JVHL)	KQJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
CIGNA - PPA	62308	837	✓	✓					✓	✓								
CIGNA - PPO	62308	837	✓	✓					✓	✓								
CIGNA (Non-HAP & CIGNA-HAP) (JVHL)	KDJVH	835	✓	✓		✓	✓											
CIGNA (Non-HAP & CIGNA-HAP) (JVHL)	KDJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
CIGNA Behavioral Health	62308	835	✓	✓		✓	✓											ERA Payer Code 62308
CIGNA Behavioral Health	MCCBV	837	✓															ERA Payer Code 62308
CIGNA Behavioral Health	SX071	837		✓						✓								ERA Payer Code 62308
CIGNA Dental	62308	837			✓						✓							
Cigna Encounters	99139	837	✓	✓														
CIGNA Health Plan - HMO	62308	837	✓	✓					✓	✓								
CIGNA Medicare Advantage	62308	835	✓	✓		✓	✓											
CIGNA Medicare Advantage	86033	837	✓	✓														ERA Payer Code 62308
CITIZENS CHOICE HEALTH PLAN	CCHPC	837	✓	✓														
Citrus Valley IPA	NMM01	837	✓	✓														
Citrust Health Plan	10207	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
City Of New Orleans (LA)	J2309	837	✓															
ClaimChoice Administrators	83063	835	✓	✓		✓	✓											
ClaimChoice Administrators	83063	837	✓	✓					✓	✓								
ClaimChoice Administrators (DOS >1.1.21)	38219	835	✓	✓		✓	✓											formerly known as AmeraPlan
ClaimChoice Administrators (DOS >1.1.21)	38219	837	✓	✓														formerly known as AmeraPlan
Claims Development Corporation	43056	837		✓														
ClaimsBridge HPN	11752	837	✓	✓														
Claimshop- Employers Coalition on Health - MULTIPLAN PHCS/ECOH	27008	837	✓	✓														
Clear Health Alliance	CLEAR	835	✓	✓		✓	✓											
Clear Health Alliance	CLEAR	837	✓	✓					✓	✓		✓	✓					
Clear Spring Health	85468	835	✓	✓		✓	✓											
Clear Spring Health	85468	837	✓	✓					✓	✓								
Clearwater Benefit Administrators	DCRSS	837	✓	✓					✓	✓								
Clever Care Health Plan	CC168	835	✓	✓		✓	✓											
Clever Care Health Plan	CC168	837	✓	✓					✓	✓								
Client First	41201	837	✓	✓														
Clinicas del Camino Real	CDCR1	835	✓	✓														
Clinicas del Camino Real	CDCR1	837	✓	✓					✓	✓								
Clover Health	13285	835	✓	✓		✓	✓											
Clover Health	13285	837	✓	✓														
CMHC	02041	837	✓						✓									
Coachella Valley Physicians	IP079	837	✓	✓														
CoachellaMed	COMG1	835	✓	✓														
CoachellaMed	COMG1	837	✓	✓														
Coastal Administrative Services	77052	835	✓	✓		✓	✓											
Coastal Administrative Services	77052	837	✓	✓														
Coastal Care Services Inc	47394	837		✓														
Coastal Communities Physician Network	CCPN1	835	✓	✓		✓	✓											
Coastal Communities Physician Network	CCPN1	837	✓	✓														
Coeur Plan Services, LLC	11854	837	✓	✓	✓													
Cofinity - Group Resources	42049	837	✓	✓														
Collective Health	36481	835	✓	✓		✓	✓											
Collective Health	36481	837	✓	✓					✓	✓								
College Health IPA	CHIPA	837		✓														
Colonial Life (ERA Only)	37077	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Colonial Medical	22284	837	✓	✓														
Colonial Medical Eastern Caribbean	22287	835	✓	✓		✓	✓											
Colonial Medical Eastern Caribbean	22287	837	✓	✓														
Colorado Access	84129	835	✓	✓		✓	✓											
Colorado Access	84129	837	✓	✓					✓	✓								
Colorado Community Health Alliance	COCHA	835	✓	✓		✓	✓											
Colorado Community Health Alliance	COCHA	837	✓	✓								✓	✓					
Colorado Health OP	49718	837	✓	✓														
Colorado Medicaid	77016	835	✓	✓		✓	✓											
Colorado Medicaid	77016	837	✓	✓		✓	✓		✓	✓								
Colorado Medicare	12M03	835	✓			✓												
Colorado Medicare	12M03	837	✓			✓			✓									
Colorado Medicare	SMCO0	835		✓			✓											
Colorado Medicare	SMCO0	837		✓			✓			✓								
Commerce Benefits Group	34181	835	✓	✓		✓	✓											
Commerce Benefits Group	34181	837	✓	✓														
Commercial Travelers/PHX	88091	835	✓	✓		✓	✓											
Commercial Travelers/PHX	88091	837	✓	✓														
Commonwealth Care Alliance	14315	835	✓	✓		✓	✓											
Commonwealth Care Alliance	14315	837	✓	✓														
Commonwealth Care Alliance (DOS > 4/1/23)	A2793	835	✓	✓		✓	✓											
Commonwealth Care Alliance (DOS > 4/1/23)	A2793	837	✓	✓														Effective 4/1/23, claims with DOS after April 1st should be submitted to new payer code A2793. For transactions prior to 4/1/23, use 14315 and 14316.
CommuniCare Advantage	34525	835	✓	✓		✓	✓											
CommuniCare Advantage	34525	837	✓	✓														
COMMUNITY ALLIANCE MEDICAL GRP	CAMG1	837	✓	✓														
Community Care Alliance of Illinois	85468	837	✓	✓					✓	✓								
Community Care Associates (Healthchoice) (JVHL)	JWJVH	835	✓	✓		✓	✓											
Community Care Associates (Healthchoice) (JVHL)	JWJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Community Care Associates.(HealthChoice)	17902	837		✓						✓								
Community Care BHO	23282	835	✓	✓		✓	✓											
Community Care BHO	23282	837	✓	✓						✓								
Community Care Health	CCH25	837	✓	✓					✓	✓								For dates of service on/after 01/01/2025.
Community Care Inc. - Family Care (Wisconsin)	60995	835	✓	✓		✓	✓											
Community Care Inc. - Family Care (Wisconsin)	60995	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Community Care Inc. (Wisconsin)	39126	835	✓	✓		✓	✓											
Community Care Inc. (Wisconsin)	39126	837	✓	✓					✓	✓								
Community Care IPA	MPM48	835	✓	✓		✓	✓											
Community Care IPA	MPM48	837	✓	✓														
Community Care Managed Health Care Plans of Oklahoma	73143	835	✓	✓		✓	✓											
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	✓	✓		✓	✓											
Community Care Plan (Florida Health Kids)	FHKC1	837	✓	✓														
Community Care Plan (Medicaid)	59065	835	✓	✓		✓	✓											Formerly known as South FL Community Care Network - SFCCN (Medicaid)
Community Care Plan (Medicaid)	59065	837	✓	✓					✓	✓								Formerly known as South FL Community Care Network - SFCCN (Medicaid)
COMMUNITY CARE PLAN (PALM BEACH HEALTH DISTRICT)	PBHD1	835	✓	✓		✓	✓											
COMMUNITY CARE PLAN (PALM BEACH HEALTH DISTRICT)	PBHD1	837	✓	✓					✓	✓								
Community Eye Care	CECVP	837		✓														
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	42723	835	✓	✓		✓	✓											
Community First Claims	COMMF	837	✓	✓														
Community First Health Plan, Inc.	42723	835	✓	✓		✓	✓											
Community Health Alliance	35193	835	✓	✓		✓	✓											
Community Health Alliance	35193	837	✓	✓					✓	✓								
Community Health Center Network	CHCN1	835		✓														
Community Health Center Network	CHCN1	837		✓														
Community Health Choice	48145	835	✓	✓		✓	✓											
Community Health Choice	48145	837	✓	✓														
Community Health Electronic Claims/CHEC/webTPA	75261	837	✓	✓														Electronic Remittance Advice (ERA) will continue to be routed through SDS
Community Health Group	66170	837	✓	✓					✓	✓								
Community Health Group	CHGRI	835	✓	✓		✓	✓											
Community Health Group	CHGRI	837	✓						✓									
Community Health Plan of Washington	CHPWA	835	✓	✓		✓	✓											
Community Health Plan of Washington	CHPWA	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Community Health Plan, Inc.	60495	837	✓	✓					✓	✓								
CommunityConnect HealthPlan	95192	835	✓	✓		✓	✓											
CommunityConnect HealthPlan	95192	837	✓	✓					✓	✓								
Comp - Ohio (Austintown OH)	34177	837	✓	✓														
Companion Life	37322	835	✓	✓		✓	✓											
Companion Life	37322	837	✓	✓														
Compcare (Wisconsin BadgerCare only)	95192	837	✓	✓					✓	✓								
Complete Senior Care	R3485	835	✓	✓		✓	✓											
Complete Senior Care	R3485	837	✓	✓	✓				✓	✓	✓							
Compsych	37363	835		✓			✓											
Compsych	37363	837		✓														
Compsych	U7363	835	✓			✓												
Compsych	U7363	837	✓															
Compusys of Colorado	COMPU	837		✓														
Concierge HMO IPA	CHHMO	837	✓	✓														
Concierge TPA	CAS01	837	✓	✓														
CONCORDIA CARE INCORPORATED	33632	837	✓	✓														
Conifer Health Solutions (Adventist)	CAPMN	837	✓	✓					✓	✓								
Connected Senior Care Advantage	AGL03	837	✓	✓					✓	✓								
Connecticare - Medicare	78375	835	✓	✓		✓	✓											
Connecticare - Medicare	78375	837	✓	✓					✓	✓								
ConnectiCare Inc	06105	835	✓	✓		✓	✓											
ConnectiCare Inc	06105	837	✓	✓														
Connecticare Molina	00308	835	✓	✓		✓	✓											
Connecticare Molina	MLNCT	837	✓	✓														
Connecticut Carpenters Health Fund	37307	835	✓	✓		✓	✓											
Connecticut Carpenters Health Fund	37307	837	✓	✓														
Connecticut General (CIGNA)	62308	837	✓	✓					✓	✓								
Connecticut Medicaid	12K04	835	✓			✓												
Connecticut Medicaid	12K04	837	✓						✓									
Connecticut Medicaid	SKCT0	835		✓			✓											
Connecticut Medicaid	SKCT0	837		✓						✓								
Connecticut Medicare	12M04	835	✓			✓												
Connecticut Medicare	12M04	837	✓			✓			✓									
Connecticut Medicare	SMCT0	835		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Connecticut Medicare	SMCT0	837		✓			✓			✓								
Conseco Services LLC (ERA Only)	11285	835	✓	✓		✓	✓											ERA Only
Consociate Group	37135	835	✓	✓		✓	✓											
Consociate Group	37135	837	✓	✓					✓	✓								
Consolidated Associates Railroad	75284	837	✓	✓														
Consolidated Health Plans	87843	835	✓	✓		✓	✓											
Consolidated Health Plans	87843	837	✓	✓														
Consumer's Mutual Insurance (JVHL)	KWJVH	835	✓	✓		✓	✓											
Consumer's Mutual Insurance (JVHL)	KWJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Consumers Choice Health SC	45321	835	✓	✓		✓	✓											
Consumers Choice Health SC	45321	837	✓	✓					✓	✓								
Consumers Life Insurance Company	29076	837	✓	✓					✓	✓		✓	✓					
Container Graphics Corporation	08680	837	✓	✓					✓	✓								
Contessa Health	99433	837	✓	✓														
Contessa Health	CH201	835	✓	✓		✓	✓											
Contigo Health	34158	837	✓	✓														
Continental General Ins Co-Medicare Supplement	13193	837	✓	✓														
Continental General Insurance Company	71404	835	✓	✓		✓	✓											
Continental General Insurance Company	71404	837	✓	✓														
Continuum (formerly Marrick WRx)	46478	837	✓	✓														
Continuum Health Solutions (Workers Comp)	59557	837	✓	✓					✓	✓								
CONTRA COSTA BEHAVIORAL HEALTH PLAN	CCMHP	837		✓														
CONTRA COSTA HEALTH PLAN	CCHS	835	✓	✓		✓	✓											
CONTRA COSTA HEALTH PLAN	CCHS	837	✓	✓														
Contractors, Laborers, Teamsters & Engineers (Local 14B)	47046	837	✓	✓					✓	✓								
Conversion Plan-APWU	55544	837	✓															
Cook Children's Health	TH104	837		✓														
Cook Childrens Health Plan Star	CCHP9	835	✓	✓		✓	✓											
Cook Childrens Health Plan Star	CCHP9	837	✓	✓					✓	✓								
Cook Group Health Plan	35149	837	✓	✓					✓	✓								
Cook Group Solutions (CGS)-Regional Care, Inc.	47076	835	✓	✓		✓	✓											
Cook Group Solutions (CGS)-Regional Care, Inc.	47076	837	✓	✓														
Cook Medical Group	60065	837	✓	✓														
Cooks Children's Health Plan	CCHP1	835	✓	✓		✓	✓											
Cooks Children's Health Plan	CCHP1	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Cooperative Benefit Administrators (CBA)	39026	837	✓	✓					✓	✓		✓	✓					
Coordinated Benefit Plan	14829	835	✓	✓		✓	✓											
Coordinated Benefit Plan	14829	837	✓	✓					✓	✓								
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	✓	✓														
CoreSource AZ MN	35182	837	✓	✓						✓								
CoreSource NC IN	35182	837	✓	✓						✓								
Corizon Health Inc.	CORIZ	837	✓	✓														
Corizon Inc.	43160	837	✓	✓														
Cornerstone Benefit Adminstrators	35202	835	✓	✓		✓	✓											
Cornerstone Benefit Adminstrators	35202	837	✓	✓														
Cornerstone Hospice and Palliative Care, Inc.	RP111	837	✓	✓														
Cornerstone Preferred Resources	CB268	835	✓	✓		✓	✓											
Cornerstone Preferred Resources	CB268	837	✓	✓														
Corporate Benefits Service	56116	835	✓	✓		✓	✓											
Corporate Benefits Service	56116	837	✓	✓														
Corporate Plan Management, Inc.	64270	837	✓	✓					✓	✓								
CorrectCare - Integrated Health	CCIH	835	✓	✓		✓	✓											
CorrectCare - Integrated Health	CCIH	837	✓	✓														
CorrectCare Integrated Health - Jail	CCIHJAIL	837	✓	✓					✓	✓								Non-Louisiana Jails
Correctional Health Partners (ERA Only)	EHCHP	835	✓	✓		✓	✓											ERA Only
Country Financial (ERA Only)	IAS03	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
County of Fresno	AMM21	837	✓	✓														
County of Riverside	EC999	837	✓	✓														
County of Sacramento - EMSF	AMM20	837	✓	✓														
County Services Medical Program	CMSP1	837	✓	✓					✓	✓								
CountyCare	06541	835	✓	✓		✓	✓											
CountyCare	06541	837	✓	✓														
Covenant Administrators, Inc.	58102	835	✓	✓		✓	✓											
Covenant Administrators, Inc.	58102	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Covenant Management System Employee Benefit Plan	CMSEB	835		✓			✓											
Covenant Management System Employee Benefit Plan	CMSEB	837		✓														
Covenant Management System Employee Benefit Plan	UMSEB	835	✓			✓												
Covenant Management System Employee Benefit Plan	UMSEB	837	✓															
CoventryCares - Aetna Better Health of Michigan (JVHL)	J8JVH	835	✓	✓		✓	✓											
CoventryCares - Aetna Better Health of Michigan (JVHL)	J8JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
CoventryCares of Michigan	60054	835	✓	✓		✓	✓											
CoventryCares of Pennsylvania	23228	837	✓	✓					✓	✓								
Covet Health	58379	835	✓	✓		✓	✓											
Covet Health	IHS21	837	✓	✓														
Cox Health Plan	00019	835		✓			✓											
Cox Health Plan	00019	837		✓														
Cox Health Plan	00119	835	✓			✓												
Cox Health Plan	00119	837	✓															
CPR Share Plans	CB695	837	✓	✓					✓	✓								
Creative Medical Systems	64068	837	✓	✓														
Creative Plan Administrators	37320	837	✓	✓														
Crescent Health Solutions	56213	837	✓	✓														
Crossway Health Share	33213	837	✓	✓														
Crown City Medical Group	MPM35	837	✓	✓					✓	✓								
Croy-Hall Mgmt. Inc.	37266	837	✓	✓														
Crumdale Claims Solutions	69933	837	✓	✓														
CSEA DENTAL	CX054	837			✓						✓							
CSI Life (ERA Only)	IAS04	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
CSI Network Services	34186	837	✓	✓					✓	✓								
CSO Omaha (ERA Only)	IAS05	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Culinary Las Vegas - Unite HERE Health	59144	835	✓	✓		✓	✓											
Culinary Las Vegas - Unite HERE Health	59144	837	✓	✓														
Curaechoice	CC304	835	✓	✓		✓	✓											
Curaechoice	CC304	837	✓	✓														
Current Health Solutions	77153	837	✓	✓					✓	✓								
Custom Design Benefits	82056	835	✓	✓		✓	✓											
Custom Design Benefits	82056	837	✓	✓														
Davis Vision	00157	835		✓			✓											
Davis Vision	00157	837		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
DC Risk Solutions	DCRSS	837	✓	✓					✓	✓								
Dean Health Plan	39113	835	✓	✓		✓	✓											
Dean Health Plan	39113	837	✓	✓					✓	✓								
Dean Health Plan by Medica	41822	835	✓	✓		✓	✓											
Dean Health Plan by Medica	41822	837	✓	✓					✓	✓								As of January 1, 2024, this payer does not offer Electronic Remittance Advice (ERA) at this time.
Decent	DECENT	837	✓	✓														
DELANO IPA	77124	835		✓			✓											
Delaware First Health	68069	837	✓	✓					✓	✓		✓	✓					
Delaware Medicaid	12K87	835	✓			✓												
Delaware Medicaid	12K87	837	✓						✓									
Delaware Medicaid	SKDE0	835		✓			✓											
Delaware Medicaid	SKDE0	837		✓						✓								
Delaware Medicare	12M76	835	✓			✓												
Delaware Medicare	12M76	837	✓			✓			✓									
Delaware Medicare	SMDE0	835		✓			✓											
Delaware Medicare	SMDE0	837		✓			✓			✓								
Dell Children's Health Plan (DCHP)	38261	835	✓	✓		✓	✓											
Dell Children's Health Plan (DCHP)	38261	837	✓	✓														
Delta Dental (DDIC)	94276	835			✓			✓										
Delta Dental (DDIC)	94276	837			✓						✓							
Delta Dental Northeast	02027	835			✓			✓										
Delta Dental Northeast	02027	837			✓						✓			✓				
Delta Dental of Alabama	DDAL1	835			✓			✓										
Delta Dental of Alabama	DDAL1	837			✓						✓			✓				
Delta Dental of Alaska	DDAK1	835			✓			✓										
Delta Dental of Alaska	DDAK1	837			✓						✓							
Delta Dental of Arizona	86027	835			✓			✓										
Delta Dental of Arizona	86027	837			✓						✓			✓				
Delta Dental of Arkansas	CDAR1	835			✓			✓										
Delta Dental of Arkansas	CDAR1	837			✓						✓			✓				
Delta Dental of California	77777	835			✓			✓										
Delta Dental of California	77777	837			✓						✓			✓				
Delta Dental of Colorado	DDPCO	835			✓			✓										
Delta Dental of Colorado	DDPCO	837			✓						✓			✓				

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Delta Dental of Connecticut	22189	837			✓						✓			✓				
Delta Dental of Delaware	51022	835			✓			✓										
Delta Dental of Delaware	51022	837			✓						✓							
Delta Dental of Florida	DDFL1	835			✓			✓										
Delta Dental of Florida	DDFL1	837			✓						✓			✓				
Delta Dental of Georgia	DDGA1	835			✓			✓										
Delta Dental of Georgia	DDGA1	837			✓						✓							
Delta Dental of Idaho	82029	835			✓			✓										
Delta Dental of Idaho	82029	837			✓						✓			✓				
Delta Dental of Illinois	05030	835			✓			✓										
Delta Dental of Illinois	05030	837			✓						✓			✓				
Delta Dental of Illinois - Individual	IDIND	835			✓			✓										
Delta Dental of Illinois - Individual	IDIND	837			✓						✓			✓				
Delta Dental of Indiana	DDPI	835			✓			✓										
Delta Dental of Indiana	DDPI	837			✓						✓			✓				
Delta Dental of Iowa	CDIA1	837			✓						✓			✓				
Delta Dental of Kansas	CDKS1	835			✓			✓										
Delta Dental of Kansas	CDKS1	837			✓						✓							
Delta Dental of Kentucky	CDKY1	835			✓			✓										
Delta Dental of Kentucky	CDKY1	837			✓						✓			✓				
Delta Dental of Louisiana	DDLA1	835			✓			✓										
Delta Dental of Louisiana	DDLA1	837			✓						✓			✓				
Delta Dental of Maryland	DDMD1	835			✓			✓										
Delta Dental of Maryland	DDMD1	837			✓						✓							
Delta Dental of Massachusetts	04614	835			✓			✓										
Delta Dental of Massachusetts	04614	837			✓						✓			✓				
Delta Dental of Michigan	DDPM	835			✓			✓										
Delta Dental of Michigan	DDPM	837			✓						✓			✓				
Delta Dental of Minnesota	07000	835			✓			✓										
Delta Dental of Minnesota	07000	837			✓						✓			✓				
Delta Dental of Mississippi	DDMS1	835			✓			✓										
Delta Dental of Mississippi	DDMS1	837			✓						✓			✓				
Delta Dental of Missouri	43090	835			✓			✓										
Delta Dental of Missouri	43090	837			✓						✓			✓				
Delta Dental of Montana	DDMT1	835			✓			✓										

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Delta Dental of Montana	DDMT1	837			✓						✓			✓				
Delta Dental of Nebraska	07027	835			✓			✓										
Delta Dental of Nebraska	07027	837			✓						✓			✓				
Delta Dental of Nevada	DDNV1	835			✓			✓										
Delta Dental of Nevada	DDNV1	837			✓						✓			✓				
Delta Dental of New Jersey	22189	835			✓			✓										
Delta Dental of New Jersey	22189	837			✓						✓			✓				
Delta Dental of New Mexico	DDPNM	835			✓			✓										
Delta Dental of New Mexico	DDPNM	837			✓						✓			✓				
Delta Dental of New York	11198	835			✓			✓										
Delta Dental of New York	11198	837			✓						✓							
Delta Dental of North Carolina	56101	835			✓			✓										
Delta Dental of North Carolina	56101	837			✓						✓			✓				
Delta Dental of North Dakota	07029	835			✓			✓										
Delta Dental of North Dakota	07029	837			✓						✓			✓				
Delta Dental of Ohio	DDPO	835			✓			✓										
Delta Dental of Ohio	DDPO	837			✓						✓			✓				
Delta Dental of Oklahoma	DDPOK	835			✓			✓										
Delta Dental of Oklahoma	DDPOK	837			✓						✓			✓				
Delta Dental of Oregon	CDOR1	835			✓			✓										
Delta Dental of Oregon	CDOR1	837			✓						✓							
Delta Dental of Pennsylvania	23166	835			✓			✓										
Delta Dental of Pennsylvania	23166	837			✓						✓							
Delta Dental of Puerto Rico	66043	835			✓			✓										
Delta Dental of Puerto Rico	66043	837			✓						✓			✓				
Delta Dental of Rhode Island	05029	835			✓			✓										
Delta Dental of Rhode Island	05029	837			✓						✓							
Delta Dental of South Carolina	43091	835			✓			✓										
Delta Dental of South Carolina	43091	837			✓						✓			✓				
Delta Dental of South Dakota	54097	837			✓						✓			✓				
Delta Dental of Tennessee	DDPTN	835			✓			✓										
Delta Dental of Tennessee	DDPTN	837			✓						✓			✓				
Delta Dental of Texas	DDTX1	835			✓			✓										
Delta Dental of Texas	DDTX1	837			✓						✓			✓				
Delta Dental of Utah	DDUT1	835			✓			✓										

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Delta Dental of Utah	DDUT1	837			✓						✓			✓				
Delta Dental of Virginia	54084	835			✓			✓										
Delta Dental of Virginia	54084	837			✓						✓							
Delta Dental of Washington	91062	835			✓			✓										
Delta Dental of Washington	91062	837			✓						✓							
Delta Dental of Washington DC	52147	835			✓			✓										
Delta Dental of Washington DC	52147	837			✓						✓							
Delta Dental of West Virginia	31096	835			✓			✓										
Delta Dental of West Virginia	31096	837			✓						✓			✓				
Delta Dental of Wisconsin	39069	835			✓			✓										
Delta Dental of Wisconsin	39069	837			✓						✓			✓				
Delta Dental of Wisconsin - Individual	WDENC	835			✓			✓										
Delta Dental of Wisconsin - Individual	WDENC	837			✓													
Delta Dental of Wyoming	CDWY1	835			✓			✓										
Delta Dental of Wyoming	CDWY1	837			✓						✓			✓				
Delta Dental Wisconsin Medicare Advantage	WIMAN	837			✓						✓			✓				
Delta Health Systems	DHS01	835	✓	✓		✓	✓											
Delta Health Systems	DHS01	837	✓	✓					✓	✓								
Delta Minnesota M.A. Public Programs	07031	837			✓						✓			✓				
DELTACARE USA	DDCA2	835			✓			✓										
DELTACARE USA	DDCA2	837			✓						✓							
Dental Professionals of Wisconsin	39148	837			✓						✓							
DentaQuest Government Plans	CX014	835			✓			✓										
DentaQuest Government Plans	CX014	837			✓													
DentaQuest Vision	63740	835		✓			✓											Also known as EyeQuest
DentaQuest Vision	63740	837		✓														
Dentegra	88888	837			✓													
Denti-Cal Encounters	DTCA7	837			✓													Encounter Claims Only (not FFS)
Denver Health - Indigent	84134	837		✓														
Denver Health and Hospital Authority	84133	837	✓	✓														
Denver Health Medical Plan	84135	835	✓	✓		✓	✓											
Denver Health Medical Plan	84135	837	✓	✓														
Denver Health Medical Plan - FHN	65456	837	✓	✓														
Denver Health Medical Plan Inc. - Medicare Choice	84131	837	✓	✓														
Deseret Mutual	12X35	837	✓			✓												ERA Payer Code SX105

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Deseret Mutual	SX105	835	✓	✓		✓	✓											
Deseret Mutual	UH105	837		✓			✓											ERA Payer Code SX105
Desert Medical Group	DESRT	837	✓	✓					✓									
Desert Oasis Healthcare	44006	837		✓														
Desert Valley Medical Group	DVMC1	837	✓	✓														
Detego Health	62599	837	✓	✓														
Devoted Health	DEVOT	835	✓	✓		✓	✓											
Devoted Health	DEVOT	837	✓	✓														
DH Cook	82347	837	✓	✓														
DHMN Preferred IPA Hospital Risk	DHM02	835	✓	✓														
DHMN Preferred IPA Hospital Risk	DHM02	837	✓	✓					✓	✓								
DHMN Santa Cruz	DHM01	835	✓	✓		✓												
DHMN Santa Cruz	DHM01	837	✓	✓					✓	✓								
Dialysis TPA	82435	837	✓	✓														
Diamond Bar Medical Group	NMM01	837	✓	✓														
Dignity Global	MPM27	837	✓	✓					✓	✓								
Dignity HCLA	MPM28	837	✓	✓					✓	✓								
Dignity Health - Mercy Medical Group / Woodland Clinic	PROH1	835	✓	✓		✓	✓											
Dignity Health - Mercy Medical Group / Woodland Clinic	PROH1	837	✓	✓														
Dignity Health - Sacramento Hospital	HOSH1	835	✓	✓		✓	✓											
Dignity Health - Sacramento Hospital	HOSH1	837	✓	✓					✓	✓								
Dignity Health Management Services	DHM02	837	✓	✓					✓	✓								
Dignity Health Medical Group - Inland Empire	DHFIE	837	✓	✓					✓	✓								
Dignity Health Medical Group- Inland Empire (Professional Risk)	PROH4	835	✓	✓		✓	✓											
Dignity Health Medical Group- Inland Empire (Professional Risk)	PROH4	837	✓	✓														
Dignity Health MSO	27133	837	✓	✓														
Dignity Health MSO	MCS03	835	✓	✓		✓	✓											
Dignity Health MSO	MCS03	837	✓	✓														
Direct Care Administrators	DCA62	837		✓						✓								
District of Columbia Medicaid	12001	837	✓			✓												
District of Columbia Medicaid	77033	835	✓	✓		✓	✓											
District of Columbia Medicaid	SKDC0	837		✓			✓											
District of Columbia Medicare	12M63	837	✓			✓												
District of Columbia Medicare	SMDC0	835		✓			✓											
District of Columbia Medicare	SMDC0	837		✓			✓			✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Diversified Administration Corporation	06102	835	✓	✓		✓	✓											
Diversified Administration Corporation	06102	837	✓	✓														
Diversified Benefit Administrators	DBA20	835	✓	✓		✓	✓											
Diversified Benefit Administrators	DBA20	837	✓	✓					✓	✓								
DMC Care (JVHL)	JSJVH	835	✓	✓		✓	✓											
DMC Care (JVHL)	JSJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Doctors Healthcare Plans	DRHCP	835	✓	✓		✓	✓											
Doctors Healthcare Plans	DRHCP	837	✓	✓														
Doctors Managed IPA	DMIPA	837	✓	✓					✓	✓								
Dolton Medical Group	DOLMG	837	✓	✓					✓	✓								
Dominion Dental	DOM01	837			✓									✓				
Downey Select IPA	APP01	837	✓	✓					✓	✓								
Dreyer Health	DREYR	837		✓						✓								
Driscoll Children's Health Plan	74284	835	✓	✓		✓	✓											
Driscoll Children's Health Plan	74284	837	✓	✓														
Dunn and Associates Benefits Administrators Inc.	35186	835	✓	✓		✓	✓											
Dunn and Associates Benefits Administrators Inc.	35186	837	✓	✓														
Dupage Medical group	DMG01	835	✓	✓		✓	✓											
Dupage Medical group	DMG01	837	✓	✓					✓	✓								Claims with DOS after Jan 1 2023, please submit to payer code 36364
DuPage Medical Group	57140	835	✓	✓		✓	✓											
E-V Benefits Management Inc (Columbus OH)	34159	837		✓						✓								
E.S. BEVERIDGE & ASSOCIATES	34108	837	✓	✓														
Early Intervention CBO	36434	837		✓														
Early Intervention Central	TH084	837		✓														
East Boston Neighborhood Pace	25849	835	✓	✓		✓	✓											
East Boston Neighborhood Pace	25849	837	✓	✓														
Eastern Iowa Community Healthcare (EICH)	23861	837	✓	✓					✓	✓								
Eastland Medical Group	66122	837	✓	✓														
Easy Access Care IPA	EAIPA	837	✓	✓					✓	✓								
Easy Care MSO	ECMSO	837	✓	✓														
Easy Choice Health Plan of California	20532	837	✓	✓					✓	✓								
Easy Choice Health Plan of New York	24770	837		✓														
EBIX HEALTH ADMINISTRATION EXCHANGE (EHAE)	IAC01	837	✓	✓														
EBMC	31074	835	✓	✓		✓	✓											
EBMC	31074	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
EBMS (Employee Benefit Management Services Inc.)	12X44	837	✓						✓									ERA Payer Code 81039
EBMS (Employee Benefit Management Services Inc.)	81039	835	✓	✓		✓	✓											
EBMS (Employee Benefit Management Services Inc.)	81039	837	✓	✓						✓								ERA Payer Code 81039
Eddy Senior Care PACE	R3500	837	✓	✓	✓													
Edenbridge of DC	R3490	835	✓	✓		✓	✓											
Edenbridge of DC	R3490	837	✓	✓	✓													
Edenbridge PACE of West Baltimore	R3491	835	✓	✓		✓	✓											
Edenbridge PACE of West Baltimore	R3491	837	✓	✓	✓													
Edison Health	66456	837	✓	✓														
Edison Revolution	89425	837	✓	✓														
Educator's Mutual (EMIA)	SX110	837		✓			✓			✓								
EGID (Employees Group Insurance Division)	22521	837	✓	✓														
EHS Medical Group - Fresno	SYMED	837	✓	✓														
EL Camino Health Alliance	ECL01	835	✓	✓		✓	✓											
EL Camino Health Alliance	ECL01	837	✓	✓					✓	✓								
El Paso First - CHIP	12T27	837	✓															
El Paso First - CHIP	TH090	837		✓														
EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS	EPF37	835	✓	✓		✓	✓											
EL PASO FIRST HEALTH PLAN HCO HEALTHCARE OPTIONS	EPF37	837	✓	✓		✓	✓											
El Paso First Health Plan Premier Plan Star Medicaid HMO	EPF02	835	✓	✓		✓	✓											
El Paso First Health Plan Premier Plan Star Medicaid HMO	EPF02	837	✓	✓		✓	✓											
EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP)	EPF07	835	✓	✓		✓	✓											
EL PASO HEALTH ADVANTAGE DUAL SNP (HMO D-SNP)	EPF07	837	✓	✓		✓	✓		✓	✓								
El Proyecto Del Barrio	MPM04	837	✓	✓					✓	✓								
Elderhaus Inc.	64192	837	✓	✓														
ElderONE (Collabrios Health)	98627	835	✓	✓	✓	✓	✓	✓										
ElderONE (Collabrios Health)	98627	837	✓	✓	✓													
ElderPlan Inc.	31625	835	✓	✓		✓	✓											
ElderPlan Inc.	31625	837	✓	✓														
Elderwood Health	03964	837	✓	✓					✓	✓								
Element Care Inc.	04326	835	✓	✓		✓	✓											
Element Care Inc.	04326	837	✓	✓														
Elevate PFS	14043	837	✓	✓		✓	✓		✓									Elevate PFS formerly Centauri Health Solutions
elipsLife (ERA Only)	IAS20	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Elite Physicians Group	EPG01	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Emanate Health IPA	MPM62	835	✓	✓		✓	✓											
Emanate Health IPA	MPM62	837	✓	✓					✓	✓								
Emanate Health IPA - Astrana	EHIHO	837	✓															Dates of service on or after 1.1.2026
Emanate Health IPA (NMM)	NMM01	837	✓	✓														
Emblem Dental	11271	837			✓						✓			✓				
Emblem Dental	EMBDQ	837			✓						✓			✓				
Emerald Health Network Inc. (All PPO Business)	34167	837	✓	✓														
Emergency Medical Services Fund - Orange County CA	95600	837		✓						✓								
EMHS Employee Health Plan	16565	835	✓	✓		✓	✓											
EMHS Employee Health Plan	16565	837	✓	✓					✓	✓								
EMI Health	SX110	835	✓	✓		✓	✓											
EMI Health	SX110	837	✓	✓		✓	✓		✓	✓								
EMI-KP Ambulance Claims	59299	837		✓														
Empire Dental	55093	835			✓			✓										
Empire Dental	55093	837			✓						✓			✓				
Empire Healthcare IPA	EHI01	835	✓	✓		✓	✓											
Empire Healthcare IPA	EHI01	837	✓	✓					✓	✓								
Empire Omnipro (BC NY City)	12B36	837	✓						✓									
Empire Omnipro (BC NY State)	12B35	837	✓						✓									
Empire Physician's Medical Group	EMP01	837		✓														
Employee Benefit Concepts (Farmington Hills MI)	38241	837	✓	✓														
Employee Benefit Consultants	37257	835	✓	✓		✓	✓											
Employee Benefit Consultants	37257	837	✓	✓	✓						✓							Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Employee Benefit Logistics	92135	835	✓	✓		✓	✓											
Employee Benefit Logistics	92135	837	✓	✓					✓	✓								
Employee Benefit Services	37216	835	✓	✓		✓	✓											
Employee Benefit Services	37216	837	✓	✓					✓	✓								
Employee Benefit Services Inc. (EBSI)	60221	835	✓	✓														
Employee Benefit Services Inc. (EBSI)	60221	837	✓	✓														
Employee Benefit Systems	42149	835	✓	✓		✓	✓											
Employee Benefit Systems	42149	837	✓	✓														
Employee Benefits Administration & Management Company	22262	835		✓			✓											
Employee Benefits Administration & Management Company	22262	837		✓														
Employee Benefits Plan Administration Inc. (E.B.P.A.)	03036	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Employee Health Systems	SYMED	837	✓	✓														
Employee Plans LLC	35112	837	✓	✓														
Employee Security, Inc.	54098	837		✓						✓								
Employer Direct Healthcare	48888	837	✓	✓														
Employer Plan Services, Inc.	74212	835	✓	✓		✓	✓											aka Fringe Benefit Group - Houston
Employer Plan Services, Inc.	74212	837	✓	✓					✓	✓								aka Fringe Benefit Group - Houston
Employer's Direct Health - Employee Plan	75236	837	✓	✓														
Employer's Direct Health - FI	75235	837	✓	✓														
Employer's Direct Health - SF	75233	837	✓	✓														
Employers Direct Health	75232	837	✓	✓														
Employers Health Network	IHS07	837	✓	✓					✓	✓								
Employers Mutual Inc (Jacksonville Florida)	59298	837	✓	✓														
Employers Mutual Inc. (Stuart Florida)	59331	837	✓	✓														
Empower 360	IHS01	837	✓	✓					✓	✓								
Empower Healthcare Solutions	12956	835	✓	✓		✓	✓											
Empower Healthcare Solutions	12956	837	✓	✓					✓	✓								
EnableComp MVA	ENCMV	837	✓	✓					✓	✓		✓	✓					Client must be contracted with EnableComp
EnableComp OOS Medicaid	ENCMD	837	✓	✓					✓	✓		✓	✓					Client must be contracted with EnableComp
EnableComp VA	ENCVA	837	✓	✓					✓	✓		✓	✓					Client must be contracted with EnableComp
EnableComp WC	ENCMP	837	✓	✓								✓	✓					Client must be contracted with EnableComp
Encircle PPO	35206	837	✓	✓														
Encore Health Network	35206	837	✓	✓														
Enstar Natural Gas	91136	837	✓	✓														
Enterprise Group Planning, Inc.	EGPIN	835	✓	✓		✓	✓											
Enterprise Group Planning, Inc.	EGPIN	837	✓	✓														
Enterprise Life Insurance Company	62325	837	✓	✓					✓	✓								
Enterprise Life Insurance Company	USHA1	835	✓	✓		✓	✓											
Entrust, Inc	36878	835	✓	✓		✓	✓											
Entrust, Inc	36878	837	✓	✓					✓	✓								
Envolve Dental	46278	835			✓			✓										
Envolve Dental	46278	837			✓						✓			✓				
Envolve Vision	56190	837		✓														
Eon Health	85468	837	✓	✓					✓	✓								
Epic Assistance	49578	837	✓	✓					✓	✓								
EQUICOR	62308	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
EQUICOR - PPO	62308	837	✓	✓					✓	✓								
Erie Insurance Medicare Supplement (ERA Only)	IAS06	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
ERISA	TH110	837		✓														
Esperanza PACE	R3465	835	✓	✓		✓	✓											
Esperanza PACE	R3465	837	✓	✓														
Essence Healthcare	20818	835	✓	✓		✓	✓											
Essence Healthcare	20818	837	✓	✓					✓	✓								
Essential Health Partners	EHPSC	835	✓	✓		✓	✓											
Essential Health Partners	EHPSC	837	✓	✓														For claims with DOS 7/1/19 and after.
Essential Health Partners IPA	EIPA9	837	✓	✓														
Eternal Health	RP037	835	✓	✓		✓	✓											
Eternal Health	RP037	837	✓	✓					✓	✓								
Everence I & P	35605	835	✓	✓		✓	✓											
Everence I & P	35605	837	✓	✓					✓	✓								
Everest Reinsurance (ERA Only)	IAS07	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Evernorth Behavioral Health, Inc	62308	837	✓	✓					✓	✓								
Evernorth Network Services	62350	837	✓	✓					✓	✓								
Everpointe	32052	837	✓	✓														
eviCore	62160	837	✓	✓														
EVOLENT SOMOS ANTHEM NY	81508	835	✓	✓		✓	✓											
EVOLENT SOMOS ANTHEM NY	81508	837	✓	✓					✓	✓								
Evolent Specialty (formerly New Century Health)	NCHCA	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)	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.
Evolent Specialty (formerly New Century Health)	NCHOR	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)	NCHUR	837	✓	✓					✓	✓								As of January 29, 2024, Electronic Remits Advice (ERA) is not available for this payer at this time.
Evolutions Healthcare Systems (New Port Richey FL)	59313	835	✓	✓		✓	✓											
Evolutions Healthcare Systems (New Port Richey FL)	59313	837	✓	✓														
Evry Health	EH001	835	✓	✓		✓	✓											
Excellus - BCBS Utica Watertown	12B38	835	✓			✓												
Excellus - BCBS Utica Watertown	12B38	837	✓															
Excellus - BCBS Utica Watertown	SB806	835		✓			✓											
Excellus - BCBS Utica Watertown	SB806	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Excellus - Blue Cross Blue Shield Central NY	12B37	835	✓			✓												
Excellus - Blue Cross Blue Shield Central NY	12B37	837	✓															
Excellus - Blue Cross Blue Shield Central NY	SB805	835		✓			✓											
Excellus - Blue Cross Blue Shield Central NY	SB805	837		✓						✓								
Excellus - Blue Cross Blue Shield Rochester Area	12B40	835	✓			✓												
Excellus - Blue Cross Blue Shield Rochester Area	12B40	837	✓															
Excellus - Blue Cross Blue Shield Rochester Area	SB804	835		✓			✓											
Excellus - Blue Cross Blue Shield Rochester Area	SB804	837		✓						✓								
ExclusiCare	71412	837	✓	✓														
Exemplar Health	83383	837	✓	✓					✓	✓								
Extended Care MLTC	46166	837	✓	✓					✓	✓								
Eye Management, Inc. (EMI)	65062	837		✓														
EyeMed	31165	837		✓														
F40 Alaska Carpenters Trust	91136	837	✓															
FABOH(CHP/RPU)	39112	837	✓	✓					✓	✓								
Facey Medical Foundation	95432	835		✓			✓											
Facey Medical Foundation	95432	837		✓														
FACS Group	37300	837	✓	✓														
Fallon Community Health Plan	22254	835	✓	✓		✓	✓											
Fallon Community Health Plan	22254	837	✓	✓														
Family Care Specialists	FCS01	837	✓	✓					✓	✓								
Family Care Specialists (FCS)	MPM40	837	✓	✓					✓	✓								
Family Choice Medical Group	CAPMN	835	✓	✓		✓	✓											
Family Choice Medical Group	CAPMN	837	✓	✓					✓	✓								
Family Choice Medical Services	FCMS2	835	✓	✓		✓	✓											
Family Choice Medical Services	FCMS2	837	✓	✓	✓													
Family Healthcare Network	R3468	835	✓	✓	✓	✓	✓	✓										
Family Healthcare Network	R3468	837	✓	✓	✓													
Family Practice Medical Group	10145	835	✓	✓		✓	✓											
Family Practice Medical Group	10145	837	✓	✓														
Family Seniors Medical Group	HCMG1	837	✓	✓					✓	✓								
Farm Bureau Health Plans (ERA Only)	62045	835	✓	✓		✓	✓											
Farm Bureau Health Plans & MAPD	RP061	837	✓	✓														
FCE Benefit Administrators	33033	835	✓	✓		✓	✓											
FCE Benefit Administrators	33033	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
FCL Dental	CX090	837			✓						✓			✓				
FDNY World Trade Center Health Plan	FDNYP	837		✓			✓											
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	✓	✓														
Federated HR Services	37300	837	✓	✓														
Fenix Medical Group	60818	835	✓	✓		✓	✓											
Fenix Medical Group	60818	837	✓	✓														
Fenyx Health Group MSA	83309	837	✓	✓														
Fidelis Care EVV	EVVNY	837	✓	✓														Use only for Fidelis Care New York Electronic Visit Verification claims.
Fidelis Care New York	11315	835	✓	✓		✓	✓											
Fidelis Care New York	11315	837	✓	✓					✓	✓								
Fidelity Security Life	FSL01	837	✓	✓														
Firefly Health	FRFLY	837	✓	✓					✓	✓								
First Agency	88055	837	✓	✓														
FIRST CARE	94999	835	✓	✓		✓	✓											
FIRST CARE	94999	837	✓	✓														
First Carolina Care	FCC01	835	✓	✓		✓	✓											
First Carolina Care	FCC01	837	✓	✓														
First Choice Health Administrators	91131	835	✓	✓		✓	✓											
First Choice Health Administrators	91131	837	✓	✓														
First Choice MA Plans	FCMA1	835	✓	✓														
First Choice MA Plans	FCMA1	837	✓	✓														
First Choice Medical Group	FCMG1	837	✓	✓					✓	✓								
First Choice Medical Group/Meritage	FC001	835	✓	✓														
First Choice Medical Group/Meritage	FC001	837	✓	✓														
First Choice Next (SC)	57103	835	✓	✓		✓	✓											
First Choice Next (SC)	57103	837	✓	✓					✓	✓								
First Choice of Midwest	75138	837	✓	✓					✓	✓								
First Choice VIP Care (SC - DSNP)	32456	835	✓	✓		✓	✓											
First Choice VIP Care (SC - DSNP)	32456	837	✓	✓					✓	✓								
First Choice VIP Care Plus by Select Health of South Carolina	77009	835	✓	✓		✓	✓											
First Choice VIP Care Plus by Select Health of South Carolina	77009	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
First Medical Network (FMN) - Atlanta GA	29076	837	✓	✓					✓	✓		✓	✓					
First Primary Care	FPC36	835	✓	✓		✓	✓											
First Primary Care	FPC36	837	✓	✓														
FirstNation Health	65418	837	✓	✓					✓	✓								
Flex Compensation Dental	R7004	837			✓						✓			✓				
Florida Blue Medicare	FBM01	835	✓	✓		✓	✓											
Florida Blue Medicare	FBM01	837	✓	✓														
Florida Community Care	FLCCR	835	✓	✓		✓	✓											
Florida Community Care	FLCCR	837	✓	✓					✓	✓								
Florida Complete Care	FLCPC	835	✓	✓		✓	✓											
Florida Complete Care	FLCPC	837	✓	✓					✓	✓								
Florida First	59276	837		✓														
Florida Health Administrators	86753	835	✓	✓		✓	✓											
Florida Health Administrators	86753	837	✓	✓					✓	✓								
Florida Health Care Plan	59322	835	✓	✓		✓	✓											
Florida Health Care Plan	59322	837	✓	✓														
Florida Hospital Orlando VBR	VB001	837	✓	✓					✓	✓								
Florida Medicaid	77027	835	✓	✓		✓	✓											
Florida Medicaid	77027	837	✓	✓		✓	✓		✓	✓								
Florida Medicare	09101	835	✓			✓												
Florida Medicare	09101	837	✓			✓												
Florida Medicare	09102	835		✓			✓											
Florida Medicare	09102	837		✓			✓			✓								
Florida PACE Center	FLPAC	837	✓	✓														
Flume Health	FH205	837	✓	✓														
FMH Benefit Services Inc.	48117	835	✓	✓		✓	✓											
FMH Benefit Services Inc.	48117	837	✓	✓														
For Your Benefit	FYB01	837	✓	✓					✓	✓								
Forest County Potawatomi Insurance	25059	835	✓	✓		✓	✓											
Forest County Potawatomi Insurance	25059	837	✓	✓	✓						✓							
Foundation for Medical Care of Tulare & Kings County	TKFMC	837	✓	✓														
Fountain Valley IPA	CAPMN	837	✓	✓					✓	✓								
Fox Valley Medicine Site 199	FVMCH	837	✓	✓														
Fox-Everett Inc.	64069	835	✓	✓		✓	✓											
Fox-Everett Inc.	64069	837	✓	✓	✓						✓							

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Franciscan Purdue	FAIPUR	835	✓	✓		✓	✓											
Franciscan Purdue	FAIPUR	837	✓	✓														
Franciscan Senior Health & Wellness	FSHW1	835	✓	✓														
Franciscan Senior Health & Wellness	FSHW1	837	✓	✓	✓				✓	✓	✓							
Freedom Claims Management	67136	837	✓	✓					✓	✓								
Freedom Health Plan	41212	835	✓	✓		✓	✓											
Freedom Health Plan	41212	837	✓	✓														
Freedom Life Insurance	62324	835	✓	✓		✓	✓											
Freedom Life Insurance	62324	837	✓	✓														
Friant Water Users	TKFMC	837	✓	✓														
Friday Health Plans	H0657	835	✓	✓		✓	✓											Formerly known as Colorado Choice Health Plans
Friday Health Plans	H0657	837	✓	✓					✓	✓								Formerly known as Colorado Choice Health Plans
Fringe Benefit Coordinators	59204	835	✓	✓		✓	✓											
Fringe Benefit Coordinators	59204	837	✓	✓														
Fringe Benefit Group	45289	835	✓	✓		✓	✓											
Fringe Benefit Group	45289	837	✓	✓														
Fringe Benefit Group	93158	837	✓	✓														
Fringe Benefit Management	59069	837	✓	✓														
FrontPath Health Coalition	34171	837	✓	✓														
Galveston County Indigent Health Care	30005	837	✓	✓														
Garden State Life Insurance Company (ERA Only)	IAS24	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
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	60550	837	✓	✓														
Gateway Health Plan Medicaid PA	25169	835	✓	✓		✓	✓											
Gateway Health Plan Medicaid PA	25169	837	✓	✓														
Gateway IPA (Pinnacle Health Resources) (Prospect Medical Group)	PROSP	837		✓						✓								
GBS Group Benefit Services, Inc	80241	837	✓	✓	✓													
Geisinger Health Plan	75273	835	✓	✓		✓	✓											
Geisinger Health Plan	75273	837	✓	✓						✓								
Geisinger Health Plan	GHP22	835			✓			✓										
Geisinger Health Plan	GHP22	837			✓						✓							
GEMCare (Golden Empire Managed Care System)	MCS01	837		✓														
GemCare Health Plan, Kern County EPO	MCS03	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Gemcare IPA	27133	837	✓	✓														
General Vision Services	GVS01	837		✓														
Generations Healthcare	46050	837	✓	✓														
Genesee Health Plan (JVHL)	MBJVH	835	✓	✓		✓	✓											
Genesee Health Plan (JVHL)	MBJVH	837	✓	✓		✓	✓		✓	✓								Provider 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		✓	✓		✓	✓										
Georgia Medicaid	SKGA0	837		✓	✓					✓	✓							
Georgia Medicare	12M05	835	✓			✓												
Georgia Medicare	12M05	837	✓			✓			✓									
Georgia Medicare	SMGA0	835		✓			✓											
Georgia Medicare	SMGA0	837		✓			✓			✓								
GHI - New York (Group Health Inc.)	13551	835	✓	✓	✓	✓	✓	✓										
GHI - New York (Group Health Inc.)	13551	837	✓	✓	✓				✓	✓	✓			✓				
GHI HMO	25531	835	✓	✓		✓	✓											
GHI HMO	25531	837	✓	✓					✓	✓								
GHP (Group Health Plan) - MULTIPLAN PHCS/GROUP HEALTH	25141	837		✓														
Glendale Adventist Medical Center	NMM01	837	✓	✓														
Global Care Inc.	07689	835	✓	✓		✓	✓											
Global Care Inc.	07689	837	✓	✓					✓	✓								
Global Care Medical Group IPA	MPM05	837	✓	✓														
Global Excel Management	GEM01	835	✓	✓		✓	✓											
Global Excel Management	GEM01	837	✓	✓														
Global Health	GHOKC	837	✓	✓					✓	✓								
Global Healthcare Alliance	12X59	837	✓															
Global Medical Management	GMICC	837	✓	✓														
Global TBSP	MPM64	837	✓	✓														As of October 12, 2023, ERA is not available for this payer.
Globe Life and Accident Insurance Company (ERA Only)	91472	835	✓	✓		✓	✓											
GMP - Employers Retiree Trust	23641	837		✓														
GMP - Employers Retiree Trust	GMPER	835	✓	✓		✓	✓											
GMR Healthcare	85664	837	✓	✓														
GMS Inc.	47083	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
GMS Inc.	47083	837	✓	✓					✓	✓								
Gold Coast Health Plan	77160	835	✓	✓		✓	✓											
Gold Coast Health Plan	77160	837	✓	✓					✓	✓								
Gold Kidney Health Plan	A6865	835	✓	✓		✓	✓											
Gold Kidney Health Plan	A6865	837	✓	✓														
Golden Bay Health Plan	GBHP1	835	✓	✓		✓	✓											
Golden Bay Health Plan	GBHP1	837	✓	✓														
Golden Coast MSO	GCMSO	837	✓	✓					✓	✓								
Golden Physicians	GPMG2	835	✓	✓														
Golden Physicians	GPMG2	837	✓	✓														
Golden Shore Medical Group (GSMG)	NMM03	835	✓	✓														
Golden Shore Medical Group (GSMG)	NMM03	837	✓	✓					✓	✓								
Golden State Medical Group	MBA01	837	✓	✓					✓									
Gonzaba Medical Group	GMGSA	835	✓	✓		✓	✓											
Gonzaba Medical Group	GMGSA	837	✓	✓														
Good Samaritan Medical Practice Association	IP086	837		✓														
Good Samaritan Medical Practice Association	PROSP	837	✓	✓					✓	✓								
Government Employees Health Association (GEHA)	39026	837			✓						✓	✓	✓					
Gravie Inc.	GRV01	835	✓	✓		✓	✓											
Gravie Inc.	GRV01	837	✓	✓														
Great American Life Ins. Co-Medicare Supplement	13193	837	✓	✓														
Great Southern Life (ERA Only)	IAS09	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Great States Health IICT	GSHTX	837	✓	✓					✓	✓								
Great-West Healthcare	62308	835	✓	✓		✓	✓											
Great-West Healthcare	80705	837	✓	✓														
Great-West Healthcare (formerly American General)	63665	837	✓	✓														
Greater Covina Medical Group	99284	837		✓														
Greater Newport Physicians	GNPMG	835	✓	✓		✓	✓											
Greater Newport Physicians	GNPMG	837	✓	✓					✓	✓								
Greater Newport Physicians Medical Group	33010	837	✓	✓					✓	✓								
Greater Orange County Medical Group	NMM01	837	✓	✓														
Greater San Gabriel Med Grp	NMM01	837	✓	✓														
Group Administrators Ltd.	36338	835	✓	✓		✓	✓											
Group Administrators Ltd.	36338	837	✓	✓	✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Group and Pension Administrators	48143	835	✓	✓	✓	✓	✓	✓										
Group and Pension Administrators	48143	837	✓	✓	✓													
Group Benefit Services Inc.	CB951	835	✓	✓		✓	✓											
Group Benefit Services Inc.	CB951	837	✓	✓														
Group Benefits - Louisiana	72087	837		✓			✓											
Group Health Co-op	12X16	837	✓															
Group Health Cooperative of South Central Wisconsin	39167	835	✓	✓		✓	✓											
Group Health Cooperative of South Central Wisconsin	39167	837	✓	✓														
Group Insurance Service Center Inc.	37276	837	✓	✓														
Group Management Services Inc	OBA16	837	✓	✓														
Group Marketing Services, Inc.	66701	835	✓	✓		✓	✓											
Group Marketing Services, Inc.	66701	837	✓	✓														
Group Resources	28680	837	✓	✓					✓	✓								
Guarantee Trust Life Insurance	TLW81	835	✓	✓		✓	✓											
Guardian Life Insurance Company of America	64246	835	✓	✓	✓	✓	✓	✓										
Guardian Life Insurance Company of America	64246	837	✓	✓	✓						✓			✓				
Guidant Health Plan	GHP01	837	✓	✓														
Guidehealth Behavioral Health Network	36363	835	✓	✓		✓	✓											
Guidehealth Behavioral Health Network	36363	837	✓	✓														
Gulf Guaranty	99943	837	✓	✓					✓	✓								
Gulf Guaranty	99953	835	✓	✓		✓	✓											
Gulf Quest Renaissance	RENGQ	837		✓														
Gulf South	58379	835	✓	✓		✓	✓											
Gulf South	60389	837	✓	✓	✓				✓	✓	✓							
Gulf Stream-General Dynamics	CB624	837	✓	✓					✓	✓								
Gundersen Health Plan / Quartz	39180	835	✓	✓		✓	✓											
Gundersen Health Plan / Quartz	39180	837	✓	✓					✓	✓								
H.E.R.E.I.U Welfare Pension Funds	37114	837	✓	✓														
HAA Preferred Partners	65101	837	✓	✓														
Halcyon Behavioral Health	HALCY	837	✓	✓					✓	✓								
Halos Systems	HALOS	835	✓	✓		✓	✓											
Halos Systems	HALOS	837	✓	✓					✓	✓								
Hamaspik Choice	47738	835	✓	✓		✓	✓											
Hamaspik Choice	47738	837	✓	✓														
Hammerman and Gainer, Inc	97258	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Hanover Insurance Company	WP927	835	✓	✓		✓	✓											
HAP CareSource Michigan Dual Medicare Medicaid	MIMCRCS1	835	✓	✓		✓	✓											
HAP CareSource Michigan Dual Medicare Medicaid	MIMCRCS1	837	✓	✓														
HAP CareSource Michigan Marketplace	MICS1	835	✓	✓		✓	✓											
HAP CareSource Michigan Marketplace	MICS1	837	✓	✓														
HAP Midwest Health Plan (JVHL)	JBJVH	835	✓	✓		✓	✓											
HAP Midwest Health Plan (JVHL)	JBJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
HAP/AHL/Curanet	38224	835	✓	✓		✓	✓											
HAP/AHL/Curanet	38224	837	✓	✓														
Harbor Health	HARBR	835	✓	✓		✓	✓											
Harbor Health	HARBR	837	✓	✓														
Harbor Health Plan (JVHL)	M1JVH	835	✓	✓		✓	✓											
Harbor Health Plan (JVHL)	M1JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Harmony Health Plan of Illinois	14163	835	✓	✓		✓	✓											
Harmony Health Plan of Illinois	36406	837	✓	✓					✓	✓								ERA Payer Code 14163
Harmony Health Plan of Indiana	36405	835	✓	✓		✓	✓											
Harmony Health Plan of Indiana	36405	837	✓	✓						✓								ERA Payer Code 14163
Harrington Health Non-EPO	59143	837	✓	✓														
Harrington Health-Kansas (formerly known as Fiserv Health-Kansas)	62061	837	✓	✓														
Harris Methodist Health Plan	75201	837	✓															
Harvard Community Health Plan	04245	835	✓	✓		✓	✓											
Harvard Community Health Plan	04245	837	✓	✓					✓	✓								
Harvard Pilgrim	04271	835	✓	✓		✓	✓											
Harvard Pilgrim	04271	837	✓	✓					✓	✓								
Harvard Pilgrim Joint Venture	04271	835	✓	✓		✓	✓											
Hawaii Dental Service	99010	835			✓			✓										
Hawaii Dental Service	99010	837			✓						✓							
Hawaii Mainland Administrators PHCS HMA Employees PMO	86070	837	✓	✓														
Hawaii Medicaid	12K62	835	✓			✓												
Hawaii Medicaid	12K62	837	✓			✓			✓									
Hawaii Medicaid	SKHI0	835		✓			✓											
Hawaii Medicaid	SKHI0	837		✓			✓			✓								
Hawaii Medical Assurance Association (HMAA/HWMG)	48330	835	✓	✓		✓	✓											
Hawaii Medical Assurance Association (HMAA/HWMG)	48330	837	✓	✓														
Hawaii Medicare	SMHI0	835		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Hawaii Medicare	SMHI0	837		✓			✓			✓								
HCC Life Insurance	HCCMI	837		✓														
HCC Life Insurance	UCCMI	837	✓															
HCH Administration	37111	837	✓	✓														
HCS - Health Claims Service (Boise ID)	82018	837		✓														
Health Alliance Medical Plans of Illinois	77950	835	✓	✓		✓	✓											
Health Alliance Medical Plans of Illinois	77950	837	✓	✓					✓	✓								
Health Alliance Plan (Capitated Contracts) (JVHL)	JGJVH	835	✓	✓		✓	✓											
Health Alliance Plan (Capitated Contracts) (JVHL)	JGJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Health Alliance Plan (Fee for Service Contracts) (JVHL)	JHJVH	835	✓	✓		✓	✓											
Health Alliance Plan (Fee for Service Contracts) (JVHL)	JHJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Health Care LA IPA (HCLA)	MPM06	835	✓	✓		✓	✓											
Health Care LA IPA (HCLA)	MPM06	837	✓	✓					✓	✓								
Health Care Network of Wisconsin (HCN)	42102	837	✓	✓														
Health Care Savings - Institutional	56142	837	✓															
Health Change Pathway	62180	835	✓	✓		✓	✓											
Health Change Pathway	62180	837	✓	✓	✓				✓	✓								
Health Choice Arizona	62179	835	✓	✓		✓	✓											
Health Choice Arizona	62179	837	✓	✓					✓	✓								
Health Choice Generations	62180	837	✓	✓	✓				✓	✓								
Health Choice Generations Utah	13054	837	✓	✓			✓											
Health Choice Generations Utah	45399	835	✓	✓		✓	✓											
Health Choice Pathway	62180	837	✓	✓	✓				✓	✓								
Health Choice Utah	45399	835	✓	✓		✓	✓											
Health Choice Utah	45399	837	✓	✓		✓	✓											
Health Cost Solutions	62111	835	✓	✓		✓	✓											
Health Cost Solutions	62111	837	✓	✓														
Health Design Plus (Hudson OH)	34158	837	✓	✓														
Health Economics Corp	39026	837	✓	✓					✓	✓		✓	✓					
Health Excel IPA	PROSP	837	✓	✓					✓	✓								
Health First Health Plan Inc. (ERA Only)	A5234	835	✓	✓		✓	✓											ERA Only
Health First Health Plans	95019	835	✓	✓		✓	✓											
Health First Health Plans	95019	837	✓	✓														For claims with a DOS prior to 01/01/22 and on or after 01/01/2023.
Health First TPA Austin	75289	837	✓	✓														
Health Net of California and Oregon	95567	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Health Net of California and Oregon	95567	837	✓	✓					✓	✓		✓	✓					
Health Network One	65062	837		✓														
Health New England	04286	835	✓	✓		✓	✓											
Health New England	04286	837	✓	✓														
Health Options Inc (FL - BCBS HMO)	12B26	837	✓															
Health Options Inc (FL - BCBS HMO)	SX030	837		✓						✓								
Health Payment Systems Inc.	20270	835	✓	✓		✓	✓											
Health Payment Systems Inc.	20270	837	✓	✓					✓	✓								
Health Plan of Nevada	76342	835	✓	✓		✓	✓											
Health Plan of Nevada	76342	837	✓	✓					✓	✓								
Health Plan of San Joaquin	68035	837	✓	✓		✓	✓		✓	✓								
Health Plan of San Joaquin	HPSJ1	835	✓	✓		✓	✓											
Health Plan of San Mateo	HPSM1	835	✓	✓		✓	✓											
Health Plan of San Mateo	HPSM1	837	✓	✓														
Health Plan of San Mateo Dental	HPSMD	837			✓						✓			✓				
Health Plans Inc.	44273	835	✓	✓		✓	✓											
Health Plans Inc.	44273	837	✓	✓														
Health Plus (JVHL)	KEJVH	835	✓	✓		✓	✓											
Health Plus (JVHL)	KEJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Health Risk Management	41170	837	✓	✓														
Health Safety Net (HSN)	CKMA1	835			✓			✓										
Health Safety Net (HSN)	CKMA1	837			✓						✓			✓				
Health Services for Children with Special Needs	37290	835	✓	✓		✓	✓											
Health Services for Children with Special Needs	37290	837	✓	✓														
Health Services Management	41150	837		✓														
Health Services Preferred (HSP) by Emerald Health	34167	837	✓	✓														
Health Source MSO	HSMSO	837	✓	✓		✓	✓											
Health Special Risk, Inc	65449	837	✓	✓					✓	✓								
Health Texas Medical Group	HTHTX	837	✓	✓					✓	✓								
Health2Business Inc	55213	837	✓	✓														
HealthBridge	74853	835	✓	✓	✓	✓	✓	✓										
HealthBridge	74853	837	✓	✓	✓													
Healthcare Highways Health Plan	HCHHP	837	✓	✓	✓													Effective for dates of service on or after 1/1/2020
Healthcare In Action	MPM56	837	✓	✓														
Healthcare Management Administrators (HMA)	HMA01	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Healthcare Management Administrators (HMA)	HMA01	837	✓	✓					✓	✓								
HealthCare Partners IPA	11328	835	✓	✓		✓	✓											
HealthCare Partners IPA	11328	837	✓	✓														
Healthcare Partners of Nevada	20501	835	✓	✓		✓	✓											
Healthcare Partners of Nevada	20501	837	✓	✓					✓	✓								
Healthcare Resources NW	56731	837	✓	✓														
Healthcare Solutions Group	73147	835	✓	✓		✓	✓											
Healthcare Solutions Group	73147	837	✓	✓					✓	✓								
Healthcare Strategic Initiatives	HSICS	835	✓	✓														
Healthcare Strategic Initiatives	HSICS	837	✓	✓	✓													Payer returns ERA automatically.
HealthChoice Oklahoma	71064	837	✓	✓	✓				✓	✓								
HealthCosmos Medical Group LLC	COSAZ	837	✓	✓					✓	✓								
HealthCosmos New Mexico	COSNM	837	✓	✓														
HealthCosmos of Nevada PLLC-	COSNV	837	✓	✓					✓	✓								
Healthease	59608	835	✓	✓		✓	✓											
Healthease	59608	837	✓	✓														
HealthEdge Administrators	95213	837	✓	✓														
HealthEZ	41178	835	✓	✓		✓	✓											
HealthEZ	41178	837	✓	✓					✓	✓								
Healthfirst 65 Plus	80141	837	✓															
Healthfirst Family Health Plus (FHP)	80141	837	✓															
Healthfirst Health Plan of New Jersey	80141	837	✓	✓														
Healthfirst Inc. (New York)	80141	835	✓	✓		✓	✓											
Healthfirst Inc. (New York)	80141	837	✓	✓														
Healthfirst PHSP	80141	837	✓															
HealthFirst TPA	34185	837		✓														
Healthfirst Tyler TX	75234	835	✓	✓		✓	✓											
Healthfirst Tyler TX	75234	837	✓	✓					✓	✓								
Healthgram Inc.	56144	835	✓	✓		✓	✓											
Healthgram Inc.	56144	837	✓	✓					✓	✓								
HealthGroup Limited	23274	837	✓	✓					✓	✓								
HealthGuard of Lancaster	23226	837	✓	✓					✓	✓								
Healthlink	90001	835	✓	✓		✓	✓											
Healthlink	90001	837	✓	✓					✓	✓								
Healthly Medical Group	HMG01	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
HealthNow - BCBS Northeastern NY	12B68	835	✓	✓		✓	✓											
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		✓			✓											
HealthNow - Blue Cross Blue Shield of Western NY	SB801	837		✓			✓			✓			✓					
Healthnow Division	55204	835		✓			✓											
Healthnow Division	55204	837		✓			✓											
Healthpartners	94267	835	✓	✓	✓	✓	✓	✓										
Healthpartners	94267	837	✓	✓	✓						✓							
HealthPartners MN Dental	HP001	835			✓			✓										
HealthPlan Services	59140	835	✓	✓		✓	✓											
HealthPlan Services	59140	837	✓	✓					✓	✓								
HealthPlex Dental	11271	835			✓			✓										
HealthPlex Dental	11271	837			✓						✓			✓				
HealthPlus Managed Long Term Care	45302	835	✓	✓		✓	✓											
HealthPlus Managed Long Term Care	45302	837	✓	✓					✓	✓								
HealthScope Benefits (UMR)	40026	835	✓	✓		✓	✓											
HealthScope Benefits (UMR)	40026	837	✓	✓					✓	✓								Only for claims whose patient ID card shows 40026 as the payer ID.
HealthSelect IPA (IL)	SB621	837		✓						✓								ERA Payer Code 00621
HealthSmart -Noble Mid Orange	HSM01	835	✓	✓		✓	✓											
HealthSmart -Noble Mid Orange	HSM01	837	✓	✓														
Healthsmart Accel	75237	837	✓	✓					✓	✓								
HealthSmart Benefit Solutions	37272	835	✓	✓		✓	✓											
HealthSmart Benefit Solutions	37283	835	✓	✓		✓	✓											
HealthSmart Benefit Solutions	37283	837	✓	✓					✓	✓								
HealthSmart Benefit Solutions fka Wells Fargo TPA.Inc.	87815	835	✓	✓		✓	✓											
HealthSmart Benefit Solutions fka Wells Fargo TPA.Inc.	87815	837	✓	✓					✓	✓								
HealthSmart Preferred Care Inc.	75250	837	✓	✓					✓	✓								
Healthsource AR (Med) (CIGNA)	71075	837	✓	✓					✓	✓								
Healthsource CMHC	02041	837	✓	✓					✓	✓								
Healthsource GA (CIGNA)	58210	837	✓	✓					✓	✓								
Healthsource KY	61127	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Healthsource Massachusetts Inc.	02041	837	✓	✓					✓	✓								
Healthsource ME	01041	837	✓	✓														
Healthsource N. TX (CIGNA)	75255	837	✓	✓					✓	✓								
Healthsource NC (CIGNA)	56147	837	✓	✓					✓	✓								
Healthsource NH	02038	837		✓						✓								
Healthsource OH	31141	837	✓	✓					✓	✓								
Healthsource SC	06119	837	✓						✓									
Healthsource TN (CIGNA)	62129	837	✓	✓					✓	✓								
HealthSpring	52192	835	✓	✓		✓	✓											
HealthSpring	52192	837	✓	✓														
HealthSpring HMO/HealthSpring Medicare+Choice	63092	835	✓	✓		✓	✓											
HealthSpring HMO/HealthSpring Medicare+Choice	63092	837	✓	✓														
Healthsun Health Plans	HESUN	835	✓	✓		✓	✓											
Healthsun Health Plans	HESUN	837	✓	✓														
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		✓														
Healthy Blue Dual Advantage Louisiana	00551	837	✓	✓					✓	✓								
Healthy Blue Kansas	00047	835	✓	✓		✓	✓											
Healthy Blue Kansas	00047	837	✓	✓								✓	✓					
Healthy Blue Missouri	00541	835	✓	✓		✓	✓											
Healthy Blue Missouri	00541	837	✓	✓								✓	✓					
Healthy Blue North Carolina	00602	835	✓	✓		✓	✓											
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	✓	✓		✓	✓											
HealthyBlue LA	00661	837	✓	✓								✓	✓					
Hemet Community Medical Group (HCMG)	HCMG1	837	✓	✓					✓	✓								
Hennepin Health	60058	835	✓	✓		✓	✓											
Hennepin Health	60058	837	✓	✓					✓	✓								
Heritage Bureau of Prisons	IHS43	837	✓	✓					✓	✓								
Heritage Consultants	59230	837		✓						✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
HeritAge PACE	R1001	835	✓	✓	✓	✓	✓	✓										
HeritAge PACE	R1001	837	✓	✓	✓													
Heritage Provider Network	DESRT	837		✓														
Heritage Victor Valley	VVMG1	837		✓														
Heritage Victor Valley Medical Group	30862	837	✓	✓														
Heritage Vision Plans	96462	837		✓														
Hero Health Plans	HERO1	835	✓	✓		✓	✓											
Hero Health Plans	HERO1	837	✓	✓														
HFN Inc.	36335	835	✓	✓		✓	✓											
HFN Inc.	36335	837	✓	✓														
High Desert Medical Group	95393	837	✓	✓														
High Desert Medical Group	HDMDG	835	✓	✓														
High Desert PACE	R3467	835	✓	✓		✓	✓											
High Desert PACE	R3467	837	✓	✓														
Highmark BCBS Delaware Health Options	47181	835	✓	✓		✓	✓											
Highmark BCBS Delaware Health Options	47181	837	✓	✓					✓	✓								
Highmark Blue Cross & Blue Shield of Pennsylvania	54771	835		✓			✓											
Highmark Blue Cross & Blue Shield of Pennsylvania	54771	837		✓			✓			✓			✓					
Highmark Blue Cross & Blue Shield of Pennsylvania Central	54771C	835	✓			✓												
Highmark Blue Cross & Blue Shield of Pennsylvania Central	54771C	837	✓			✓			✓			✓						
Highmark Blue Cross & Blue Shield of Pennsylvania Southeastern	54771S	835	✓			✓												
Highmark Blue Cross & Blue Shield of Pennsylvania Southeastern	54771S	837	✓			✓			✓			✓						For claims with DOS on or after 1/1/2024.
Highmark Blue Cross & Blue Shield of Pennsylvania Western	54771W	835	✓			✓												
Highmark Blue Cross & Blue Shield of Pennsylvania Western	54771W	837	✓			✓			✓			✓						
Highmark Blue Cross Blue Shield West Virginia	54828	835	✓	✓		✓	✓											
Highmark Blue Cross Blue Shield West Virginia	54828	837	✓	✓					✓	✓								Formerly Mountain State Blue Cross Blue Shield of West Virginia
Highmark Health Options Dual	47183	835	✓	✓		✓	✓											
Highmark Health Options Dual	47183	837	✓	✓														
Highmark Health Options Duals - West Virginia	88831	837	✓	✓														
Highmark Health Options West Virginia	RP118	837	✓	✓														This payer is not available for production until August 1, 2024.
Highmark Senior Solutions (PA)	95462	835	✓	✓		✓	✓											
Highmark Senior Solutions (PA)	95462	837	✓	✓		✓	✓		✓	✓		✓	✓					(aka Freedom Blue Medicare Advantage)
Highmark Senior Solutions (WV)	95461	835	✓	✓		✓	✓											
Highmark Senior Solutions (WV)	95461	837	✓	✓		✓	✓		✓	✓								
Hill Physicians Medical Group	00046	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Hill Physicians Medical Group	HIL01	835	✓	✓		✓	✓											
HIP - Health Insurance Plan of Greater New York	55247	835	✓	✓		✓	✓											
HIP - Health Insurance Plan of Greater New York	55247	837	✓	✓					✓	✓								
HIPNATION	HIP32	835	✓	✓		✓	✓											
HIPNATION	HIP32	837	✓	✓														
Hispanic Physicians IPA	HPFFS	837		✓														
Hispanic Physicians IPA (Encounters Only)	HPIPA	837		✓														
HMA - Health Management Admin	12T11	837	✓															
HMA Hawaii	86066	835	✓	✓		✓	✓											
HMA Hawaii	86066	837	✓	✓														
HMC HealthWorks aka Health Management Co	75318	837	✓	✓														
HMO Louisiana Inc	84555	837	✓	✓														
HMSO-Highline Medical Service Organization	91164	837	✓	✓														
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	✓	✓					✓	✓								
Hollywood Presbyterian Global	MPM29	837	✓	✓					✓	✓								
Hollywood Presbyterian Medical Center - HWDPPREF	MPM76	837	✓	✓														
Hollywood Presbyterian Medical Center - Preferred	AMM18	837	✓	✓														
Hollywood Presbyterian Medical Center - San Judas IPA	AMM17	837	✓	✓														
Hollywood Presbyterian San Judas	MPM49	837	✓	✓					✓	✓								
Home Health & Hospice J6 NGS - Wisconsin (06001)	RHHWI	835	✓			✓												J6 Part A HHH – Contractor Code 06001. For any neighboring states, please reference the NGS Crosswalk to confirm contractor code.
Home Health & Hospice J6 NGS - Wisconsin (06001)	RHHWI	837	✓			✓												J6 Part A HHH – Contractor Code 06001. For any neighboring states, please reference the NGS Crosswalk to confirm contractor code.
Home Health & Hospice JK NGS	JKHHH	835	✓			✓												
Home Health & Hospice JK NGS	JKHHH	837	✓			✓			✓									
Home Health & Hospice Jurisdiction M	12M80	835	✓			✓												
Home Health & Hospice Jurisdiction M	12M80	837	✓			✓			✓									
Home Health Hospice J6 NGS (06014)	12M98	835	✓			✓												J6 Part A HHH - Contractor Code 06014. For any neighboring states, please reference the NGS Crosswalk to confirm contractor code.
Home Health Hospice J6 NGS (06014)	12M98	837	✓			✓			✓									J6 Part A HHH - Contractor Code 06014. For any neighboring states, please reference the NGS Crosswalk to confirm contractor code.
Homelink	30750	837	✓	✓					✓	✓								
Hometown Health Plan Nevada	88023	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Hometown Health Plan Nevada	88023	837	✓	✓														
HOMETOWN HEALTH PLAN NV SENIOR CARE PLUS COMPLETE P3 MCR	58379	835	✓	✓		✓	✓											
HOMETOWN HEALTH PLAN NV SENIOR CARE PLUS COMPLETE P3 MCR	58379	837	✓	✓														
Hope Select Care Pace	R3499	835	✓	✓		✓	✓											
Hope Select Care Pace	R3499	837	✓	✓	✓													
HORACE MANN LIFE INSURANCE COMPANY	HMLIC	837	✓	✓					✓	✓								
Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ)	22099	835	✓	✓	✓	✓	✓	✓										
Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ)	22099	837	✓	✓	✓				✓	✓				✓				
Horizon Healthcare of NY	22099	837	✓	✓					✓	✓				✓				
Horizon New Jersey Health	22326	835	✓	✓		✓	✓											
Horizon New Jersey Health	22326	837	✓	✓					✓	✓								
Horizon New Jersey Health	HNJ01	835			✓			✓										
Horizon New Jersey Health	HNJ01	837			✓						✓							
Horizon PACE	R4569	837	✓	✓														
Horizon Valley Medical Group	HVMG1	835	✓	✓														
Horizon Valley Medical Group	HVMG1	837	✓	✓					✓	✓								
Hotel Employees & Restaurant Employees Health Trust	91136	837	✓	✓														
HPC	82802	837	✓	✓														
HPI Vanderbilt	IHS22	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	✓	✓		✓	✓											ERA's for National and Local will come back through this connection
HSBS World Trade Center Health Program	31172	837	✓	✓					✓	✓								Payer ID 31172 is used for Local Commercial Claims
HSHS Medical Group IPA	37137	835	✓	✓		✓	✓											
HSHS Medical Group IPA	37137	837	✓	✓														
Humana (JVHL)	KVJVH	835	✓	✓		✓	✓											
Humana (JVHL)	KVJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Humana Choice Care Network	61101	837	✓	✓					✓	✓		✓	✓					
Humana CompBenefits	CX021	835			✓			✓										
Humana CompBenefits	CX021	837			✓						✓							
Humana Dental	61101	835			✓			✓										
Humana Dental	73288	837			✓						✓			✓				

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Humana Dermatology - New Century Health	NCH02	837		✓														
Humana Emphesys	61101	837	✓	✓					✓	✓		✓	✓					
Humana Employers Health Insurance	61101	837	✓	✓					✓	✓		✓	✓					
Humana Inc.	61101	835	✓	✓		✓	✓											ERA Payer Code 61101
Humana Inc.	61101	837	✓	✓					✓	✓		✓	✓					
Humana Long Term Care	61115	837	✓	✓														
Humana of Puerto Rico	65018	837	✓	✓														
Humana Ohio Medicaid	61103	837	✓	✓														
Humana Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Humana Ohio Medicaid Vision	6110V	837		✓						✓								
Humana Ohio Medicaid Vision	SKOH0	835		✓			✓											Effective 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)	19753	837	✓	✓														
I. E. Shaffer (West Trenton NJ)	22175	835	✓	✓		✓	✓											
I. E. Shaffer (West Trenton NJ)	22175	837	✓	✓														
I'Mcare	41600	835	✓	✓		✓	✓											
I'Mcare	41600	837	✓	✓														
IAA	37279	835	✓	✓		✓	✓											
IAA	37279	837	✓	✓														
IBC Personal Choice	12X26	837	✓						✓									ERA Payer Code SX055
IBC Personal Choice	SX055	835	✓	✓		✓	✓											
IBC Personal Choice	SX083	837		✓						✓								ERA Payer Code SX055
IBEW Local 1	44602	835	✓	✓		✓	✓											
IBEW Local 1	44602	837	✓	✓					✓	✓								
IBEW Local 640 & Arizona Chapter NECA Health & Welfare Trust	74234	837	✓	✓														
IBG Administrators, LLC	81810	837	✓	✓					✓	✓								
IBM Business Transformation Outsourcing Insurance Services Corporate	19028	837	✓															
iCare Health Solutions	26054	837		✓						✓								
ICE Health Services	VAICE	835	✓	✓		✓	✓											
ICE Health Services	VAICE	837	✓	✓	✓													
iCircle Care of New York	ICRCL	835	✓	✓														
iCircle Care of New York	ICRCL	837	✓	✓														
Idaho Medicaid	12K07	835	✓			✓												
Idaho Medicaid	12K07	837	✓						✓									

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Idaho Medicaid	SKID0	835		✓			✓											
Idaho Medicaid	SKID0	837		✓						✓								
Idaho Medicare	12M07	835	✓			✓												
Idaho Medicare	12M07	837	✓			✓			✓						✓			
Idaho Medicare	SMID0	835		✓			✓											
Idaho Medicare	SMID0	837		✓			✓			✓						✓		
IEC Group - AmeriBen	97661	837	✓	✓					✓	✓								
IHG Direct	75274	837	✓	✓														
Illinois Complete	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
Illinois Health Partners	36364	837	✓	✓														
Illinois Medicaid	CKIL1	835			✓			✓										
Illinois Medicaid	CKIL1	837			✓						✓							
Illinois Medicaid	ILMCD	835	✓	✓		✓	✓											
Illinois Medicaid	SKIL0	837	✓	✓					✓	✓								
Illinois Medicare	12M08	835	✓			✓												
Illinois Medicare	12M08	837	✓			✓			✓			✓						
Illinois Medicare	SMIL0	835		✓			✓											
Illinois Medicare	SMIL0	837		✓			✓			✓			✓					
Illinois Physicians Alliance IPA	IPA99	837	✓	✓														
IMA, Inc - 90 Degree Benefits	64556	835	✓	✓		✓	✓											
IMA, Inc - 90 Degree Benefits	64556	837	✓	✓														
Imagine Health	43123	837	✓	✓														
Immergrun, INC	59904	835	✓	✓	✓	✓	✓	✓										
Immergrun, INC	59904	837	✓	✓	✓													
IMPACT HEALTH SHARE INC	IH400	837	✓	✓					✓	✓								
Imperial County Physicians Med Group (SCPMCS)	SCP01	837	✓	✓														
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	835	✓	✓		✓	✓											
Imperial Health Holdings Medical Group	IHHMG	837	✓	✓					✓	✓								
Imperial Health Plan of California, Inc.	IHP01	835	✓	✓		✓	✓											
Imperial Health Plan of California, Inc.	IHP01	837	✓	✓					✓	✓								
Imperial Insurance Companies	IICTX	837	✓	✓					✓	✓								
Imperial Insurance Companies Inc Exchange AZ	IEXAZ	837	✓	✓														
Imperial Insurance Companies Inc Exchange NV	IEXNV	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Imperial Insurance Companies Inc Exchange UT	IEXUT	837	✓	✓														
Imperial Insurance Inc Exchange TX	IEXTX	837	✓	✓														
IMS Management Svcs - Texas	12T64	837	✓															
IMS TrialCard	56155	835	✓	✓		✓	✓											
IMS TrialCard	56155	837	✓	✓					✓	✓								
IMX Easy	86070	837	✓	✓														
IN Physicians Associates - ACTY	INP12	837	✓	✓					✓	✓								
IncentiCare	18151	837	✓	✓														
INDECS Corporation	40585	835	✓	✓		✓	✓											
INDECS Corporation	40585	837	✓	✓														
INDECS, A Homestead Company	L0929	837	✓	✓														
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	✓	✓					✓	✓								
Independent Health Association	95308	835	✓	✓		✓	✓											
Independent Health Association	95308	837	✓	✓		✓	✓		✓	✓								
Independent Health Care Plan(ICARE)	11695	835	✓	✓		✓	✓											
Independent Health Care Plan(ICARE)	11695	837	✓	✓					✓	✓								
Indian Health Services	12X75	837	✓															
Indian Health Services	SX171	837		✓														
Indiana Medicaid	12K09	835	✓			✓												
Indiana Medicaid	12K09	837	✓						✓									
Indiana Medicaid	SKIN0	835		✓			✓											
Indiana Medicaid	SKIN0	837		✓						✓								
Indiana Medicare	12M09	835	✓			✓												
Indiana Medicare	12M09	837	✓			✓			✓									
Indiana Medicare	SMIN0	835		✓			✓											
Indiana Medicare	SMIN0	837		✓			✓			✓								
Indiana ProHealth aka Community Health Network	35161	835	✓	✓		✓	✓											
Indiana University Health Plan	95444	835	✓	✓		✓	✓											
Indiana University Health Plan	95444	837	✓	✓														
Indiana University Health Plan (Commercial)	23253	835	✓	✓		✓	✓											
Indiana University Health Plan (Commercial)	26212	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Individual Assurance Company	30360	835	✓	✓		✓	✓											
Individual Assurance Company	30360	837	✓	✓					✓	✓								
Individual Health Insurance Companies	31053	837	✓	✓														
Inetico Inc.	43471	835	✓	✓		✓	✓											
Inetico Inc.	43471	837	✓	✓					✓	✓								
Informed LLC	52196	837	✓	✓														
Ingham Health Plan Corporation	38343	835	✓	✓		✓	✓											
Ingham Health Plan Corporation	38343	837	✓	✓						✓								
Inland Empire Health Plan	99101	837	✓	✓														
Inland Empire Health Plan	IEHP1	835	✓	✓		✓	✓											
Inland Empire Health Plan	IEHP1	837	✓	✓														
Inland Empire health Plan (Covered California)	IECCA	835	✓	✓		✓	✓											
Inland Empire health Plan (Covered California)	IECCA	837	✓	✓														
Inland Faculty Medical Group	MVMM1	835	✓	✓		✓	✓											
Inland Faculty Medical Group	MVMM1	837	✓	✓														
Inland Valley - (Redlands IPA)	SYMED	837	✓	✓														
Innermark TPA	98481	835	✓	✓	✓	✓	✓	✓										
Innermark TPA	98481	837	✓	✓	✓													
InnovAge	31182	835	✓	✓		✓	✓											
InnovAge	31182	837	✓	✓														
Innovation Health	40025	837	✓	✓														
Innovative Healthware Solutions	04320	837	✓	✓														
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	00C60	835	✓	✓		✓	✓											
Instil Health Insurance Company	00C60	837	✓	✓					✓	✓								
Insurance Administrative Solutions	75300	835		✓			✓											
Insurance Design Administrators	13315	835	✓	✓		✓	✓											
Insurance Design Administrators	13315	837	✓	✓														
Insurance Management Services Texas	IMSMS	835	✓	✓		✓	✓											
Insurance Management Services Texas	IMSMS	837	✓	✓														
Insurance Services of Lubbock	TH012	837		✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Insurance Systems	11889	837	✓	✓					✓	✓								
InsuranceTPA.com	39182	837	✓	✓					✓	✓								
Insurers Administrative Corp.	86304	837	✓	✓														
Integra Administrative Group (Seaford DE)	51020	835	✓	✓		✓	✓											
Integra Administrative Group (Seaford DE)	51020	837	✓	✓														
Integra Group	31127	837	✓	✓														
Integra Group-CHA	31129	837		✓														
IntegraNet Health	INET1	835	✓	✓		✓	✓											
IntegraNet Health	INET1	837	✓	✓	✓													
IntegraNet SCAN	ISCN1	835	✓	✓		✓	✓											
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	✓	✓														
Integrated Homecare Services	IHCS1	835	✓	✓														
Integrated Homecare Services	IHCS1	837	✓	✓														
Integrated Medical Solutions LLC	20050	837	✓	✓														
Integrity Administrators - South Tahoe Refuse	28580	837	✓	✓					✓	✓								
Inter Americas Insurance Corp Inc.	92649	837	✓	✓														
Inter County Health Plan	54763	837	✓	✓					✓	✓								
Inter Valley Health Plan	IVHPA	837	✓	✓														
Interactive Medical Systems	56132	835	✓	✓		✓	✓											ERA Only
InterCommunity Health CCO (IHN)	SAMHP	835	✓	✓		✓	✓											
InterCommunity Health CCO (IHN)	SAMHP	837	✓	✓					✓	✓								
InterCommunity Health Network	INTHP	835		✓														
InterCommunity Health Network	INTHP	837		✓						✓								
Interface EAP (IEAP)	60280	837	✓	✓					✓	✓								
Intergroup Services Corporation	23287	837	✓	✓														
Intermountain Healthcare (now known as SelectHealth)	SX107	837		✓														
International Benefit Administrator	11329	835	✓	✓		✓	✓											
International Benefit Administrator	11329	837	✓	✓														
International Brotherhood of Boilermakers	36609	837	✓	✓														
International Brotherhood-IBBEHC	48603	837	✓	✓						✓								
International Med	IMGIN	837	✓	✓														
INTERWEST HEALTH PPO MONTANA	84137	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
INTotal Health (claims with DOS on or after 7/01/2016)	35115	835	✓	✓		✓	✓											
INTotal Health (claims with DOS on or after 7/01/2016)	35115	837	✓	✓					✓	✓								
Iowa Health Advantage	RP075	835	✓	✓		✓	✓											
Iowa Health Advantage	RP075	837	✓	✓														
Iowa Medicaid	12K10	835	✓			✓												
Iowa Medicaid	12K10	837	✓			✓			✓						✓			
Iowa Medicaid	CKIA1	835			✓			✓										
Iowa Medicaid	CKIA1	837			✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Iowa Medicaid	SKIA0	835		✓			✓											
Iowa Medicaid	SKIA0	837		✓			✓			✓						✓		
Iowa Medicare	SMIA0	835	✓	✓		✓	✓											
Iowa Medicare	SMIA0	837	✓	✓		✓	✓		✓	✓								
Iowa Safety Net Management Information System	18049	835	✓	✓		✓	✓											
Iowa Safety Net Management Information System	18049	837	✓	✓		✓	✓		✓						✓	✓		
Iowa Screening Program	HSMBS	835		✓			✓											
Iowa Screening Program	HSMBS	837		✓														
Iowa Total Care	68069	837	✓	✓					✓	✓		✓	✓					
Iron Road Healthcare	87042	837		✓						✓								
IU Health Plans	26212	837	✓	✓														
IU Health Transplant Evaluation Program	47262	837	✓	✓					✓	✓								
J15 Home Health and Hospice	12M97	835	✓			✓												
J15 Home Health and Hospice	12M97	837	✓			✓			✓									
Jade Health Care Medical Group	NMM07	835	✓	✓		✓	✓											
Jade Health Care Medical Group	NMM07	837	✓	✓					✓	✓								
JAI MEDICAL SYSTEMS HC	JAI01	835	✓	✓		✓	✓											Effective February 20, 2025, route has changed to EDI Gateway "SSI"
JAI MEDICAL SYSTEMS HC	JAI01	837	✓	✓					✓	✓								
Jefferson Health Plans	80142	835	✓	✓		✓	✓											
Jefferson Health Plans	80142	837	✓	✓														
Jefferson Health Plans CHIP	80142	837	✓	✓														
Jefferson Health Plans EverWell	80142	837	✓	✓														
Jefferson Health Plans Individual and Family	80142	837	✓	✓														
Jefferson Health Plans Medicare Advantage HMO	80142	837	✓	✓														
Jefferson Health Plans Medicare PPO	RP099	835	✓	✓		✓	✓											
Jefferson Health Plans Medicare PPO	RP099	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Jefferson Health Plans New Jersey Medicare PPO	NJ099	837	✓	✓					✓	✓								
JERICHO SHARE	IHS02	837	✓	✓					✓	✓								
JL Legacy Part A	12901	835	✓			✓												
JL Legacy Part A	12901	837	✓			✓			✓									
JLS Family Enterprises	JLSFE	837	✓	✓														
JOHN MORRELL COMPANY CO. - AHPBA	38310	837	✓	✓														
John Muir Mt. Diablo Health System	68036	835	✓	✓		✓	✓											
John Muir Mt. Diablo Health System	68036	837	✓	✓					✓	✓								
John Muir Physician Network	68036	837		✓						✓								
John P Pearl and Associates	37215	837	✓	✓														
Johns Hopkins Health Advantage	66003	835	✓	✓		✓	✓											
Johns Hopkins Health Advantage	66003	837	✓	✓														
Johns Hopkins Healthcare (EHP/PP)	52189	835	✓	✓		✓	✓											
Johns Hopkins Healthcare (EHP/PP)	52189	837	✓	✓								✓	✓					
Johns Hopkins Healthcare (USFHP)	52123	835	✓	✓		✓	✓											
Johns Hopkins Healthcare (USFHP)	52123	837	✓	✓														
Johns Hopkins HomeCare Group	JHHCG	837		✓														
Joplin Claims / Benefit Management Inc	43178	837	✓	✓														
JORDAN VALLEY PACE MCR /MCD	98471	837	✓	✓	✓													
JP Farley Corporation	34136	835	✓	✓		✓	✓											
JP Farley Corporation	34136	837	✓	✓														
JP Specialties	12T47	837	✓															
JPS Preferred Care - PREFERRED CARE	MWP01	837		✓														
Kaiser Foundation Health Plan of Colorado	91617	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of Colorado	91617	837	✓	✓					✓	✓								
Kaiser Foundation Health Plan of Hawaii	94123	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of Hawaii	94123	837	✓	✓														
Kaiser Foundation Health Plan of Northern CA Region	94135	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of Northern CA Region	94135	837	✓	✓					✓	✓								
Kaiser Foundation Health Plan of Southern CA Region	94134	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of Southern CA Region	94134	837	✓	✓					✓	✓								
Kaiser Foundation Health Plan of the Mid-Atlantic States Inc.	52095	837	✓	✓					✓	✓								
Kaiser Foundation Health Plan of the Mid-Atlantic States Inc.	NG008	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of the Northwest	NW002	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan of the Northwest	NW002	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Kaiser Foundation Health Plan Of Washington	91051	835	✓	✓		✓	✓											
Kaiser Foundation Health Plan Of Washington	91051	837	✓	✓					✓	✓								
Kaiser Permanente of Georgia	21313	835	✓	✓		✓	✓											
Kaiser Permanente of Georgia	21313	837	✓	✓														
Kaiser Self Funded	94320	835	✓	✓		✓	✓											
Kaiser Self Funded	94320	837	✓	✓														
Kalos Heath	40137	835	✓	✓		✓	✓											
Kalos Heath	40137	837	✓	✓														
Kane County BCBS	KCIPA	835	✓	✓		✓	✓											
Kane County BCBS	KCIPA	837	✓	✓														
Kansas City Life Insurance	44030	837		✓						✓								
Kansas Medicaid	MDKSI	835	✓			✓												
Kansas Medicaid	MDKSI	837	✓			✓			✓									
Kansas Medicaid	MDKSP	835		✓			✓											
Kansas Medicaid	MDKSP	837		✓			✓			✓								
Kansas Medicare	57324	835	✓			✓												
Kansas Medicare	57324	837	✓			✓			✓									
Kansas Medicare	SMKS0	835		✓			✓											
Kansas Medicare	SMKS0	837		✓			✓			✓								
Kansas Superior Select	71066	835	✓	✓		✓	✓											
Kansas Superior Select	71066	837	✓	✓														
Kaweah Delta	TKFMC	837	✓	✓														
Kaweah Delta Medicare Advantage	IP084	835	✓	✓		✓	✓											
Kaweah Delta Medicare Advantage	IP084	837	✓	✓														
KB Medical Practice, PC	35463	837	✓	✓														
Keenan and Associates	KEE01	837	✓	✓														
Keenan Associates (CA)	95279	837	✓	✓					✓	✓								
Kelseycare	KELSI	837	✓	✓														
KelseyCare	KELSE	835	✓	✓		✓	✓											
KelseyCare	KELSE	837	✓	✓														
Kemberton	KMBTN	837	✓	✓														
Kemper Benefits	61453	837	✓	✓					✓	✓								
Kemper Health (Reserve National Insurance Co.)	73066	835	✓	✓		✓	✓											Formerly known as Reserve National Insurance
Kemper Health (Reserve National Insurance Co.)	73066	837	✓	✓					✓	✓								Formerly known as Reserve National Insurance
Kempton Company	73100	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Kempton Company	73100	837	✓	✓	✓													
Kempton Group Administrators	73100	837	✓	✓	✓													
Kentucky Medicaid	12K11	835	✓			✓												
Kentucky Medicaid	12K11	837	✓			✓			✓									
Kentucky Medicaid	SKKY0	835		✓			✓											
Kentucky Medicaid	SKKY0	837		✓			✓			✓								
Kentucky Medicare	12M11	835	✓			✓												
Kentucky Medicare	12M11	837	✓			✓			✓									
Kentucky Medicare	SMKY0	835		✓			✓											
Kentucky Medicare	SMKY0	837		✓			✓			✓								
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	✓	✓		✓	✓											
Kern Health Systems	77039	837	✓	✓					✓	✓								
Kern Legacy Health Plan	89890	837	✓	✓					✓	✓								
Key Benefit Administrators (Indianapolis IN)	37217	835	✓	✓		✓	✓											
Key Benefit Administrators (Indianapolis IN)	37217	837	✓	✓	✓													
Key Health Medical Solutions Inc.	95460	837		✓														
Key Medical Group	IP082	835	✓	✓		✓	✓											
Key Medical Group	IP082	837	✓	✓														
Key Medical Group - Medicare Advantage	IP083	835	✓	✓		✓	✓											
Key Medical Group - Medicare Advantage	IP083	837	✓	✓														
Key Select	37321	837	✓	✓					✓	✓								
Key Solution	37323	835	✓	✓		✓	✓											
Key Solution	37323	837	✓	✓					✓	✓								
KeyCare of Maryland	KCMD1	835	✓	✓		✓	✓											
KeyCare of Maryland	KCMD1	837	✓	✓														
Keystone First	23284	835	✓	✓		✓	✓											
Keystone First	23284	837	✓	✓								✓	✓					
Keystone First CHIP	30070	835	✓	✓		✓	✓											
Keystone First CHIP	30070	837	✓	✓														For claims with DOS on or after 07/01/2025.
Keystone First Community HealthChoices	42344	835	✓	✓		✓	✓											
Keystone First Community HealthChoices	42344	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Keystone First VIP Choice	77741	835	✓	✓		✓	✓											
Keystone First VIP Choice	77741	837	✓	✓														
Keystone Health Plan East	12X25	837	✓			✓			✓									
Keystone Health Plan East	SX055	835	✓	✓		✓	✓											ERA Payer Code SX055
Keystone Health Plan East	SX055	837		✓						✓								
KG Administrative Services	KGA15	837	✓	✓														
Klais & Company	34145	837	✓	✓					✓	✓								
KM Strategic Management (KMSM)	HCMG1	837	✓	✓					✓	✓								
Koan Risk Solutions, Inc.	65871	837	✓	✓	✓													
Kopp Billing Agency	RP091	837	✓	✓		✓	✓		✓	✓								
Korean American Medical Group	AMM24	837	✓	✓					✓	✓								
Kova Healthcare, Inc.	KOVA1	835	✓	✓		✓	✓											
Kova Healthcare, Inc.	KOVA1	837	✓	✓					✓	✓								
KPS-Kitsap Physician Services	KPS01	837	✓	✓														
KS - Sunflower State Health	68069	837	✓	✓					✓	✓		✓	✓					
KSKJ Life (ERA Only)	IAS11	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
LA Blue Advantage Louisiana	72107	835	✓	✓		✓	✓											
LA Blue Advantage Louisiana	72107	837	✓	✓		✓	✓											
LA Care Health Plan	LACAR	835	✓	✓		✓	✓											
LA Care Health Plan	LACAR	837	✓	✓					✓	✓								
LACH HealthNet by MedPOINT	MPM19	837	✓	✓					✓	✓								
LADOC CorrectCare	LADOC	837	✓	✓					✓	✓								
Lagniappe Advantage	LALA1	837	✓	✓														
Lake County Physicians Association	37116	835	✓	✓		✓	✓											
Lake County Physicians Association	37116	837	✓	✓														
Lakeside Community Healthcare	LMG01	837	✓	✓														
Lakeside Comprehensive Healthcare	66127	837	✓	✓					✓	✓								
Lakeside Health Services	LMG11	837		✓														
Lakeside Medical Group	66125	837	✓	✓														
Lakewood Health Plan	CAPMN	837	✓	✓					✓	✓								
Lancaster General Health	16109	837	✓	✓					✓	✓								
Landmark Healthcare Inc	LNDMK	835		✓			✓											
Landmark Healthcare Inc	LNDMK	837		✓						✓								
Las Vegas Firefighters Health & Welfare Trust	77684	837	✓	✓	✓													
LaSalle Medical Associates	LSMA2	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
LaSalle Medical Associates	LSMA2	837	✓	✓					✓	✓								
LaSalle Medical Associates	NMM02	835	✓															
Lasso Healthcare MSA	10550	837	✓	✓					✓	✓								
Lawndale Christian Health Center	LAWND	837	✓	✓														
Lawndale Pace	R3466	837	✓	✓														
LBA Health Plans	52193	835	✓	✓		✓	✓											
LBA Health Plans	52193	837	✓	✓														
Leon Health Plans	A3565	835	✓	✓		✓	✓											
Leon Health Plans	A3565	837	✓	✓														
Leon Medical Center Health Plan	37316	837	✓	✓														
Leonard Holding Company	84365	837	✓	✓					✓	✓								
Level Health	LVL21	835	✓	✓		✓	✓											
Level Health	LVL21	837	✓	✓														
LHP Claims Unit	37248	837	✓	✓														
Liberty Advantage Health Plan (HMO SNP)	LIB01	835	✓	✓		✓	✓											
Liberty Advantage Health Plan (HMO SNP)	LIB01	837	✓	✓					✓	✓								
Liberty Dental Plan	CX083	837			✓						✓			✓				
Liberty Health Advantage	87071	837	✓															
Liberty HealthShare	90753	837	✓	✓														
Liberty National Life Insurance Company (ERA Only)	65331	835	✓	✓		✓	✓											
Liberty Union	37281	837	✓	✓														
Life Armstrong	R3476	835	✓	✓		✓	✓											
Life Armstrong	R3476	837	✓	✓														
Life Assurance Company	37281	837	✓	✓														
LIFE BEAVER PACE	R3475	835	✓	✓		✓	✓											
LIFE BEAVER PACE	R3475	837	✓	✓														
Life Butler	R3477	835	✓	✓	✓	✓	✓	✓										
Life Butler	R3477	837	✓	✓	✓													
Life Investors Insurance	12T67	837	✓															
Life Investors Insurance of America - Long Term Care	12T39	837	✓															
LIFE Pittsburgh	25181	835	✓	✓		✓	✓											
LIFE Pittsburgh	25181	837	✓	✓														For claims with DOS on or prior 11/30/2025.
LIFE Pittsburgh (Meridian PACE Solutions)	M7701	837	✓	✓	✓				✓	✓	✓							
Life St. Francis	R3473	835	✓	✓	✓	✓	✓	✓										
Life St. Francis	R3473	837	✓	✓	✓													

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Life Trac	41136	837	✓	✓														
LifeCircles PACE	71498	835	✓	✓		✓	✓											
LifeCircles PACE	71498	837	✓	✓														
Lifemap	RLH01	837			✓						✓							
LifePath Hospice Inc	76870	837	✓	✓					✓	✓								
LifeShield National Insurance Co	47865	837	✓	✓														
Lifetime Benefit Solutions	EBSRM	835	✓	✓		✓	✓											
LifeWise Health Plan of Washington	91049	835	✓	✓		✓	✓											
LifeWise Health Plan of Washington	91049	837	✓	✓					✓	✓								
LifeWise Healthplan of Oregon	93093	835	✓	✓		✓	✓											
LifeWise Healthplan of Oregon	93093	837	✓	✓					✓	✓								
Lifeworks Advantage	LWA01	835	✓	✓		✓	✓											
Lifeworks Advantage	LWA01	837	✓	✓														
Lincoln Financial Group (Dental)	CX061	837			✓													
Lincoln Heritage (ERA Only)	IAS12	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Line Construction Benefit Fund	LCB01	835	✓	✓		✓	✓											ERA ONLY
Little Company of Mary	LCM01	837	✓	✓														
Little Company of Mary	LCM1	837	✓	✓														For claims with a DOS on or after 1/1/17
Live Well IPA	LWIPA	835	✓	✓														
Live Well IPA	LWIPA	837	✓	✓					✓	✓								
Local 137 Operating Engineers Welfare Fund	84041	837	✓	✓					✓	✓								
Local 670 Engineers	67011	837	✓	✓														
Lockard & Williams	CB752	835	✓	✓		✓	✓											
Lockard & Williams	CB752	837	✓	✓														
Loma Linda	99255	837	✓						✓									
Loma Linda University Adventist Health Sciences Center Employee Health Plan	37267	837	✓	✓														
Loma Linda University Adventist Health Sciences Centers	37267	837	✓	✓														
Loma Linda University Behavioral Medicine Center Employee Health Plan	37267	837	✓	✓														
Loma Linda University Employee Health Plan	37267	837	✓	✓														
Loma Linda University Health Care Employee Health Plan	37267	837	✓	✓														
Loma Linda University Healthcare	33036	837	✓	✓														
Loma Linda University Medical Center (LLUMC)	95352	837	✓	✓														
Loma Linda University Medical Center Employee Health Plan	37267	837	✓	✓														
Loma Linda University Medical Center Residents Health Plan	37267	837	✓	✓														
Loma Linda University Student Health Plan	37267	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Lone Star Medical Group PLLC	LNSTR	837	✓	✓					✓	✓								
Long Beach Memorial IPA	IP095	837	✓	✓					✓	✓								
Longevity Health Plan of Colorado	LCO01	835	✓	✓		✓	✓											
Longevity Health Plan of Colorado	LCO01	837	✓	✓														
Longevity Health Plan of Florida	LFL01	835	✓	✓		✓	✓											
Longevity Health Plan of Florida	LFL01	837	✓	✓														
Longevity Health Plan of Illinois	LIL01	835	✓	✓		✓	✓											
Longevity Health Plan of Illinois	LIL01	837	✓	✓														
Longevity Health Plan of Michigan	LMI01	835	✓	✓		✓	✓											
Longevity Health Plan of Michigan	LMI01	837	✓	✓														
Longevity Health Plan of New Jersey	LNJ01	835	✓	✓		✓	✓											
Longevity Health Plan of New Jersey	LNJ01	837	✓	✓														
Longevity Health Plan of New York	LNY01	835	✓	✓		✓	✓											
Longevity Health Plan of New York	LNY01	837	✓	✓														
Longevity Health Plan of North Carolina	LNC01	835	✓	✓		✓	✓											
Longevity Health Plan of North Carolina	LNC01	837	✓	✓														
Longevity Health Plan of Oklahoma	LOK01	835	✓	✓		✓	✓											
Longevity Health Plan of Oklahoma	LOK01	837	✓	✓														
Los Angeles Medical Center (LAMC)	PROSP	837	✓	✓					✓	✓								
Louisiana Healthcare Connections	68069	837	✓	✓					✓	✓		✓	✓					
Louisiana Medicaid	MCDLA	835	✓	✓		✓	✓											
Louisiana Medicaid	MCDLA	837	✓	✓		✓	✓		✓	✓					✓	✓		
Louisiana Medicaid - DME Claims	SKLA1	837		✓			✓			✓								
Louisiana Medicaid Medicare Advantage	MCALA	835	✓	✓		✓	✓											
Louisiana Medicaid Medicare Advantage	MCALA	837	✓	✓		✓	✓		✓	✓								
Louisiana Medicare	12M12	835	✓			✓												
Louisiana Medicare	12M12	837	✓			✓												
Louisiana Medicare	SMLA0	835		✓			✓											
Louisiana Medicare	SMLA0	837		✓			✓			✓								
Loyal American Life Ins Co-Medicare Supplement	13193	835	✓	✓		✓	✓											
Loyal American Life Ins Co-Medicare Supplement	13193	837	✓	✓														
Loyola Physician Partners	37175	835	✓	✓		✓	✓											
Loyola Physician Partners	37175	837	✓	✓														
Lucent Health Solutions	88056	837	✓	✓														
Lucent Health Solutions (LHS Gov Operations)	17380	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Lucent Health Solutions (LHS Gov Operations)	17380	837	✓	✓					✓	✓								Also Known As Heritage Health Solutions
Lucentis Copay Program	82694	835	✓	✓		✓	✓											
Lucentis Copay Program	82694	837	✓	✓														
Lumico (ERA Only)	IAS13	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Luminare Health (CoreSource AZ MN)	35182	835	✓	✓		✓	✓											Claim Mailing Address: PO Box 2920, Clinton, IAaka Health Options Program
Luminare Health (CoreSource AZ MN)	35182	837	✓	✓						✓								
Luminare Health (CoreSource OH)	35183	835	✓	✓		✓	✓											
Luminare Health (CoreSource OH)	35183	837	✓	✓														
Luminare Health Internal (CoreSource-Internal)	35187	835	✓	✓		✓	✓											
Luminare Health Internal (CoreSource-Internal)	35187	837	✓	✓														
Luminare Health Little Rock (CoreSource Little Rock)	75136	835	✓	✓		✓	✓											
Luminare Health Little Rock (CoreSource Little Rock)	75136	837	✓	✓														
Lummi Indian Business Council (PRC)	LUMMI	837	✓	✓	✓													
Luninare Health (Coresoure AZ MN)	35182	837	✓	✓						✓								
Luninare Health (Coresoure MD IL PA)	35182	837	✓	✓						✓								
Luninare Health (Coresoure NC IN)	35182	837	✓	✓						✓								
LUTHER CARE	CB212	837	✓	✓														
LUTHERAN SERVICES CAROLINAS	LSC01	835	✓	✓														
LUTHERAN SERVICES CAROLINAS	LSC01	837	✓	✓	✓				✓	✓								
MacNeal Health Providers- CHS	36334	835	✓	✓		✓	✓											
MacNeal Health Providers- CHS	36334	837	✓	✓														
Maestro Health Plan	56139	835	✓	✓		✓	✓											
Maestro Health Plan	56139	837	✓	✓														
Magellan Complete Care of Arizona	MCC01	835	✓	✓		✓	✓											
Magellan Complete Care of Arizona	MCC01	837	✓	✓														
Magellan Complete Care of Virginia	MCC02	837	✓	✓														
Magellan Health Services	01260	835	✓	✓		✓	✓											
Magellan Health Services	01260	837	✓	✓					✓	✓								
Magnacare	11303	835	✓	✓		✓	✓											Payer requires EFT in order to receive ERA files
Magnacare	11303	837	✓	✓														
Magnolia	68069	837	✓	✓					✓	✓		✓	✓					
Maine Community Health Options	45341	835	✓	✓		✓	✓											
Maine Community Health Options	45341	837	✓	✓														
Maine Medicaid	12K13	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Maine Medicaid	12K13	837	✓															
Maine Medicaid	SKME0	835		✓			✓											
Maine Medicaid	SKME0	837		✓						✓								
Maine Medicare	12M13	835	✓			✓												
Maine Medicare	12M13	837	✓			✓			✓									
Maine Medicare	SMME0	835		✓			✓											
Maine Medicare	SMME0	837		✓			✓			✓			✓					
Managed Care of North America, Inc. (MCNA)	65030	837			✓						✓							
Managed Care Services LLC	35162	837	✓	✓					✓	✓								
Managed Care Systems (Delano Regional Medical Group)	MCS02	835		✓			✓											
Managed Care Systems (Delano Regional Medical Group)	MCS02	837		✓														
Managed Care Systems (Gemcare)	MCS01	835		✓			✓											
Managed Care Systems (Gemcare)	MCS01	837	✓	✓														
Managed Health Network	22771	837	✓	✓														
Managed Health Services Indiana (Medicaid HMO)	68069	837	✓	✓					✓	✓		✓	✓					
Managed Health Services Wisconsin	68069	837	✓	✓					✓	✓		✓	✓					
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	✓	✓														
Mapfre (Canada Life)	L0160	837	✓	✓														
March Vision Care Inc.	52461	835		✓			✓											
March Vision Care Inc.	52461	837	✓	✓														
Marpai Administrators LLC	56139	837	✓	✓														
Marquette Life Insurance Company	48055	837	✓	✓														
Marrick Medical Finance LLC.	20805	835	✓	✓		✓	✓											
Marrick Medical Finance LLC.	20805	837	✓	✓					✓	✓								
MARTINS POINT HEALTH CARE	53275	837	✓	✓														
MARTINS POINT HEALTH CARE	MPHC1	835	✓	✓		✓	✓											
Mary Washington Health Plan	83269	835	✓	✓		✓	✓											
Mary Washington Health Plan	83269	837	✓	✓														
Maryland Medicaid	MCDMD	835	✓	✓		✓	✓								✓			
Maryland Medicaid	MCDMD	837	✓	✓		✓	✓		✓						✓	✓		
Maryland Medicare	12010	835	✓			✓												
Maryland Medicare	12010	837	✓			✓			✓									
Maryland Medicare	SMMD0	835		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Maryland Medicare	SMMD0	837		✓			✓			✓								
Maryland Physicians Care	76498	835	✓	✓		✓	✓											
Maryland Physicians Care	76498	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
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	✓	✓														
Mass Advantage	86220	835	✓	✓														
Mass Advantage	86220	837	✓	✓														
Mass Behavioral Health Partnership	BHOMA	837	✓	✓					✓	✓								
Mass General Brigham Health Plan	04293	835	✓	✓		✓	✓											
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	✓			✓												
Massachusetts Medicaid	12K14	837	✓			✓			✓									
Massachusetts Medicaid	SKMA0	835		✓			✓											
Massachusetts Medicaid	SKMA0	837		✓			✓			✓								
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	HSNMP	837		✓			✓			✓								
Massachusetts Medicare	12M14	835	✓			✓												
Massachusetts Medicare	12M14	837	✓			✓			✓									
Massachusetts Medicare	SMMA0	835		✓			✓											
Massachusetts Medicare	SMMA0	837		✓			✓			✓								
Massachusetts Mutual	80314	837	✓	✓					✓	✓		✓	✓					
Massachusetts Mutual	WLPNT	837	✓	✓					✓	✓		✓	✓					
Masters Mates and Pilots Plan	MMPHB	837	✓	✓														
Maven Clinic	MAVEN	837		✓														
Max Specialty Benefits	27320	837		✓														
Maxor Administrative Services	92805	837	✓	✓														
Mayo Clinic FL/GA	88090	837	✓	✓														
MBA Benefit Administrators Inc (Salt Lake UT)	83028	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
MBA Benefit Administrators Inc (Salt Lake UT)	83028	837	✓	✓														
MCA ADMINISTRATORS	25160	835	✓	✓		✓	✓											
MCA ADMINISTRATORS	25160	837	✓	✓														
MCA-Sedgwick WTCHP	LV371	837	✓	✓					✓	✓								Payer ID LV371 is used for National Commercial Claims, ERAs enrollment is under 31172
Mcare Advantage Plan	12M85	837	✓															
McLaren Advantage SNP	38338	835	✓	✓		✓	✓											
McLaren Advantage SNP	3833R	837	✓	✓					✓	✓								
McLaren Health Advantage	38338	835	✓	✓		✓	✓											
McLaren Health Advantage	3833A	837	✓	✓					✓	✓								
McLaren Health Plan (Commercial)	38338	835	✓	✓		✓	✓											EFT enrollment required
McLaren Health Plan (Commercial)	38338	837	✓	✓					✓	✓								
McLaren Health Plan (JVHL)	K7JVH	835	✓	✓		✓	✓											
McLaren Health Plan (JVHL)	K7JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
McLaren Medicaid	3833C	835	✓	✓		✓	✓											
McLaren Medicaid	3833C	837	✓	✓					✓	✓								
McLaren Medicare Supplement	3833S	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	✓	✓		✓	✓											
MD Senior Care Medical Group	MSCMG	837	✓	✓														
MDSave	MDSAV	835	✓	✓		✓	✓											
MDSave	MDSAV	837	✓	✓														
Mdwise Healthy Indiana Plan	31354	837	✓	✓					✓	✓								
MDWise Healthy Indiana Plan	3135M	835	✓	✓		✓	✓											
MDWise Healthy Indiana Plan	3135M	837	✓	✓					✓	✓								
Mdwise Hoosier Healthwise	35191	837	✓	✓					✓	✓								
MDWise Hoosier Healthwise	3519M	835	✓	✓		✓	✓											
MDWise Hoosier Healthwise	3519M	837	✓	✓					✓	✓								
MDWise Medicare Advantage	MDADV	835	✓	✓		✓	✓											
MDWise Medicare Advantage	MDADV	837	✓	✓					✓	✓								
MDX Hawaii	MDXHI	835	✓	✓		✓	✓											
MDX Hawaii	MDXHI	837	✓	✓														
MED PAY	88058	835	✓	✓		✓	✓											
MED PAY	99999-0733	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
MedAdmin Solutions	58202	837	✓	✓														
MedBen (Newark OH)	74323	835	✓	✓		✓	✓											
MedBen (Newark OH)	74323	837	✓	✓														
MedCare Partners	MCP01	837	✓	✓					✓	✓								
MedCom	59231	837	✓	✓					✓	✓								
Medcore HP	31057	837	✓	✓														
MedCost Benefit Services	56205	835	✓	✓		✓	✓											
MedCost Benefit Services	56205	837	✓	✓					✓	✓								
MedCost Inc.	56162	835	✓	✓		✓	✓											
MedCost Inc.	56162	837	✓	✓					✓	✓								
Medfocus	95321	837		✓														
Medi-cal Dental	94146	835			✓			✓										
Medi-cal Dental	94146	837			✓									✓				
Medi-Share	59355	837	✓	✓														
Medica	39113	837	✓	✓					✓	✓								
Medica	94265	835	✓	✓		✓	✓											
Medica	94265	837	✓	✓					✓	✓								
Medica	MEDM1	835	✓	✓		✓	✓											Payer Code Effective 1/1/21
Medica	MEDM1	837	✓	✓					✓	✓								Payer Code Effective 1/1/21
Medica Health Plan Solutions	71890	835	✓	✓		✓	✓											
Medica Health Plan Solutions	71890	837	✓	✓														
Medica HealthCare Plan of Florida	78857	837	✓	✓														
Medica HealthCare Plan of Florida	87726	835	✓	✓		✓	✓											
MEDICA of Minnesota	07031	837			✓						✓			✓				
Medica2	12422	835	✓	✓		✓	✓											
Medica2	12422	837	✓	✓					✓	✓								
Medicaid of New Jersey	CKNJ1	835			✓			✓										
Medicaid of New Jersey	CKNJ1	837			✓						✓							
Medicaid of New York (UHC Community Plan)	GP133	835			✓			✓										
Medicaid of New York (UHC Community Plan)	GP133	837			✓						✓			✓				
Medicaid of Texas - MCNA	MCNA1	837			✓						✓							
Medicaid of Texas (UHC Community Plan)	GP133	837			✓						✓			✓				
MEDICAL ASSOCIATES HEALTH PLAN	MAHC1	835	✓	✓		✓	✓											
MEDICAL ASSOCIATES HEALTH PLAN	MAHC1	837	✓	✓														
Medical Benefits Administration	MBA01	837		✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Medical Benefits Administrators Inc. (Newark OH)	74323	837	✓	✓														
Medical Benefits Companies (Newark OH)	74323	837	✓	✓														
Medical Benefits Mutual (Newark OH)	74323	837	✓	✓														
Medical Benefits Mutual Life Insurance Co.	74323	837	✓	✓														
Medical Card System	66039	835	✓	✓		✓	✓											
Medical Card System (MCS)	L0170	837	✓	✓														
Medical Mutual of Ohio	29076	835	✓	✓		✓	✓											
Medical Mutual of Ohio	29076	837	✓	✓					✓	✓		✓	✓					
Medical Reimbursements of America	62177	837	✓	✓														
Medical Services Initiative	12057	837	✓	✓					✓	✓								
Medical Value Plan - Ohio (MVP)	38224	837		✓														
Medicare DME - All Jurisdictions	SDMEB	835		✓			✓											
Medicare DME - All Jurisdictions	SDMEB	837		✓			✓			✓								
Medicare Part A Legacy - JH	04911	835	✓			✓												
Medicare Part A Legacy - JH	04911	837	✓			✓			✓									
Medicare Part A Legacy (CA, HI, NV)	12M65	835	✓			✓												
Medicare Part A Legacy (CA, HI, NV)	12M65	837	✓			✓			✓						✓			
Medicare Plus Blue Michigan	00210	837	✓															
Medicare Plus Blue Michigan	00710	837		✓														
Medicare PPO (BCBS SC)	00C63	835	✓	✓		✓	✓											
Medicare PPO (BCBS SC)	00C63	837	✓	✓														
Medicare y Mucho Mas (MMM)	L0210	835	✓	✓		✓	✓											
Medicare y Mucho Mas (MMM)	L0210	837	✓	✓														
MediChoice IPA	AMM11	837	✓	✓														
Medico Insurance Company	23160	835	✓	✓	✓	✓	✓	✓										
Medico Insurance Company	23160	837	✓	✓	✓						✓			✓				
MediGold	95655	835	✓	✓		✓	✓											
MediGold	95655	837	✓	✓					✓	✓								
MediGold PPO	13123	837	✓	✓														
MediView Curative	CURTV	835	✓	✓		✓	✓											
MediView Curative	CURTV	837	✓	✓														
Mediview Inc.	STAR1	837	✓	✓														
Medlytix	MEDLX	837	✓	✓														
MedMgr MSO, Inc	MMM88	837	✓	✓														
MedPartners - Mary Black Health Network	412MP	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
MedPartners - Mary Black Health Network	412MP	837	✓	✓														
MedPartners Administrative Services	35205	835	✓	✓		✓	✓											
MedPartners Administrative Services	35205	837	✓	✓														
MedSolutions Inc	62160	835	✓	✓		✓	✓											
MedSolutions Inc	62160	837	✓	✓														
Medstar Family Choice Maryland Healthchoice	RP063	837	✓	✓														
Medstar Family Choice, Inc (DC)	RP062	835	✓	✓		✓	✓											
Medstar Family Choice, Inc (DC)	RP062	837	✓	✓					✓	✓								
Medstar Family Choice, Inc (MD)	RP063	835	✓	✓		✓	✓											
Medstar Family Choice, Inc (MD)	RP063	837	✓	✓														
MEGA Life & Health (United Ins. Div)	97055	837	✓															
Memorial Clinical Associates/ SelectCare of Texas (MCA)	62181	837	✓															
Memorial Healthcare IPA	IP095	837	✓	✓					✓	✓								
Memorial Herman Health Network Providers	37330	837	✓	✓					✓	✓								Payer ID is for dates of service prior to 1.31.2026
Memorial Hermann Health Insurance Company	MHHNP	837	✓	✓														
MemorialCare Medical Foundation	MMFMC	835	✓	✓		✓	✓											
MemorialCare Medical Foundation	MMFMC	837	✓	✓					✓	✓								
MemorialCare Medical Foundation UCI	MMFUC	835	✓	✓		✓	✓											
MemorialCare Medical Foundation UCI	MMFUC	837	✓	✓					✓	✓								
MemorialCare Select Health Plan	46187	835	✓	✓		✓	✓											
MemorialCare Select Health Plan	46187	837	✓	✓														
Menifee Valley Community Medical Group	HCMG1	835	✓	✓														Payer returns ERA's automatically once electronic claim submission begins.
Menifee Valley Community Medical Group	HCMG1	837	✓	✓					✓	✓								
Mental Health Consultants Inc.	37050	837	✓	✓														
Merchants Benefit Administration	86087	835	✓	✓		✓	✓											
Merchants Benefit Administration	86087	837	✓	✓														
Merchants Benefit Administration, Inc.	MBAM1	837	✓	✓														
Merchants Benefit Administrator	IHS24	837	✓	✓					✓	✓								
Mercy Benefit Administration	37264	837	✓	✓														Formerly known as St. John's Claims Administration
Mercy Care Plan (AHCCCS)	86052	835	✓	✓		✓	✓											
Mercy Care Plan (AHCCCS)	86052	837	✓	✓					✓	✓		✓	✓					
Mercy Maricopa Integrated Care	33628	837	✓	✓					✓	✓								
Mercy Physicians Medical Group (MPMG) (NAMM Southern CA)	PROSP	837	✓	✓					✓	✓								
Mercy Provider Network	43185	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
MercyCare Insurance	39114	835	✓	✓		✓	✓											
MercyCare Insurance	39114	837	✓	✓														
Meridian Health Plan Michigan Complete	MHPMI	835	✓	✓		✓	✓											Payer Requires EFT in order to receive ERA
Meridian Health Plan Michigan Complete	MHPMI	837	✓	✓														
Meridian Health Plan of Illinois Complete	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
Meridian Health Plan of Michigan (JVHL)	J2JVH	835	✓	✓		✓	✓											
Meridian Health Plan of Michigan (JVHL)	J2JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Meridian PACE Solutions	24201	837			✓						✓							
Meridian PACE Solutions	MPSAB	835	✓	✓		✓	✓											
Meridian PACE Solutions	MPSAB	837	✓	✓														
MeridianComplete - Illinois	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
MeridianComplete - Michigan	MHPMI	837	✓	✓														
MeridianHealth Illinois	13189	835	✓	✓		✓	✓											ERA enrollment is done under payer name "CENTENE". Payer Requires EFT in order to receive ERA.
MeridianHealth Illinois	13189	837	✓	✓					✓	✓								For claims with a DOS before 07/01/2021
MeridianHealth Illinois	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
MeridianTotal	68069	837	✓	✓					✓	✓		✓	✓					
MeridianTotal - Illinois	MHPIL	835	✓	✓		✓	✓											ERA enrollment is done under payer name "CENTENE". Payer Requires EFT in order to receive ERA
MeridianTotal - Illinois	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
Meritage Medical Network	IP097	835	✓	✓		✓	✓											
Meritage Medical Network	IP097	837	✓	✓														
Meritain Health	38232	837	✓	✓														
Meritain Health	41124	835	✓	✓		✓	✓											
Meritain Health	41124	837	✓	✓	✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Metlife Dental	65978	835			✓			✓										
Metlife Dental	65978	837			✓						✓			✓				
MetroPlus Health Plan	13265	835	✓	✓		✓	✓											
MetroPlus Health Plan	13265	837	✓	✓														
MFC & HealthPlus Peoria	23550	835	✓	✓		✓	✓											
MFC & HealthPlus Peoria	23550	837	✓	✓														
MHP Systems	64068	837	✓	✓														
Miami Children's Health Plan	82832	835	✓	✓		✓	✓											
Michigan Medicaid	12K37	835	✓			✓												
Michigan Medicaid	12K37	837	✓			✓			✓									

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Michigan Medicaid	CKMI1	835			✓			✓										
Michigan Medicaid	CKMI1	837			✓						✓							
Michigan Medicaid	SKMI0	835		✓			✓											
Michigan Medicaid	SKMI0	837		✓			✓			✓								
Michigan Medicare	SMMI0	835	✓	✓		✓	✓											
Michigan Medicare	SMMI0	837	✓	✓		✓	✓		✓	✓								
Mid American Benefits	22823	835	✓	✓		✓	✓											
Mid American Benefits	22823	837	✓	✓					✓	✓								
Mid Rogue Oregon Health Plan	26161	837	✓	✓														
Mid-America Associates Inc.	37281	837	✓	✓														
Mid-County Physicians Medical Group	SCP01	837	✓	✓														
Midland National Life Insurance Company	90956	837		✓														
Midlands Choice Inc.	47080	837	✓	✓					✓	✓								
Midwest Health Partners	76079	837	✓	✓														
Midwest Operating Engineers Welfare Fund	45979	837	✓	✓					✓	✓								
Midwest Physicians Administrative Services	TH088	837		✓														
Millette Administrators, Inc (Millette Administrators)	MAI58	837	✓		✓													
Millette Administrators, Inc. (Michigan)	MAI60	835	✓	✓		✓	✓											
Millette Administrators, Inc. (Michigan)	MAI60	837	✓	✓	✓													
Mills Peninsula Medical Group	SC050	837	✓	✓					✓	✓								
Minnesota Department of Health	MNDH1	835	✓	✓														ERAs will begin returning once claim submissions start for payer ID MNDH1
Minnesota Department of Health	MNDH1	837	✓	✓														
Minnesota Medicaid	12K16	835	✓			✓												
Minnesota Medicaid	12K16	837	✓			✓			✓									
Minnesota Medicaid	SKMN0	835		✓			✓											
Minnesota Medicaid	SKMN0	837		✓			✓			✓								
Minnesota Medicare	12M16	835	✓			✓												
Minnesota Medicare	12M16	837	✓			✓			✓			✓						
Minnesota Medicare	SMMN0	835		✓			✓											
Minnesota Medicare	SMMN0	837		✓			✓			✓			✓					
Mission (St. Joseph Heritage Healthcare)	STJOE	837	✓	✓														
Mission Community IPA	PHM10	837		✓														
Mississippi Health Partners	64068	837	✓	✓														
Mississippi Medicaid	12K17	837	✓						✓									

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Mississippi Medicaid	CKMS1	835			✓			✓										
Mississippi Medicaid	CKMS1	837			✓						✓							
Mississippi Medicaid	SKMS0	837		✓						✓								
Mississippi Medicaid	SKMS1	835	✓	✓		✓	✓											
Mississippi Medicare	12M17	835	✓			✓												
Mississippi Medicare	12M17	837	✓			✓			✓									
Mississippi Medicare	SMMS0	835		✓			✓											
Mississippi Medicare	SMMS0	837		✓			✓			✓								
Mississippi Physicians Care Network	64084	837	✓	✓														
Mississippi Public Entity Employee Benefit Trust	37233	837	✓	✓														
Mississippi Select Health Care	64088	837	✓	✓														
Missoula County Medical Benefits Plan	37275	837	✓	✓														
Missouri Medicaid	12K15	835	✓			✓												
Missouri Medicaid	12K15	837	✓						✓									
Missouri Medicaid	SKMO0	835		✓			✓											
Missouri Medicaid	SKMO0	837		✓						✓								
Missouri Medicare	12M15	835	✓			✓												
Missouri Medicare	12M15	837	✓			✓			✓									
Missouri Medicare	SMMO0	835		✓			✓											
Missouri Medicare	SMMO0	837		✓			✓			✓								
Missouri Medicare Select	MMS01	837	✓	✓														
MMM Florida	MMMFL	835	✓	✓		✓	✓											
MMM Florida	MMMFL	837	✓	✓					✓	✓								
MMSI (Mayo Clinic Health Solutions)	71890	837	✓	✓														
MO - Missouri Home State Health Care	68069	837	✓	✓					✓	✓		✓	✓					
Moda Health	13350	835	✓	✓		✓	✓											
Moda Health	13350	837	✓	✓														
Molina Complete Care of Virginia (Medicare & Medicaid)	MCC02	835	✓	✓		✓	✓											
Molina Complete Care of Virginia (Medicare & Medicaid)	MCC02	837	✓	✓														
Molina Healthcare (Dual Benefits) (Medical & BH Claims) MyCare Ohio	0021586	835	✓	✓		✓	✓											
Molina Healthcare (Dual Benefits) (Medical & BH Claims) MyCare Ohio	0021586	837	✓	✓					✓	✓								For claims with DOS on or after 01/01/2026.
Molina Healthcare Dental	SKYGN	835			✓			✓										
Molina Healthcare Dental	SKYGN	837			✓						✓			✓				
Molina Healthcare New Mexico Medicaid Turquoise	MLNNM	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Molina Healthcare of California	38333	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of California	38333	837	✓	✓					✓	✓								
Molina Healthcare of California Encounters	33373	837	✓	✓														
Molina Healthcare of Florida	51062	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Florida	51062	837	✓	✓					✓	✓								
Molina Healthcare of Idaho	61799	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Idaho	61799	837	✓	✓														
Molina Healthcare of Illinois	20934	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Illinois	20934	837	✓	✓														
Molina Healthcare of Iowa	MLNIA	835	✓	✓		✓	✓											
Molina Healthcare of Iowa	MLNIA	837	✓	✓					✓	✓								
Molina Healthcare of Michigan	38334	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Michigan	38334	837	✓	✓														
Molina Healthcare of Michigan (JVHL)	JIJVH	835	✓	✓		✓	✓											
Molina Healthcare of Michigan (JVHL)	JIJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Molina Healthcare of Mississippi	77010	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Mississippi	77010	837	✓	✓														
Molina Healthcare of Nebraska	MLNNE	835	✓	✓		✓	✓											
Molina Healthcare of Nebraska	MLNNE	837	✓	✓					✓	✓								
Molina Healthcare of Nevada	MLNNV	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Nevada	MLNNV	837	✓	✓														
Molina Healthcare of New Mexico - Salud Market Place and Medicare	09824	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of New Mexico - Salud Market Place and Medicare	09824	837	✓	✓														Effective April 1, 2026, claims submitted to Payer Code 09824 will be routed to the payer's code MLNNM.
Molina Healthcare of New Mexico -SCI	04423	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of New Mexico -SCI	04423	837	✓	✓					✓	✓								
Molina Healthcare of New York	16146	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of New York	16146	837	✓	✓					✓	✓								
Molina Healthcare of Ohio	20149	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Ohio	20149	837	✓	✓														
Molina Healthcare of Puerto Rico	81794	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of South Carolina	46299	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of South Carolina	46299	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Molina Healthcare of Texas	20554	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Texas	20554	837	✓	✓					✓	✓								
Molina Healthcare of Utah	12X09	835	✓			✓												
Molina Healthcare of Utah	12X09	837	✓															
Molina Healthcare of Utah	SX109	835		✓			✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Utah	SX109	837		✓														
Molina Healthcare of Washington	38336	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Washington	38336	837	✓	✓														
Molina Healthcare of Wisconsin	ABRI1	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Molina Healthcare of Wisconsin	ABRI1	837	✓	✓														
Molina Ohio Medicaid	73160	837	✓	✓														
Molina Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Molina Ohio Medicaid Vision	7316V	837	✓	✓														
Molina Ohio Medicaid Vision	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
Monarch Healthcare IPA	IP095	835	✓	✓		✓	✓											
Monarch Healthcare IPA	IP095	837	✓	✓					✓	✓								
Monitor Life - Crum & Forster (ERA Only)	IAS22	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Monitor Life Insurance Company (Secondary claims only)	16098	835	✓	✓		✓	✓											
Monitor Life Insurance Company (Secondary claims only)	16098	837	✓															
Montana Medicaid	12K77	835	✓			✓												
Montana Medicaid	12K77	837	✓						✓									
Montana Medicaid	SKMT0	835		✓			✓											
Montana Medicaid	SKMT0	837		✓						✓								
Montana Medicare	12M77	835	✓			✓												
Montana Medicare	12M77	837	✓			✓			✓						✓			
Montana Medicare	SMMT0	835		✓			✓											
Montana Medicare	SMMT0	837		✓			✓			✓						✓		
Montefiore Contract Management Organization	13174	835	✓	✓		✓	✓											
Montefiore Contract Management Organization	13174	837	✓	✓					✓	✓								
Montifiore HMO	46161	837	✓	✓					✓	✓								
Monumental Life Insurance Company	MMLIC	837		✓														
Monumental Life Insurance Company (TX)	TRLTC	837	✓	✓					✓	✓								
MORRIS ASSOCIATES	35092	837	✓	✓														
MotivHealth	U7632	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
MotivHealth	U7632	837	✓	✓														
Mount Sinai Eldercare (Collabrios Health)	R3492	835	✓	✓		✓	✓											
Mount Sinai Eldercare (Collabrios Health)	R3492	837	✓	✓	✓													
Mountain Health CO-OP	MHC01	835	✓	✓		✓	✓											
Mountain Health CO-OP	MHC01	837	✓	✓														
Mountain State Blue Cross Blue Shield of West Virginia	SB941	837		✓			✓			✓								
Mountain States Administrative Services	86040	837	✓	✓														
MPE Services Inc.	37233	837	✓	✓														
MPEEBT	37233	837	✓	✓														
MPM Prospect Medical Group	MPM16	837		✓						✓								
MS Administrators	IHS42	837	✓	✓					✓	✓								
MSA Care Guard	20572	837	✓	✓					✓	✓								
MSC (Medical Service Company) Group, Inc.	80019	837	✓	✓														
Mt. Carmel Health Plan	95655	837	✓	✓					✓	✓								
Multicare	R3457	837	✓	✓														
Multicare Connected Care (MCC)	RP036	835	✓	✓		✓	✓											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	✓	✓														
Mutual Health Services	34192	835	✓	✓		✓	✓											
Mutual of Omaha Insurance Company	71412	835	✓	✓	✓	✓	✓	✓										
Mutual of Omaha Insurance Company	71412	837	✓	✓														
Mutual of Omaha Insurance Company	CX087	837			✓						✓							
Mutually Preferred	71412	837	✓	✓														
MVP Health Plan (Mohawk Valley)	14165	835	✓	✓		✓	✓											
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	62777	837	✓	✓														
My Family Medical Group	33020	837		✓														
MyCare Ohio Anthem BCBS	0022147	835	✓	✓		✓	✓											
MyCare Ohio Anthem BCBS	0022147	837	✓	✓					✓	✓		✓	✓					For claims with DOS on or after 01/01/2026.
MyDecision HealthSmart	18840	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
myPlace Health	MPH01	835	✓	✓														
myPlace Health	MPH01	837	✓	✓	✓				✓	✓	✓							
MyTruAdvantage	MTAMA	837	✓	✓					✓	✓								
MyTruAdvantage	SIHOMA	835	✓	✓	✓	✓	✓	✓										
MyTruAdvantage	SIHOMA	837	✓	✓	✓				✓	✓								
N.W. Ironworkers Health & Security Trust Fund	91136	837	✓	✓														
N.W. Roofers & Employers Health & Security Trust Fund	91136	837	✓	✓														
N.W. Textile Processors	91136	837	✓	✓														
NAA (North America Administrators L.P.) (Nashville TN)	65085	835	✓	✓		✓	✓											
NAA (North America Administrators L.P.) (Nashville TN)	65085	837	✓	✓														
NALC/Affordable	53011	837	✓	✓					✓	✓								
NAMCI/Global Care	L0110	837	✓	✓					✓	✓								
NAMM-IL (Senior Care Partners) (ERA Only)	NANPR	835	✓	✓		✓	✓											ERA Only
NAPHCARE INC.	58182	837	✓	✓	✓				✓	✓								
Nascentia Health Options (formerly VNA Homecare Options)	31626	837	✓	✓														
Nascentia Health Plan	45529	835	✓	✓		✓	✓											
Nascentia Health Plan	45529	837	✓	✓														
National Accident and Health General Agency Inc. (NAHGA)	67788	835	✓	✓		✓	✓											
National Accident and Health General Agency Inc. (NAHGA)	67788	837	✓	✓					✓	✓								
National Association of Letter Carriers/NALCHBP	53011	835	✓	✓		✓	✓											
National Association of Letter Carriers/NALCHBP	53011	837	✓	✓					✓	✓								
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	✓	✓														
National Foundation Life Insurance	USHA1	835	✓	✓		✓	✓											
National General	ASHC1	837	✓	✓					✓	✓								
National Imaging Associates	SX190	837		✓														
National Rural Electric Coop (NRECA)	39026	837	✓	✓					✓	✓		✓	✓					
National Telecommunications Cooperative Association	52120	835	✓	✓		✓	✓											
National Telecommunications Cooperative Association	52120	837	✓	✓	✓													
National Telecommunications Cooperative Association (NTCA - Staff)	52104	837	✓	✓														
National Telecommunications Cooperative Association (NTCA)	52103	837	✓	✓														
National Vision Administrators	NVADM	837		✓														
NationsVision	NV101	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
NationsVision	NV101	837	✓	✓														
Nebraska Medicaid	12K19	837	✓			✓												
Nebraska Medicaid	NEMCD	835	✓	✓		✓	✓											
Nebraska Medicaid	SKNE0	837		✓			✓											
Nebraska Medicare	12M19	835	✓			✓												
Nebraska Medicare	12M19	837	✓			✓			✓									
Nebraska Medicare	SMNE0	835		✓			✓											
Nebraska Medicare	SMNE0	837		✓			✓			✓								
Nebraska Total Care	68069	837	✓	✓					✓	✓		✓	✓					
Neighborhood Health Partnership (NHP)	96107	837	✓	✓					✓	✓								
Neighborhood Health Plan Rhode Island	05047	835	✓	✓		✓	✓											
Neighborhood Health Plan Rhode Island	05047	837	✓	✓					✓	✓								
Neighborhood Health Plan Rhode Island - Exchange, Unity, Integrity	96240	835	✓	✓		✓	✓											
Neighborhood Health Plan Rhode Island - Exchange, Unity, Integrity	96240	837	✓	✓														
NEIGHBORHOOD HEALTHCARE PACE	R3456	837	✓	✓														
Netcare Life and Health Insurance (Hagatna Guam)	66055	837	✓	✓														
NetWell	27726	837	✓	✓														
Network Health Insurance Corp-Medicare	77076	835	✓	✓		✓	✓											
Network Health Insurance Corp-Medicare	77076	837	✓	✓														
Network Health Plan of Wisconsin Inc.	39144	835	✓	✓		✓	✓											
Network Health Plan of Wisconsin Inc.	39144	837	✓	✓														
Network Health TPA	22344	837	✓	✓					✓	✓								
Network Solutions IPA	NSIPA	837		✓						✓								
Network TPA LLC	58204	837	✓	✓														
NEUEHEALTH	NEUEH	835	✓	✓		✓	✓											
NEUEHEALTH	NEUEH	837	✓	✓														
Nevada Medicaid	NVMMIS	835	✓	✓		✓	✓											
Nevada Medicaid	NVMMIS	837	✓	✓		✓	✓		✓	✓								
Nevada Medicare	SMNV0	835		✓			✓											
Nevada Medicare	SMNV0	837		✓			✓			✓								
NEW AVENUES INC.	95998	837	✓	✓					✓	✓								
New Century Health - Vista Cardiology	NCH09	837		✓														
New Directions Behavioral Health (NDBH)	NDX99	837	✓	✓					✓	✓								
New England Dental Administrators (ERA Only)	43351	835			✓			✓										
New Era Employee Welfare Benefit Plan Trust	76031	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
New Era Life	98798	835	✓	✓		✓	✓											
New Era Life	98798	837	✓	✓														
New Era Life - Employee Benefit Plans	96396	837	✓	✓														
New Hampshire Medicaid	12K90	835	✓			✓												
New Hampshire Medicaid	12K90	837	✓			✓			✓									
New Hampshire Medicaid	SKNH0	835		✓			✓											
New Hampshire Medicaid	SKNH0	837		✓			✓			✓								
New Hampshire Medicare	12M21	835	✓			✓												
New Hampshire Medicare	12M21	837	✓			✓			✓									
New Hampshire Medicare	SMNH0	835		✓			✓											
New Hampshire Medicare	SMNH0	837		✓			✓			✓								
New Horizon PACE	R3481	835	✓	✓		✓	✓											
New Horizon PACE	R3481	837	✓	✓	✓													
New Jersey Medicaid	MDNJI	835	✓			✓												
New Jersey Medicaid	MDNJI	837	✓			✓			✓									
New Jersey Medicaid	MDNJP	835		✓			✓											
New Jersey Medicaid	MDNJP	837		✓			✓			✓								
New Jersey Medicaid-Charity Care	CKNJ2	835	✓			✓												
New Jersey Medicaid-Charity Care	CKNJ2	837	✓			✓			✓									
New Jersey Medicare	12005	835	✓			✓												
New Jersey Medicare	12005	837	✓			✓			✓									
New Jersey Medicare	SMNJ0	835		✓			✓											
New Jersey Medicare	SMNJ0	837		✓			✓			✓								
New Life Medical Group, Inc.	HSM01	837	✓	✓														
New Mexico Medicaid	12K22	835	✓			✓												
New Mexico Medicaid	12K22	837	✓			✓			✓									
New Mexico Medicaid	SKNM0	835		✓			✓											
New Mexico Medicaid	SKNM0	837		✓			✓											
New Mexico Medicare	SMNM0	835		✓			✓											
New Mexico Medicare	SMNM0	837		✓			✓			✓								
New York City Retirees	CX076	837			✓						✓							
New York Hotel Fund	7707C	837		✓														
New York Life	12T69	837	✓															
New York Medicaid	12K35	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
New York Medicaid	12K35	837	✓			✓			✓									Do not use this payer code if you began submitting claims after April 1, 2025, as you will instead have a unique payer code associated with your ETIN. If you are unsure of your assigned payer code, please contact your Client Manager for assistance.
New York Medicaid	SKNY0	835		✓	✓		✓	✓										
New York Medicaid	SKNY0	837		✓	✓		✓	✓		✓								Do not use this payer code if you began submitting claims after April 1, 2025, as you will instead have a unique payer code associated with your ETIN. If you are unsure of your assigned payer code, please contact your Client Manager for assistance.
New York Medical Indemnity Fund	NYDFS	837	✓	✓					✓	✓								As of October 3rd, 2023, this payer does not accept ERA at this time.
New York Medicare	12M35	835	✓			✓												
New York Medicare	12M35	837	✓			✓			✓			✓						
New York Medicare Downstate	SMNY0	835		✓			✓											
New York Medicare Downstate	SMNY0	837		✓			✓			✓			✓					
New York Medicare Queens	SMNY2	835		✓			✓											
New York Medicare Queens	SMNY2	837		✓			✓			✓			✓					
New York Medicare-Upstate	SMNY1	835		✓			✓											
New York Medicare-Upstate	SMNY1	837		✓			✓			✓			✓					
New York Network Management	11334	837		✓														
NEXCALIBER	ADSL1	837	✓	✓					✓	✓								
Next Level Health Partners	81085	835	✓	✓		✓	✓											Former payer code 69821
Next Level Health Partners	81085	837	✓	✓														
NextBlue of North Dakota	55892	835	✓	✓		✓	✓											
NextBlue of North Dakota	55892	837	✓	✓														
Nexus Health Medical Group	NEX01	837	✓	✓														
NGS American Inc	38225	835	✓	✓		✓	✓											
NGS American Inc	38225	837	✓	✓					✓	✓								
NH Healthy Families	68069	837	✓	✓					✓	✓		✓	✓					
NH Healthy Families' Behavioral Health	68068	837	✓	✓					✓	✓								
NHBCAUX	88050	837	✓	✓					✓	✓								
NHC Advantage	NHC01	837	✓	✓														As of January 23, 2024, the payer does not offer an electronic remittance.
Nice Healthcare	NICE1	835	✓	✓		✓	✓											
Nice Healthcare	NICE1	837	✓	✓														
Nippon Life Insurance Company of America	81264	835	✓	✓	✓	✓	✓	✓										
Nippon Life Insurance Company of America	81264	837	✓	✓	✓													
Nivano Physicians Group	MBA01	837	✓	✓					✓									
NJ Carpenters Health Fund	22603	837	✓	✓					✓	✓								
Noble AMA Select IPA	PDT01	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Nomi Health	1NOMI	835	✓	✓		✓	✓											
Nomi Health	1NOMI	837	✓	✓														
North American Medical Management - Southern California	IP079	837	✓	✓														
North Carolina Department of Public Safety Correctional Claims	38520	837	✓	✓					✓	✓								
North Carolina Medicaid	12K23	835	✓			✓												
North Carolina Medicaid	12K23	837	✓			✓			✓									Encounter Claims Accepted
North Carolina Medicaid	CKNC1	835			✓			✓										
North Carolina Medicaid	CKNC1	837			✓			✓										
North Carolina Medicaid	SKNC0	835		✓			✓											
North Carolina Medicaid	SKNC0	837		✓			✓			✓								Encounter Claims Accepted
North Carolina Medicare	12M23	835	✓			✓												
North Carolina Medicare	12M23	837	✓			✓												
North Carolina Medicare	SMNC0	835		✓			✓											
North Carolina Medicare	SMNC0	837		✓			✓											
North County Health Services	SCP01	837	✓	✓														
North Dakota Medicaid	12K78	835	✓			✓												
North Dakota Medicaid	12K78	837	✓			✓			✓						✓			
North Dakota Medicaid	SKND0	835		✓			✓											
North Dakota Medicaid	SKND0	837		✓			✓			✓						✓		
North Dakota Medicare	12M82	835	✓			✓												
North Dakota Medicare	12M82	837	✓			✓			✓						✓			
North Dakota Medicare	SMND0	835		✓			✓											
North Dakota Medicare	SMND0	837		✓			✓			✓						✓		
North East Medical Services	NEMS	835	✓	✓		✓	✓											
North East Medical Services	NEMS	837	✓	✓	✓				✓	✓	✓							
North West Orange County Medical Group	PROSP	837		✓						✓								
Northbay Healthcare	NB123	837	✓	✓					✓	✓								
Northeast Georgia Health Services	58169	837	✓	✓														
Northern California Advantage Medical Group	NCA01	837		✓														
Northern California Physicians Group	NCPG1	837	✓	✓														
Northern Illinois Health Plan	36347	837	✓	✓														
Northern Nevada Trust Fund	88027	835	✓	✓		✓	✓											
Northern Nevada Trust Fund	88027	837	✓	✓														
Northridge Medical Group	NMG01	837		✓														
NorthShore Physician Associates	36364	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
NorthShore Physician Associates (DOS < 1/1/23)	48026	835	✓	✓		✓	✓											
NorthShore University Health System Medical Group	36364	837	✓	✓														
Northwell Direct	88987	837	✓	✓														
Northwest Community Health Partners	36364	837	✓	✓														
Northwest Diagnostic Clinic/SelectCare of Texas (NWDC)	62119	837	✓	✓														
Northwest Physicians Network	LIFE1	837	✓	✓					✓	✓								
Northwest Physicians Network	NPN11	837	✓	✓					✓	✓								Use NPN11 for Dates of Service prior to 01/01/21
Northwest Suburban IPA (Illinois)	36346	835	✓	✓		✓	✓											
Northwest Suburban IPA (Illinois)	36346	837	✓	✓														
Northwood Healthcare	NWOOD	835	✓	✓		✓	✓											
Northwood Healthcare	NWOOD	837	✓	✓					✓	✓								
Novasys Health Network	71080	837	✓	✓														
NP Providence Health Plan Commercial	PHMD1	837		✓						✓								
NP Providence Health Plan Medicare	PHMD2	837		✓														
NP Providence Health Plan OHP	PHMD3	837		✓														
NP Yamhill County CCO	PHMD4	837		✓														
Nuestra Familia Medical Group (Prospect Medical Group)	PROSP	837		✓						✓								
NYCE	26992	837	✓	✓	✓													
NYCE	39026	835	✓	✓	✓	✓	✓	✓										
Nyhart	37299	837	✓	✓														
NYLCARE CA	91135	837	✓															
NYS DOH UCP	14142	835	✓	✓		✓	✓											
NYS DOH UCP	14142	837	✓	✓					✓	✓								
Oak Street Health	OAKST	837	✓	✓														
Oak West Physician Association	36400	835	✓	✓		✓	✓											
Oak West Physician Association	36400	837	✓	✓														
Oasis IPA	DESRT	837		✓														
OCCUPATIONAL EYEWEAR NETWORK INC	50653	837	✓	✓														
Ochsner Health Plan	A5236	835	✓	✓		✓	✓											
Ochsner Health Plan	A5236	837	✓	✓														
OCRW Orange County Health Services Dept - Ryan White Program	69879	837	✓	✓														
Ohio Health Choice PPO	34189	837	✓	✓														
Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											
Ohio Medicaid	SKOH0	837	✓	✓					✓	✓								
Ohio Medicare	12M24	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Ohio Medicare	12M24	837	✓			✓			✓									
Ohio Medicare	SMOH0	835		✓			✓											
Ohio Medicare	SMOH0	837		✓			✓			✓								
Ohio PPO Connect	74431	835	✓	✓		✓	✓											
Ohio PPO Connect	74431	837	✓	✓					✓	✓								
OhioHealthy	48116	835	✓	✓		✓	✓											
OhioHealthy	48116	837	✓	✓														
Oklahoma Humana Healthy Horizon	61101	837	✓	✓					✓	✓		✓	✓					
Oklahoma Complete Care	68069	837	✓	✓					✓	✓		✓	✓					
Oklahoma DRS DOC	71065	835	✓	✓		✓	✓											Effective 1/1/23, ERA enrollment completed under UMR (39026).
Oklahoma DRS DOC	71065	837	✓	✓														
Oklahoma Medicaid	12K25	835	✓			✓												
Oklahoma Medicaid	12K25	837	✓						✓									
Oklahoma Medicaid	731476619	837			✓			✓			✓							
Oklahoma Medicaid	SKOK0	835		✓			✓											
Oklahoma Medicaid	SKOK0	837		✓						✓								
Oklahoma Medicare	12M37	835	✓			✓												
Oklahoma Medicare	12M37	837	✓			✓			✓									
Oklahoma Medicare	SMOK0	835		✓			✓											
Oklahoma Medicare	SMOK0	837		✓			✓			✓								
Old Surety Life Insurance Company (ERA Only)	29237	835	✓	✓		✓	✓											
Olive Branch Administration	OLIVE	835	✓	✓		✓	✓											
Olive Branch Administration	OLIVE	837	✓	✓														
Olympus Managed Health Care	65074	837	✓	✓														
OMNI Administrators	OMNIA	835		✓			✓											also known as Leading Edge Administrators
OMNI Administrators	OMNIA	837		✓														
Omni IPA	36090	837	✓	✓														
Omnicare Medical Group (OMNI)	OMN02	837	✓	✓														
Oncology Physicians Network CA PC	OPNC1	837	✓	✓														
One Call Medical	22321	835	✓	✓		✓	✓											
One Call Medical	22321	837	✓	✓														
One Home Care Solutions	ONEHC	835	✓	✓		✓	✓											
One Home Care Solutions	ONEHC	837	✓	✓					✓	✓								
OnLok Senior Health Services, Inc.	99485	837	✓	✓														
OODA Health	OODAH	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
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	✓	✓		✓	✓											
Optum Care Network	OCN01	837	✓	✓					✓	✓								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.Formerly Healthcare Partners California
Optum Care Network - Inland Faculty Medical Group	MPM70	837	✓	✓														
Optum Maryland Behavioral Health	OMDBH	835	✓	✓		✓	✓											
Optum Maryland Behavioral Health	OMDBH	837	✓	✓					✓	✓								
Optum Medical Network / AZ, UT (formerly Lifeprint Arizona)	LIFE1	835	✓	✓		✓	✓											
Optum Medical Network / AZ, UT (formerly Lifeprint Arizona)	LIFE1	837	✓	✓					✓	✓								
Optum MedicalRx	ORXM1	835		✓			✓											
Optum MedicalRx	ORXM1	837		✓														For claims with DOS on or after 1/1/2024.
Optum Public Sector	OSDPS	837		✓														
Optum San Diego Public Sector County	CNTY1	837	✓	✓														
OptumCare Network of CT	E3287	835	✓	✓		✓	✓											
OptumCare Network of CT	E3287	837	✓	✓														
OptumHealth	87726	837		✓						✓		✓	✓					
OptumHealth Behavioral Solutions (formerly Pacificare Behavioral Health)	87726	837	✓	✓					✓	✓		✓	✓					
OptumHealth Behavioral Solutions (formerly United Behavioral Health)	87726	837	✓	✓					✓	✓		✓	✓					
OptumHealth Care Solutions (formerly United Resource Networks)	41194	835	✓	✓		✓	✓											
OptumHealth Care Solutions (formerly United Resource Networks)	41194	837	✓	✓					✓	✓								
OptumHealth Physical Health	41161	835		✓			✓											
OptumHealth Physical Health	41161	837		✓						✓								Former payer codes 41159, 41160 (includes Oxford)
OptumHealth Physical Health - includes Oxford (formerly ACN & ACNIPA)	41160	837		✓														
OptumHealth Vision	00773	835		✓			✓											
OptumHealth Vision	00773	837		✓														
Orange Coast Memorial IPA	IP095	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Orange County Advantage Medical Group	HSM01	837	✓	✓														
Orange County Health Care Agency	65021	837	✓	✓					✓	✓								
Oregon Medicaid	12K41	835	✓			✓												
Oregon Medicaid	12K41	837	✓			✓			✓									
Oregon Medicaid	SKOR0	835		✓			✓											
Oregon Medicaid	SKOR0	837		✓			✓			✓								
Oregon Medicare	12M41	835	✓			✓												
Oregon Medicare	12M41	837	✓			✓			✓						✓			
Oregon Medicare	SMOR0	835		✓			✓											
Oregon Medicare	SMOR0	837		✓			✓			✓						✓		
Orthonet - Uniformed Services Family Health Plan	13382	837		✓														
Orthonet- Aetna	13383	837	✓	✓					✓	✓								
Oscar Health	OSCAR	835	✓	✓		✓	✓											
Oscar Health	OSCAR	837	✓	✓					✓	✓								
OSF Healthcare Central	OSFC9	837	✓	✓														
OSF Healthcare East I & P	OSFE9	837	✓	✓														
OSU Aetna Better Health	OSUAE	837		✓						✓								
OSU Centene Oklahoma Complete Health	OSUCE	837		✓						✓								
OSU Center For Health Sciences	76619	837		✓						✓								
OSU Humana Healthy Horizons	OSUHU	837		✓														
Outpatient Services/ZeroOutofPocket	04430	837	✓	✓														
Oxford Life Insurance Company (ERA Only)	76112	835	✓	✓		✓	✓											
P3 Health Partners Arizona	58375	837	✓	✓														
P3 Health Partners of Nevada	P3HNV	835	✓	✓		✓	✓											
P3 Health Partners of Nevada	P3HNV	837	✓	✓					✓	✓								
PA Health and Wellness	68069	837	✓	✓					✓	✓		✓	✓					
PACE	IMP01	837	✓	✓														
Pace at Hudson Headwaters	R3469	835	✓	✓		✓	✓											
Pace at Hudson Headwaters	R3469	837	✓	✓														
PACE by Innercare	2556G	837	✓	✓	✓													
PACE Central Iowa	IMP01	837	✓	✓														
PACE CNY	70454	837	✓	✓	✓													
PACE KC	R3462	835	✓	✓		✓	✓											
PACE KC	R3462	837	✓	✓	✓													
PACE Nebraska	IMP01	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
PACE Northeast Michigan	91922	835	✓	✓	✓	✓	✓	✓										
PACE Northeast Michigan	91922	837	✓	✓	✓													
PACE of Greater New Orleans	R3461	835	✓	✓	✓	✓	✓	✓										
PACE of Greater New Orleans	R3461	837	✓	✓	✓													
PACE of Southwest Michigan	R3484	835	✓	✓		✓	✓											
PACE of Southwest Michigan	R3484	837	✓	✓					✓	✓								
Pace of Southwest Michigan, Inc.	45114	837	✓	✓					✓	✓								
PACE of the Triad	TRIA01	835	✓	✓														
PACE of the Triad	TRIA01	837	✓	✓	✓				✓	✓	✓							
PACE Southeast Michigan	86711	837	✓	✓														
PACE Southeast Michigan	R3460	835	✓	✓		✓	✓											
PACE Southeast Michigan	R3460	837	✓	✓					✓	✓								
PACE Southwest Iowa	IMP01	837	✓	✓														
Pace Suburban Bus Service (submitted via IDPA)	PACE1	837		✓														
PACE Your Life	98472	837	✓	✓														
Pacific Alliance Medical Center	SYMED	837	✓	✓														
Pacific Alliance Medical Group	SYMED	837	✓	✓														
Pacific IPA	NMM01	837	✓	✓														
Pacific Southwest Administrators	75309	835	✓	✓		✓	✓											
Pacific Southwest Administrators	75309	837	✓	✓					✓	✓								
Pacifica of the Valley Hospital	MPM50	837	✓	✓														
PacificSource Community Solutions	20416	837	✓	✓														
PacificSource Health Plans	93029	835	✓	✓		✓	✓											
PacificSource Health Plans	93029	837	✓	✓														
PacificSource Medicare	20377	837	✓	✓														
Painter Local 155 Welfare	CX076	837			✓						✓							
Painters Union Insurance Fund	53483	837	✓	✓					✓	✓								
Palo Alto Medical Foundation	94115	835	✓	✓		✓	✓											
Palo Alto Medical Foundation	94115	837	✓	✓					✓	✓								
Pan American Life Insurance Group	04218	835	✓	✓		✓	✓											
Pan American Life Insurance Group	04218	837	✓	✓														
Paramount Dental	CX019	837			✓						✓							
Paramount Health	PARHC	835	✓	✓		✓	✓											
Paramount Health	SX158	837	✓	✓														ERA Payer Code PARHC
Paramount Healthcare Services	PARHC	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Parkland Community Health Plan	66917	835	✓	✓		✓	✓											
Parkland Community Health Plan	66917	837	✓	✓														
PARTNERS BEHAVIORAL HEALTH MANAGEMENT	13141	835	✓	✓		✓	✓											
PARTNERS BEHAVIORAL HEALTH MANAGEMENT	52613	837	✓	✓					✓	✓								
Partners Health Plan Dental	CX014	837			✓													
Partners In Health	PARTH	837	✓	✓														
Partnership Health Plan Of California	12M81	835	✓			✓												
Partnership Health Plan Of California	12M81	837	✓			✓												Claim Enrollment AND Testing is Required for Every NPI.
Partnership Health Plan Of California	SX140	835		✓			✓											
Partnership Health Plan Of California	SX140	837		✓			✓											Claim Enrollment AND Testing is Required for Every NPI.
Passport Advantage	66008	835	✓	✓		✓	✓											
Passport Advantage	66008	837	✓	✓														
Passport Health Plan by Molina Healthcare	61325	835	✓	✓		✓	✓											As of 8/29/22, Molina has designated ECHO Health as their ERA gateway to better meet provider's payment solutions needs
Passport Health Plan by Molina Healthcare	61325	837	✓	✓														
PATH Administrators	25172	837	✓	✓					✓	✓								
Patient Advocates LLC	10525	835			✓			✓										
Patient Advocates LLC	10525	837			✓													
Patient Advocates LLC	55489	835	✓	✓		✓	✓											
Patient Advocates LLC	55489	837	✓	✓					✓	✓								
PATIENTPAY	26335	837		✓														
Payer Compass	PA331	837	✓	✓					✓	✓								
Payer Fusion	27048	837	✓	✓														
Peach State Health Plan	68069	837	✓	✓					✓	✓		✓	✓					
Peak Health	PEAK0	835	✓	✓		✓	✓											
Peak Health	PEAK0	837	✓	✓														
PEF Clinic	PEF01	837	✓	✓														
Pegasus Medical Group	PROSP	837		✓						✓								
Pegasus Medical Group	SMG01	837	✓	✓														
PEHP - Utah Public Employee Health Plan	SX106	835	✓	✓		✓	✓											
PEHP - Utah Public Employee Health Plan	SX106	837	✓	✓		✓	✓		✓	✓								
Pekin Insurance	37086	835	✓	✓		✓	✓											
Pekin Insurance	37086	837	✓	✓														
Penn Behavioral Health	53226	837	✓	✓														
Pennsylvania Health Care Plan (ERA Only)	VALHLTH	835	✓	✓		✓	✓											ERA Only

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Pennsylvania Medicaid	12008	835	✓			✓												
Pennsylvania Medicaid	12008	837	✓						✓									
Pennsylvania Medicaid	SKPA0	835		✓			✓											
Pennsylvania Medicaid	SKPA0	837		✓	✓					✓								
Pennsylvania Medicare	12M60	835	✓			✓												
Pennsylvania Medicare	12M60	837	✓			✓			✓									
Pennsylvania Medicare	SMPA0	835		✓			✓											
Pennsylvania Medicare	SMPA0	837		✓			✓			✓								
Pennsylvania Pace	20172	837	✓	✓														
Pennsylvania Preferred Health Network (PPHN)	06161	837	✓	✓					✓	✓								
Pequot Pharmaceutical Network	37121	837	✓	✓														
Perennial Advantage CO	PACO1	837	✓	✓														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	✓	✓														
Perlman Medical Group	73275	837	✓	✓	✓				✓	✓								
Perlman Medical Group	MLMDP	837	✓	✓														
Personal Insurance Administrators Inc. (Agoura Hills CA)	95397	835	✓	✓		✓	✓											
Personal Insurance Administrators Inc. (Agoura Hills CA)	95397	837	✓	✓														
Personify Health Solutions LLC	62001	837	✓	✓	✓													
PersonifyHealth formerly Healthcomp North	36149	835	✓	✓		✓	✓											
PersonifyHealth formerly Healthcomp North	36149	837	✓	✓	✓													
PersonifyHealth formerly Healthcomp South	07205	835	✓	✓		✓	✓											
PersonifyHealth formerly Healthcomp South	07205	837	✓	✓														
PersonifyHealth formerly Healthcomp West	85729	835	✓	✓		✓	✓											
PersonifyHealth formerly Healthcomp West	85729	837	✓	✓														
PHCS Claims (formerly American LIFECARE)	72099	837	✓	✓														
Philadelphia American Life Insurance Company	98798	837	✓	✓														
Phoenix Mutual Life	67814	837	✓	✓														
PHP Management System	PHPMSI	837	✓	✓														
Physician Associates of Louisiana	58204	837	✓	✓														
Physician Associates of the Greater San Gabriel Valley	PA513	837		✓														
Physician Care Network LLC	58204	837	✓	✓														
Physician Health Partners	PHPMC	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Physician Healthcare Integration IPA	POP10	837		✓														
PHYSICIAN'S ACCOUNTABLE CARE ORG	28943	837		✓														
Physician's Data Trust	PDT01	835	✓	✓		✓	✓											
Physician's Data Trust	PDT01	837	✓	✓														
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	✓	✓		✓	✓											
Physicians Care Network (Rockford IL only)	36345	837	✓	✓														
Physicians Care Network / The Polyclinic	PCN12	837	✓	✓														
Physicians Choice Medical Group of San Luis Obispo	SLOS1	835	✓	✓		✓	✓											
Physicians Choice Medical Group of San Luis Obispo	SLOS1	837	✓	✓														
Physicians Choice Medical Group of Santa Maria	MCI01	835	✓	✓		✓	✓											
Physicians Choice Medical Group of Santa Maria	MCI01	837	✓	✓														
Physicians Health Association of Illinois	37136	835	✓	✓		✓	✓											
Physicians Health Association of Illinois	37136	837	✓	✓					✓	✓								
Physicians Health Collaborative	20398	837	✓	✓														
Physicians Health Network	MHM03	837		✓														
Physicians Health Plan	37330	835	✓	✓		✓	✓											
Physicians Health Plan	37330	837	✓	✓					✓	✓								Payer ID is for dates of service prior to 1.31.2026
Physicians Health Plan (JVHL)	MNJVH	835	✓	✓		✓	✓											
Physicians Health Plan (JVHL)	MNJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Physicians Health Plan of Michigan Medicare	83276	835	✓	✓			✓											
Physicians Health Plan of Michigan Medicare	83276	837	✓	✓														
Physicians Health Plan of Northern Indiana, Inc	12399	835	✓	✓		✓	✓											
Physicians Health Plan of Northern Indiana, Inc	12399	837	✓	✓														
Physicians Healthways IPA	NMM01	837	✓	✓														
Physicians Medical Group of San Jose	EXC01	835	✓	✓		✓	✓											
Physicians Medical Group of San Jose	EXC01	837	✓	✓					✓									
Physicians Mutual Insurance Company	47027	835	✓	✓		✓	✓											
Physicians Mutual Insurance Company	47027	837	✓	✓														
Physicians of Southwest Washington	91171	835	✓	✓		✓	✓											
Physicians of Southwest Washington	91171	837	✓	✓														
Physicians Plus Insurance Corporation	39156	837	✓	✓														
PhysMetrics	48008	837	✓	✓					✓	✓								
PIEDMONT COMMUNITY HEALTH PLAN	55768	835	✓	✓		✓	✓											
PIEDMONT COMMUNITY HEALTH PLAN	55768	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
PIH Health	BHP01	837	✓	✓														
PIH Health (ERA Only)	PIH01	835	✓	✓		✓	✓											ERA Only
Pinnacle Claims Management Inc.	24735	837	✓	✓														
Pinnacle Health Resources (Prospect Medical Group)	PROSP	837		✓						✓								
Pinnacle Medical Group	95271	835	✓	✓		✓	✓											
Pinnacle Medical Group	95271	837	✓	✓														
Pioneer Medical Group	PIONR	837		✓														
Pioneer Provider Network (for claims with DOS prior to 3/31/19)	PPNZZ	835		✓			✓											
Pioneer Provider Network (for claims with DOS prior to 3/31/19)	PPNZZ	837		✓						✓								
Pittsburgh Care Partnership Inc.	23283	835	✓	✓		✓	✓											
Pittsburgh Care Partnership Inc.	23283	837	✓	✓														
Plan de Salud Hospital Menonita	L0190	835	✓	✓		✓	✓											
Plan de Salud Hospital Menonita	L0190	837	✓	✓														
Planned Administrators, Incorporated (PAI)	37287	835	✓	✓		✓	✓											
Planned Administrators, Incorporated (PAI)	37287	837	✓	✓					✓	✓								
PLANSTIN	65241	835	✓	✓		✓	✓											
PLANSTIN	65241	837	✓	✓					✓	✓								
Podi Care Managed Care	58204	837	✓	✓														
PODIATRY NETWORK FL	59324	837	✓	✓														
Point C	IHS29	835	✓	✓		✓	✓											
Point C	IHS29	837	✓	✓	✓													
Point Comfort Underwriters	PCU01	837	✓	✓														
Point Comfort Underwriters	PCU02	837	✓	✓														
Pomona Valley Medical Group	IP057	837		✓														
Pomona Valley Medical Group	PROSP	837		✓						✓								
Pool Administrators, INC (PAI) Primary	PAI01	835		✓			✓											
Pool Administrators, INC (PAI) Primary	PAI01	837		✓														
Pool Administrators, Inc. (PAI)	PAI02	835		✓			✓											
Pool Administrators, Inc. (PAI)	PAI02	837		✓						✓								
Positive Healthcare - California	95422	837	✓	✓														
Positive Healthcare Florida (FL MCO PHC/PHP)	95411	837	✓	✓					✓	✓								
Prairie States Enterprises Inc	36373	835	✓	✓		✓	✓											
Prairie States Enterprises Inc	36373	837	✓	✓	✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Preferred Administrators	60338	837	✓	✓					✓	✓								Claims previously submitted to payer code 88057. Effective June 30th, 2023, please submit all claims to 60338.

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Preferred Administrators	EPF10	835	✓	✓		✓	✓											
Preferred Administrators	EPF10	837	✓	✓		✓	✓											
Preferred Benefit Administrators (Longwood FL)	53476	837	✓	✓					✓	✓								
Preferred Blue (BCBS SC)	00481	835	✓	✓		✓	✓											
Preferred Blue (BCBS SC)	00481	837	✓	✓														
Preferred Care Partners Florida	65088	835	✓	✓		✓	✓											
Preferred Care Partners Florida	65088	837	✓	✓					✓	✓								
Preferred Community Choice/PCCSelect/CompMed	73145	837	✓	✓					✓	✓								
Preferred Health Care (PHC)	33898	837	✓	✓					✓	✓								
Preferred Health Partners	14966	837	✓	✓														
Preferred Health Plan of the Carolinas	CB404	835	✓	✓		✓	✓											
Preferred Health Plan of the Carolinas	CB404	837	✓	✓														
Preferred Health Professionals	31478	837	✓	✓														
Preferred Health Systems A Coventry Health Care Plan	61665	837		✓														
Preferred IPA	PFIPA	835	✓	✓		✓	✓											
Preferred IPA	PFIPA	837	✓	✓														
Preferred Medical Claim Solutions (PMCS) (ERA Only)	21524	835	✓	✓		✓	✓											
PreferredOne (MN)	41147	835	✓	✓		✓	✓											
PreferredOne (MN)	41147	837	✓	✓					✓	✓								
Premera BCBS of Washington	00430	837	✓	✓					✓	✓								
Premera BCBS of Washington Dental	47570	835			✓			✓										
Premera BCBS of Washington Dental	47570	837			✓						✓							
Premera Blue Cross Blue Shield of Alaska	00430	835	✓	✓		✓	✓											
Premera Blue Cross Blue Shield of Alaska	00430	837	✓	✓					✓	✓								
Premier Administrative Solutions	65415	837	✓	✓														
Premier Care IPA	PCMSO	837		✓						✓								
Premier Dental Group	CX029	837			✓						✓							
Premier Eye Care	65054	835		✓			✓											
Premier Eye Care	65054	837		✓						✓								
Premier Health Systems Inc.	29076	837	✓	✓					✓	✓		✓	✓					
Premier HealthCare Exchange	88056	835	✓	✓		✓	✓											
Premier HealthCare Exchange	88056	837	✓	✓														
Premier HealthCare Exchange, Inc. (PHX)	88051	837	✓	✓														
Premier Patient Care IPA	PPCIP	835	✓	✓														Payer returns ERAs automatically once electronic claim submission begins.

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Premier Patient Care IPA	PPCIP	837	✓	✓														
Premier Physician Network	MPM22	835	✓	✓		✓	✓											
Premier Physician Network	MPM22	837	✓	✓					✓	✓								
Premiercare Health Network	PHNPA	835	✓	✓		✓	✓											
Premiercare Health Network	PHNPA	837	✓	✓														
Presbyterian (NM)	05003	837	✓	✓					✓	✓								
Presbyterian (NM)	TH061	835	✓	✓		✓	✓											
Presbyterian Health Plan	PREHP	837	✓	✓														
Presbyterian Health Plan NM Medicaid (Turquoise)	NMPHP	835	✓	✓		✓	✓											
Presbyterian Health Plan NM Medicaid (Turquoise)	NMPHP	837	✓	✓					✓	✓								
Presence ERC	46311	835	✓	✓		✓	✓											aka Amita ERC
Presence ERC	46311	837	✓	✓														
Presence Health Partners	36396	837	✓	✓														
Prevea 360 Health Plan	39113	837	✓	✓					✓	✓								
Prevea360 Health Plan	39113	837	✓	✓					✓	✓								
Prevea360 Health Plan	41822	837	✓	✓					✓	✓								As of January 1, 2024, this payer does not offer Electronic Remittance Advice (ERA) at this time.
Primary Care Associates Medical Group (PCAMG)	IP079	837	✓	✓														
Primary Care Associates of California	PCACZ	837	✓	✓														
Primary Care Practices Of Sacramento - EHS	SYMED	837	✓	✓														
Primary Care Services	MSO44	837	✓															
Primary Health Network	82048	837	✓	✓														
Primary PhysicianCare Inc.	56144	837	✓	✓					✓	✓								
Prime Community Care Central Valley	MVCV1	835	✓	✓		✓	✓											
Prime Community Care Central Valley	MVCV1	837	✓	✓														
Prime West Health Plan	61604	835	✓	✓		✓	✓											
Prime West Health Plan	61604	837	✓	✓														
PrimeCare Medical Network	IP079	835	✓	✓		✓	✓											
PrimeCare Medical Network	IP079	837	✓	✓														
Primewell Health Services	77701	835	✓	✓		✓	✓											Formerly known as Vantage Health Plan
Primewell Health Services	77701	837	✓	✓														Formerly known as Vantage Health Plan
PrimeWest Health Dental	LX049	837			✓						✓							
Principal Financial Group (Dental claims only)	61271	835			✓			✓										
Principal Financial Group (Dental claims only)	61271	837			✓						✓			✓				
Principal Life (ERA Only)	IAS14	835	✓	✓		✓	✓											aka Insurance Administrative Solutions

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Priority Health	38217	835	✓	✓		✓	✓											
Priority Health	38217	837	✓	✓					✓	✓								
Priority Health (JVHL)	JZJVH	835	✓	✓		✓	✓											
Priority Health (JVHL)	JZJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Prism Network Inc.	37268	837		✓														
Prism-Univera	37315	837	✓	✓														
ProCare (Prospect)	PROSP	837		✓						✓								
ProCare Advantage of TX	PTX01	835	✓	✓		✓	✓											
ProCare Advantage of TX	PTX01	837	✓	✓														
Prodegi Corporate Benefit Services	87065	837	✓	✓														
Professional Benefit Administrators Inc. (Oak Brook IL)	36331	835	✓	✓	✓	✓	✓	✓										
Professional Benefit Administrators Inc. (Oak Brook IL)	36331	837	✓	✓	✓						✓							Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Professional Benefit Services Inc	56724	837	✓	✓														
Professional Health Care Network (PHCN)	26748	835	✓	✓		✓	✓											
Professional Health Care Network (PHCN)	26748	837	✓	✓														
Progyny	PROGY	835	✓	✓		✓	✓											
Progyny	PROGY	837	✓	✓														
Prominence Administrative Services	88022	835	✓	✓		✓	✓											
Prominence Administrative Services	88022	837	✓	✓														
Prominence Health Plan of Nevada	93082	835	✓	✓		✓	✓											
Prominence Health Plan of Nevada	93082	837	✓	✓														
Prominence Health Plan of Texas	80095	837	✓	✓														
Prominence Healthfirst	83352	837	✓	✓														
Prospect Health Network	PROSP	837		✓						✓								
Prospect Medical Group	PROSP	835	✓	✓		✓	✓											
Prospect Medical Group	PROSP	837	✓	✓					✓	✓								
Prospect Sherman Oaks Medical Group (Prospect Medical Group)	PROSP	837		✓						✓								
Prosperity Life	89486	837	✓	✓														
Protective Life Insurance Company	37309	837		✓														
Providence Facility Claims	PROV1	837	✓	✓														
Providence Health Assurance Medicaid	77350	835	✓	✓		✓	✓											
Providence Health Assurance Medicaid	77350	837	✓	✓					✓	✓								
Providence Health Plan	PHP01	835	✓	✓		✓	✓											
Providence Health Plan	PHP01	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Providence Insurance and Administrative Services	PAS01	835	✓	✓		✓	✓											
Providence Insurance and Administrative Services	PAS01	837	✓	✓														
Providence PACE CA	77240	837	✓	✓														
Providence Preferred	PHP00	837		✓														
Provident American Life & Health Ins Co-Medicare Supplement	13193	837	✓	✓														
Provider Network of America (JVHL)	MPJVH	835	✓	✓		✓	✓											
Provider Network of America (JVHL)	MPJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Provider Partners Health Plan	31406	835	✓	✓		✓	✓											
Provider Partners Health Plan	31406	837	✓	✓														
Provider Partners Health Plan Illinois	31401	835	✓	✓		✓	✓											
Provider Partners Health Plan Illinois	31401	837	✓	✓					✓	✓								
Provider Partners Health Plan Indiana	31407	835	✓	✓		✓	✓											
Provider Partners Health Plan Indiana	31407	837	✓	✓					✓	✓								
Provider Partners Health Plan Kentucky	31408	837	✓	✓														
Provider Partners Health Plan Missouri	31404	835	✓	✓		✓	✓											
Provider Partners Health Plan Missouri	31404	837	✓	✓					✓	✓								
Provider Partners Health Plan Ohio	31402	835	✓	✓		✓	✓											
Provider Partners Health Plan Ohio	31402	837	✓	✓														
Provider Partners Health Plan Pennsylvania	31400	837	✓	✓					✓	✓								
Provider Partners Health Plan Texas	31405	835	✓	✓		✓	✓											
Provider Partners Health Plan Texas	31405	837	✓	✓					✓	✓								
ProviDRs Care Network	48100	837	✓	✓					✓	✓								
Prudent Medical Group	MPM25	837	✓	✓					✓	✓								
Prudential	68241	837		✓														
Pruitt Health Premier	PH001	835	✓	✓		✓	✓											
Pruitt Health Premier	PH001	837	✓	✓														
Pruitt Health Premier NC & SC	PHPC1	835	✓	✓		✓	✓											
Pruitt Health Premier NC & SC	PHPC1	837	✓	✓														
PSKW Physician Reimbursement Program	PSKW0	835	✓	✓		✓	✓											
PSKW Physician Reimbursement Program	PSKW0	837	✓	✓					✓	✓								
Psychealth Care Management LLC	A2797	835	✓	✓		✓	✓											
Psychealth Care Management LLC	A2797	837	✓	✓														
PTS Sidecar Health	99999-0BHT	837	✓	✓														
Puerto Rico Medicare	SMPR0	835		✓			✓											
Puerto Rico Medicare	SMPR0	837		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Puerto Rico Medicare Part B (J9-First Coast)	SMPR0	837		✓			✓											
Puget Sound Benefits Trust	91136	837	✓	✓														
Puget Sound Electrical Workers Trust	91136	837	✓	✓														
Puritan (formerly Admiral Life) (ERA Only)	IAS15	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Pyramid Life Insurance Company	48055	837	✓	✓														
Quad City Community Healthcare (QCCH)	40437	837	✓	✓					✓	✓								
QuadMed (West Allis, WI)	39197	837	✓	✓														
Qual Choice of Arkansas	35174	835	✓	✓		✓	✓											
Qual Choice of Arkansas	35174	837	✓	✓					✓	✓								
QualCare Alliance Networks, Inc. (QANI)	22312	837	✓	✓					✓	✓								Note: As of January 30, 2024, Electronic Remits Advice (ERA) is not available for this payer at this time.
QualCare IPA	QCP01	835	✓	✓		✓	✓											
QualCare IPA	QCP01	837	✓	✓					✓	✓								
Qualexa Healthcare	86772	837	✓	✓														
Quality Care IPA	POP07	837		✓														
Quality Care Partners	89461	837	✓	✓														
Quest Behavioral Health	44219	837	✓	✓					✓	✓								
QuikTrip	73067	835	✓	✓		✓	✓											
QuikTrip	73067	837	✓	✓														
QVI Risk Solutions Inc.	57117	837		✓														
R&N Market	TKFMC	837	✓	✓														
Rady Children's Health Network	RCHN1	837	✓	✓														
Rady Children's Specialists of San Diego	CSSD2	837		✓														
Railroad Medicare (PGBA)	SRRGA	835		✓			✓											
Railroad Medicare (PGBA)	SRRGA	837		✓			✓			✓								
Ravenswood Physician Associates Inc	RPAWC	835	✓	✓		✓	✓											
Ravenswood Physician Associates Inc	RPAWC	837	✓	✓														
Reading Hospital Employer Group	44219	837	✓	✓					✓	✓								
Redirect Health Administration	86145	837	✓	✓														
Redlands Community Hospital	RCH23	837	✓															
Redlands-Yucaipa Medical Group	18247	837		✓						✓								
Redwood Coast PACE	R3483	837	✓	✓														
Redwood Community Health Coalition	MPM17	837	✓	✓					✓	✓								
Regal Medical Group	REGAL	837	✓	✓					✓	✓								
Regence Blue Cross Blue Shield of Oregon	00851	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Regence Blue Cross Blue Shield of Oregon	00851	837	✓	✓					✓	✓								
Regence Blue Cross Blue Shield of Oregon	12B41	837	✓															
Regence Blue Cross Blue Shield of Oregon	SB850	837		✓						✓								
Regence Blue Cross Blue Shield of Utah	00910	835	✓	✓		✓	✓											
Regence Blue Cross Blue Shield of Utah	00910	837	✓	✓					✓	✓								
Regence Blue Cross Blue Shield of Utah	SB910	837		✓						✓								
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	✓	✓					✓	✓								
Regence Blue Shield of Washington	SB931	837		✓						✓								
Regence Group Administrators	RGA01	835	✓	✓		✓	✓											
Regence Group Administrators	RGA01	837	✓	✓					✓	✓								
Regency Employee Benefits	38221	835	✓	✓		✓	✓											
Regency Employee Benefits	38221	837	✓	✓														
Regent Medical Group, Inc.	HSM01	837	✓	✓														
Rehn and Associates	REHNA	837	✓	✓														
Reliance Community Care Partners	79846	837	✓	✓														
Reliance Health Plan	RHP01	835	✓	✓		✓	✓											
Reliance Health Plan	RHP01	837	✓	✓					✓	✓								
Reliance Standard Life	36088	835			✓			✓										
Reliance Standard Life	36088	837			✓						✓			✓				
Religious Order of Jehovah's Witness	ROJW1	837		✓						✓								
Resource One Administrators	20333	835	✓	✓		✓	✓											
Resource One Administrators	66456	837	✓	✓														
ResourceOne Administrators/AdminOne	37278	835	✓	✓		✓	✓											
Resurrection Healthcare Preferred	36396	835	✓	✓		✓	✓											aka Amita Health Saint Joseph Hospital Chicago
Resurrection Healthcare Preferred	36396	837	✓	✓														
Resurrection Physician Provider Group	RPPG1	835	✓	✓		✓	✓											
Resurrection Physician Provider Group	RPPG1	837	✓	✓														
RevClaims	RVC01	837	✓	✓					✓	✓								
Rhode Island Medicaid	12K74	835	✓			✓												
Rhode Island Medicaid	12K74	837	✓						✓									
Rhode Island Medicaid	SKRI0	835		✓			✓											
Rhode Island Medicaid	SKRI0	837		✓						✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Rhode Island Medicare	12M74	835	✓			✓												
Rhode Island Medicare	12M74	837	✓			✓			✓									
Rhode Island Medicare	SMRI0	835		✓			✓											
Rhode Island Medicare	SMRI0	837		✓			✓			✓								
Right Care from Scott & White	74205	835	✓	✓		✓	✓											
Right Care from Scott & White	74205	837	✓	✓					✓	✓								
RightChoice Benefit Administrators	37331	837	✓	✓														
Rincon Health Network	RHN01	837	✓	✓														
Rios Arizona IPA	RIOSA	835	✓	✓		✓	✓											
Rios Arizona IPA	RIOSA	837	✓	✓														
Rios Health Plan	RHPCA	837	✓	✓														
RIOS SOUTHWEST MEDICAL GROUP	RIOS1	837	✓	✓														
RIVER CITY MEDICAL GROUP	RCMG1	835	✓	✓		✓	✓											
RIVER CITY MEDICAL GROUP	RCMG1	837	✓	✓														
River City Medical Group Senior	AMM23	837	✓	✓														
Riverside Health Inc.	45281	835	✓	✓		✓	✓											
Riverside Health Inc.	45281	837	✓	✓														
Riverside Medical Clinic	RMC01	837		✓						✓								
Riverspring Health Plans (ElderServe)	05178	835	✓	✓		✓	✓											
Riverspring Health Plans (ElderServe)	05178	837	✓	✓														
Rocky Mountain PACE	93142	835	✓	✓														
Rocky Mountain PACE	93142	837	✓	✓	✓				✓	✓	✓							
Rosemont of Des Plaines IL	36215	837	✓															
Royal Health Care	73780	837	✓	✓					✓	✓								
Royal Neighbors of America (ERA Only)	IAS16	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
RPS Sports and Leisure	BOLL1	835	✓	✓		✓	✓											
RPS Sports and Leisure	BOLL1	837	✓	✓														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 866-267-0093.
Rubicon Health Group	IHS18	837	✓	✓					✓	✓								
Rural Carrier Benefit Plan (for claims after to 12/31/17)	60054	837	✓	✓					✓	✓		✓	✓	✓				
Rush Prudential Health Plans (HMO Only)	36389	837	✓	✓														
Ryan White Network	AMM03	837	✓	✓														
S & S Healthcare Strategies DBA Reflect Health	31441	835	✓	✓		✓	✓											
S & S Healthcare Strategies DBA Reflect Health	31441	837	✓	✓														Also known as Piedmont Community Health Plan

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Sagamore Health Network	35164	837	✓	✓														
Sage	SAGE1	835	✓	✓		✓	✓											
Sage	SAGE1	837	✓	✓														
Saint Johns Health Clinic	SJHC1	837	✓	✓														
Saint Mary's Health Plan	88082	837		✓														Encounters Only
SAINT MARY'S HEALTH PLAN	88029	837	✓	✓														
Salvasen Health	CB122	837	✓	✓					✓	✓								
Samaritan Health Plans	CP001	835	✓	✓		✓	✓											
Samaritan Health Plans	CP001	837	✓	✓														
Samera Health	U8053	837	✓	✓														
San Bernardino Medical Group	SBMED	837		✓														
San Diego County Medical Services (CMS)	MSO11	837	✓	✓														
San Diego County Physician Emergency Services	MSO22	837	✓	✓						✓								
San Diego County Ryan White Care Act	MSO33	837	✓	✓														
San Diego PACE	96400	837	✓	✓														
San Diego Physicians Med Group (SCPMCS)	SCP01	837	✓	✓														
San Francisco County Physician Emergency Service	UCSF	837		✓														
San Francisco Health Plan	SFHP1	835	✓	✓		✓	✓											
San Francisco Health Plan	SFHP1	837	✓	✓					✓	✓								
San Joaquin Health Administrators	68035	837		✓			✓			✓								
San Louis Obispo Select	33072	837	✓	✓														
Sana Benefits	50114	835	✓	✓		✓	✓											
Sana Benefits	50114	837	✓	✓					✓	✓								
Sanford Health Plan	91184	835	✓	✓		✓	✓											
Sanford Health Plan	91184	837	✓	✓														
Sanford Health Plan Medicare Advantage	RP035	835	✓	✓		✓	✓											
Sanford Health Plan Medicare Advantage	RP035	837	✓	✓					✓	✓								
Sanitation Officers Local 444	CX076	837			✓						✓							
Sansum Clinic-	SAN01	837		✓														
Santa Barbara Select IPA	SBIPA	835	✓	✓		✓	✓											Payer is listed as "McKesson Technologies Inc. (MED3000 CA)" within PaySpan
Santa Barbara Select IPA	SBIPA	837	✓	✓														
Santa Clara County IPA HMO	10378	835		✓			✓											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	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
SANTA CLARA FAMILY HEALTH PLAN	24077	837	✓	✓														
Sante Community Medical Center	SNTCC	837	✓	✓														
Sante Community Physicians Medical Group Corp	SNTMC	837	✓	✓														
Sante Health System and Affiliates	77038	837	✓	✓														
Sante Health System and Affiliates	SANTE	835	✓	✓		✓	✓											
Sante Medi-Cal	SNTMC	837	✓	✓														
Satellite Health Plan, Inc.	45552	837	✓	✓														
Saudi Health Mission	SHM01	837	✓	✓														
SCAN ENCOUNTERS	99157	837	✓	✓					✓	✓								
SCAN Health Plan	72261	835	✓	✓		✓	✓											
SCAN Health Plan	72261	837	✓	✓					✓	✓								
SCAN Health Plan - California	SCAN1	835	✓	✓		✓	✓											ERA Payer Code SCAN1
SCAN Health Plan - California	SCAN1	837	✓	✓					✓	✓								
Scan Health Plan Arizona	73172	837	✓	✓														
SCAN1	72261	837	✓	✓					✓	✓								
SCAN1	SCAN1	837	✓	✓					✓	✓								
SCHS ALTA Global Care Medical Group	MPM54	837	✓	✓														
Scion Dental	SCION	835			✓			✓										
Scion Dental	SCION	837			✓						✓			✓				
Scott & White Health Plan	12T05	837	✓															
Scott & White Health Plan	TH002	835	✓	✓		✓	✓											
Scott & White Health Plan	TH002	837		✓														
Scripps Health Plan MSO	SHPM1	835	✓	✓		✓	✓											
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	✓	✓		✓	✓											Payer is listed as "McKesson Technologies Inc. (MED3000 CA)" within PaySpan
Seaview IPA	SVIPA	837	✓	✓														
SECUR Health Plan	SECUR	835	✓	✓		✓	✓											
SECUR Health Plan	SECUR	837	✓	✓					✓	✓								
SecureOne Benefits Administrators	86242	837	✓	✓					✓	✓								
Security Administrative Services	35202	837	✓	✓														
Security Health Plan	39045	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Security Health Plan	39045	837	✓	✓	✓				✓	✓	✓							
Sedgwick Managed Care Ohio (formerly Careworks)	10010	835	✓	✓		✓	✓											
Sedgwick Managed Care Ohio (formerly Careworks)	10010	837		✓														
Sedwick Managed Care Ohio (formerly CompManagement)	15243	837	✓	✓														
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	✓	✓														
SelectCare	00014	837	✓	✓														
SelectCare of Texas (Kelsey-Seybold)	61225	835	✓	✓		✓	✓											
SelectHealth	SX107	835	✓	✓		✓	✓											
SelectHealth	SX107	837	✓	✓														
Self Fund Health	SFH48	835	✓	✓		✓	✓											
Self Fund Health	SFH48	837	✓	✓														
Self Insured Plans (Naples FL)	36404	837	✓	✓														
Self Insured Services Company (SISCO) Dental	CX020	837			✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Self-Funded Plans Inc.	34131	837	✓	✓					✓	✓								
Selman Tricare Supp	52214	837	✓	✓					✓	✓								
Sendero IdealCare	MV440	835		✓			✓											
Sendero IdealCare	MV440	837		✓														
Sendero IdealCare	UV440	835	✓			✓												
Sendero IdealCare	UV440	837	✓															
Sendero Star and CHIP	SCS17	835	✓	✓		✓	✓											
Sendero Star and CHIP	SCS17	837	✓	✓														
SENIOR CARE PARTNERS PACE MI MCR	R3496	835	✓	✓		✓	✓											
SENIOR CARE PARTNERS PACE MI MCR	R3496	837	✓	✓	✓				✓	✓	✓							
Senior Health Partners (SHP)	80141	837	✓	✓														
SENIOR WHOLE HEALTH	83035	837	✓	✓														
Senior Whole Health Massachusetts	SWHMA	835	✓	✓		✓	✓											Effective 2022, the payer has transitioned to ECHO for their ERA/EFT gateway vendor
Senior Whole Health Massachusetts	SWHMA	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Senior Whole Health of New York	SWHNY	835	✓	✓		✓	✓											Effective 2022, the payer has transitioned to ECHO for their ERA/EFT gateway vendor
Senior Whole Health of New York	SWHNY	837	✓	✓					✓	✓								
Sentara Family Care	54154	837	✓	✓					✓	✓								
Sentara Health Management	54154	837	✓	✓					✓	✓								
Sentara Health Plans	54154	835	✓	✓		✓	✓											
Sentara Health Plans	54154	837	✓	✓					✓	✓								
SENTARA PACE MCR	SENT1	837	✓	✓														
Sentinel Management Services	23249	837	✓	✓														
Sentinel Security Life Insurance Company	87020	835	✓	✓		✓	✓											
Seoul Medical Group	AMM07	837	✓	✓														
Sequoia Beverage	TKFMC	837	✓	✓														
Sequoia Health IPA	CAPMN	837	✓	✓					✓	✓								
Seton Health Plan (CHIP)	SHPCH	837	✓	✓														
Seven Corners	25404	837	✓	✓														
SGIC	11789	837	✓	✓														
SGRX Healthchoice of Michigan	29094	837	✓	✓														
Share Healthcare	52876	837	✓	✓														
Shared Health Mississippi	SHMS1	835	✓	✓		✓	✓											
Shared Health Mississippi	SHMS1	837	✓	✓					✓	✓								
Sharp Community Medical Group	SCMG1	835	✓	✓														
Sharp Community Medical Group	SCMG1	837	✓	✓														
Sharp Health Plan	SHP01	835	✓	✓														
Sharp Health Plan	SHP01	837	✓	✓														
Sharp Rees-Sealy Medical Group	SRS83	835	✓	✓														
Sharp Rees-Sealy Medical Group	SRS83	837	✓	✓					✓	✓								ERA's are automatically returned upon submitting claims.
Sheakley Unicomp	10002	837	✓	✓					✓	✓								
Sheet Metal Workers Local 104 Health Care Plan (San Ramon CA)	38238	837	✓	✓														
Shenandoah Life (ERA Only)	IAS17	835	✓	✓		✓	✓											aka Insurance Administrative Solutions
Sherman Choice - BLUE CROSS SHERMAN CHOICE	SC359	837	✓	✓														
Show Me Health Administrators, LLC (SMHA)	98578	837	✓	✓														
Sidecar Health	SDCAR	835	✓	✓		✓	✓											
Sidecar Health	SDCAR	837	✓	✓					✓	✓								
SIDS (Self Insured Dental Services)	CX076	837			✓						✓							
Sieba	03699	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Sieba	03699	837	✓	✓					✓	✓								
Sierra Family Network (Prospect Medical Group)	PROSP	837		✓						✓								
Sierra Medical Group	30891	837		✓														
Sierra Medical Group	SMG01	837	✓	✓														
Sierra Nevada Medical Association	MBA01	837		✓														
Signature Advantage	SA001	835	✓	✓		✓	✓											
Signature Advantage	SA001	837	✓	✓					✓	✓								
Silicon Valley Medical Development	S9637	837	✓	✓					✓	✓								
Silver Cross Health Connection	65093	837	✓	✓														
Silver Star PACE	R3480	835	✓	✓	✓	✓	✓	✓										
Silver Star PACE	R3480	837	✓	✓	✓													
Silversummit Healthplan	68069	837	✓	✓					✓	✓		✓	✓					
SimplePay	27905	835	✓	✓		✓	✓											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	✓	✓		✓	✓											Mailing Address: PO Box 61010, Virginia Beach, VA 23466
Simply Healthcare	SMPLY	837	✓	✓					✓	✓		✓	✓					Mailing Address: PO Box 61010, Virginia Beach, VA 23466
Simpra Advantage Inc.	SIM01	835	✓	✓		✓	✓											
Simpra Advantage Inc.	SIM01	837	✓	✓														
Simpra Advantage Inc. (DOS > 12/31/2022)	SIM02	835	✓	✓		✓	✓											
Simpra Advantage Inc. (DOS > 12/31/2022)	SIM02	837	✓	✓														
Sinclair Health Plan	84076	837	✓	✓														
SisCo Benefits	00540	835	✓	✓		✓	✓											
SisCo Benefits	00540	837	✓	✓														
SisCo Benefits	44827	835	✓	✓		✓	✓											
SisCo Benefits	44827	837	✓	✓					✓	✓								
SKAI Blue Cross Blue Shield	BSKAI	835	✓	✓		✓	✓											
SKAI Blue Cross Blue Shield	BSKAI	837	✓	✓														
Smith Administrators	02057	837	✓	✓					✓	✓								
Snedeker Risk Management (Hope Trust)	A7637	835	✓	✓		✓	✓											
Snedeker Risk Management (Hope Trust)	A7637	837	✓	✓														
Solidarity Healthshare	77721	837	✓	✓														Claim Mailing Address: PO Box 26967, Tempe, AZ 85285
Solidarity Healthshare	SH777	835	✓	✓		✓	✓											
Solis Health Plans	73581	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
SOMOS Emblem IPA	81336	835	✓	✓		✓	✓											
Sonder Health Plans	A0339	835	✓	✓		✓	✓											
Sonder Health Plans	A0339	837	✓	✓					✓	✓								
Sound Health (now known as First Choice Health Network)	91131	837	✓	✓														
South Atlantic Medical Group IPA	SAMG1	835	✓	✓														
South Atlantic Medical Group IPA	SAMG1	837	✓	✓					✓	✓								
South Carolina Medicaid	12K55	835	✓			✓												
South Carolina Medicaid	12K55	837	✓			✓			✓									
South Carolina Medicaid	SKSC0	835		✓			✓											
South Carolina Medicaid	SKSC0	837		✓			✓			✓								
South Carolina Medicare	12M55	835	✓			✓												
South Carolina Medicare	12M55	837	✓			✓			✓									
South Carolina Medicare	SMSC0	835		✓			✓											
South Carolina Medicare	SMSC0	837		✓			✓											
South Central Preferred	23266	835	✓	✓		✓	✓											
South Central Preferred	23266	837	✓	✓					✓	✓								
South Country Health Alliance	81600	835	✓	✓		✓	✓											
South Country Health Alliance	81600	837	✓	✓					✓	✓								
South Dakota Medicaid	12K36	835	✓			✓												
South Dakota Medicaid	12K36	837	✓			✓			✓									
South Dakota Medicaid	SKSD0	835		✓			✓											
South Dakota Medicaid	SKSD0	837		✓			✓			✓								
South Dakota Medicare	12M83	835	✓			✓												
South Dakota Medicare	12M83	837	✓			✓			✓									
South Dakota Medicare	SMSD0	835		✓			✓									✓		
South Dakota Medicare	SMSD0	837		✓			✓			✓						✓		
South Florida Musculoskeletal Care	06294	837	✓	✓														
South Indiana Health Operations - HMO	77153	835	✓	✓		✓	✓											
South Indiana Health Operations - HMO	77153	837	✓	✓					✓	✓								
South Point Hotel & Casino	35227	837		✓						✓								
SouthCare/Healthcare Preferred	25147	837	✓	✓					✓	✓								
Southern California Healthcare System	MPM20	837	✓	✓					✓	✓								
Southern California Physicians Managed Care Services	SCP01	837	✓	✓														
Southern California UFCW Unions & Food Employers	SCUFW	837		✓														
Southern Illinois Health Care Association	SIH99	837	✓						✓									

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Southern Illinois Health Care Association	SIHCA	837		✓						✓								
Southland Advantage Medical Group, Inc.	HSM01	837	✓	✓														
Southland BCBS	SIPA1	837	✓	✓														
Southland Benefit Solutions, LLC (Dental)	26374	837			✓						✓							
Southland Benefit Solutions, LLC (Vision)	V47936	837		✓														
Southland San Gabriel Valley Medical Group, Inc	PHM11	837		✓														
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	837	✓	✓														
Special Agents Mutual Benefits Association (SAMBA) (ERA Only)	SAMBA	835	✓	✓		✓	✓											
Spectera	00773	837		✓														
Spectrum Administrators Inc. - TPA Allentown PA (IHS Gateway Payer)	23253	835	✓	✓		✓	✓											
Spectrum Administrators Inc. - TPA Allentown PA (IHS Gateway Payer)	23253	837	✓	✓														
Spencer Stuart (ARM, LTD)	38416	837	✓	✓					✓	✓								
Spina Bifida - VA HAC	84146	837	✓	✓					✓	✓		✓	✓					
St Francis IPA	STFMC	835	✓	✓		✓	✓											
St Francis IPA	STFMC	837	✓	✓														
St Lukes Health Plan Inc	92170	837	✓	✓														
St. Francis IPA	APP01	837	✓	✓					✓	✓								
St. Joseph Heritage Healthcare	STJOE	835	✓	✓		✓	✓											
St. Joseph Heritage Healthcare	STJOE	837	✓	✓														
St. Joseph IPA	STJOE	837	✓	✓														
St. Jude (St. Joseph Heritage Healthcare)	STJOE	837	✓	✓														
St. Jude Yorba Linda	STJOE	837	✓	✓														
St. Mary Medical Center	HSM01	837	✓	✓														
St. Mary's IPA	CAPMN	837	✓	✓					✓	✓								
St. Paul 's PACE	SPPCA	835	✓	✓														This payer is not available for production until May 16, 2025.
St. Paul 's PACE	SPPCA	837	✓	✓	✓				✓	✓	✓							This payer is not available for production until May 16, 2025.
St. Peter Medical Group, Inc.	HSM01	837	✓	✓														
St. Vincent IPA	PDT01	837	✓	✓														
Staff Benefits Management Administration (SBM)	SBMCO	835	✓	✓		✓	✓											
Staff Benefits Management Administration (SBM)	SBMCO	837	✓	✓					✓	✓								
Standard Life and Accident (Secondary claims only)	73099	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Standard Life and Accident (Secondary claims only)	73099	837	✓	✓														
StandardHealth with Health Choice (HCS)	RP105	837	✓	✓	✓													
Stanford Healthcare Advantage	46407	837	✓	✓														
Starmark	61425	837	✓	✓														
State Employee Plan (BCBS SC)	00400	835	✓	✓		✓	✓											
State Employee Plan (BCBS SC)	00400	837	✓	✓														
State Farm (Casualty & Property Claims)	31059	835	✓	✓		✓	✓											
State Farm (Casualty & Property Claims)	31059	837	✓	✓														
State Farm Insurance Companies	31053	835	✓	✓		✓	✓											
State Farm Insurance Companies	31053	837	✓	✓														
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	✓	✓														
State of Texas Dental Plan	57254	835	✓	✓		✓	✓											
State of Texas Dental Plan	57254	837	✓	✓	✓						✓							
Stirling Benefits	06089	835	✓	✓	✓	✓	✓	✓										
Stirling Benefits	06089	837	✓	✓	✓													
Stonebridge Life Insurance Company (TX)	TRP1E	835	✓	✓		✓	✓											
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		✓						✓								
Stones River Regional IPA/Windsor	15752	837		✓														
Student Assurance Services (ERA Only)	SAS01	835	✓	✓		✓	✓											ERA Only
Suffolk County Municipal Employees Benefit Fund	CX076	837			✓						✓							
SummaCare Health Plan	95202	837	✓	✓														
SummaCare Health Plan	A5202	835	✓	✓		✓	✓											ERA Payer Code A5202
Summit Administration Services Inc.	86083	835	✓	✓		✓	✓											
Summit Administration Services Inc.	86083	837	✓	✓														
Summit America Insurance Services Inc.	37301	835	✓	✓		✓	✓											
Summit America Insurance Services Inc.	37301	837		✓														
Summit Community Care	PASSE	835	✓	✓		✓	✓											
Summit Community Care	PASSE	837	✓	✓					✓	✓		✓	✓					
SunAmerica Life Insurance Company	90956	837		✓														
Sunrise PACE	R3498	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Sunrise PACE	R3498	837	✓	✓	✓													
Sunshine State Health Plan	68069	837	✓	✓					✓	✓		✓	✓					
Superior Choice Medical Group	SCPR1	835	✓	✓		✓	✓											
Superior Choice Medical Group	SCPR1	837	✓	✓														
Superior Health Plan Texas	68069	837	✓	✓					✓	✓		✓	✓					
Superior Vision Services	13305	837		✓														
Superior Vision Services	13374	835		✓			✓											
Surest	25463	835	✓	✓		✓	✓											
Surest	25463	837	✓	✓														
Sutter Connect (SIP/SMG/SWMG)	SC004	837		✓														
Sutter East Bay Medical Foundation	94269	837	✓	✓														
Sutter East Bay Regional Hospital	96176	837	✓	✓														
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	✓	✓					✓	✓								
SVS Vision Inc.	SVSVN	837		✓			✓											
Swedish Covenant Hospital	36411	837	✓	✓														
Symetra Select Benefits	37282	837	✓	✓														
SynerMed	SYMED	837	✓	✓														
Syntriq Health Solutions	SNTRQ	835	✓	✓		✓	✓											
Syntriq Health Solutions	SNTRQ	837	✓	✓														
TakeCare Insurance Company	98022	835	✓	✓		✓	✓											
TakeCare Insurance Company	98022	837	✓	✓														
Talbert Medical Group	TALMG	837		✓														
Tall Tree Administrators	88067	835	✓	✓		✓	✓											
Tall Tree Administrators	88067	837	✓	✓														
TASEBA	TKFMC	837	✓	✓														
Taylor Benefits	TAYLR	835		✓			✓											
Taylor Benefits	TAYLR	837		✓														
Taylor Benefits	UAYLR	835	✓			✓												
Taylor Benefits	UAYLR	837	✓															
TCC Benefits Administrator - Pre-Med Defender	SX160	835	✓	✓		✓	✓											
TCC Benefits Administrator - Pre-Med Defender	TCC13	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
TCC Benefits Administrator - Self Funded	SX160	835	✓	✓		✓	✓											
TCC Benefits Administrator - Self Funded	TCC93	837	✓	✓					✓	✓								
Teal Premier	88300	837	✓	✓														
Team Choice PNS	75133	837	✓	✓														
Teamcare	36215	837	✓	✓														
Teamsters Local Union 301	36612	837	✓															
Teamsters Medicare Trust for Retired Employees	43619	837	✓	✓														
Temecula Valley Medical Group	HCMG1	837	✓	✓					✓	✓								
Tennessee Medicaid	12K46	835	✓			✓												
Tennessee Medicaid	12K46	837	✓			✓												
Tennessee Medicaid	SKTN2	835		✓			✓											
Tennessee Medicaid	SKTN2	837		✓			✓											
Tennessee Medicare	12M53	835	✓			✓												
Tennessee Medicare	12M53	837	✓			✓			✓									
Tennessee Medicare	SMTN0	835		✓			✓											
Tennessee Medicare	SMTN0	837		✓			✓			✓								
Tethys Health Ventures	20212	837	✓	✓					✓	✓								
Texas Children's Health Plan	76048	837	✓	✓														
TEXAS CHILDRENS HEALTH	TXCSM	837		✓														
Texas Childrens Health Plan (Medicaid)	75228	837	✓	✓														
Texas Christus	45210	837	✓	✓					✓	✓								
Texas HealthSpring	33104	837	✓															
Texas Independence Health Plan	31403	835	✓	✓		✓	✓											
Texas Independence Health Plan	31403	837	✓	✓														
Texas Medicaid	12K64	835	✓			✓												
Texas Medicaid	12K64	837	✓						✓									
Texas Medicaid	SKTX0	835		✓	✓		✓	✓										
Texas Medicaid	SKTX0	837		✓	✓					✓								
Texas Medicaid MAP	TXMAI	837	✓															This Payer ID is for TX Medicaid MAP (Secondary) Attachments only.
Texas Medicaid MAP	TXMAP	837		✓														This Payer ID is for TX Medicaid MAP (Secondary) Attachments only.
Texas Medicare	12M31	835	✓			✓												
Texas Medicare	12M31	837	✓			✓			✓									
Texas Medicare	SMTX0	835		✓			✓											
Texas Medicare	SMTX0	837		✓			✓			✓								
Texas Mutual Insurance Company	WK002	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Texas Premier Plan	TH089	837		✓			✓											
TexasFirst Health Plan (NTX)	13185	837	✓	✓														
Texicare	TXCARE	837	✓	✓														
The Alliance	88461	837	✓	✓														
The Benefit Group Inc	TBGNE	837	✓	✓														
The Care Network/The Savannah Business Group	68423	837	✓	✓														
The City of Odessa	75600	837	✓	✓														
The Dickinson Group	82016	837	✓	✓														
The Health Exchange (Cerner Corporation)	20356	837	✓	✓														
The Health Plan	95677	837	✓	✓														
The Health Plan of West Virginia, Inc	95677	835	✓	✓		✓	✓											
The Health Plan of West Virginia, Inc	95677	837	✓	✓														
The Healthcare Group	35206	837	✓	✓														
The Loomis Company - TPA Wyomissing PA (IHS Gateway Payer)	23223	835	✓	✓		✓	✓											
The Loomis Company - TPA Wyomissing PA (IHS Gateway Payer)	23223	837	✓	✓					✓	✓								
The MEGA Life & Health Insurance Company-OKC	59227	837		✓														
The Mohegan Tribe of Indians of Connecticut	MOHEG	835	✓	✓														
The Mohegan Tribe of Indians of Connecticut	MOHEG	837	✓	✓					✓	✓								
The National Radiology Network	59087	837	✓	✓														
The New England	66893	837		✓														
The Oaks PACE	57034	837	✓	✓														
The Physicians Assurance Corp (TPAC) /Employee Benefit Management Corp (EBMC)	31074	837	✓	✓														
The Standard Insurance Dental	93024	835			✓			✓										
The Standard Insurance Dental	93024	837			✓						✓			✓				
The Zero Card	75296	837	✓	✓														
Third Party Administrators	37225	837	✓															
Thomas H. Cooper & Company	SX160	837		✓						✓								Equivalent to payer code 315
Thome Pace	RP044	837	✓	✓														
Three Rivers Preferred	MP340	837		✓						✓								
Thrivent Financial For Lutherans	30167	837	✓	✓														
Thrivent Financial For Lutherans	THRIV	835	✓	✓		✓	✓											
Thrivent Financial Lutheran Brotherhood Medicare	30166	835	✓	✓		✓	✓											
Thrivent Financial Lutheran Brotherhood Medicare	30166	837	✓	✓														
TLC Advantage of Sioux Falls	TLC01	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
TLC Benefit Solutions	TLC79	835	✓	✓		✓	✓											
TLC Benefit Solutions	TLC79	837	✓	✓														
Today's Options (American Progressive and Pyramid Life)	48055	835	✓	✓		✓	✓											
Today's Options (American Progressive and Pyramid Life)	48055	837	✓	✓														
Today's Options powered by CCRX	48055	837	✓	✓														
Together with Children's Community Health Plan of Wisconsin	251CC	835	✓	✓		✓	✓											
Together with Children's Community Health Plan of Wisconsin	251CC	837	✓	✓														
Tooling & Manufacturing Association	61425	837	✓	✓														
Torrance Hospital IPA	THIPA	837	✓	✓														
Torrance Memorial Medical Center	TMMC1	837	✓	✓					✓	✓								
Total Broker Benefits	36342	837	✓	✓														
Total Dental Administrators	CX112	837			✓						✓							
Total Plan Concepts	80900	837	✓	✓														
Total Plan Services	41202	835	✓	✓		✓	✓											
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	✓	✓	✓													
Touchstone Health PSO	23856	837	✓	✓														
Town & Country	TKFMC	837	✓	✓														
TPAC/Employee Benefit Management Corp	31074	837	✓	✓														
TPN Health	T1010	835	✓	✓		✓	✓											
TPN Health	T1010	837	✓	✓														
TR Paul Inc.	37230	837	✓	✓														
Transact RX	PARTD	835		✓			✓											
Transact RX	PARTD	837		✓														
TransAmerica Financial Life Insurance Company (TX)	TRP1P	837	✓	✓					✓	✓								
TransAmerica Life Insurance Company (AR)	TLINS	835	✓	✓		✓	✓											
TransAmerica Life Insurance Company (TX)	TRP1P	837	✓	✓					✓	✓								
TransAmerica Premier Life Insurance Company (TX)	TRP1P	837	✓	✓					✓	✓								
TransChoice-Key Benefit Administrators	37284	837	✓	✓					✓	✓								
Transwestern Insurance Administrators, Inc	TRAN1	837		✓						✓								
Travis County Healthcare District dba Central Health	TCMAP	835	✓	✓		✓	✓											
Travis County Healthcare District dba Central Health	TCMAP	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Trellis Health Partners	36397	837	✓	✓														
Tres Health TPA	32396	837	✓	✓														
Tri-Valley Medical Group	20538	835	✓	✓		✓	✓											
Tri-Valley Medical Group	20538	837	✓	✓														
Triad Healthcare	39181	837	✓	✓														
Triada Assurance	CB733	837	✓	✓					✓	✓								
Tribado	32691	837	✓	✓					✓	✓								
Tribute /SelectCare of Oklahoma	73117	837	✓	✓														
Tribute Health Plan	31118	835	✓	✓		✓	✓											
Tribute Health Plan	31118	837	✓	✓														
Tricare Active Reservists Dental	DXTAS	835			✓			✓										
Tricare Active Reservists Dental	DXTAS	837			✓						✓			✓				
Tricare Dental Program	TDPC1	835			✓			✓										
Tricare Dental Program	TDPC1	837			✓						✓			✓				
Tricare East	99727	835	✓	✓		✓	✓											
Tricare East	99727	837	✓	✓					✓	✓								
Tricare for Life	TDDIR	835	✓	✓		✓	✓											
Tricare for Life	TDDIR	837	✓	✓		✓	✓		✓	✓								
Tricare for Overseas	12X46	835	✓			✓												
Tricare for Overseas	12X46	837	✓			✓			✓									
Tricare for Overseas	SX163	835		✓			✓											
Tricare for Overseas	SX163	837		✓			✓			✓								
Tricare Retiree Dental Program	DDPFS	837			✓						✓			✓				
Tricare West	99726	835	✓	✓		✓	✓											
Tricare West	99726	837	✓	✓					✓	✓								
TriCities IPA	PDT01	837	✓	✓														
Trigon Blue Cross and Blue Shield (Virginia)	SB924	837		✓						✓								
TRIHEALTH PHYSICIAN SOLUTIONS	31144	837	✓	✓														
Trillium Community Health Plan	68069	837	✓	✓					✓	✓		✓	✓					
Trillium Health Resources	43071	835	✓	✓		✓	✓											
Trillium Health Resources	56089	837	✓	✓														
Trillium Tailored Plan	43072	835	✓	✓		✓	✓											
Trillium Tailored Plan	43072	837	✓	✓														
Trinity Health Pace	TRNPC	835	✓	✓														
Trinity Health Pace	TRNPC	837	✓	✓					✓	✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Trinity HealthShare	TRIN1	835	✓	✓		✓	✓											
Triple-S Advantage	973MA	835	✓	✓		✓	✓											
Triple-S Advantage	973MA	837	✓	✓														
Triple-S Inc.	12B48	837	✓															
Triple-S Inc.	SB980	835		✓			✓											
Triple-S Inc.	SB980	837		✓														
TRIPLEFIN LLC	64300	837	✓	✓														
TRISTAR Benefit Administrators	42137	835	✓	✓		✓	✓											
TRISTAR Benefit Administrators	42137	837	✓	✓														
TriValley Medical Group Corporation	TVMG1	837	✓	✓														
Troy Medicare	TRYMC	835	✓	✓		✓	✓											
Troy Medicare	TRYMC	837	✓	✓					✓	✓								
Tru Blue TPA	83413	837	✓	✓					✓	✓								
Tru Community Care	TRUCO	835	✓	✓		✓	✓											
Tru Community Care	TRUCO	837	✓	✓														
TruAssure Insurance Company	ILDTA	837			✓						✓			✓				
True Blue / Blue Cross of Idaho	12B84	835	✓			✓												
True Blue / Blue Cross of Idaho	12B84	837	✓			✓			✓						✓			
True Blue / Blue Cross of Idaho	SB612	835		✓			✓											
True Blue / Blue Cross of Idaho	SB612	837		✓	✓		✓	✓		✓	✓					✓		
TrueCare	MSMCDCS1	835	✓	✓		✓	✓											
TrueCare	MSMCDCS1	837	✓	✓														
Truli for Health	TRULI	835	✓	✓		✓	✓											
Truli for Health	TRULI	837	✓	✓					✓	✓								
TRUSTED HEALTH PLAN	L0230	837	✓	✓					✓	✓								
Trusteed Insurance (FCHN)	91131	837	✓	✓														
Trusteed Plans Service Corporation	91078	835	✓	✓		✓	✓											
Trusteed Plans Service Corporation	91078	837	✓	✓														
Trustmark Insurance Company	61425	835	✓	✓		✓	✓											
Trustmark Insurance Company	61425	837	✓	✓														
Tucker Administrators Inc	00128	835	✓	✓		✓	✓											
Tucker Administrators Inc	00128	837	✓	✓					✓	✓								
Tufts Health Plan	04298	835	✓	✓		✓	✓											
Tufts Health Plan	04298	837	✓	✓		✓	✓		✓	✓								
U.S. Family Health Plan Northwest Region	87347	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
U.S. Network and Administrative Services	USN01	837	✓	✓					✓	✓								
UC Irvine	UCI01	837	✓	✓					✓	✓								
UC-Davis Health	94603	837	✓	✓														
UCARE Individual and Family Plans	55413	835	✓	✓		✓	✓											
UCARE Individual and Family Plans	55413	837	✓	✓					✓	✓								
UCare Minnesota	55413	837	✓	✓					✓	✓								
Ucare Minnesota (DOS > 1/1/22)	12X50	837	✓						✓									
Ucare Minnesota (DOS > 1/1/22)	SX178	837		✓						✓								
UCare Minnesota Senior Health Options	55413	837	✓	✓					✓	✓								
UCare Minnesota Senior Health Options (DOS > 1/1/22)	52629	837	✓	✓														
UCLA Health Medicare Advantage Plan	28189	837	✓	✓														
UCLA Medical Group	USMBP	835	✓	✓														
UCLA Medical Group	USMBP	837	✓	✓														
UCS (The City of East Chicago)	56001	837	✓	✓					✓	✓								
UCS BASI Hotstart	19450	837	✓	✓														
UCS BASI: Meter Group USA	16025	835	✓	✓		✓	✓											
UCS BASI: Meter Group USA	16025	837	✓	✓														
UCS Cement Masons	34924	837	✓	✓														
UCS Insight Benefit Administrators	96436	837	✓	✓					✓	✓								
UCS PBS Oregon	56724	837	✓	✓														
UCS Seminole Tribe of Florida	78702	837	✓	✓														
UCS Wagner Meinert	36150	837	✓	✓					✓	✓								
UCS: CAM Administrative Services, INC.	63985	837	✓	✓					✓	✓								
UCSD Managed Care	UCSDH	835	✓	✓														
UCSD Managed Care	UCSDH	837	✓	✓														
UFCW Local 1000 and Kroger Dallas Health & Welfare Plan	99843	837	✓	✓	✓													
UHP Management	UHP01	837	✓	✓					✓	✓								
Ullico Inc.	ULLIC	837	✓	✓														
Ultimate Health Plan	77022	835	✓	✓		✓	✓											
Ultimate Health Plan	77022	837	✓	✓					✓	✓								
Ultra Benefits Inc.	41206	835	✓	✓		✓	✓											
Ultra Benefits Inc.	41206	837	✓	✓														
Umass Medical School and Criminal Justice Program	UMHCJ	835	✓	✓		✓	✓											
Umass Medical School and Criminal Justice Program	UMHCJ	837	✓	✓														
UMC HEALTH PLAN	75130	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Umpqua Health Alliance	77503	835	✓	✓		✓	✓											
Umpqua Health Alliance	77503	837	✓	✓					✓	✓								
UMR (formerly Lexington / CommonWealth Administrative Group)	39026	837	✓	✓					✓	✓		✓	✓					
UMR (formerly UMR Onalaska)	79480	837	✓	✓					✓	✓								
UMR (formerly UMR San Antonio Benefit Planners)	39026	837	✓	✓					✓	✓		✓	✓					
UMR Wausuau	39026	835	✓	✓	✓	✓	✓	✓										
UMR Wausuau	39026	837	✓	✓	✓				✓	✓	✓	✓	✓					
UMR Westerville (formerly Harrington Benefit Services - Columbus)	39026	837	✓	✓					✓	✓		✓	✓					
UMWA Health & Retirement Funds	52180	835	✓	✓		✓	✓											ERA enrollment under payer name Healthsmart Benefit Solutions
UMWA Health & Retirement Funds	52180	837	✓	✓					✓	✓								
Unicare Life & Health	80314	835	✓	✓		✓	✓											
Unicare Life & Health	80314	837	✓	✓					✓	✓		✓	✓					
Unicare Life & Health/Wellpoint	WLPNT	837	✓	✓					✓	✓		✓	✓					
Unified Group Services	35198	835	✓	✓		✓	✓											
Unified Group Services	35198	837	✓	✓	✓													Payer does not accept electronic claims. Claims are mailed to payer and final acknowledgement from Experian is when it is mailed.
Unified Health Plan	IHS12	837	✓	✓														
Unified Health Services	62170	835	✓	✓		✓	✓											
Unified Health Services	62170	837	✓	✓														
Unified Health Services	62710	835	✓	✓		✓	✓											
Unified Life	RP064	837	✓	✓					✓	✓								
Uniform Medical Plan	39026	837	✓	✓					✓	✓		✓	✓					
Unify HealthCare Administrators	84962	837	✓	✓	✓													
Union Pacific IPA (SCPMCS)	SCP01	837	✓	✓														
Union Pacific Railroad Employees Health Systems	87042	835	✓	✓		✓	✓											
Union Pacific Railroad Employees Health Systems	87042	837		✓						✓								
Unison Health Plan/Better Health Plans	87726	837	✓	✓					✓	✓		✓	✓					
United Agriculture Benefit Trust	UABT1	837		✓						✓								
United American	55004	835		✓			✓											
United American Insurance	92916	835	✓	✓		✓	✓											
United Americhoice of Nebraska (ERA Only)	UFNEP	835	✓	✓		✓	✓											
United AmeriChoice of Wisconsin (ERA Only)	WID01	835	✓	✓		✓	✓											
United Benefit Advisors	38260	837	✓	✓														
United Care Medical Group	ADCUC	837	✓	✓					✓	✓								
United Concordia	89070	835			✓			✓										

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
United Concordia	89070	837			✓						✓			✓				
United Food & Commercial Workers Midwest Unions	36659	837		✓														
United Group Programs	UGP19	837	✓	✓														
United Healthcare (Golden Rule) (JVHL)	KRJVH	835	✓	✓		✓	✓											
United Healthcare (Golden Rule) (JVHL)	KRJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
United Healthcare (non-Golden Rule)(JVHL)	J5JVH	835	✓	✓		✓	✓											
United Healthcare (non-Golden Rule)(JVHL)	J5JVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
United Healthcare Arizona Physicians IPA	GP133	837			✓						✓			✓				
United Healthcare Community Plan	GP133	837			✓						✓			✓				
United Healthcare Community Plan - New Mexico EverCare	GP133	837			✓						✓			✓				
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			✓						✓			✓				
United Healthcare Community Plan - RI (Formerly Americhoice)	GP133	837			✓						✓			✓				
United Healthcare Community Plan - TN (Formerly Americhoice)	GP133	837			✓						✓			✓				
United Healthcare Community Plan - TX (Formerly Americhoice)	GP133	837			✓						✓			✓				
United Healthcare Community Plan – MS	GP133	837			✓						✓			✓				
United Healthcare Community Plan (AHCCCS)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (AZ Healthnet)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (FL)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (GA Medicare)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (Great Lakes Health Plan) (JVHL)	JRJVH	835	✓	✓		✓	✓											
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			✓						✓			✓				
United Healthcare Community Plan (KS)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (MA)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (MI Medicare)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (Oxford)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (Special Handling)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (Unison Health Plan)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (WA Medicare)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (Wash. DC Medicare)	GP133	837			✓						✓			✓				
United Healthcare Community Plan (WI)	GP133	837			✓						✓			✓				
United Healthcare Community Plan AZ-Evercare	GP133	837			✓						✓			✓				
United Healthcare Community Plan Louisiana-Medicaid (Healthy Louisiana)	GP133	837			✓						✓			✓				

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
United Healthcare Dental	52133	837			✓						✓			✓				
United Healthcare Dental	87726	835			✓			✓										
United Healthcare NDC Claims	UHNDC	837		✓						✓								
United Healthcare New Mexico Medicaid	04567	835	✓	✓		✓	✓											
United Healthcare New Mexico Medicaid	87748	837	✓	✓														
United Healthcare/ Peoples Health	87726	837	✓	✓					✓	✓		✓	✓					
United Medical Alliance	84132	837	✓	✓														
United of Omaha	71412	837	✓	✓														
United Physicians International	SANDS	837	✓	✓														
United Teacher Assoc Ins Co-Medicare Supplement	13193	837	✓	✓														
UnitedHealthcare	87726	835	✓	✓		✓	✓											
UnitedHealthcare	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare (Definity Health Plan)	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare (Empire Plan)	87726	837		✓						✓		✓	✓					
UnitedHealthcare (MAHP MD IPA Optimum Choice MAMSI)	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare (Oxford Health Plans)	06111	835	✓	✓		✓	✓											
UnitedHealthcare (Oxford Health Plans)	06111	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare / MAHP - MD IPA Optimum Choice MLH (formerly MAMSI)	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare / UHIS - UnitedHealth Integrated Services	39026	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare / UnitedHealthcare StudentResources	74227	835	✓	✓		✓	✓											
UnitedHealthcare / UnitedHealthcare StudentResources	74227	837	✓	✓					✓	✓								
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	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / FLHI LA MD MS CAN OH RI WAWI	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / IA, hawk-I	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / MI (formerly Great Lakes Health Plan)	95467	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan / MI (formerly Great Lakes Health Plan)	95467	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / MS CHIP	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / NJ (formerly Americhoice NJ Medicaid)	86047	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan / NJ (formerly Americhoice NJ Medicaid)	86047	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / NY	NYU01	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
UnitedHealthcare Community Plan / PA (formerly AmeriChoice PA Medicaid&CHIP	86049	837		✓														
UnitedHealthcare Community Plan / SC (formerly Unison)	25175	837	✓	✓														
UnitedHealthcare Community Plan / TN (formerly AmeriChoice TN: TennCare)	95378	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan / TN (formerly AmeriChoice TN: TennCare)	95378	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / TX	TEX01	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan / UnitedHealthcare Dual Complete	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / UnitedHealthcare Long Term Care	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Community Plan / WI	WID01	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan of Missouri	86050	835	✓	✓		✓	✓											
UnitedHealthcare Community Plan of Missouri	86050	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Medicare Solutions / UnitedHealthcare Chronic Complete	87726	837	✓	✓					✓	✓		✓	✓					
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	✓	✓					✓	✓		✓	✓					
UnitedHealthcare Ohio Medicaid	88337	837	✓	✓					✓	✓								
UnitedHealthcare Ohio Medicaid	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
UnitedHealthcare Ohio Medicaid Vision	8357V	837	✓	✓														
UnitedHealthcare Ohio Medicaid Vision	SKOH0	835	✓	✓		✓	✓											Effective 2/1/2023, remittance returned under Ohio Medicaid
UnitedHealthcare West	87726	837	✓	✓					✓	✓		✓	✓					
UnitedHealthcare West	95959	835	✓	✓		✓	✓											
UnitedHealthcare West	95959	837	✓	✓														
UnitedHealthcare West Encounters	95958	837		✓														
UnitedHealthOne	81400	837	✓	✓					✓	✓								
UnitedHealthOne (formerly Golden Rule)	37602	835	✓	✓		✓	✓											
UnitedHealthOne (formerly Golden Rule)	37602	837	✓	✓					✓	✓								
UnitedHeathcare Community Plan	87726	837	✓	✓					✓	✓		✓	✓					
Unity Vision	UVCAR	837		✓						✓								
Univera Healthcare	UNINW	835	✓	✓		✓	✓											
Univera Healthcare	UNINW	837	✓	✓						✓								
Universal Care - California	33001	837	✓	✓														
Universal Fidelity Administrators Company	93220	835	✓	✓		✓	✓											
Universal Fidelity Administrators Company	93220	837	✓	✓					✓	✓								
Universal Health Fellowship	53684	837	✓	✓	✓													

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Universal Healthcare IPA	UHIPA	835	✓	✓		✓	✓											
Universal Healthcare IPA	UHIPA	837	✓	✓					✓	✓								
University Family Care	09830	835	✓	✓		✓	✓											
University Family Care	09830	837	✓	✓					✓	✓								
University Family Care - Maricopa Health Plan	09908	835	✓	✓		✓	✓											
University Family Care - Maricopa Health Plan	09908	837	✓	✓														
University Health Alliance	99026	837		✓						✓								
University Health Care Advantage	46407	835	✓	✓		✓	✓											
University Health Care Advantage	46407	837	✓	✓														
University Healthcare Marketplace	45437	837	✓	✓														
University of Illinois	UIC67	835	✓	✓		✓	✓											
University of Illinois	UIC67	837	✓	✓														
University of Illinois at Chicago Div of Specialized Care for Children	37601	837	✓	✓														
University of Maryland Health Advantage	45282	835		✓			✓											
University of Maryland Health Advantage	45282	837	✓	✓					✓	✓								
University of Maryland Health Advantage	U5282	835	✓			✓												
University of Utah Health Plans	SX155	835	✓	✓		✓	✓											
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	835	✓	✓		✓	✓											
UPMC Vision Advantage	25184	837	✓	✓														
Upper Peninsula Health Group (TPA)	00446	835	✓	✓		✓	✓											
Upper Peninsula Health Group (TPA)	37324	837	✓	✓														
Upper Peninsula Health Plan (Medicaid)	38337	835	✓	✓		✓	✓											
Upper Peninsula Health Plan (Medicaid)	38337	837	✓	✓														
US Benefits	93092	835	✓	✓		✓	✓											
US Benefits	93092	837	✓	✓														
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		✓						✓								

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
US Department of Labor - Energy	77103	835		✓			✓											
US Department of Labor - Energy	77103	837		✓						✓								
US Engagement, LLC	50443	837	✓	✓														
US Family Health Plan	90551	835	✓	✓		✓	✓											
US Family Health Plan	90551	837	✓	✓														
US Family Health Plan (USFHP) TX AND LA	USFHP	837	✓	✓														
US Imaging Network	50383	835	✓	✓		✓	✓											
US Imaging Network	50383	837	✓	✓														
USAA (United Services Automobile Association)	74095	835	✓	✓		✓	✓											
USAA-Medicare Supplemental (ERA Only)	USAAM	835	✓	✓		✓	✓											
USFHP - St. Vincent Catholic Medical Centers of New York	13407	835	✓	✓		✓	✓											
USFHP - St. Vincent Catholic Medical Centers of New York	13407	837	✓	✓														
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	✓	✓														
Utah Medicaid	12K42	837	✓			✓												
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	835		✓			✓											
Utah Medicare	SMUT0	837		✓			✓			✓						✓		
UTMB Correctional Managed Care	UTMBC	835	✓	✓														
UTMB Correctional Managed Care	UTMBC	837	✓	✓														
UW Graduate Appointee Plan	91136	837	✓	✓														
VA Community Care Network Region 1	VACCN	835	✓	✓		✓	✓											
VA Community Care Network Region 1	VACCN	837	✓	✓	✓				✓	✓	✓							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	✓	✓					✓	✓								
VA Community Care Network Region 5	VACCN5	835	✓	✓		✓	✓											
VA Community Care Network Region 5	VACCN5	837	✓	✓					✓	✓								
VA Fee Basis Programs	12115	835	✓	✓		✓	✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
VA Fee Basis Programs	12115	837	✓	✓								✓	✓					
VA Fee Basis Programs	12116	837			✓						✓							
VA Financial Services Center (Dialysis)	VAFSC	837	✓						✓									
VAFSC-ICE Health Service Corp (IHSC)	DIHSC	835	✓	✓	✓	✓	✓	✓										
VAFSC-ICE Health Service Corp (IHSC)	DIHSC	837	✓	✓	✓													
Valenz	94749	837	✓	✓														
Valenz-Auxiant	92645	837	✓	✓														
Valir Pace	64009	837		✓														
Valir Pace Medicare Advantage	R3463	835	✓	✓		✓	✓											
Valir Pace Medicare Advantage	R3463	837	✓	✓														
Valley Care IPA	VCIPA	835	✓	✓		✓	✓											
Valley Care IPA	VCIPA	837	✓	✓					✓	✓								
Valley Health Plan (Commercial)	VHP01	835	✓	✓		✓	✓											
Valley Health Plan (Commercial)	VHP01	837	✓	✓		✓	✓		✓	✓								
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		✓														
Valley Preferred - PPO Allentown PA (IHS Gateway Payer)	23253	837		✓														
Valley Presbyterian Hospital	MPM53	835	✓	✓		✓	✓											
Valley Presbyterian Hospital	MPM53	837	✓	✓														
Valley Presbyterian Hospital Community Family Care VPRESCFC	MPM61	837	✓	✓														
Valley Presbyterian Hospital Preferred IPA VPRESPREF	MPM60	837	✓	✓					✓	✓								
Valley Presbyterian Hospital SERRA MG	MPM67	837	✓	✓														
Valor Health Plan	43259	835	✓	✓		✓	✓											
Valor Health Plan	43259	837	✓	✓														
Valor Medicare Advantage	43259	837	✓	✓														
Van Lang IPA	77036	837	✓	✓														
Vanderbilt University Medical Center	BPSLLC	835	✓	✓		✓	✓											
Vanderbilt University Medical Center	BPSLLC	837	✓	✓					✓	✓								
Vantage Medical Group	PROSP	837	✓	✓					✓	✓								
Variable Protection Administrators (VPA)	VPA18	837	✓	✓					✓	✓								
Varipro	72187	837	✓	✓														
Vault Administrative Services	VS402	835	✓	✓		✓	✓											
Vault Administrative Services	VS402	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Vaya Health	13010	835	✓	✓		✓	✓											
Vaya Health	13010	837	✓	✓		✓	✓		✓	✓								
Ventura County Health Care Plan	VCHCP	837	✓	✓					✓	✓								
Verda Healthcare AZ MCR	VERAZ	837	✓	✓														
Verda Healthcare Texas	VERTX	835	✓	✓		✓	✓											
Verda Healthcare Texas	VERTX	837	✓	✓														
Verity National Group	75256	837	✓	✓					✓	✓								
Vermont Medicaid	12K26	835	✓			✓												
Vermont Medicaid	12K26	837	✓			✓												
Vermont Medicaid	SKVT0	835		✓			✓											
Vermont Medicaid	SKVT0	837		✓			✓											
Vermont Medicare	12M26	835	✓			✓												
Vermont Medicare	12M26	837	✓			✓			✓			✓						
Vermont Medicare	SMVT0	835		✓			✓											
Vermont Medicare	SMVT0	837		✓			✓			✓			✓					
VESTACARE	VESTA	837	✓	✓														
VGM Homelink	50701	835		✓			✓											
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	837	✓	✓														
VieCare Life Armstrong	25922	837	✓	✓														
VieCare LIFE Butler	25923	837	✓	✓														
VillageCareMAX	26545	835	✓	✓		✓	✓											
VillageCareMAX	26545	837	✓	✓														
Virgin Islands Medicare	12M52	835	✓			✓												
Virgin Islands Medicare	12M52	837	✓			✓												
Virgin Islands Medicare	SMVI0	835		✓			✓											
Virgin Islands Medicare	SMVI0	837		✓			✓											
Virginia Health Network, Inc.	54138	837		✓						✓								
Virginia Mason Group Health	91131	837	✓	✓														
Virginia Medicaid	12003	835	✓			✓												
Virginia Medicaid	12003	837	✓						✓									
Virginia Medicaid	SKVA0	835		✓			✓											

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Virginia Medicaid	SKVA0	837		✓						✓								
Virginia Medicare	11003	835	✓			✓												
Virginia Medicare	11003	837	✓			✓			✓									
Virginia Medicare	SMVA0	835		✓			✓											
Virginia Medicare	SMVA0	837		✓			✓			✓								
Virginia Premier Health Plan	VAPRM	835	✓	✓		✓	✓											
Virginia Premier Health Plan	VAPRM	837	✓	✓					✓	✓								
Vision Service Plan (VSP)	94163	835		✓			✓											
Vision Service Plan (VSP)	94163	837		✓														
Vista Oncology - New Century Infusion Solutions	NCH08	837		✓														
VitalCore Milette	MAI58	837	✓	✓	✓													
Vitas Healthcare	ZP5678	835	✓	✓		✓	✓											
Vitori Health	IHS25	837	✓	✓														
Vitruvian Care IPA	VUIPA	837	✓	✓					✓	✓								
Viva Health Plan	63114	835	✓	✓	✓	✓	✓	✓										
Viva Health Plan	63114	837	✓	✓	✓													
Vivida Health	A0102	837	✓	✓														For claim DOS on or after 1/1/21. Claims with DOS prior to 1/1/21 should be sent using payer code 45488
Vivida Health (for DOS prior to 1/1/21)	45488	837	✓	✓					✓	✓								
VMD Primary Providers of AZ	84213	837	✓	✓														
VNS CHOICE Medicare	77073	835	✓	✓		✓	✓											
VNS CHOICE Medicare	77073	837	✓	✓					✓	✓								
Volunteers of America National Services	VNSPC	835	✓	✓		✓	✓											
Volunteers of America National Services	VNSPC	837	✓	✓														
VOLUSIA HEALTH NETWORK	59266	835	✓	✓		✓	✓											
VOLUSIA HEALTH NETWORK	59266	837	✓	✓														
Vxtra Health Plan Inc.	99915	837	✓	✓					✓	✓								As of February 20, 2024, Electronic Remits Advice (ERA) is not available for this payer at this time.
Vytalize Health (ERA Only)	RP042	835	✓	✓		✓	✓											
Vytra Healthcare	22264	835	✓	✓		✓	✓											
Vytra Healthcare	22264	837	✓	✓					✓	✓								
WA - Washington Coordinated Care	68069	837	✓	✓					✓	✓		✓	✓					
Wabash Memorial Hospital Association	85256	835	✓	✓		✓	✓											
Wagner Meinert	31650	837	✓	✓					✓	✓								
Washington County General Fund	77111	837	✓	✓					✓	✓								
Washington Medicaid	12K27	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Washington Medicaid	12K27	837	✓			✓			✓									
Washington Medicaid	SKWA0	835		✓			✓											
Washington Medicaid	SKWA0	837		✓	✓		✓	✓		✓	✓							
Washington Medicare	12M45	835	✓			✓												
Washington Medicare	12M45	837	✓			✓			✓						✓			
Washington Medicare	SMWA0	835		✓			✓											
Washington Medicare	SMWA0	837		✓			✓			✓						✓		
Washington National	70319	835	✓	✓		✓	✓											
Washington National	70319	837	✓	✓														
Washington State Dept of Labor and Industry	SX063	837	✓	✓														
Washington State Dept of Labor and Industry	WALAI	835	✓	✓		✓	✓											
Waterstone Benefit Administrators (Oklahoma Providers)	73155	837	✓	✓														
Waterstone Benefit Administrators (Outside Oklahoma)	23051	837	✓	✓														
Watts Health Care	MPM09	837	✓	✓					✓	✓								
WebTPA Employer Services LLC	75261	835	✓	✓		✓	✓											Per the payer's request, the payer's name has been updated to WebTPA Employer Services LLC.
WebTPA Employer Services LLC	75261	837	✓	✓	✓													Electronic Remittance Advice (ERA) will continue to be routed through SDS
Weiss Health Providers	36337	837	✓	✓														
WelbeHealth	WBHCA	835	✓	✓		✓	✓											
WelbeHealth	WBHCA	837	✓	✓					✓	✓								
Welcome Health	MPM57	835	✓	✓		✓	✓											
Welcome Health	MPM57	837	✓	✓														
Welfare and Pension Administrators	91136	835	✓	✓		✓	✓											
Welfare and Pension Administrators	91136	837	✓	✓	✓													
Well Sense Health Plan	13337	837	✓	✓					✓	✓								
Well-Med	WELM2	835	✓	✓		✓	✓											
Well-Med	WELM2	837	✓	✓					✓	✓								
WellCare (JVHL)	MMJVH	835	✓	✓		✓	✓											
WellCare (JVHL)	MMJVH	837	✓	✓		✓	✓		✓	✓								Provider must be an approved JVHL lab
Wellcare by Allwell	68069	837	✓	✓					✓	✓		✓	✓					
Wellcare Complete	68069	837	✓	✓					✓	✓		✓	✓					
Wellcare Health Plan, Inc. (Encounters only)	59354	835	✓	✓		✓	✓											
Wellcare Health Plan, Inc. (Encounters only)	59354	837	✓	✓					✓	✓								
Wellcare Health Plan, Inc. (Fee-for-Service)	14163	835	✓	✓		✓	✓											
Wellcare Health Plan, Inc. (Fee-for-Service)	14163	837	✓	✓					✓	✓		✓	✓					

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
WellCare of North Carolina	14163	837	✓	✓					✓	✓		✓	✓					
WellChoice of NJ	00803	835		✓			✓											
WellChoice of NJ	SB803	837		✓						✓								ERA Payer Code 00803.
Wellfleet Supplemental Medical Expense Plan	98585	837	✓	✓														
Wellmark BCBS - Medicare COB	12B92	837	✓						✓									
Wellnet Health Plans	25711	837	✓	✓					✓	✓								
Wellnet Healthcare Administrators, Inc.	93669	835	✓	✓	✓	✓	✓	✓										
Wellnet Healthcare Administrators, Inc.	93669	837	✓	✓	✓													
WellPay/Inssolen	95729	837	✓	✓														
WellSpace Nexus LLC	NEXUS	835	✓	✓		✓	✓											
WellSpace Nexus LLC	NEXUS	837	✓	✓														
WellSystems LLC	35245	835	✓	✓		✓	✓											aka Continental Benefits
WellSystems LLC	35245	837	✓	✓														
WeShare	WESHR	837	✓	✓					✓	✓								
West Covina Medical Group	66124	837	✓	✓														
West Suburban Health Providers	80942	837	✓	✓														
West Virginia Family Health Plan	45276	837		✓														
West Virginia Medicaid	12K28	835	✓			✓												
West Virginia Medicaid	12K28	837	✓						✓									
West Virginia Medicaid	SKWV0	835		✓			✓											
West Virginia Medicaid	SKWV0	837		✓						✓								
West Virginia Medicare	12M10	835	✓			✓												
West Virginia Medicare	12M10	837	✓			✓			✓									
West Virginia Medicare	SMWV0	835		✓			✓											
West Virginia Medicare	SMWV0	837		✓			✓											
West Virginia Senior Advantage	70023	837	✓	✓					✓	✓								For claims with DOS on or after 01/01/2026.
Western Grower's Insurance Company	24735	837	✓	✓														
Western Growers Assurance Trust	24735	837	✓	✓														
Western Health Advantage	68039	837	✓	✓														
Western Health Advantage by Ayin	77225	835	✓	✓		✓	✓											
Western Health Advantage by Ayin	77225	837	✓	✓														
Western Mutual Insurance	37247	837	✓	✓														
Western Oregon Advanced Health	DOCSO	835		✓			✓											
Western Oregon Advanced Health	DOCSO	837		✓						✓								
Western Oregon Advanced Health	UOCSO	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Western Oregon Advanced Health	UOCSO	837	✓						✓									
Western Reserve Life Insurance Company (TX)	TRLTC	837	✓	✓					✓	✓								
Western Sky Community Care	68069	837	✓	✓					✓	✓		✓	✓					
Western Southern Financial Group (Cincinnati OH)	31048	837	✓	✓														
WeX Health	ZP234	835	✓	✓		✓	✓											
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	✓	✓														
William C. Earhart	93050	835	✓	✓		✓	✓											
William C. Earhart	93050	837	✓	✓														
Willow Health	WHLTH	837	✓	✓					✓	✓								
Wilson McShane Dental	R7002	837			✓						✓			✓				
Wilson-McShane	41095	837	✓	✓														
Windsor Medicare Extra	62153	837	✓	✓					✓	✓								
WINHealth	27327	835	✓	✓		✓	✓											
WINHealth	27327	837	✓	✓					✓	✓								
Wisconsin Chronic Disease Program (WCDP)	SKWID	835	✓	✓		✓	✓											
Wisconsin Chronic Disease Program (WCDP)	SKWID	837	✓	✓					✓	✓								
Wisconsin Department of Corrections	74101	835	✓	✓		✓	✓											
Wisconsin Department of Corrections	74101	837	✓	✓														
Wisconsin Medicaid	CKWI1	835			✓			✓										
Wisconsin Medicaid	CKWI1	837			✓													
Wisconsin Medicaid	SKWI0	835	✓	✓		✓	✓											
Wisconsin Medicaid	SKWI0	837	✓	✓					✓	✓								
Wisconsin Medicare	12M29	835	✓			✓												
Wisconsin Medicare	12M29	837	✓			✓			✓			✓						
Wisconsin Medicare	SMWI0	835		✓			✓											
Wisconsin Medicare	SMWI0	837		✓			✓			✓			✓					
Wisconsin Well Woman Program (WWWP)	SKWIW	835	✓	✓		✓	✓											
Wisconsin Well Woman Program (WWWP)	SKWIW	837	✓	✓					✓	✓								
Women's Integrated Network Inc. (WIN Fertility)	13413	837		✓														
World Insurance Company	75276	835	✓	✓		✓	✓											ERA Only
WPP-ElderCare Wisconsin	77080	837	✓	✓														
WPS Commercial	12X29	835	✓			✓												

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
WPS Commercial	12X29	837	✓			✓												
WPS Commercial	SX022	835		✓			✓											
WPS Commercial	SX022	837		✓			✓			✓								
WPS Medicare Part A National - Legacy Claims - J5	52280	835	✓			✓												
WPS Medicare Part A National - Legacy Claims - J5	52280	837	✓			✓			✓									
WyoBlue Advantage	WYBA	835	✓	✓		✓	✓											
WyoBlue Advantage	WYBA	837	✓	✓														
Wyoming Medicaid	12K30	835	✓			✓												
Wyoming Medicaid	12K30	837	✓			✓			✓									
Wyoming Medicaid	SKWY0	835		✓			✓											
Wyoming Medicaid	SKWY0	837		✓			✓			✓								
Wyoming Medicaid Dental	CKWY1	835			✓			✓										
Wyoming Medicaid Dental	CKWY1	837			✓			✓			✓							
Wyoming Medicare	12M30	835	✓			✓												
Wyoming Medicare	12M30	837	✓			✓			✓						✓			
Wyoming Medicare	SMWY0	835		✓			✓											
Wyoming Medicare	SMWY0	837		✓			✓			✓						✓		
Yale University Heath Plan	60646	835	✓	✓		✓	✓											
Yale University Heath Plan	60646	837	✓	✓					✓	✓								
Yamhill CCO	YAMHL	835	✓	✓		✓	✓											
Yamhill CCO	YAMHL	837	✓	✓														
Yamhill CCO Physical Health	77943	835	✓	✓		✓	✓											
Yamhill CCO Physical Health	77943	837	✓	✓					✓	✓								
Yerington Paiute Tribe	51350	837	✓	✓					✓	✓								
YesCare	43160	837	✓	✓														
YourCare Health Plan	15003	835	✓	✓		✓	✓											
YourCare Health Plan	15003	837	✓	✓														
YouthCare	68069	837	✓	✓					✓	✓		✓	✓					
YouthCare Healthchoice Illinois	MHPIL	837	✓	✓					✓	✓		✓	✓					For DOS on or after 1/1/21
Yuzu Health	IHS15	835	✓	✓		✓	✓											
Yuzu Health	IHS15	837	✓	✓														
Zenith Administrators (MN) Dental	R7001	835			✓			✓										
Zenith Administrators (MN) Dental	R7001	837			✓						✓			✓				
Zenith American Solutions TPA	89677	835	✓	✓		✓	✓											
Zenith American Solutions TPA	89677	837	✓	✓														

Payer Name	Payer Code	Transaction	Available			Enrollment			COB			Attachments			Submitter Id			Notes
			I	P	D	I	P	D	I	P	D	I	P	D	I	P	D	
Zing Choice IL (HMO)	83248	835	✓	✓		✓	✓											
Zing Choice IL (HMO)	83248	837	✓	✓														