pennsylvania
DEPARTMENT OF HUMAN SERVICES

Pennsylvania PROMIS*e*™ Companion Guide

834
Benefit Enrollment and Maintenance
Version 5010

November 2015, Version 2.1

Copyright Notice and Disclaimer

Revision History

Document Version Number	Revision Date	Reason for Revisions	Revisions Completed By
Version 1.1	06/01/2010	New document	Documentation Team
Version 1.2	07/07/2010	Loop updates	Documentation Team
Version 1.3	08/06/2012	Updates for PH/95	Documentation Team
Version 1.4	09/19/2012	Updated Carrier List in Appendix A	Documentation Team
Version 1.5	10/25/2012	Removed PH/95 from Carrier List in Appendix A	Documentation Team
Version 1.6	12/07/2012	Removed Names	Documentation Team
Version 1.7	01/09/2013	Updated Appendix A	Documentation Team
Version 1.8	12/24/2013	Updated Appendix A	Documentation Team
Version 1.9	09/12/2014	Updated Appendix A and added Copyright Notice and Disclaimer page	Documentation Team
Version 2.0	05/01/2015	Revised document to meet ASC X12 copyright standards and added/updated appendices Removed Appendix A (Language Codes)	BDCM\MMU
Version 2.1	11/16/2015	Updated TR3 unique identifier	Documentation Team

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Overview

The Pennsylvania Department of Human Service's HIPAA-compliant Provider Reimbursement and Operations Management Information System (PROMIS*e*™) has adopted the new version 5010 X12 standards. These standards comply with the CMS mandate effective January 1, 2012.

This Companion Guide contains detailed instructions for interpreting the ASC X12 005010X220A1 Benefit Enrollment and Maintenance (834) transaction records that can be received from PROMIS*e*™ in the 834 format. Please disregard any instructions that do not pertain to the services you are receiving.

MCOs must complete a certification process in order to receive the 834 transaction from PROMIS*e*™ for production processing. The certification process consists of the transmittal of the 834 to verify that the format can pass HIPAA compliance checks.

This Companion Guide applies to both the daily and the monthly 834 PROMISe™ files. Each record on the files will contain a series of segments (BGN, REF, etc.) for each recipient. Segments will not be sent when they are not required AND there has been no change to that data. However, each segment that is sent is always a complete segment and is to be considered a full replacement for previously sent segments.

Monthly File – There will be only one record on the file for each recipient (the most recent). Records will be included if the recipient is eligible for both Medical Assistance and managed care at some point in the next month. This file will be generated on the next to the last Saturday of each month. For example, a file generated on the next to the last Saturday in September will contain the most recent record for each of the MCO's recipients where the recipient was both MA and managed care eligible at some point in October (as of the date the file is generated). Third Party Liability information is not included on this file.

Daily File – The daily file will only contain records for each of an MCO's recipients where data for that recipient (contained in the 834 layout) has changed. There may be more than one record on the file for a recipient. This will be determined by the budget and maintenance – a separate record for each type. For example, if an MCO recipient has a Medical Assistance category termination and a new MA category added on the same day, two records will be generated on that evening's daily file – one for the terminated category and one for the new category. However, if a recipient changes their address, phone number and language preference on the same day, only one change record will be sent that includes all of these changes. If a caseworker changes a recipient's address three times in one day, only one record will be sent on that evening's daily file. It will contain only the address in effect at the end of that day.

This file will be sorted. The MCO should process the records in the order in which they appear on the file. Changes that occur for a terminated coverage period will continue to be sent until a term record has been sent. For example, the MCO receives a Managed Care termination (001/024) date of 03/31/15 for one of their recipients on 02/24/15. On 02/28/15, the recipient changes their phone number. This change record will be sent to the MCO because a final term record for both the MA Category and Managed Care (024/024) has not been sent. Once a term record for both

category and managed care has been sent, no further 834 records will be generated for that recipient. TPL data will be sent on daily files when it overlaps with managed care coverage.

The files will only contain records for eligible recipients - those with a CIS eligibility status code where the first character is NOT an "N". Eligibility status code is not sent on either the daily or the monthly file.

Companion Guide Instructions

One of the new terms born out of HIPAA is *payer variability*. As each payer works to make its system HIPAA ready, there is a realization and an allowance that payers are going to require information and values/formats specific to their systems. This Companion Guide was developed to communicate the Pennsylvania Benefit Enrollment and Maintenance-specific information required to successfully interpret the 834 transaction.

This Companion Guide is to be used in conjunction with the *ASC X12 Implementation Guide* (found at http://store.x12.org). The *ASC X12 Implementation Guide* takes precedence and is the main source of information about the transaction sets.

The Companion Guide contains:

- DHS interpretation/application of the data elements that support Benefit Enrollment and Maintenance transaction submissions,

- The methods utilized to convey data that are not included in the *ASC X12 Implementation Guide*, but are required for processing Pennsylvania Department of Human Services transactions; and Clarification for certain, less obvious, but still standard, uses of the transaction.

Revisions to the Companion Guide

The initial release of this Companion Guide was June 2010. The first release reflected all the known information as of this date. However, as the implementation phases of PROMISe progress, updates and releases of new information may be forthcoming.

The e-mail information that you provided will be used to notify you when the updates are available. If your email information changes, PH-MCOs should notify DHS/OMAP at 834DataIssues@pa.gov, BH-MCOs should notify DHS/OMHSAS at omhsas-834Issues@pa.gov. The most current version of the Companion Guide will also be available on the Managed Care Intranet.

Revision Process:

For each new release of this Companion Guide, the information that has been changed since the previous version will be located in that specific section of the guide.

If a revision is made to a data element, it will be detailed in the Revision(s) Description section in the table containing the element. DHS will clearly define the change that was made so it can be integrated into your process.

If there are any updated releases to the Companion Guide, DHS will attempt to notify you of its availability through the email address that was supplied when you registered for PROMISe™ certification. Updates will also be posted to the DHS web site. Please check for these updates regularly.

Pennsylvania-Specific HIPAA Data Elements

Page #	Field Name	PROMISe™ Specific
C.3	ISA06: Interchange Sender ID	Production - "345529167" Testing - "445314156"
33	BGN02: Reference Identification (Industry: Transaction Set Identifier Code)	DXXJJJS D = Daily (or M = Monthly) XX = two character MCO code JJJ = Julian Date S = Sequence Number
39	N102: Name (Industry: Plan Sponsor Name)	"Pennsylvania Dept of Human Services"
	N104: Identification Code (Industry: Sponsor Identifier)	"236003113"
49	INS03: Maintenance Type Code	Daily files could contain multiple records for each recipient. The "030" Audit (Monthly File) will only contain one record for each recipient. This will be present if the recipient is eligible at some point in the next month.
56	REF02: Group or Policy Number	Concatenated field of: County Code (2 bytes), District Code (1 byte), Record Number (7 bytes), Line Number (2 bytes), Category (3 bytes), Grant Group (1 byte), Program Status Code (2 bytes), Lock-In Status Code (1 byte). If any of these values are not available, spaces will be used; zero is a valid value for district, program status code, and lock-in status code.

Page #	Field Name	PROMISe™ Specific
58	REF02: Subscriber Supplemental Identifier	Subscriber Supplemental Identifier will be a concatenated field of Ethnicity Code (1 byte), Facility Placement Code (2 bytes), Waiver Code (2 bytes), Pregnancy Due Date (8 bytes), County Children and Youth Agency/Juvenile Probation Office and spaces or filler (9 bytes). If any of these values are not available, spaces will be used; except for facility placement/waiver code where zeros will be used. Placement code and waiver code will only be provided when open (active).
70	N406: Location Identifier (Industry: Location Identification Code)	Facility Placement County Code (2 bytes) Waiver County Code (2 bytes)
85	LUI02: Identification Code (Industry: Language Code)	Language Preference Code
140	LOOP 2300: Health Coverage HD01: Maintenance Type Code	See Appendix A for further PA-specific data instructions.
	HD04: Plan Coverage Description	See Appendix A for further PA-specific data instructions.
143	DTP01: Date/Time Qualifier (Industry: Date Time Qualifier)	See Appendix A for further PA-specific data instructions.
	DTP03: Date Time Period (Industry: Coverage Period)	See Appendix A for further PA-specific data instructions.

Page #	Field Name	PROMISe™ Specific
164	COB02: Reference Identification (Industry: Insured Group or Policy Number)	This data element will consist of the following CIS values: TPL Policy Number (20 bytes), TPL Source ID (4 bytes), and TPL Policyholder/ Employer indicator (1 Byte). Values are concatenated - no delimiters will be used. Spaces will be used when a value is not available. On the monthly file, this field is never sent. On the daily file, this field is required when enrolling a new member or when TPL resources have been added, changed, or terminated. A "Y" in Policyholder/Employer will indicate that this data is available on CIS (although it may not be valid). An "N" will indicate that there is no policyholder/employer data available.
169	NM103: Name Last or Organization Name (IMPLEMENTATION NAME: Coordination of Benefits Insurer Name)	This will consist of the following fields concatenated in this order: TPL Carrier Insurance Code (3 bytes), TPL Type of Insurance (1 byte), TPL Court Order Insurance (1 byte), and TPL Carrier Name - only if unlisted (30 bytes). No delimiters will be used. Spaces will be used when a value is not available. Zero is a valid value for Court Order Insurance. See Appendix B for a list of TPL Carrier Insurance Codes.

Appendix A – Health Coverage

Page #	Field Name	Description
140	Plan Level Maintenance Type Code (HD01)	Addition, termination, and reinstatement codes are used when begin and end dates are affected. Change codes are used when begin and end dates are not affected. The Audit/compare code is used for the monthly file. Code 025 – Reinstatement – will only be used for PH coverage. It will not be used for either BH or TPL coverage. See Note 1 at end of Appendix
	Insurance Code (HD03)	Will be populated with "HMO" for PH and BH; for TPL, other HIPAA values are indicated below (cross walked to the TPL type of insurance from segment N102, loop 2320, position 4) FAC - A (Medicare Part A) PRA - B (Medicare Part B) DEN - D (Dental) FAC - H (Hospital Plan Only) LTD - L (Black Lung Medical Benefits) MM - M (Major Medical) HMO - O (HMO) HLT - P (Patient Pay-Not LTC) PDG - R (Drug Plan) FAC - S (Medigap Supplemental to Medicare Part A) PRA - T (Medigap Supplemental to Medicare Part B) AK - U (Act 62 Coverage) VIS - V (Vision Benefits) STD - W (Worker's Compensation) HLT - X (Basic Coverage) LTC - Z (Patient Pay-LTC) See Note 1 at end of Appendix
	Plan Coverage Description (HD04)	Will be populated with the following fields concatenated together in the following order: For PH/BH coverage: • 'PH' or 'BH' (hard coded value - 2 bytes), • PH or BH Current Plan Code (2 bytes), • PH or BH Auto Assign Indicator (1 byte), • Exemption Code (2 bytes). If one of the values is not available, spaces will be substituted. Exemption code will only be sent if active (open); otherwise, 00 will be sent as a valid value indicating no exemption. See the Managed Care Intranet for other values. See Note 1 at end of Appendix
143	Date/Time (DTP01)	The value used will depend on the following algorithm:

		• When the Daily/Monthly Current Plan Begin Date is being output, then populate the Data Element DTP01 with the value '348'. • When the Daily/Monthly Current Plan End Date is being output, then populate the Data Element DTP01 with the value '349'. When both the Plan Begin and Plan End Dates are present in the input record, then two DTP Segments will be created, one for each date value. A loop will be created for each set of DTP segments – one loop for PH, one loop for BH, and a separate loop for each TPL resource. • Unlisted Carrier Address Street (26 bytes), • Unlisted Carrier Address City (16 bytes), • Unlisted Carrier Address State (2 bytes), • Unlisted Carrier Address Zip Code (5 bytes), See Note 1 at end of Appendix
	Date Time Period (DTP03)	Will be populated with a date value from one of the following input fields: • Daily/Monthly PH Current Plan Begin Date • Daily/Monthly PH Current Plan End Date • Daily/Monthly BH Current Plan Begin Date • Daily/Monthly BH Current Plan End Date • Daily/Monthly TPL Begin Date • Daily/Monthly TPL End Date Only one date will appear in any one DTP Segment, but multiple DTP segments can be used in multiple 2300 Loops. Each 2300 Loop will either have Physical Health or Behavioral Health dates. The system will not mix the three types of dates in the same 2300 Loop. The Monthly file is the only file that will have both PH and BH date sets, but it will not have any TPL date sets. Up to two DTP Segments will be used within a 2300 Loop to indicate the Begin and End Dates. Two DTP Segments are not required. If there is no End Date value, then only one DTP Segment for the Begin Date information will be sent. There will always be a DTP Segment for the Begin Date. See Note 2 at end of Appendix

NOTE 1: These fields will always be sent for the Daily file and only for the Monthly file if they are eligible during the following month. TPL segments will not be part of the Monthly file.

NOTE 2: Occasionally, when errors occur, it may become necessary for DHS to change a termination date. For this reason, all termination (maintenance code 024) records will also contain the coverage begin date. For example, a managed care termination record is sent on a daily file with an MC begin date of 1-1-10 and an end date of 10-31-10. The next day, DPW Central Office changes the end date to 9-30-10 (due to an error). A termination record will be generated on that evening's daily file with an MC begin date of 1-1-10 and an end date of 9-30-10. Since the begin date is the same, the MCO should replace the original 10-31-10 end date with the new end date of 9-30-10 – and should not provide coverage for the month of October.

In addition, it is possible that the file will contain void eligibility periods (begin date after end date). This will occur only when the begin date was sent on a prior day's file.

Appendix B – Insurance Carriers

Insurance Listings with Addresses:

Carrier Code	Carrier Name	Address
001	Aetna Better Health (PCO)	2000 Market Street Ste 850 Philadelphia, PA 19103
002	Capital Blue Cross SecureChoice (PCO)	2500 Elmerton Avenue Harrisburg, PA 17177
003	Gateway Healthplus (PCO)	Four Gateway Center 444 Liberty Avenue Ste 2100 Pittsburgh, PA 15222
004	Geisinger Healthy Connect (PCO)	108 Woodbine Lane Danville, PA 17821
005	Health Partners Essential (PCO)	901 Market Street Ste 500 Philadelphia, PA 19107
006	Keystone Connect (PCO)	200 Stevens Drive Philadelphia, PA 19113
007	United Healthcare Community Plan for Adults (PCO)	1001 Brinton Road Pittsburgh, PA 15221
008	UPMC for Best Health (PCO)	600 Grant Street 55th Floor Pittsburgh, PA 15219
009	AmeriHealth Connect (PCO)	200 Stevens Drive Philadelphia, PA 19113
100	Medicare Part B	
103	Medicare Part D	
200	Independence Blue Cross	1901 Market Street Philadelphia, PA 19103

Carrier Code	Carrier Name	Address
201	Highmark Blue Cross/Blue Shield	Fifth Avenue Place 120 Fifth Ave/Suite P3105 Pittsburgh, PA 15222
202	Capital Blue Cross	2500 Elmerton Avenue Harrisburg, PA. 17177
203	Blue Cross of N.E. PA	19 N Main Street Wilkes-Barre, PA. 18711
240	Security 65 Independence Plan	1901 Market Street Philadelphia, PA. 19103
241	Security 65 Highmark Plan	5th Avenue Place Pittsburgh, PA. 15222
242	Security 65 Capital Plan	Dept 778995 Harrisburg, PA. 17177-8995
243	Security 65 Northeast Plan	70 N Main Street Wilkes-Barre, PA. 18711
244	Highmark Service Company	5th Avenue Place 120 5th Avenue Place/Suite P3105 Pittsburgh, PA. 15222
249	Blue Cross Medigap (out-of-state)	
299	Blue Cross Out of State	
300	Highmark Blue Shield	P.O. Box 890062 Camp Hill, PA. 17089-0062
340	Blue Shield Medigap - Security 65	P.O. Box 898845 Camp Hill, PA. 17089-8845
349	Blue Shield Medigap (out-of-state)	
399	Blue Shield Out Of State	
400	TRICARE/United Concordia	TDP Claims Processing/PO Box 69411 Harrisburg, PA 17106
400	TRICARE (formerly CHAMPUS)	Palmetto GBA/PO Box 7011 Camden, SC 29020

Carrier Code	Carrier Name	Address
400	TRICARE/Express Scripts	PO Box 390007 Bloomington, MN 55439
401	ChampVA	PO Box 65023 Denver, CO 80206-9023
500	Personal Choice 65/Keystone 65	1901 Market Street Philadelphia, PA 19103
501	Highmark Freedom Blue	120 Fifth Ave, Suite P5501 Pittsburgh, PA 15222
502	Capital SeniorBlue	2500 Elmerton Ave Harrisburg, PA 17177
504	SecurityBlue	120 Fifth Ave, Suite P5501 Pittsburgh, PA 15222
505	Aetna	151 Farmington Avenue Hartford, CT 06156
506	Gateway Health Plan Medicare Assured	600 Grant Street, 41st Floor Pittsburgh, PA 15219
507	Humana	101 East Main Street Louisville, KY 40202
509	Advantra	11 Stanwix Street, Suite 2300 Pittsburgh, PA 15222
510	Sterling Option 1	2219 Rimland Dr, PO Box 5348 Bellingham, WA 98226
511	Geisinger Health Plan	100 North Academy Avenue Danville, PA 17822
512	Amerihealth 65	1901 Market Street Philadelphia, PA 19103
513	UnitedHealthCare Community Plan Dual Complete (formerly Unison Advantage) Termed 12/31/2013	PO Box 8207 Kingston, NY 12402
514	Keystone 65 Complete	1901 Market Street Philadelphia, PA 19103

Carrier Code	Carrier Name	Address
515	UPMC For Life	112 Washington Place Pittsburgh, PA 15219
516	CIGNA HealthSpring (formerly Bravo Health)	3601 O'Donnell Street Baltimore, MD 21224
517	Today's Options	4888 Loop Central Dr, Suite 900 Houston, TX 77081
518	United Healthcare Companies	13621 NW 12th Street Sunrise, FL 33323
519	Keystone SeniorBlue	2500 Elmerton Avenue Harrisburg, PA 17177
520	WellCare	8735 Henderson Road Tampa, FL 33634
521	Horizon Blue Cross Blue Shield of New Jersey	3 Penn Plaza East Newark, NJ 07105
522	Healthfirst Medicare Plan	25 Broadway, 9th Floor New York, NY 10004
527	Coventry Healthcare	3721 Tecport Drive Harrisburg, PA 17106
528	Universal Health Care	100 Central Avenue, Suite 200 Saint Petersburg, FL 33701
529	Citrus Health Care	5420 Bay Center Dr, Suite 250 Tampa, FL 33609
530	GHI Medicare Choice	441 Ninth Avenue New York, NY 10001
531	UniCare	PO Box 9154 Oxnard, CA 93031
532	Anthem Blue Cross/Blue Shield	4241 Irwin Simpson Road, OHO205-A037 Mason, OH 45040
533	Care Improvement Plus	250 West Pratt St, Suite 230 Baltimore, MD 21201
536	USACare	259 Monroe Ave Rochester, NY 14607

Carrier Code	Carrier Name	Address
537	HIP Health Plan of Greater New York	55 Water Street New York, NY 10041-8190
538	MD MedicareChoice	5501 West Waters Ave, Ste 401 Tampa, FL 33634
539	HealthMarkets Care Assured	9151 Blvd 26 North Richland Hills, TX 76180
542	CIGNA Medicare Access	900 Cottage Grove Road Hartford, CT 06152
543	Universal American	PO Box 742568 Houston, TX 77274
544	Keystone VIP Choice	PO Box 307 Linthicum, MD 21090-0307
545	Health Partners Medicare	901 Market Street, Suite 500 Philadelphia, PA 19107
598	Unlisted Medicare Advantage HMO's	
600	Medicare Part A	
700	Delta Dental of PA	One Delta Drive Mechanicsburg, PA 17055
701	Amalgamated Life Insurance Co.	730 Broadway New York, NY. 10003-9511
703	Allstate Insurance Co.	60 Allstate Plaza S. Northbrook, IL. 60062
704	Bankers Life & Casualty Co.	222 Merchandise Mart Plaza Chicago, IL. 60654
705	United Concordia	4401 Deer Path Road Harrisburg, PA 17110
706	CONSECO	11825 N Pennsylvania St Carmel, IN 46032
707	Combined Insurance Co. of America	1000 Milwaukee Ave Glenview, IL 60025

Carrier Code	Carrier Name	Address
708	Cigna	PO Box 182223 Chattanooga, TN 37422
709	Argus	PO Box 419019 Kansas City, MO 64141
710	Continental Casualty Insurance Co.	333 South Wabash Chicago, IL. 60604
711	American General	70 Pine Street New York, NY 10270
712	Eastern Life & Health Insurance Co.	25 Race Avenue Lancaster, PA 17608
713	AXA Equitable Life Insurance Co.	PO Box 1047 Charlotte, NC 28201
714	Inter-Co. Hospital Plan	720 Blair Mill Road Horsham, PA. 19044
715	Inter-Co. Phys. Service Plan	720 Blair Mill Rad Horsham, PA. 19044
716	John Hancock Mutual Life Insurance Co.	P.O. Box 111 Boston, MA. 02117
718	Life Insurance Co. North America	1601 Chestnut Street Philadelphia, PA. 19192
719	Lincoln Financial Group	8801 Indian Hills Drive Omaha, NE 68114
720	Mass Mutual Life Insurance Co.	1295 State Street Springfield, MA 01111
721	United Healthcare	P O Box 740800 Atlanta, GA 30374
722	Mutual of Omaha Insurance Co.	Mutual Of Omaha Plaza Omaha, NE. 68175
723	People Benefit Life Insurance Co.	Claims Dept. Valley Forge, PA. 19493
724	New York Life Insurance Co.	51 Madison Avenue New York, NY. 10010
725	Transamerica Occidental Insurance Co.	P.O. Box 2101 Los Angeles, CA. 90051-2101

Carrier Code	Carrier Name	Address
726	Phoenix Mutual Life Insurance Co.	PO Box 22012 Albany, NY 12201-2012
727	Provident Life/Accident Insurance Co.	Fountain Square Chattanooga, TN. 37402
728	Prudential Insurance Co. of America	751 Broad Street Newark, NJ 07102
730	Travelers Insurance	One Town Square MPB Hartford, CT 06183
731	National Association of Letter Carriers	20547 Waverly Court Ashburn, VA 20149
732	Washington National Insurance Co.	PO Box 2004 Carmel, IN 46032-3004
733	Express Scripts/Medco	100 Parsons Pond Drive Franklin Lake, NJ 07417
734	American Postal Workers Union	PO Box 967 Silver Spring, MD 20910
735	Accordia National	P.O. Box 3262 Charleston, WV 25332
736	Employers Health Insurance Co.	PO Box 14610 Lexington, KY 40512-4610
737	Jefferson-Pilot Life Insurance Co.	P.O. Box 21008 Greensboro, NC. 27420
738	Philadelphia American Life Ins. Co.	P.O. Box 4884 Houston, TX. 77210-4884
739	Protective Life Insurance Co.	2801 HWY 280 South Birmingham, AL 35223
740	Commercial Medigap	
741	AARP Medigap	PO Box 740819 Atlanta, GA 30374-0819
742	National Vision Administrators	P.O. Box 1981 East Hanover, NJ. 07936-0981
743	Express Scripts (use carrier 733)	Will be termed in the future: please use carrier 733

Carrier Code	Carrier Name	Address
744	PEBTF	150 S. 43rd Street, Suite 1 Harrisburg, PA. 17111-5700
745	National Pharmaceutical Services	P.O. Box 407 Boystown, NE. 68010
747	PCS	950 E. Shea Blvd. Scottsdale, AZ. 85260
749	Caremark	PO Box 686005 San Antonio, TX 78268-6005
750	Aetna	151 Farmington Avenue Hartford, CT 06156
752	Alliance Health Network	1700 Peach Street Erie, PA. 16501
753	Advantage Health Plan PA	121 Seventh Street Pittsburgh, PA. 15222-3408
755	Geisinger Health Plan	PO Box 8200 Danville, PA 17821-8200
757	HealthAmerica /Health Assurance	PO Box 7088 London, KY 40742
760	First Priority Health	19 N. Main Street Wilkes-Barre, PA. 18711
761	Keystone Health Plan Central	P.O. Box 898812 Camp Hill, PA. 17089-8812
762	Keystone Health Plan East	1901 Market Street Philadelphia, PA. 19103
763	Keystone Health Plan West	PO Box 898819 Camp Hill, PA 17089
765	Prudential Health Care Plan	P.O. Box 901 Horsham, PA. 19044
766	Healthnet of the Northeast	P.O. Box 14700 Lexington, KY 40512
772	HIP Health Plan of PA	6 Neshaminy Interplex Trevose, PA. 19053
774	UPMC Health Plan Inc	PO Box 2999 Pittsburgh, PA. 15230
775	Optimum Choice Inc of PA	PO Box 930 Frederick, MD 21705

Carrier Code	Carrier Name	Address
776	Philcare Health Systems	2005 Market Street Philadelphia, PA. 19103
778	Amerihealth HMO	1901 Market Street Philadelphia, PA 19103
779	Health Plans of PA	100 W Sproul Road - 3Rd Floor Springfield, PA 19064
780	Principal HealthCare of PA	2751 Centerville Road Wilmington, DE 19808
781	Avalon Health Ltd.	2500 Elmerton Avenue Harrisburg, PA 17110
783	Qualmed Plans For Health	1835 Market Street Philadelphia, PA 19103
784	Physicians Care HMO	651 East Park Drive, Suite 108 Harrisburg, PA 17111
798	Other HMO	
799	Commercial Insurance (Not Otherwise Listed)	
802	Workers' Compensation	
803	Black Lung Medical Benefits	
900	Patient Pay	
902	LTC Patient Pay	
903	Transfer Penalty	

Alphabetical Listing of Insurance Carriers:

Carrier Name	Carrier Code
AARP Medigap	741
Accordia National	735
Advantage Health Plan	753
Advantra (Medicare Advantage)	509
Aetna (Medicare Advantage)	505
Aetna	750
Aetna Better Health (PCO)	001
Alliance Health Network	752
Allstate Insurance Company	703
Amalgamated Life Insurance Co	701
American General Ins Co	711
American Postal Workers Union	734
Amerihealth HMO	778
AmeriHealth Connect (PCO)	009

Amerihealth 65	512
Carrier Name	**Carrier Code**
Anthem Blue Cross/Blue Shield (Medicare Advantage)	532
Argus	709
AXA Equitable Life Insurance Co.	713
Avalon Health LTD	781
Bankers Life & Casualty Co	704
Black Lung Medical Benefits	803
Blue Cross Medigap (out of state)	249
Blue Cross of Northeastern PA	203
Blue Cross Out-of-State	299
Blue Shield Medigap (out of state)	349
Blue Shield Medigap Security 65	340
Blue Shield Out-of-State	399
Capital Blue Cross SecureChoice (PCO)	002
Capital Blue Cross	202
Capital SeniorBlue (Medicare Advantage)	502

Care Improvement Plus (Medicare Advantage)	533
Carrier Name	**Carrier Code**
Caremark	749
Champus (Tricare & United Concordia)	400
Champus/VA	401
Cigna	708
CIGNA HealthSpring (formerly Bravo Health) (Medicare Advantage)	516
CIGNA Medicare Access (Medicare Advantage)	542
Citrus Health Care (Medicare Advantage)	529
Combined Insurance Company of America	707
Commercial Insurance (Carrier name not on list)	799
Commercial Medigap Ins. (Not otherwise listed)	740
Compensation	802
CONSECO	706
Continental Casualty Ins Co	710
Coventry Healthcare (Medicare Advantage)	527
Delta Dental of PA	700

Eastern Life & Health Insurance Co	712

Carrier Name	Carrier Code
Employers Health Insurance Co	736
Express Scripts/Medco	733
Express Scripts (use 733) (will be termed in the future)	743
First Priority Health	760
Freedom Blue (Medicare Advantage)	501
Gateway Health Plan Medicare Assured (Medicare Advantage)	506
Gateway Healthplus (PCO)	003
Geisinger Health Plan	755
Geisinger Health Plan (Medicare Advantage)	511
Geisinger Healthy Connect (PCO)	004
GHI Medicare Choice (Medicare Advantage)	530
HealthPartners Medicare	545
Health Partners Essential (PCO)	005
Health Plans of PA	779
HealthAmerica Advantra/Advantra Gold/Advantra Silver (Medicare Advantage)	509

Carrier Name	Carrier Code
HealthAmerica/Health Assurance	757
Healthfirst Medicare Plan (Medicare Advantage)	522
HealthMarkets Care Assured (Medicare Advantage)	539
Healthnet of the Northeast	766
Highmark Blue Cross/Blue Shield	201
Highmark Blue Shield	300
Highmark Service Company	244
HIP Health Plan of Greater New York (Medicare Advantage)	537
HIP Health Plan of PA	772
Horizon BC/BS of New Jersey (Medicare Advantage)	521
Humana (Medicare Advantage)	507
Independence Blue Cross	200
Inter-County Hosp Plan	714

Inter-County Phys Serv Plan	715
Carrier Name	**Carrier Code**
Jefferson-Pilot Life Ins Co	737
John Hancock Mutual Life Ins Co	716
Keystone 65 Complete (Medicare Advantage)	514
Keystone Health Plan Central	761
Keystone Health Plan East	762
Keystone Health Plan West	763
Keystone SeniorBlue (Medicare Advantage)	519
Keystone VIP Choice	544
Keystone Connect (PCO)	006
Life Insurance Co North America	718
Lincoln National Life Ins Co	719
Long Term Care Patient Pay	902
MD MedicareChoice (Medicare Advantage)	538

Massachusetts Mutual Life Ins Co	720
Medicare A	600
Carrier Name	**Carrier Code**
Medicare B	100
Mutual of Omaha Ins Co	722
National Association of Letter Carriers	731
National Pharmaceutical Svc	745
National Vision Administrators	742
New York Life Insurance Co	724
Optimum Choice Inc of PA	775
Other HMO(Must enter name/address)	798
Patient Pay	900
PCS	747
PEBTF(Major Med /Medigap)	744
People Benefit Life Insurance Company	723
Personal Choice 65/Keystone 65 (Medicare Advantage)	500

Carrier Name	Carrier Code
Philadelphia American Life Ins	738
Philcare Health Systems	776
Carrier Name	**Carrier Code**
Phoenix Mutual Life Ins Co	726
Physicians Care HMO	784
Principal Health Care of PA	780
Protective Life Ins Co	739
Provident Life & Accident Ins	727
Prudential Health Care Plan	765
Prudential Ins Co of America	728
Qualmed Plans for Health	783
Security 65 Capital Plan	242
Security 65 Highmark Plan	241
Security 65 Independence Plan	240
Security 65 Northeast Plan	243
Security Blue (Medicare Advantage)	504
Sterling Option 1 (Medicare Advantage)	510

Today's Option (Medicare Advantage)	517
Transamerica Occidental Ins Co	725
Transfer Penalty	903
Carrier Name	**Carrier Code**
Travelers Insurance	730
Tricare	400
UniCare (Medicare Advantage)	531
Unison Advantage (Medicare Advantage)	513
United Concordia	705
United Health Care	721
United HealthCare Companies (Medicare Advantage)	518
United Healthcare Community Plan for Adults (PCO)	007
Universal American (Medicare Advantage)	543
Universal Health Care (Medicare Advantage)	528
UPMC For Life (Medicare Advantage)	515
UPMC Health Plan	774
UPMC for Best Health (PCO)	008

USACare (Medicare Advantage)	536
Washington National Ins Co	732
WellCare (Medicare Advantage)	520