**Conduent EDI Solutions, Inc.** 



# Conduent EDI Solutions Inc. Eligibility Gateway 270/271 Payer Guide Commercial

Version 4010

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# Revisions

Date	Changes
3/31/11	Added payer Carpenter's Health and Welfare Trust of St Louis 10555
3/31/11	Removed payer Neighborhood Health Partnership 00422- payer deactivated and routed to UHC RV 00335
3/31/11	Modified MMSI 10144- added 3 subscriber and 3 dependent searches. Added NPI support for Information Receiver. Removed group number and changed disclaimer
3/31/11	Modified AARP 10431- added subscriber gender code row to 2100c loop
3/31/11	Modified Ameritas Group- added subscriber gender code row to 2100c loop and dependent gender code row to 2100d loop. Changed to "r" requirement for service type code
3/31/11	Added payer BMC HealthNet Plan 10556
3/31/11	Modified Amerigroup AMGRP- added additional subscriber search types and NPI
3/31/11	Modified Continental General 10454- corrected list of service type codes, formerly 30. New codes 1,30,33,35,48,50,52,86,88,98,A4,AL
3/31/11	Added payer Antares – 10559
3/31/11	Added payer Absolute Total Care- 10560
3/31/11	Added note to United Healthcare Plan of River Valley 00335- migration of Neighborhood Health Partnership
3/31/11	Added payer Advantage by Bridgeway Health Solutions- 10561
3/31/11	Added payer Advantage by Buckeye Community Health Plan- 10562
3/31/11	Added payer Advantage by Managed Health Services- 10563
3/31/11	Added payer Advantage by Superior Health Plan- 10564
3/31/11	Added payers Cenpatico Arizona (10567), Florida (10568), Georgia (10569), Indiana (10570), Kansas (10571), Ohio (10572), South Carolina (10573)
3/31/11	Added payer Buckeye Community Health- 10566
3/31/11	Added payer Bridgeway Arizona- 10565
4/28/11	Corrected search option 2 for Sunshine State (10451)
5/25/11	Modified Fallon Community Health Plan PayerID 00272-Added NPI and updated Subscriber S2 search type.
5/25/11	Deactivated Payer Recall Systems - SRT Administrators payerID 10243
5/25/11	Deactivated - CHC Care of South Carolina Payer ID 10420
5/25/11	Added New Payer- VNS CHOICE-10600
5/25/11	Added New Payer - Union Pacific Railroad Employees Health Systems-10599
5/25/11	Added New Payer - MDWise Hoosier Alliance-10598
5/25/11	Added New Payer- HEALTHe Exchange-10597
5/25/11	Added New Payer - American National Life Insurance Company of Texas-10596
5/25/11	Added New payer- American National Insurance Company-10595
5/25/11	Added New Payer - Affinity Health Plan-PayerID 10594
5/25/11	Added New Payer - Standard Life and Accident Insurance Company-PayerID 10593
5/25/11	Added New Payer -Superior HealthPlan Texas-PayerID 10592
5/25/11	Added New payer- Special Agents Mutual Benefit Association-Payer ID 10591
5/25/11	Added new payer- Peach State Health Plan -Payer ID 10590
5/25/11	Added new Payer DakotaCare Payer ID 10577
5/25/11	Added new payer – Celticare- PayerID 10589
5/25/11	Added new Payer -Cenpatico – Massachusetts-PayerID 10588
5/25/11	Added new Payer-Managed Health Services Indiana-PayerID 10586

Date	Changes							
5/25/11	Added new Payer-Managed Health Services Wisconsin-PayerID 10587							
5/25/11	Added new Payer-Integrated Mental Health Services-PayerID 10585							
5/25/11	Added new payer-Group Practice AffiliatesPayerID 10583							
5/25/11	Re-Activated Payer - Today's Option-10505							
5/25/11	Added New Payer - Tribute/SelectCare of Oklahoma-10607							
5/25/11	Added New Payer - Today's Health-10606							
5/25/11	Added New Payer - TexanPlus North Texas Area-10604							
5/25/11	Added New Payer - TexanPlus Southeast Texas Area-10605							
5/25/11	Added New Payer - Generations Healthcare-10603							
5/25/11	Added New Payer - Fresenius Medical Care-10602							
5/25/11	Added New Payer - Essence Healthcare -10601							
5/25/11	Added New Payer – Deseret Mutual (DMBA), 10578							
5/25/11	Added New Payer – Public Employees Health Plan (PEHP) - 10574							
5/25/11	Added New Payer – Select Health Utah – 10575							
9/6/2011	Added New payer Florida Health Care Plans-10615							
9/6/2011	Added note to Connecticare-10303 regarding Member ID's							
9/6/2011	Added Payer CHC – CoventryCares-10614							
9/6/2011	Added Payer Group Health Cooperative - 10608							
9/6/2011	Added payer Cook Children's Health Plan 10610							
9/6/2011	Added payer Geisinger Health Plan 10611							
9/6/2011	Added payer Geisinger Health Plan-Gold 10612							
9/6/2011	Updated subscriber search type-Community Health Plan of Washington (CHPW)-2641							
9/6/2011	Added payer Windsor Medicare Extra 10576							
9/6/2011	Added note to member ID changes in subscriber loop-Tricare TRICR							
9/6/2011	Removed Dependent search type and update subscriber search type-MVP HealthCare 00432							
10/18/11	Re-Activated Payer – Texas CHIP-10185							
10/18/11	Removed all PacifiCare payers and rerouted them through UHC-00112							
10/18/11	Updated MemberID only search notes for HealthNet National (10385)							
10/18/11	Added Freedom Blue (10502) to the Payer Downtime section							
10/18/11	Added Payer Emblem Health – 10616							
10/18/11	Added list of acceptable service types for Essence Health care-10601							
10/18/11	Changed payer name from Nationwide Health Plan to Nationwide Specialty Health-00086							
10/18/11	Added new payer Administrative Services, Inc-payer ID 10619							
12/16/11	Removed Payer Passport Advantage – 4957. We are no longer able to guarantee that the data we are							
10/10/11	accessing is as current or correct as our standards demand.							
12/16/11	Updated Texas Chip (10185) to accepting NPI							
12/16/11	Updated Medica (00404) D1-dependant search type							
12/16/11	Modified NEHEN-Neighborhood Health Plans-00000002395 search types added dependent search type							
12/16/11	Modified NEHEN-Tufts Associated Health Plan-00000002394 search types							
12/16/11	Modified NEHEN-Harvard Pilgrim Health-0000002393 search types							
2/3/2012	Added payer Kentucky Spirit Health Plan – 10620							
3/27/12	Added update STC for Health Net National -10385							
3/27/12	Updated HealthFirst NJ (10438) and NY (00240)- new search option criteria							
3/30/12	Removed payer Mercy Care Health Plan 10465. Transactions now need to be sent to either Coventry Group Health Plan 00184 or Coventry Missouri 10449							
6/27/12	Removed the following payers as they are now listed in the 5010 guide- AARP-10431, Aetna-AETNA, American Postal Workers Union-00360, AmeriHealth Mercy-2843, Ameritas Group-00425, 00426,							

Date	Changes
	00428, 00427, 00429, 00430, Assurant Health- 00254, 00252, 00253, Asuris- 10529, Aultcare- 10472, AvMed- AVMED, BMC Health- 10556, Capital Physicians District- 10458, Cigna- 00001, CO Access- 0000002356, Cook Children's Health Plan- 10610, CoreSource- FMH 00204 and Little Rock 00205, Coventry- all, Denver Health Plan- 0000001321, Family Care- 10427, Federated Insurance- 00262, Florida Health Care- 10615, Florida Hospital Healthcare System- 10333, Freedom Blue- 10502, Fresenius Medical Care- 10620, Geisinger- 10611, Geisinger Gold- 10612, Generations Healthcare- 10603, Gilsbar- 10509, Health Alliance Plan- 00000002077, Healthcare Solutions Group- 10463, Health Choice AZ- 00329, HealthFirst NJ- 10438 and NY- 00240, HealthEase- 10510, HealthEase Kids- 10511, HealthNet National- 10385, HealthPartners MN-10484, HealthPartners PHL- 00288, Health Markets- 00207, 00248, 00206, 00208, Horizon NJ Health- 2840, Humana- 00041, John Hopkins- 0000002613, Kaiser Foundation Plan of CO-00277, HI-00278, Mid Atlantic States-00276, OH-00280 and the Northwest-00279, Kaiser Permanente of GA-00281, S CA-00283 and N CA-00282, Keystone Mercy- 2232, Medica-00404, Medical Mutual of OH-00211, Medicare-CMS, MMSI (Mayo)-10144, Mutual of Omaha- 10382, National Assoc of Letter Carriers- 00214, NEHEN Harvard Pilgrim-00000002393, Ohana- 10515, Optima/Sentara- 10477, Oxford Health Plan- 00016, Pacific Source Health Plan- 2597, Passport Health- 2841, Physicians Mutual Insurance- 00287, PreferredOne- 00371, Principal Financial- 00144, 00143, Recall Systems- all, Select Health SC- 10520, TexanPlus North Texas Area- 10604, TexanPlus Southeast Texas Area- 10605, Today's Health- 10666, Today's Options- 10505, Tribute/Select Care of OK- 10607, Trustmark- 00233, UMR (Wausau)- 10501, Unicare- UCARE, United Healthcare- 00112, VA Fee Basis- 00231, VIVA Health- 10468, Wellcare Health Plans- 10488, Windsor Medicare Extra- 10576
7/5/2012	<ul> <li>Health Plans- 10488, Windsor Medicare Extra- 10576</li> <li>Removed the following payers as they are now listed in the 5010 guide- Continental General Insurance Company 10454, Central Reserve Life Insurance Company 10450, American Family Insurance Group-Medicare Supplement and PPO 10487, American Republic Insurance Company 00224, Cooperative Benefit Administrators 00223, World Insurance (ARIC) 10386, Molina WI 10678, TX 10391, OH 00445, NM 10146, MO 10523, MI 00226, FL 10445, CA 00222, Sanford Health Plan 10533, Unity Health Plans 0000000780, UCare of Minnesota 2596, SummaCare Health Plan 0000002514, Santa Clara Valley Health and Hospital 0000002805, HealthPlus of Michigan 1311, NEHEN Neighborhood Health Plans 00000002395, Three Rivers Health Plans (Unison Health Plan) 00198, Select Health Utah 10575, Deseret Mutual (DMBA) 10578, Better Health Plans 00199</li> </ul>
8/1/2012	Removed the following payers as they are now listed in the 5010 guide- Affinity Health Plan 10594, Priority Health 10490, Significa Benefit Services 00191, USAA Life Insurance 10195, Independence Administrators 10417, AmeriHealth Administrators 10416, UPMC Tristate 00000001054, Group Health Cooperative 10608
8/1/2012	Updated downtimes for GEHA – 10394, Medica – 00404, Cigna – 00001, UHC – 00112, Oxford – 00016, Qualchoice – 10553, MAMSI- MAMSI, AARP – 10431, Great West – GRWST
8/1/2012	Removed Columbia United Providers 2639- no longer available
8/1/2012	Removed Vytra 10407- absorbed into Emblem Health 10616
8/27/12	Updated Fidelis 10459- updated eligibility date options
8/27/12	Deactivated Peach State Health Plan 10590
8/27/12	Corrected Union Pacific Railroad payer ID to 10599
8/27/12	Added payer Standard Life and Accident 10593- never got added to guide when payer was added to list in 2011
8/27/2012	Removed the following payers as they are now listed in the 5010 guide- Managed Health Services WI 10587, Kentucky Spirit Health Plan 10620, Cenpatico WI 10634, TX 10633, SC 10573, OH 10572, MA 10588, KY 10632, KS 10571, IN 10570, IL 10631, GA 10569, FL 10568, AZ 10567, CeltiCare 10589, Buckeye Community Health 10566, Bridgeway Arizona 10565, Advantage by Superior Health Plan 10564, Advantage by Managed Health Services 10563, Advantage by Buckeye Community Health Plan 10562, Advantage by Bridgeway Health Solutions 10561, Absolute Total Care 10560
9/28/12	Removed the following payers as they are now listed in the 5010 guide- CarePlus Health plan 10056, Fidelis Care New York 10459, Great West 10089, University Physicians Healthcare Group (AZ) 10439, University Family Care (AZ) 10194, University Care Advantage (AZ) 10433, Maricopa Health Plan (AZ).
11/2/12	Removed the following payers as they are now listed in the 5010 guide-Scott & White Health Plan 10360, Superior Health Plan Texas 10592, MAMSI Health Plan MAMSI, Harmony Health Plan 10514
11/2/12	Deactivated PHCS Savility Payers – 10471
12/19/13	Removed the following payers due to deactivation: Director's Guild 00259, Preferred Health 00263, Health Net – Medi-Cal 1057, San Francisco Health Plan 1059, CareFirst – Federal Employee Program

Date	Changes						
	2744, Texas CHIP 10185, Personal Insurance Administrators (PIA) – 10492, PrimeWest Health Systems 10494, Carpenters Health and Welfare 10555, Humana of Florida AV297						
1/30/2014	Removed the following payer as they are now listed in the 5010 guide Arizona Physicians IPA (APIPA)						
1/30/2014	Removed the following payer as they are now listed in the 5010 guide SPJST Medicare Supplement 10546						
1/30/2014	Removed the following payer as they are now listed in the 5010 guide Kitsap Physician Services 10341.						
1/30/2014	Deactivated, the following AMC payers from the guide they are removed from system effective January 20, 2014:						
	AMC - Alaska Electrical Health & Welfare Fund-10008 AMC - American General Life and Accident-10009 AMC - Health Future-10010 AMC - Poly America-10012 AMC - Touchstone-10013 AMC - Touchstone PSO-10014						
0 10 0 10 0 1 1	They were also removed from the payer list.						
2/28/2014	Deactivated payer American Community Mutual – 00433						
2/28/2014	Removed the following payer as they are now listed in the 5010 guide Mississippi State Employees and Teachers – 10142						
2/28/2014	Added new payer Key Benefits Administrators (IN) – 10754						
3/31/2014	Added new payer Medigold Health Plans – 10800						
6/30/2014	Removed payer Elder Health (Bravo Health) – 10399 as they are now listed in the 5010 guide						
7/31/2014	Deactivated the following payers: Cariten Healthcare – 10058 Writer's Guild – 10203						
7/31/2014	Removed payer Michigan MIChild – 2949 as they are now listed in the 5010 guide as Michigan MIChild – 10138						
7/31/2014	Removed the following payer as they are now listed in the 5010 guide United Healthcare Plan of River Valley– 00335						
10/31/2014	Deactivated payer Lovelace Health Plan – 10119						
1/31/2015	Removed payer CareSource of Ohio – 994 they are now listed in the 5010 guide						
1/31/2015	Removed payers they are now listed in the 5010 guide: CoreSource (MD/PA/IL/NC/IN/AZ/MN) – 00236 and CoreSource (OH) – 00236:						
4/15/2015	Removed Senior Care Action Network (SCAN) HMO – 00350 as they are now listed in the 5010 guide.						
4/23/2015	Removed Phoenix Health Plan– Payer ID 10166. Real time services no longer offered.						
5/5/2015	Removed Jackson Memorial Hospital Health Plan – Payer ID 00336						
5/5/2015	Made temporary revision to Rocky Mountain Health Plan – 00347						
	<b>Note:</b> Our payer intermediary will be transitioning this payer to a new connection with an estimated implementation date of 06/30/2015. As a result, we will not be accepting any new Rocky <b>Mountain Health Plan enrollments at this time.</b>						
10/16/2015	Deactivated Great American Life Assurance Co. Medicare Supp – Payer ID 10542						
3/9/2016	Removed the following payers as they are now listed in the 5010 guide: Best Choice Health Plan – 0000000820 Central Reserve Life Ins Co Medicare Supp – 10539 CHAMPVA/Spina Bifida/Children of Woment Vietnam Vets – 00232 Community Health Plan of Washington (CHPW) – 2641 ConnectCare – 10303 Essence Healthcare – 10601 Great American Life Insurance Co Medicare Supp – 10543						
	Group Practice Affiliates – 10583 Health Plan of San Mateo – 4758						

Date	Changes
	HealthSpring – 10464 MDWise Hoosier Alliance – 10598 MedCost Benefit Services – MEDST Molina Healthcare of Washington – 00228 MVP Health Care (New York) – 00432 Providence Health Plan – 2598 Public Employees Health Plan (PEHP) – 10574 Student Insurance – 00290 Sunshine State Health Plan – 10451 TRICARE – TRICR Western Health Advantage - 1043
3/9/2016	Removed the following payers as they have been moved to the 5010 guide: Aetna Long Term Care – 10397 AFLAC – Dental – 10398 American Retirement Life Ins Co Medicare Supp – 10538 AmeriChoice of New Jersey (Commerical) – 00091 Bluegrass Family Health – 10429 Central States Fund – 10486 Community Health First Medicare Advantage – 10421 Continental General Ins Co Medicare Supp – 10540 DakotaCare – 10577 Emblem Health – 10616 Government Employees Hospital Association (GEHA) – 10394 Hometown Health – 3597 Loyal American Life Insurance Co Medicare SUpp – 10544 Managed Health Services Indiana – 10586 MetLife Dental Family – 10134 NEHEN – Tuffs Associated Health Plan – 0000002394 NovaSys Health – 10466 Pittman and Associates – 10408 Provident American Life & Health Ins Co Medicare Supp – 10545 QualChoice – 10553 United Teacher Assoc Insurance Co Medicare Supp – 10547 VNS Choice – 10600 WEA Trust – 10554 WEB TPA – 10532 Wells Fargo Third Party Adminsirtators, Inc. – 10003
3/9/2016	Updated Maintenance Schedule to assure the list of payers matches the contents Remove payers that are now listed in the 5010 guide from content and Payer Maintenance Schedule
3/14/2016	Correct Payer ID numbers that are incorrect
05/05/2016	Updated search options for Key Benefit Administrators(IN) – 10754
05/05/2016	Payer 1035 – Partnership Health Plan of California migrated from 4010 to 5010. Removed the payer from this guide and added in 5010 guide.
05/05/2016	Updated search option for Mercy Care Plan (Arizona) 00340
05/23/2016	Updated search option for Mercy Care Plan (Arizona) 00340
07/08/2016	The payer Aftra Health Fund(00258) has be removed from the companion guide as it is no longer supported.
08/05/2016	Removed payer Special Agents Mutual Benefit Association – 10591
12/30/2016	Removed payer Fallan community health plan from 4010 as the payer migrated to 5010. Removed the payer from this guide and added in 5010 guide.
12/30/2016	Updated payer name - CSA Fraternal Life Medicare Supplement – 10541
12/30/2016	Rebranding to Conduent applied
05/10/2017	Updated search options for Inter Valley Health Plan – 1052
06/13/2017	Removed payer Nationwide Specialty Health-00086

Date	Changes
02/16/2018	Updated search option for Universal Care of California - 1054
02/16/2018	Removed payer San Joaquin Health Plan – 1046 and migrated to 5010 guide
06/15/2018	Removed payer Universal Care of California- 1054
06/15/2018	Added note for Inland Empire Health
04/12/2019	Removed payer Best Life and Health- 00257, Moved payer HEALTHe Exchange-10597 to 5010 guide
07/23/2021	Updated search options for Payer Integrated Mental Health Services - 10585
07/23/2021	Removed Inland Empire Health – 1081, now a 5010 payer
04/10/2024	Updated search options: American National Insurance - 10595 and American National Life Insurance Company of Texas - 10596
04/10/2024	Added payer notation: QuikTrip Corporation - 10508
04/10/2024	Removed payer Inter Valley Health Plan - 1052



#### Administrative Services, Inc. – 10619

Search Options							
Option	Element 1	Element 2	Element 3	Element 4			
Subscriber S1	Member ID						
Subscriber S2	SSN	Date of Birth					
Subscriber S3	Last Name	First Name	Date of Birth				
Subscriber S4	Member ID	Last Name	First Name	Date of Birth			

Search Options							
Option	Element 1	Element 2	Element 3	Element 4			
Subscriber S1	Member ID	Last Name	First Name	Date of Birth			
Dependent D1	Sub: Member ID	Dep: Last Name	Dep: First Name	Dep: Date of Birth			

Eligibility Date Options						
Past	Future	Range				
No	No	No				

Element Nam	ne	Use	Min	Max	Туре	Codes and Values	Element	Notes	
Payer	Payer Information Source Level: 2100A								
Payer ID		R	5	5	AN	10619	[NM108=PI] <b>NM109</b>		
Provider		1	1		,	I	nformation Re	ceiver Level: 2100B	
Federal Tax II	D	S	9	9	AN		[NM108=FI] <b>NM109</b>		
NPI		S	10	10	N		[NM108=XX] NM109		
Subscriber			•				Subs	criber Level: 2100C	
Last Name		S3,S4	1	35	AN		NM103		
First Name		S3,S4	1	25	AN		NM104		
Member ID		S1,S4	11	11	AN		[NM108=MI] <b>NM109</b>		
SSN		S2	9	9	N		[REF01=SY] <b>REF02</b>		
Date of Birth   S2,S3,S4   8   8   DT   CCYYMMDD   DMG02									
Service Type Code (		0	1	2	ID	30	EQ01		
Usage:	R=Req	uired, O=O	ptional	, S=Sitı	uational				
Data	a N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code								

# American National Insurance Company – 10595

Search Options							
Option	Element 1	Element 2	Element 3	Element 4			
Subscriber S4	Member ID	Last Name	First Name	Date of Birth			
Dependent D1	Sub: Member ID	Dep: Last Name	Dep: First Name	Dep: Date of Birth			

Eligibility Date Options							
Past	Future	Range					
No	No	No					

Element Name	e Use	Min	Max	Туре	Codes and Values	Element	Notes		
Payer	Payer Information Source Level: 2100A								
Payer ID	R	5	5	AN	10595	[NM108=PI] <b>NM109</b>			
Provider						Information Re	ceiver Level: 2100B		
Federal Tax ID	S	9	9	N		[NM108=FI] <b>NM109</b>			
NPI	S	10	10	N		[NM108=XX] NM109			
Subscriber		1		1		Subs	criber Level: 2100C		
Last Name	S2, S3, S4	1	35	AN		NM103			
First Name	S2, S3, S4	1	25	AN		NM104			
Member ID	S1, S2, S4, D1	2	80	AN		[NM108=MI] <b>NM109</b>			
Date of Birth	S1, S3, S4	8	8	DT	CCYYMMDD	DMG02			
Service Type	0	1	2	ID	30	EQ01			
Dependent						Depe	ndent Level: 2100D		
First Name	D1	1	25	AN		NM104			
Last Name	D1	1	35	AN		NM103			
Date of Birth	D1	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
	=Required, O=	Optior	nal, S=	Situatio	nal	·	_		
Data N	=Numeric, AN	=Alpha	numer	ric, DT=	Date Format, ID=Identific	ation Code			

#### American National Life Insurance Company of Texas – 10596

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Member ID	Last Name	First Name	Date of Birth				
Dependent D1	Sub: Member ID	Dep: Last Name	Dep: First Name	Dep: Date of Birth				

Eligibility Date Options						
Past	Future	Range				
No	No	No				

Element Nam	e Use	Min	Max	Туре	Codes and Values	Element	Notes		
Payer	Payer Information Source Level: 2100A								
Payer ID	R	5	5	AN	10596	[NM108=PI] <b>NM109</b>			
Provider				1		Information Red	ceiver Level: 2100B		
Federal Tax I	) S	9	9	N		[NM108=FI] <b>NM109</b>			
NPI	S	10	10	N		[NM108=XX] <b>NM109</b>			
Subscriber				1		Subs	criber Level: 2100C		
Last Name	S1	1	35	AN		NM103			
First Name	S1	1	25	AN		NM104			
Member ID	S1,D1	2	80	AN		[NM108=MI] <b>NM109</b>			
Date of Birth	S1	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
Dependent			1	1		Depe	ndent Level: 2100D		
First Name	D1	1	25	AN		NM104			
Last Name	D1	1	35	AN		NM103			
Date of Birth	D1	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
	Required, O	Optior=	al, S=	Situatio	nal	1			
Data N	=Numeric, AN	l=Alpha	numer	ic, DT=	Date Format, ID=Identific	ation Code			

## Community Care of Oklahoma – 10066

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Member ID	Date of Birth						
Subscriber S2	Member ID	Last Name	First Name					
Subscriber S3	Last Name	First Name	Date of Birth					
Dependent D1	Sub: Member ID	Dep: Date of Birth						
Dependent D2	Sub: Member ID	Dep: Last Name	Dep: First Name					
Dependent D3	Dep: Last Name	Dep: First Name	Dep: Date of Birth					

Eligibility Date Options						
Past	Future	Range				
No	No	No				

**Disclaimer**: Verification of benefits or eligibility is not a guarantee of payment. Payment can only be made after the claim has been received and reviewed in regards to eligibility, benefits, medical necessity, and other limitations and/or exclusions.

Element Name	e Use	Min	Max	Туре	Codes and Values	Element	Notes		
Payer	Payer Information Source Level: 2100A								
Payer ID	R	5	5	AN	10066	[NM108=PI] <b>NM109</b>			
Provider				•	Inf	ormation Reco	eiver Level: 2100B		
Federal Tax ID	R	9	9	N		[NM108=FI] <b>NM109</b>			
NPI	S	10	10	N		[NM108=XX] NM109			
Subscriber				•		Subsci	riber Level: 2100C		
Last Name	S2,S3	1	35	AN		NM103			
First Name	S2,S3	1	25	AN		NM104			
Member ID	S1,S2,D1,D2	2	80	AN		[NM108=MI] <b>NM109</b>			
Group Number	0	1	30	AN		[REF1=6P] <b>REF02</b>			
Date of Birth	S1,S3,D1,D3	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
Usage: R=	Required, O=Opt	ional,	S=Situ	ational					
Data N=	Numeric, AN=Alp	hanur	neric,	DT=Dat	e Format, ID=Identification (	Code			

#### Integrated Mental Health Services – 10585

Search Options							
Option	Element 1	Element 2	Element 3				
Subscriber S1	Member ID	Last Name	First Name	Date of Birth			

Eligibility Date Options							
Past	Future	Range					
No	No	No					

Element Name	Use	Min	Мах	Туре	Codes and Values	Element	Notes		
Payer	Payer Information Source Level: 2100A								
Payer ID	R	5	5	AN	10585	[NM108=PI] <b>NM109</b>			
Provider	-				I	nformation Red	ceiver Level: 2100B		
Federal Tax ID	S	9	9	N		[NM108=FI] <b>NM109</b>	Tax ID or NPI required		
NPI	S	10	10	N		[NM108=XX] NM109			
Subscriber	1	1				Subs	criber Level: 2100C		
Last Name	S1	1	35	AN		NM103			
First Name	S1	1	25	AN		NM104			
Member ID	S1	2	80	AN		[NM108=MI] <b>NM109</b>			
Date of Birth	S1	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
Usage: R=Re	quired,	O=Op	tional,	S=Situa	tional	,			
Data N=Nu	meric,	AN=AI	phanu	neric, D	T=Date Format, ID=Identificatio	n Code			

## Key Benefits Administrators (IN) – 10754

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Member ID	Date of Birth						
Subscriber S2	Member ID	Last Name	First Name					
Subscriber S3	SSN	Date of Birth						
Subscriber S4	Last Name	First Name	Date of Birth					
Subscriber S5	Member ID	Last Name	First Name	Date of Birth				
Dependent D1	Subscriber Member ID	Dep. Date of Birth						
Dependent D2	Subscriber Member ID	Dep. Last Name	Dep. First Name					
Dependent D3	Dep. SSN	Dep. Date of Birth						
Dependent D4	Dep. Last Name	Dep. First Name	Dep. Date of Birth					
Dependent D5	Subscriber Member ID	Dep. Last Name	Dep. First Name	Dep. Date of Birth				

Eligibility Date Options							
Past	Future	Range					
No	No	No					

Element Name	Use	Min	Max	Туре	Codes and Values	Element	Notes		
Payer Information Source Level: 2100									
Payer ID	R	5	5	AN	10754	[NM108=PI] <b>NM109</b>			
Provider			•		Inf	ormation Recei	ver Level: 2100B		
Provider ID	S	2	80	N		[NM108=SV] NM109			
NPI	S	10	10	N		[NM108=XX] NM109			
Subscriber			1	1	1	Subscri	ber Level: 2100C		
Last Name	S2,S4,S5	1	35	AN		NM103			
First Name	S2,S4,S5	1	25	AN		NM104			
Member ID	S1,S2,S5,D1,D2,D5	2	80	AN		[NM108=MI] <b>NM109</b>			
Date of Birth	S4	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	0	1	2	ID	30	EQ01			
Dependent						Depend	ent Level: 2100D		
Last Name	D2,D4,D5	1	35	AN		NM103			
First Name	D2,D4,D5	1	25	AN		NM104			
Date of Birth	D1,D3,D4,D5	8	8	DT	CCYYMMDD	DMG02			

Element Name		Use	Min	Max	Туре	Codes and Values	Element	Notes	
Service T Code	уре	0	1	2	ID	30	EQ01		
Usage:	Usage: R=Required, O=Optional, S=Situational								
Data	N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code								

## Medigold Health Plans – 10800

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Last Name	First Name	Member ID	Date of Birth				

Eligibility Date Options							
Past	Future	Range					
1 year	30 days	No					

Element Name	Use	Min	Max	Туре	Codes and Values	Element	Notes			
Payer	Payer Information Source Level: 2100A									
Payer ID	R	5	5	AN	10800	[NM108=PI] <b>NM109</b>				
Provider	<b>I</b>	-1	1	1		Information Re	eceiver Level: 2100B			
Provider ID	R	2	9	N		[NM108=SV] NM109				
Subscriber	<b>I</b>	-1		1		Sub	scriber Level: 2100C			
Last Name	S2	1	35	AN		NM103				
First Name	S2	1	25	AN		NM104				
Member ID	S1	2	80	AN		[NM108=MI] <b>NM109</b>				
Date of Birth	S2	8	8	DT	CCYYMMDD	DMG02				
Service Type Code	e 0	1	2	ID	30	EQ01				
Usage: R=F	Required, O	=Optior	nal, S=S	ituationa	al de la companya de		1			
Data Type: N=N										

## Metropolitan Health Plan (MHP) – 2548

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Member ID	Last Name	First Name	Date of Birth				
Subscriber S2	Member ID	Date of Birth						
Subscriber S3	Member ID	Last Name	Date of Birth					
Subscriber S4	Member ID	First Name	Date of Birth					
Subscriber S5	Last Name	First Name	Date of Birth					

Eligibility Date Options						
Past	Future	Range				
No	No	No				

**Disclaimer**: Verification of benefits or eligibility is not a guarantee of payment. Payment can only be made after the claim has been received and reviewed in regards to eligibility, benefits, medical necessity, and other limitations and/or exclusions.

Element Name	Use	Min	Max	Туре	Codes and Values	Element	Notes		
Payer	Payer Information Source Level: 2100A								
Payer ID	R	5	5	AN	2548	[NM108=PI] <b>NM109</b>			
Provider	·					Information Re	eceiver Level: 2100B		
NPI	R	10	10	N		[NM108=XX] NM109			
Subscriber						Sub	scriber Level: 2100C		
Last Name	S1	1	35	AN		NM103			
First Name	S1	1	25	AN		NM104			
Member ID	S1	2	80	AN		[NM108=MI] <b>NM109</b>			
Group Number	0	9	9	N		[REF01=6P] <b>REF02</b>			
Date of Birth	S1	8	8	DT	CCYYMMDD	DMG02			
Service Type Code	• 0	1	2	ID	30	EQ01			
Usage: R=R	equired, O	=Optior	nal, S=S	ituationa	al		·		
Data Type: N=N	ata Type: N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code								

# Partners National Health Plans of NC – 10369

Search Options								
Option	Element 1	Element 2	Element 3	Element 4				
Subscriber S1	Member ID	Last Name	First Name					
Subscriber S2	Last Name	First Name	Date of Birth					

Eligibility Date Options							
Past	Future	Range					
1 year	No	No					

Element Name	Use	Min	Мах	Туре	Codes and Values	Element	Notes			
Payer	Payer Information Source Level: 2100A									
Payer ID	R	5	5	AN	10369	[NM108=PI] <b>NM109</b>				
Provider	-					Information Re	eceiver Level: 2100B			
NPI/Federal Tax ID	R	10	10	N		[NM108=XX] NM109	National Provider ID if NM108=XX. Federal Tax ID if			
							NM108=FI.			
Subscriber						Sub	scriber Level: 2100C			
Last Name	S1, S2	1	35	AN		NM103				
First Name	S1, S2	1	25	AN		NM104				
Member ID	S1	2	80	AN		[NM108=MI] <b>NM109</b>				
Date of Birth	S2	8	8	DT	CCYYMMDD	DMG02				
Service Type Code	0	1	2	ID	30	EQ01				
-	equired, O=	-								
Data Type: N=Nu	ta Type: N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code									

## QuikTrip Corporation – 10508

Search Options						
Option	Element 1	Element 2	Element 3	Element 4		
Subscriber S1	Member ID	Date of Birth				
Subscriber S2	Member ID					
Subscriber S3	Member SSN	Date of Birth				
Subscriber S4	Last Name	First Name	Date of Birth			
Subscriber S5	Member ID	Last Name	First Name	Date of Birth		
Dependent D1	Sub: Member ID	Dep: Date of Birth				
Dependent D2	Sub: Member ID	Dep : Last Name	Dep : First Name			
Dependent D3	Dep: SSN	Dep: Date of Birth				
Dependent D4	Dep: Last Name	Dep: First name	Dep: Date of Birth			
Dependent D5	Sub: Member ID	Dep: Last Name	Dep: First name	Dep: Date of Birth		

**Note:** This payer requires the member ID to be submitted with the 9 digit SSN and a "01" suffix in the NM109. (E.g., 12345678901)

Eligibility Date Options						
Past	Future	Range				
No	No	No				

Element Name	Use	Min	Max	Туре	Codes and Values	Element	Notes
Payer		1		<u> </u>		Information So	ource Level: 2100A
Payer ID	R	5	5	AN	10508	[NM108=PI] <b>NM109</b>	
Provider	Provider Information Receiver Level: 2100B						
Federal Tax ID	R	9	9	N		[NM108=FI] <b>NM109</b>	<b>Either</b> Tax ID or NPI is required
NPI	S	10	10	N		[NM108=XX] NM109	<b>Either</b> Tax ID or NPI is required
Subscriber			1	1		Subsc	riber Level: 2100C
Last Name	S2,S4,S5	1	35	AN		NM103	
First Name	S2,S4,S5	1	25	AN		NM104	
Member ID	S1,S2,S5 D1,D2,D5	2	80	AN		[NM108=MI] <b>NM109</b>	
Member SSN	S3						
Date of Birth	S1,S3,S4 S5	8	8	DT	CCYYMMDD	DMG02	
Service Type Code	0	1	2	ID	30	EQ01	
Dependent							dent Level: 2100D
Last Name	D2,D4,D5	1	35	AN		NM103	

Element Na	ame	Use	Min	Мах	Туре	Codes and Values	Element	Notes
First Name		D2,D4,D5	1	25	AN		NM104	
Dependent	SSN	D3						
Date of Birt	h	D1,D3,D4 D5	8	8	DT	CCYYMMDD	DMG02	
Service Typ Code	)e	0	1	2	ID	30	EQ01	
Usage:	R=Required, O=Optional, S=Situational							
Data	N=Nu	N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code						

#### Standard Life and Accident Insurance Company – 10593

Search Options							
Option	Element 1	Element 2	Element 3	Element 4			
Subscriber S1	Member ID	Date of Birth					
Subscriber S2	Member ID	Last Name	First Name				
Subscriber S3	Last Name	First Name	Date of Birth				
Subscriber S4	Member ID	Last Name	First Name	Date of Birth			

**Disclaimer:** This verification is not a guarantee of benefits. All claims are subject to review. We cannot determine if a claim is considered eligible until a claim is received and our investigation is complete. All claims are subject to the contract provisions, exclusions, and limitations.

Eligibility Date Options					
Past	Future	Range			
No	No	No			

Element Na	me	Use	Min	Мах	Туре	Codes and Values	Element	Notes
Payer	Payer Information Source Level: 2100/							
Payer ID		R	5	5	AN	10593	[NM108=PI] <b>NM109</b>	
Provider			<u>I</u>	<u> </u>	1		Information Red	ceiver Level: 2100B
Federal Tax	ID	S	9	9	N		[NM108=FI] <b>NM109</b>	
NPI		S	10	10	N		[NM108=XX] NM109	
Subscriber							Subse	criber Level: 2100C
Last Name		S2,S3,S4	1	35	AN		NM103	
First Name		S2,S3,S4	1	25	AN		NM104	
Member ID		S1,S2,S4	2	80	AN		[NM108=MI] NM109	
Date of Birth		S1,S3,S4	8	8	DT	CCYYMMDD	DMG02	
Service Type Code		0	1	2	ID	30	EQ01	
•		quired, O=C	•					
Data	Data N=Numeric, AN=Alphanumeric, DT=Date Format, ID=Identification Code							

#### Union Pacific Railroad Employees Health Systems–10599

Search Options				
Option	Element 1	Element 2	Element 3	
Subscriber S1	Member ID			
Subscriber S2	Last Name	First Name	Date of Birth	
Subscriber S3	Member ID	Last Name	First Name	Date of Birth

Eligibility Date Options					
Past	Future	Range			
No	No	No			

Element Na	ime	Use	Min	Max	Туре	Codes and Values	Element	Notes
Payer	Payer Information Source Level: 2100A							
Payer ID		R	5	5	AN	10599	[NM108=PI] <b>NM109</b>	
Provider			•		•	lı	nformation Rec	eiver Level: 2100B
Federal Tax	ID	S	9	9	N		[NM108=FI] <b>NM109</b>	
NPI		S	10	10	N		[NM108=XX] NM109	
Subscriber		1		1	<u>I</u>	1	Subso	criber Level: 2100C
Last Name		S2,S3	1	35	AN		NM103	
First Name		S2,S3	1	25	AN		NM104	
Member ID		S1,S3	2	20	AN		[NM108=MI] <b>NM109</b>	
Date of Birth	ו	S2,S3	8	8	DT	CCYYMMDD	DMG02	
Service Typ Code		0	1	2	ID	30	EQ01	
Usage:	R=Red	quired, C	)=Opti	onal, S	S=Situat	ional		
Data	N=Nui	meric, A	N=Alp	hanum	eric, DT	=Date Format, ID=Identification	n Code	

# **Payer Maintenance Schedule**

Payer	Stated Downtime
Administrative Services, Inc.	No Stated Downtime
American National Insurance Company	No Stated Downtime
American National Life Insurance Company TX	No Stated Downtime
Amerigroup Corporation	No Stated Downtime
Antares	No Stated Downtime
Best Life and Health	No Stated Downtime
Community Care of Oklahoma	No Stated Downtime
CSA Fraternal Life Medicare Supp	No Stated Downtime
Emblem Health	No Stated Downtime
Inland Empire Health	No Stated Downtime
Integrated Mental Health Services	No Stated Downtime
Inter Valley Health Plan	No Stated Downtime
Key Benefits Administrators (IN)	No Stated Downtime
Medigold Health Plans	No Stated Downtime
Mercy Care Plan (Arizona)	No Stated Downtime
Metropolitan Health Plan (MHP)	No Stated Downtime
Nationwide Speciality Health	No Stated Downtime
Partners National Health Plans of NC	No Stated Downtime
QuikTrip Corporation	No Stated Downtime
San Joaquin Health Plan	No Stated Downtime
Standard Life and Accident Insurance Company	No Stated Downtime
Union Pacific Railroad Employees Health Systems	No Stated Downtime
Universal Care of California	No Stated Downtime