



## Medical Payer List

V4.1.105 - 02/25/08

| Last Update | Payer Name   | Payer ID | Enroll Reqd | Record Type | Additional Information  |
|-------------|--|----------|-------------|-------------|---|
|             | 1199 National Benefit Fund                             | 13162    |             | 837P        |   |
|             | 1199 National Benefit Fund                             | 13162    |             | 837I        |   |
|             | ABC Health Plan of New York                            | 48185    |             | 837P        |   |
|             | ABC Health Plan of New York                            | 48185    |             | 837I        |   |
|             | ABMA Medical Corp. (Hnet Sr. & Secure Horizons Only)   | E3510    |             | 837P        | Only claims from providers in Northern Calif. Please contact the EDI Dept for North American Medical Management (NAMM) Lead/Supervisor at 800-956-8000 prior to initial submission of claims. |
|             | Abrazo Advantage Health Plan                           | 03443    |             | 837P        |   |
|             | Access Administrators                                  | AHS01    |             | 837P        |   |
|             | Access Administrators                                  | AHS01    |             | 837I        |   |
|             | Access Plus/UTMB Healthcare Systems                    | 76049    | Yes         | 837P        | Provider ID required in loop 2310B REF02. Contact 281-652-8700 to obtain ID.  |
|             | Acclaim  | 64071    |             | 837P        |   |
|             | Acclaim  | 64071    |             | 837I        |   |
|             | Acclaim Repricing                                      | 21356    |             | 837P        |   |
|             | Acclaim Repricing                                      | 21356    |             | 837I        |   |
|             | ACS Benefit & Consulting Services, Inc.                | 72467    |             | 837P        |   |
|             | ACS Benefit & Consulting Services, Inc.                | 72467    |             | 837I        |   |
|             | Adaptis Healthplan                                     | 91173    |             | 837P        |   |
|             | Adaptis Healthplan                                     | 91173    |             | 837I        |   |
|             | Administration Systems Research Corporation (ASR Corp) | 38265    |             | 837P        | Includes ASR Health Benefits and Physicians Care  |
|             | Administration Systems Research Corporation (ASR Corp) | 38265    |             | 837I        | Includes ASR Health Benefits and Physicians Care  |
|             | Administrative Concepts Inc.                           | 22384    |             | 837P        |   |
|             | Administrative Concepts Inc.                           | 22384    |             | 837I        |   |
| A 02/25/08  | Administrative Services                                | 59141    |             | 837I        |   |
|             | Advanced Data Solutions, Inc.                          | 58202    |             | 837P        |   |
|             | Advanced Data Solutions, Inc.                          | 58202    |             | 837I        |   |
|             | Advanced Medical Management                            | AMM01    |             | 837P        |   |
|             | Advanced Medical Management                            | AMM01    |             | 837I        |   |
|             | Advantage Health Solution                              | 35209    |             | 837P        |   |
|             | Advantage Health Solution                              | 35209    |             | 837I        |   |
|             | Advantra Freedom                                       | 25152    |             | 837P        |   |
|             | Advantra Freedom                                       | 25152    |             | 837I        |   |
|             | Advantra/Health America, Inc./Health Assurance         | 25126    |             | 837P        |   |
|             | Advantra/Health America, Inc./Health Assurance         | 25126    |             | 837I        |   |
|             | Advica - Northeast Georgia Health System               | 13376    |             | 837P        |   |
|             | Advica - Northeast Georgia Health System               | 13376    |             | 837I        |   |
|             | AdvoCare Incorporated (Ohio BWC)                       | 31147    | Yes         | 837P        |   |
|             | AdvoCare Incorporated (Ohio BWC)                       | 31147    | Yes         | 837I        |   |
|             | Advocate Health Centers                                | 36320    |             | 837P        | Required data elements needed for submission. Please contact Advocate Health Partners Operations' Debbie Motz at 847-699-4377 or Tony Hani at 847-699-4368 for more information.              |
|             | Advocate Health Centers                                | 36320    |             | 837I        | Required data elements needed for submission. Please contact Advocate Health Partners Operations' Debbie Motz at 847-699-4377 or Tony Hani at 847-699-4368 for more information.              |
|             | Advocate Health Partners (PHO's)                       | 65093    |             | 837P        | Required data elements needed for submission. Please contact Advocate Health Partners Operations Debbie Motz at (847) 699-4377 or Tony Hani (847) 699-4368 for more info.                     |
|             | Advocate Health Partners (PHO's)                       | 65093    |             | 837I        | Required data elements needed for submission. Please contact Advocate Health Partners Operations Debbie Motz at (847) 699-4377 or Tony Hani (847) 699-4368 for more info.                     |
|             | Aetna / US Healthcare (All Plans)                      | 60054    |             | 837P        |   |
|             | Aetna / US Healthcare (All Plans)                      | 60054    |             | 837I        |   |

|  |  |       |     |      |   |
|--|--|-------|-----|------|---|
|  | Aetna / US Healthcare (All Plans)                              | 60054 | Yes | 835  |   |
|  | Aetna Affordable Health Choices                                | 57604 |     | 837P | Use this payer ID when billing Aetna Affordable Health Choices. Do not use payer ID 60054. The top of the member's ID card will show the wording "Aetna Affordable Health Choices PPO" or "Aetna Affordable Health Choices." The payer ID at the bottom of the card will read 57604-0028. |
|  | Aetna Affordable Health Choices                                | 57604 |     | 837I | Use this payer ID when billing Aetna Affordable Health Choices. Do not use payer ID 60054. The top of the member's ID card will show the wording "Aetna Affordable Health Choices PPO" or "Aetna Affordable Health Choices." The payer ID at the bottom of the card will read 57604-0028. |
|  | Aetna Insurance Company  | 60054 |     | 837P |   |
|  | Aetna Insurance Company  | 60054 |     | 837I |   |
|  | Aetna Texas Medicaid and CHIP                                  | 38692 |     | 837P |   |
|  | Aetna Texas Medicaid and CHIP                                  | 38692 |     | 837I |   |
|  | Affiliated Doctors of Orange County                            | ADOCS |     | 837P |   |
|  | Affinity Health Plan   | 13334 |     | 837P |   |
|  | Affinity Health Plan   | 13334 |     | 837I |   |
|  | AFL- CIO Food & Beverage Dealer's Trust Fund (Toledo, OH)      | 34444 |     | 837P |   |
|  | AFL- CIO Food & Beverage Dealer's Trust Fund (Toledo, OH)      | 34444 |     | 837I |   |
|  | AFTRA Health Fund  | 13346 |     | 837P |   |
|  | AFTRA Health Fund  | 13346 |     | 837I |   |
|  | Agency Services, Inc.  | 64158 |     | 837P |   |
|  | Agency Services, Inc.  | 64158 |     | 837I |   |
|  | AGIA, Inc.   | 95241 |     | 837P |   |
|  | AGIA, Inc.   | 95241 |     | 837I |   |
|  | Alabama Medical Surgical, LLC                                  | 06311 |     | 837P |   |
|  | Alaska Children's Services, Inc.                               | 91136 |     | 837P | Group # required  |
|  | Alaska Children's Services, Inc.                               | 91136 |     | 837I | Group # required  |
|  | Alaska Laborer's Construction Industry Trust                   | 91136 |     | 837P | Group # required  |
|  | Alaska Laborer's Construction Industry Trust                   | 91136 |     | 837I | Group # required  |
|  | Alaska Pipe Trades Local 375                                   | 91136 |     | 837P | Group # required  |
|  | Alaska Pipe Trades Local 375                                   | 91136 |     | 837I | Group # required  |
|  | Alaska United Food & Commercial Workers Health & Welfare Trust | 91136 |     | 837P | Group # required  |
|  | Alaska United Food & Commercial Workers Health & Welfare Trust | 91136 |     | 837I | Group # required  |
|  | AliCare  | 13550 |     | 837P |   |
|  | AliCare  | 13550 |     | 837I |   |
|  | Alignis  | 58213 |     | 837P |   |
|  | All Saints/Covenant-Milwaukee, Wisconsin                       | 39160 | Yes | 837I | Contact Karen Mills (414) 256-5705 to enroll in EDI   |
|  | Alliance - Alpha Care Gold                                     | ADSL1 |     | 837P |   |
|  | Alliance - Alpha Care Gold                                     | ADSL1 |     | 837I |   |
|  | Alliance PPO, Inc. (Maryland)                                  | 52149 |     | 837P |   |
|  | Alliant Health Plans of Georgia                                | 58234 |     | 837P |   |
|  | Alliant Health Plans of Georgia                                | 58234 |     | 837I |   |
|  | Allied Administrators (San Francisco, CA)                      | 94177 |     | 837P |   |
|  | Allied Administrators (San Francisco, CA)                      | 94177 |     | 837I |   |
|  | Allied Benefit Systems   | 37308 |     | 837P |   |
|  | Allied Benefit Systems   | 37308 |     | 837I |   |
|  | Allied Health - Podiatry (UHIN)                                | SX157 | Yes | 837P |   |
|  | ALPS CompCare (Ohio BWC)                                       | 31147 | Yes | 837P |   |
|  | ALPS CompCare (Ohio BWC)                                       | 31147 | Yes | 837I |   |
|  | Alta Senior Care (Hnet Sr. & Secure Horizons Only)             | E3510 |     | 837P | Only claims from providers in Northern Calif. Please contact the EDI Dept for North American Medical Management (NAMM) Lead/Supervisor at 800-956-8000 prior to initial submission of claims.   |
|  | Altius Health Plans (Coventry)                                 | SX113 | Yes | 837P | Providers who do not have an Altius provider number assigned should contact Altius Provider Relations at 801-933-3130 (Madalyn Jewkes) email: madalyn.jewkes@ahplans.com  |
|  | AMA Insurance Agency   | TH071 |     | 837P |   |

|   |       |     |      |  |
|---|-------|-----|------|--|
| Amalgamated Life Insurance Company (ALICARE)            | 13550 |     | 837P |  |
| Amalgamated Life Insurance Company (ALICARE)            | 13550 |     | 837I |  |
| AmeriBen Solutions, Inc.                                | 75137 |     | 837P |  |
| AmeriBen Solutions, Inc.                                | 75137 |     | 837I |  |
| Americaid Community Care (Maryland)                     | 27517 |     | 837P |  |
| Americaid Community Care (Maryland)                     | 27517 |     | 837I |  |
| Americaid Community Care (New Jersey)                   | 27516 |     | 837P |  |
| Americaid Community Care (New Jersey)                   | 27516 |     | 837I |  |
| American Administrative Group                           | 75240 |     | 837P |  |
| American Administrative Group                           | 75240 |     | 837I |  |
| American Benefit Administrative Services, Inc. (ABAS)   | 37225 |     | 837P |  |
| American Benefit Administrative Services, Inc. (ABAS)   | 37225 |     | 837I |  |
| American Benefits Management (North Canton, OH)         | 34187 |     | 837P | Payer ID valid only for claims with a submission address of P.O. Box 35008, North Canton, OH 44735 |
| American Chiropractic Network (ACN)                     | ACN01 |     | 837P |  |
| American Chiropractic Network IPA of New York (ACNIPA)  | 41160 |     | 837P |  |
| American Commercial Barge Lines                         | 87726 |     | 837P |  |
| American Commercial Barge Lines                         | 87726 |     | 837I |  |
| American Community Mutual Insurance                     | 60305 |     | 837P |  |
| American Community Mutual Insurance                     | 60305 |     | 837I |  |
| American Family Insurance Company                       | AMF11 |     | 837P |  |
| American Family Insurance Company                       | AMF11 |     | 837I |  |
| American General  | 62030 |     | 837P |  |
| American General  | 62030 |     | 837I |  |
| American Healthcare Alliance                            | 01066 |     | 837P |  |
| American Healthcare Alliance                            | 01066 |     | 837I |  |
| American Imaging Management, Inc.                       | 36369 |     | 837P |  |
| American Imaging Management, Inc.                       | 36369 |     | 837I |  |
| American Insurance Company of Texas                     | 81949 |     | 837P |  |
| American International Group, Inc. (AIG)                | 87726 |     | 837P |  |
| American International Group, Inc. (AIG)                | 87726 |     | 837I |  |
| American Lifecare                                       | 72099 |     | 837P |  |
| American Lifecare                                       | 72099 |     | 837I |  |
| American Medical Security (AMS)                         | 81400 |     | 837P |  |
| American Medical Security (AMS)                         | 81400 |     | 837I |  |
| American National Insurance Co                          | 74048 |     | 837P |  |
| American National Insurance Co                          | 74048 |     | 837I |  |
| American Postal Workers Union (APWU)                    | 44444 |     | 837P |  |
| American Postal Workers Union (APWU)                    | 44444 |     | 837I |  |
| American Republic Insurance Co.                         | 42011 |     | 837P |  |
| American Republic Insurance Co.                         | 42011 |     | 837I |  |
| American Worker Health Plan                             | 37322 |     | 837P |  |
| American Worker Health Plan                             | 37322 |     | 837I |  |
| America's PPO (The ARAZ Group)                          | 95841 | Yes | 837P |  |
| America's PPO (The ARAZ Group)                          | 95841 | Yes | 837I |  |
| America's TPA   | 41178 |     | 837P |  |
| America's TPA   | 41178 |     | 837I |  |
| AmeriChoice   | 87726 |     | 837P |  |
| AmeriChoice   | 87726 |     | 837I |  |
| AmeriChoice for Nebraska                                | 87726 |     | 837P |  |
| AmeriChoice for Nebraska                                | 87726 |     | 837I |  |
| AmeriChoice of New Jersey Personal Care Plus (Medicare) | 86001 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain          |
| AmeriChoice of New Jersey Personal Care Plus (Medicare) | 86001 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain          |
| AmeriChoice of New Jersey, Inc. (Medicaid New Jersey)   | 86047 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain          |

|   |       |     |      |  |
|---|-------|-----|------|--|
| AmeriChoice of New Jersey, Inc. (Medicaid New Jersey)           | 86047 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of New York (Medicaid New York)                     | 86048 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of New York (Medicaid New York)                     | 86048 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of New York Personal Care Plus (Medicare)           | 86002 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of New York Personal Care Plus (Medicare)           | 86002 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of Pennsylvania Medicaid/CHIP                       | 86049 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of Pennsylvania Medicaid/CHIP                       | 86049 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of Pennsylvania Personal Care Plus (Medicare)       | 86003 |     | 837P | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| AmeriChoice of Pennsylvania Personal Care Plus (Medicare)       | 86003 |     | 837I | Requires your AmeriChoice assigned Provider ID number. Please call 888-362-3368 to obtain                        |
| Amerigroup Corporation  | 27514 |     | 837P | Houston, New Jersey, Maryland, Illinois & Florida  |
| Amerigroup Corporation  | 27514 |     | 837I | Houston, New Jersey, Maryland, Illinois & Florida  |
| AmeriHealth Administrators                                      | 54763 |     | 837P |  |
| AmeriHealth Administrators                                      | 54763 |     | 837I |  |
| AmeriHealth DE non-HMO  | 93688 |     | 837P |  |
| AmeriHealth HMO NJ and DE                                       | 23037 |     | 837P |  |
| AmeriHealth HMO NJ and DE                                       | 23037 |     | 837I |  |
| AmeriHealth Mercy Health Plan                                   | 22248 | Yes | 837P | Medicaid Managed Care. For EDI support, please e-mail <a href="mailto:edi.amhp@kmhp.com">edi.amhp@kmhp.com</a> . |
| AmeriHealth Mercy Health Plan                                   | 22248 | Yes | 837I | Medicaid Managed Care. For EDI support, please e-mail <a href="mailto:edi.amhp@kmhp.com">edi.amhp@kmhp.com</a> . |
| AmeriHealth NJ & DE HMO   | 95044 |     | 837P |  |
| AmeriHealth NJ non-HMO  | 60061 |     | 837P |  |
| Amerihealth PPO New Jersey/IBC                                  | 12X24 |     | 837I |  |
| AMS - American Medical Security                                 | AMS01 |     | 837P |  |
| AMVI/Prospect Health Network (Prospect Medical Group)           | PROSP |     | 837P |  |
| Anchor Benefit Consulting, Inc.                                 | 53085 |     | 837P |  |
| Anchor Benefit Consulting, Inc.                                 | 53085 |     | 837I |  |
| Ancillary Benefit Systems / Arizona Foundation for Medical Care | 86062 |     | 837P |  |
| Ancillary Benefit Systems / Arizona Foundation for Medical Care | 86062 |     | 837I |  |
| Angeles IPA (SynerMed)  | SYMED |     | 837P |  |
| Antares Management Solutions                                    | 34192 |     | 837P |  |
| Antares Management Solutions                                    | 34192 |     | 837I |  |
| APA Partners, Inc.  | 16140 |     | 837P |  |
| APA Partners, Inc.  | 16140 |     | 837I |  |
| APAC (Pinnacle Health Resources) (Prospect Medical Group)       | PROSP |     | 837P |  |
| Apex Benefit Services   | 34196 |     | 837P |  |
| Apex Benefit Services   | 34196 |     | 837I |  |
| APIPA   | 03432 | Yes | 837P |  |
| AppleCare Medical Management                                    | APP01 |     | 837P |  |
| APS Healthcare, Inc.  | 54160 |     | 837P |  |
| APS Healthcare, Inc.  | 54160 |     | 837I |  |
| Arkansas Best Corporation                                       | 75278 |     | 837P |  |
| Arkansas Best Corporation                                       | 75278 |     | 837I |  |
| Arnett Health Plans   | 95440 |     | 837P |  |
| Arnett Health Plans   | 95440 |     | 837I |  |
| Associated Third Party Administration (ATPA)                    | ATPA1 |     | 837P |  |
| Associates for Health Care, Inc (AHC)                           | 36326 |     | 837P |  |
| Associates for Health Care, Inc (AHC)                           | 36326 |     | 837I |  |
| Assurant Health   | 39065 |     | 837P | Formerly Fortis  |
| Assurant Health   | 39065 |     | 837I |  |
| Assurant Mini-Med   | 37323 |     | 837P |  |
| Assurant Mini-Med   | 37323 |     | 837I |  |

|            |  |           |     |      |   |
|------------|--|-----------|-----|------|---|
|            | Assurant Self-Funded (Ft. Mill, SC)            | 37313     |     | 837P | Only for claims that go to Ft. Mill   |
|            | Assurant Self-Funded (Ft. Mill, SC)            | 37313     |     | 837I | Only for claims that go to Ft. Mill   |
| A 01/23/08 | Asuris Northwest Health                        | SX179     |     | 837P |   |
|            | Asursis Northwest Health                       | 93221     | Yes | 837P |   |
|            | Asursis Northwest Health                       | 93221     | Yes | 837I |   |
|            | Athens Area Health Plan Select                 | 95691     |     | 837P |   |
|            | Athens Area Health Plan Select                 | 95691     |     | 837I |   |
|            | Atlanticare Administrators, Inc.               | 22304     |     | 837P |   |
|            | Atlanticare Administrators, Inc.               | 22304     |     | 837I |   |
|            | Atlantis Health Plan                           | 13853     |     | 837P |   |
|            | Atlas Administrators                           | TH004     |     | 837P |   |
|            | Atlas Life Insurance Company                   | 90956     |     | 837P |   |
|            | AultComp Managed Care Organization (OH BWC)    | 31147     | Yes | 837P |   |
|            | AultComp Managed Care Organization (OH BWC)    | 31147     | Yes | 837I |   |
|            | Austin Regional Clinic Employee Benefit Plan   | CMSEB     |     | 837P |   |
|            | Austin Regional Clinic Employee Benefit Plan   | CMSEB     |     | 837I |   |
|            | Automated Benefit Service (ABS)                | 38259     |     | 837P |   |
|            | Automated Benefit Service (ABS)                | 38259     |     | 837I |   |
|            | Automated Group Administration, Inc. (AGA)     | 37280     |     | 837P |   |
|            | Automated Group Administration, Inc. (AGA)     | 37280     |     | 837I |   |
|            | Avatar Comp (Ohio BWC)                         | 31147     | Yes | 837P |   |
|            | Avatar Comp (Ohio BWC)                         | 31147     | Yes | 837I |   |
|            | Avera Health Plans                             | 46045     |     | 837P |   |
|            | Avera Health Plans                             | 46045     |     | 837I |   |
|            | Avesis Third Party Administrators (Phoenix AZ) | 87098     |     | 837P |   |
|            | AvMed, Inc.                                    | 59274     |     | 837P | Patient ID must be in 2010BA NM109. However when patient is different from the insured, patient ID field must be blank.                 |
|            | AvMed, Inc.                                    | 59274     |     | 837I | Patient ID must be in 2010BA NM109. However when patient is different from the insured, patient ID field must be blank.                 |
|            | Bakersfield Family Medical Center (CA)         | BKRFM     |     | 837P |   |
|            | Banner Health Co.                              | SX145     | Yes | 837P |   |
|            | Bass Administrators, Inc.                      | 37248     |     | 837P |   |
|            | Bass Administrators, Inc.                      | 37248     |     | 837I |   |
|            | BCBS - Alabama                                 | 00510B    | Yes | 837P |   |
|            | BCBS - Alabama                                 | 00510B    | Yes | 837I |   |
|            | BCBS - Alabama                                 | 00510B    | Yes | 835  |   |
|            | BCBS - Arizona                                 | 860004538 | Yes | 837P | This payer can be used for either professional or institutional claims. Payer ID = 53589 can be used only for institutional claims.     |
|            | BCBS - Arizona                                 | 860004538 | Yes | 837I | This payer can be used for either professional or institutional claims. Payer ID = 53589 can be used only for institutional claims.     |
|            | BCBS - Arizona                                 | 53589     | Yes | 837I | This payer can be used only for institutional claims. Payer ID = 860004538 can be used for either professional or institutional claims. |
|            | BCBS - Arizona                                 | 860004538 | Yes | 835  |   |
|            | BCBS - Arizona                                 | 53589     | Yes | 835  |   |
|            | BCBS - Arkansas                                | 00520B    | Yes | 837P |   |
|            | BCBS - Arkansas                                | 00520B    | Yes | 837I |   |
|            | BCBS - Arkansas                                | 00520B    | Yes | 835  |   |
|            | BCBS - Colorado                                | 00050     | Yes | 837P |   |
|            | BCBS - Colorado                                | 00050     | Yes | 837I |   |
|            | BCBS - Colorado                                | 00050     | Yes | 835  |   |
|            | BCBS - Delaware                                | SB570     | Yes | 837P |   |
|            | BCBS - District of Columbia, CareFirst         | SB580     | Yes | 837P | Includes BlueChoice, BlueChoice Opt-Out, Open Access, Plus, BluePreferred (XIP), NCA, Federal Memberships and Indemnity product         |
|            | BCBS - District of Columbia, CareFirst         | 12000     | Yes | 837I |   |
|            | BCBS - District of Columbia, CareFirst         | SB580     | Yes | 835  |   |
|            | BCBS - District of Columbia, CareFirst         | 12000     | Yes | 835  | Complete ERA Set Up Form and Payer Agreement  |
|            | BCBS - Florida                                 | 00590     |     | 837P |   |

|  |  |           |     |      |  |
|--|--|-----------|-----|------|--|
|  | BCBS - Florida                                       | 00590     |     | 837I |  |
|  | BCBS - Florida                                       | 00590     | Yes | 835  |  |
|  | BCBS - Georgia                                       | 00601     | Yes | 837P |  |
|  | BCBS - Georgia                                       | 00101     | Yes | 837I |  |
|  | BCBS - Georgia                                       | 00601     | Yes | 835  |  |
|  | BCBS - Georgia                                       | 00101     | Yes | 835  |  |
|  | BCBS - Illinois                                      | G00621    |     | 837P |  |
|  | BCBS - Illinois                                      | G00621    | Yes | 835  |  |
|  | BCBS - Indiana, Anthem Midwest                       | INXBC     |     | 837P |  |
|  | BCBS - Indiana, Anthem Midwest                       | INXBC     | Yes | 835  |  |
|  | BCBS - Iowa  | 88848     | Yes | 837P |  |
|  | BCBS - Iowa  | 88848     | Yes | 835  |  |
|  | BCBS - Kentucky, Anthem Midwest                      | KYXBC     |     | 837P |  |
|  | BCBS - Kentucky, Anthem Midwest                      | KYXBC     | Yes | 835  |  |
|  | BCBS - Louisiana                                     | 53120     | Yes | 837P |  |
|  | BCBS - Louisiana                                     | 53120     | Yes | 837I |  |
|  | BCBS - Louisiana                                     | 53120     | Yes | 835  |  |
|  | BCBS - Maryland, Carefirst                           | SB690     | Yes | 837P | Includes Indemnity products, POS, PPN and PPO  |
|  | BCBS - Maryland, Carefirst                           | 12011     | Yes | 837I |  |
|  | BCBS - Maryland, Carefirst                           | SB690     | Yes | 835  |  |
|  | BCBS - Maryland, Carefirst                           | 12011     | Yes | 835  |  |
|  | BCBS - Massachusetts                                 | SB700     | Yes | 837P |  |
|  | BCBS - Massachusetts                                 | SB700     | Yes | 835  |  |
|  | BCBS - Michigan                                      | 00710     | Yes | 837P |  |
|  | BCBS - Michigan                                      | 00710     | Yes | 835  |  |
|  | BCBS - Mississippi                                   | 00230     | Yes | 837P |  |
|  | BCBS - Mississippi                                   | 00230     | Yes | 837I |  |
|  | BCBS - Mississippi Children's Health Ins Plan (CHIP) | 00230     | Yes | 837P |  |
|  | BCBS - Mississippi Children's Health Ins Plan (CHIP) | 00230     | Yes | 837I |  |
|  | BCBS - Missouri, Anthem Midwest                      | 00241     |     | 837P |  |
|  | BCBS - Missouri, Anthem Midwest                      | 00241     | Yes | 835  |  |
|  | BCBS - Montana                                       | SB751     | Yes | 837P |  |
|  | BCBS - Nebraska                                      | 77780     | Yes | 837P |  |
|  | BCBS - Nebraska                                      | 00760     | Yes | 837P |  |
|  | BCBS - Nebraska                                      | 00760     | Yes | 837I |  |
|  | BCBS - Nevada  | 00265     |     | 837P |  |
|  | BCBS - Nevada  | 00265     |     | 837I |  |
|  | BCBS - Nevada  | 00265     | Yes | 835  |  |
|  | BCBS - New Jersey                                    | 22099     | Yes | 837P |  |
|  | BCBS - New Jersey                                    | 22099     | Yes | 837I |  |
|  | BCBS - New Mexico (HCSC)                             | G00790    |     | 837P |  |
|  | BCBS - New Mexico (HCSC)                             | G00790    |     | 837I |  |
|  | BCBS - New Mexico (HCSC)                             | G00790    | Yes | 835  |  |
|  | BCBS - New York, Empire                              | SB803     | Yes | 837P |  |
|  | BCBS - New York, Northeastern, ASK                   | 00800     | Yes | 837P |  |
|  | BCBS - New York, Northeastern, ASK                   | 00800     | Yes | 835  |  |
|  | BCBS - New York, Western, ASK                        | 00301     | Yes | 837P |  |
|  | BCBS - New York, Western, ASK                        | 00301     | Yes | 835  |  |
|  | BCBS - North Carolina                                | 560894904 | Yes | 837P | Includes New Blue, PCP, MedPoint, State Health Plan, FEP, BlueCard and Traditional BCBSNC plans. |
|  | BCBS - North Carolina                                | 560894904 | Yes | 837I | Includes New Blue, PCP, MedPoint, State Health Plan, FEP, BlueCard and Traditional BCBSNC plans. |
|  | BCBS - North Carolina                                | 560894904 | Yes | 835  |  |
|  | BCBS - Ohio, Anthem Midwest                          | 00834     |     | 837P |  |
|  | BCBS - Ohio, Anthem Midwest                          | 00834     | Yes | 835  |  |
|  | BCBS - Oklahoma                                      | 730266607 | Yes | 837P |  |
|  | BCBS - Oklahoma                                      | 730266607 | Yes | 837I |  |
|  | BCBS - Oklahoma                                      | 730266607 | Yes | 835  |  |

|  |   |        |     |      |                    |
|--|---|--------|-----|------|--------------------|
|  | BCBS - Oregon, Regence                                    | G00851 | Yes | 837P |                    |
|  | BCBS - Pennsylvania, Highmark                             | 54771  | Yes | 837P |                    |
|  | BCBS - Pennsylvania, Highmark                             | 54771  | Yes | 835  |                    |
|  | BCBS - South Carolina                                     | 401    | Yes | 837P |                    |
|  | BCBS - South Carolina                                     | 401    | Yes | 837I |                    |
|  | BCBS - South Carolina Federal                             | 402    | Yes | 837P |                    |
|  | BCBS - South Carolina Federal                             | 402    | Yes | 837I |                    |
|  | BCBS - South Carolina, Carolina Benefit Administrators    | 498    | Yes | 837P |                    |
|  | BCBS - South Carolina, Carolina Benefit Administrators    | 498    | Yes | 837I |                    |
|  | BCBS - South Carolina, Carolina Benefit Administrators    | 498    | Yes | 835  |                    |
|  | BCBS - South Carolina, Companion Health Care              | 922    | Yes | 837P |                    |
|  | BCBS - South Carolina, Companion Health Care              | 922    | Yes | 837I |                    |
|  | BCBS - South Carolina, Consolidated Benefits Inc.         | C16    | Yes | 837P |                    |
|  | BCBS - South Carolina, Consolidated Benefits Inc.         | C16    | Yes | 837I |                    |
|  | BCBS - South Carolina, Employee Benefit Services, Inc.    | 446    | Yes | 837P |                    |
|  | BCBS - South Carolina, Employee Benefit Services, Inc.    | 446    | Yes | 837I |                    |
|  | BCBS - South Carolina, Employer's Life Insurance Co       | 130    | Yes | 837P |                    |
|  | BCBS - South Carolina, Employer's Life Insurance Co       | 130    | Yes | 837I |                    |
|  | BCBS - South Carolina, Medical Claims Management Corp.    | 781    | Yes | 837P |                    |
|  | BCBS - South Carolina, Medical Claims Management Corp.    | 781    | Yes | 837I |                    |
|  | BCBS - South Carolina, Planned Administrators             | 886    | Yes | 837P |                    |
|  | BCBS - South Carolina, Planned Administrators             | 886    | Yes | 837I |                    |
|  | BCBS - South Carolina, Preferred Blue                     | 481    | Yes | 837P |                    |
|  | BCBS - South Carolina, Preferred Blue                     | 481    | Yes | 837I |                    |
|  | BCBS - South Carolina, Preferred Health System - HMO Blue | 403    | Yes | 837P |                    |
|  | BCBS - South Carolina, Preferred Health System - HMO Blue | 403    | Yes | 837I |                    |
|  | BCBS - South Carolina, State Employees Health Plan        | 400    | Yes | 837P |                    |
|  | BCBS - South Carolina, State Employees Health Plan        | 400    | Yes | 837I |                    |
|  | BCBS - South Carolina, State Teachers                     | 400    | Yes | 837P |                    |
|  | BCBS - South Carolina, State Teachers                     | 400    | Yes | 837I |                    |
|  | BCBS - South Carolina, Thomas Cooper Agency               | 315    | Yes | 837P |                    |
|  | BCBS - South Carolina, Thomas Cooper Agency               | 315    | Yes | 837I |                    |
|  | BCBS - South Dakota                                       | 88848  | Yes | 837P |                    |
|  | BCBS - South Dakota                                       | 88848  | Yes | 835  |                    |
|  | BCBS - State of Mississippi Employees and Teachers Plan   | 00230  | Yes | 837P |                    |
|  | BCBS - State of Mississippi Employees and Teachers Plan   | 00230  | Yes | 837I |                    |
|  | BCBS - Tennessee for Riverbend GBA                        | 00390  | Yes | 837I | Riverbend Medicare |
|  | BCBS - Tennessee for Riverbend GBA                        | 00390  | Yes | 835  | Riverbend Medicare |
|  | BCBS - Tennessee TennCare, TennCare Select & BlueCare     | TNXBC  | Yes | 837P |                    |
|  | BCBS - Tennessee TennCare, TennCare Select & BlueCare     | TNXBC  | Yes | 837I |                    |
|  | BCBS - Tennessee TennCare, TennCare Select & BlueCare     | TNXBC  | Yes | 835  |                    |
|  | BCBS - Texas  | G84980 |     | 837P |                    |
|  | BCBS - Texas  | G84980 |     | 837I |                    |
|  | BCBS - Texas  | G84980 | Yes | 835  |                    |
|  | BCBS - Texas Federal Employee Program (TX FEP)            | G84980 |     | 837P |                    |

|   |        |     |      |   |
|---|--------|-----|------|---|
| BCBS - Texas Federal Employee Program (TX FEP)    | G84980 |     | 837I |   |
| BCBS - Texas Federal Employee Program (TX FEP)    | G84980 | Yes | 835  |   |
| BCBS - Texas, Healthcare Benefits                 | G84980 |     | 837P |   |
| BCBS - Texas, Healthcare Benefits                 | G84980 |     | 837I |   |
| BCBS - Texas, Healthcare Benefits                 | G84980 | Yes | 835  |   |
| BCBS - Texas, HMO Blue                            | G84980 |     | 837P |   |
| BCBS - Texas, HMO Blue                            | G84980 |     | 837I |   |
| BCBS - Texas, Rio Grande HMO                      | G84980 |     | 837P |   |
| BCBS - Texas, Rio Grande HMO                      | G84980 |     | 837I |   |
| BCBS - Texas, Wal-Mart (Blue Card Carriers)       | G84980 |     | 837P | Patients have a "MRT" prefix before ID #.   |
| BCBS - Texas, Wal-Mart (Blue Card Carriers)       | G84980 |     | 837I | Patients have a "MRT" prefix before ID #.   |
| BCBS - Texas, Wal-Mart (Blue Card Carriers)       | G84980 | Yes | 835  |   |
| BCBS - Virginia, Anthem                           | VABCBS | Yes | 837P |   |
| BCBS - Virginia, Anthem                           | VABCBS | Yes | 837I |   |
| BCBS - Virginia, Anthem                           | VABCBS | Yes | 835  |   |
| BCBS - West Virginia, Mountain State              | 54828  |     | 837P | Includes Mountain State Indemnity, CMM, PPO, POS, Medicare Supplemental, Federal Employees Health Benefit Plan and BlueCard Par POS |
| BCI Administrators                                | 49153  |     | 837P |   |
| BCI Administrators                                | 49153  |     | 837I |   |
| Beech Street Corporation                          | 95377  |     | 837P | Must send rendering provider info in 2310D using qualifier '77'   |
| Beech Street Corporation                          | 95377  |     | 837I | Must send rendering provider info in 2310D using qualifier '77'   |
| Behavioral Health Systems                         | 63100  |     | 837P |   |
| Behavioral Health Systems                         | 63100  |     | 837I |   |
| Bellflower Hospital (SynerMed)                    | SYMED  |     | 837P |   |
| Benecorp National Corporation                     | 33192  |     | 837P |   |
| Benecorp National Corporation                     | 33192  |     | 837I |   |
| Benefit Coordinators Corporation (Pittsburgh, PA) | 25145  |     | 837P |   |
| Benefit Coordinators Corporation (Pittsburgh, PA) | 25145  |     | 837I |   |
| Benefit Management Admin (San Antonio)            | BMATP  |     | 837P |   |
| Benefit Management Admin (San Antonio)            | BMATP  |     | 837I |   |
| Benefit Management Systems, Inc.                  | 37212  |     | 837P |   |
| Benefit Management Systems, Inc.                  | 37212  |     | 837I |   |
| Benefit Plan Administrators (BPA)                 | 88027  |     | 837P |   |
| Benefit Plan Administrators (BPA)                 | 88027  |     | 837I |   |
| Benefit Plan Administrators Co. (Eau Claire, WI)  | 39081  |     | 837P |   |
| Benefit Plan Administrators Co. (Eau Claire, WI)  | 39081  |     | 837I |   |
| Benefit Plan Administrators of St. Louis (BPS)    | 13310  |     | 837P |   |
| Benefit Plan Administrators of St. Louis (BPS)    | 13310  |     | 837I |   |
| Benefit Plan Administrators, Inc. (Fargo, ND)     | 37286  |     | 837P |   |
| Benefit Plan Administrators, Inc. (Fargo, ND)     | 37286  |     | 837I |   |
| Benefit Plan Administrators, Inc. (Roanoke, VA)   | 37118  |     | 837P |   |
| Benefit Plan Administrators, Inc. (Roanoke, VA)   | 37118  |     | 837I |   |
| Benefit Plan Management, Inc.                     | 37222  |     | 837P |   |
| Benefit Plan Management, Inc.                     | 37222  |     | 837I |   |
| Benefit Planners, Inc                             | 74223  |     | 837P |   |
| Benefit Planners, Inc                             | 74223  |     | 837I |   |
| Benefit Source, Inc.                              | 38257  |     | 837P |   |
| Benefit Source, Inc.                              | 38257  |     | 837I |   |
| Benefit Systems & Services, Inc (BSSI)            | 36342  |     | 837P |   |
| Benefit Systems & Services, Inc (BSSI)            | 36342  |     | 837I |   |
| Benefits Management Group, Inc                    | 20018  |     | 837P |   |

|  |   |         |     |      |  |
|--|---|---------|-----|------|--|
|  | Benefits Management Group, Inc            | 20018   |     | 837I |  |
|  | Benefits Management Services              | 00999   |     | 837P | Louisiana  |
|  | Benesight                                 | 87265   |     | 837P |  |
|  | Benesys, Inc.                             | 37248   |     | 837P |  |
|  | Benesys, Inc.                             | 37248   |     | 837I |  |
|  | Best Life & Health Insurance Company      | 95604   |     | 837P |  |
|  | Better Health Plans of South Carolina     | 32006   |     | 837P |  |
|  | Better Health Plans of South Carolina     | 32006   |     | 837I |  |
|  | Bienvivir                                 | 12X40   |     | 837I |  |
|  | Big Lots Associates Benefits Plan         | CX025   |     | 837P |  |
|  | Blue Bell Benefits Trust                  | ECIBB   |     | 837P |  |
|  | Blue Bell Benefits Trust                  | ECIBB   |     | 837I |  |
|  | Blue Bonnet Administrators                | 37244   |     | 837I |  |
|  | Blue Cross - Alaska, Premera              | 00430AK | Yes | 837P |  |
|  | Blue Cross - Alaska, Premera              | 00430AK | Yes | 835  |  |
|  | Blue Cross - California                   | 47198   |     | 837P |  |
|  | Blue Cross - California                   | 47198   |     | 837I |  |
|  | Blue Cross - California                   | 47198   | Yes | 835  |  |
|  | Blue Cross - California CMSP claims       | CMSPI   |     | 837I | Use this payer ID when billing CMSP to Blue Cross CA. Do not use payer ID 47198. |
|  | Blue Cross - California CMSP claims       | CMSPI   | Yes | 835  |  |
|  | Blue Cross - Idaho                        | G00610  |     | 837P |  |
|  | Blue Cross - Idaho                        | G00610I |     | 837I |  |
|  | Blue Cross - Idaho                        | G00610I | Yes | 835  |  |
|  | Blue Cross - Idaho                        | G00610  | Yes | 835  |  |
|  | Blue Cross - Minnesota                    | 00720   | Yes | 837P |  |
|  | Blue Cross - Minnesota                    | 00720   | Yes | 835  |  |
|  | Blue Cross - New Mexico                   | G00790  | Yes | 837P |  |
|  | Blue Cross - New Mexico                   | G00790  | Yes | 837I |  |
|  | Blue Cross - North Dakota, Noridian       | 00320   | Yes | 837I |  |
|  | Blue Cross - North Dakota, Noridian       | 00320   | Yes | 835  |  |
|  | Blue Cross - Washington, Premera          | 00430WA | Yes | 837P |  |
|  | Blue Cross - Washington, Premera          | 00430WA | Yes | 835  |  |
|  | Blue Cross - Wyoming, Noridian            | 00460   | Yes | 837I |  |
|  | Blue Cross - Wyoming, Noridian            | 00460   | Yes | 835  |  |
|  | Blue Shield - California                  | 94036   |     | 837P |  |
|  | Blue Shield - California                  | 94036   | Yes | 835  |  |
|  | Blue Shield - California FEP              | 94036   |     | 837P |  |
|  | Blue Shield - California FEP              | 94036   | Yes | 835  |  |
|  | Blue Shield - Idaho, Regence              | G00611  |     | 837P |  |
|  | Blue Shield - Kansas, ASK                 | 47163   | Yes | 837P |  |
|  | Blue Shield - Kansas, ASK                 | 47163   | Yes | 835  |  |
|  | Blue Shield - New York, Northeastern, ASK | 00800   | Yes | 837P |  |
|  | Blue Shield - New York, Northeastern, ASK | 00800   | Yes | 835  |  |
|  | Blue Shield - North Dakota, Noridian      | 00820   | Yes | 837P |  |
|  | Blue Shield - North Dakota, Noridian      | 00820   | Yes | 835  |  |
|  | Blue Shield - Washington, Regence         | 00932   |     | 837P |  |
|  | Blue Shield - Washington, Regence         | 00932   | Yes | 835  |  |
|  | Blue Shield - Wyoming, Noridian           | 00960   | Yes | 837P |  |
|  | Blue Shield - Wyoming, Noridian           | 00960   | Yes | 835  |  |
|  | Blue Shield Kansas City - Kansas, ASK     | 47171   |     | 837P | For Kansas City, KS and Kansas City, MO  |
|  | Blue Shield Kansas City - Kansas, ASK     | 47171   | Yes | 835  | For Kansas City, KS and Kansas City, MO  |
|  | Bluegrass Family Health                   | 61124   |     | 837P |  |
|  | Bluegrass Family Health                   | 61124   |     | 837I |  |
|  | BMSSIG (Benefits Management Services )    | 00999   |     | 837P | Valid group number required. Payer name on claim must be BMSSIG                  |
|  | BMSSIG (Benefits Management Services )    | 00999   |     | 837I | Valid group number required. Payer name on claim must be BMSSIG                  |
|  | Boilermaker's National Health & Welfare   | 36609   |     | 837P |  |
|  | Boilermaker's National Health & Welfare   | 36609   |     | 837I |  |

|  |   |         |     |      |   |
|--|---|---------|-----|------|---|
|  | Boon-Chapman Benefit Administrators                                 | 74238   |     | 837P | Payor does not accept dental claims electronically  |
|  | Boon-Chapman Benefit Administrators                                 | 74238   |     | 837I | Payor does not accept dental claims electronically  |
|  | Boston Medical Center Health Plan, Inc.(BMC HealthNet Plan)         | 13337   |     | 837P |   |
|  | Boston Medical Center Health Plan, Inc.(BMC HealthNet Plan)         | 13337   |     | 837I |   |
|  | Bravo Health  | 52192   |     | 837P | Formerly known as Elder Health HMO serving members in Pennsylvania, Maryland, Delaware, Texas, and Washington DC. Not to be confused with ElderPlan in NY.  |
|  | Bravo Health  | 52192   |     | 837I | Formerly known as Elder Health HMO serving members in Pennsylvania, Maryland, Delaware, Texas, and Washington DC. Not to be confused with ElderPlan in NY.  |
|  | Breathco/CSL Pulmonary  | 65005   |     | 837P |   |
|  | Bridge Benefits   | 41170   |     | 837P | Submit all transactions for Bridge Benefits to Payer ID 41170, Health Risk Management. If you have any questions about where to submit claims, please contact CBCA Administrators customer service at 866-903-6899. |
|  | Bridge Benefits   | 41170   |     | 837I | Submit all transactions for Bridge Benefits to Payer ID 41170, Health Risk Management. If you have any questions about where to submit claims, please contact CBCA Administrators customer service at 866-903-6899. |
|  | Bridgestone Claims Services   | 37285   |     | 837P |   |
|  | Bridgestone Claims Services   | 37285   |     | 837I |   |
|  | Bridgeway Arizona   | 68054   |     | 837P |   |
|  | Bridgeway Arizona   | 68054   |     | 837I |   |
|  | Brokerage Concepts, Inc.  | 51037   |     | 837P |   |
|  | Brokerage Concepts, Inc.  | 51037   |     | 837I |   |
|  | Brodart   | 35182   |     | 837P |   |
|  | Brodart   | 35182   |     | 837I |   |
|  | Brown & Toland Medical Group  | 94316   |     | 837P |   |
|  | Brown & Toland Medical Group  | 94316   |     | 837I |   |
|  | Bryan Independent School District                                   | BRISD   |     | 837P |   |
|  | Bryan Independent School District                                   | BRISD   |     | 837I |   |
|  | Buckeye Community Health  | 32004   | Yes | 837P | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|  | Buckeye Community Health  | 32004   | Yes | 837I | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|  | Buenaventura Medical Group Inc.                                     | 50240   |     | 837P |   |
|  | Butler Benefits   | 42150   |     | 837P |   |
|  | Butler Benefits   | 42150   |     | 837I |   |
|  | C&O Employees Hospital Association                                  | 23708   |     | 837P |   |
|  | California Alcohol & Drug Program                                   | CAADP25 | Yes | 837P | Perinatal services  |
|  | California Alcohol & Drug Program                                   | CAADP20 | Yes | 837P | Non perinatal services  |
|  | California Department of Mental Health                              | CADMH   | Yes | 837P |   |
|  | Cannon Cochran Management Services, Inc.                            | 37105   |     | 837P |   |
|  | Cannon Cochran Management Services, Inc.                            | 37105   |     | 837I |   |
|  | Cape Health Plan  | 38245   |     | 837P |   |
|  | Cape Health Plan  | 38245   |     | 837I |   |
|  | Capital Advantage Insurance Company (CAIC)                          | 23045   |     | 837P |   |
|  | Capital Blue Cross/CAIC   | 23045   |     | 837P |   |
|  | Capital Community Health Plan                                       | 87726   |     | 837P |   |
|  | Capital Community Health Plan                                       | 87726   |     | 837I |   |
|  | Capital District Physicians Health Plan (CDPHP)-Professional Claims | 95491   |     | 837P |   |
|  | Capital Health Plan   | 95112   |     | 837P |   |
|  | Capital International Management Services                           | 65067   |     | 837P |   |
|  | Capital International Management Services                           | 65067   |     | 837I |   |
|  | Capitol Administrators  | 68011   |     | 837P |   |
|  | Capitol Administrators  | 68011   |     | 837I |   |
|  | Care Improvement Plus   | 77082   |     | 837P |   |
|  | Care Improvement Plus   | 77082   |     | 837I |   |
|  | Care Network  | AMM01   |     | 837P |   |
|  | Care Network  | AMM01   |     | 837I |   |
|  | Carechoices Michigan - Mercy Healthplans                            | 38269   |     | 837P |   |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | Carechoices Michigan - Mercy Healthplans             | 38269 |     | 837I |   |
|            | CareCore National - Healthnet                        | 14184 |     | 837P | The payer requires the following - Additional Provider Info E6; Rendering Provider Network ID - E6-14, Referring provider ID E0-25, Facility Info -J0, Facility ID J0-10. |
|            | CareCore National - Healthnet                        | 14184 |     | 837I | The payer requires the following - Additional Provider Info E6; Rendering Provider Network ID - E6-14, Referring provider ID E0-25, Facility Info -J0, Facility ID J0-10. |
|            | CareCore National, LLC - Health Net New Jersey       | 14185 |     | 837P |   |
|            | CareCore National, LLC - Health Net New Jersey       | 14185 |     | 837I |   |
|            | CareCore National, LLC (Aetna Radiology Claims)      | 14179 |     | 837P |   |
|            | CareCore National, LLC (Oxford Radiology Claims)     | 14180 |     | 837P |   |
|            | CareCore National, LLC (Oxford Radiology Claims)     | 14180 |     | 837P |   |
|            | Carelink Advantra                                    | 25139 |     | 837P |   |
|            | Carelink Advantra                                    | 25139 |     | 837I |   |
|            | Carelink Health Plan                                 | 25139 |     | 837P |   |
|            | Carelink Health Plan                                 | 25139 |     | 837I |   |
|            | Carelink Medicaid                                    | 25140 |     | 837P |   |
|            | Carelink Medicaid                                    | 25140 |     | 837I |   |
|            | Carenet  | 25142 |     | 837P |   |
|            | CareOregon   | 93975 |     | 837P |   |
|            | CareOregon   | 93975 |     | 837I |   |
| A 02/25/08 | CarePlus Cardiology - New Century Health             | NCH04 |     | 837P |   |
| A 02/25/08 | CarePlus Dermatology - New Century Health            | NCH01 |     | 837P |   |
|            | CarePlus Health Plans, Inc.                          | 65031 |     | 837P | Formerly Physicians Healthcare Plans  |
| A 02/25/08 | CarePlus Urology - New Century Health                | NCH03 |     | 837P |   |
|            | CareSource of IN                                     | 37311 |     | 837P |   |
|            | CareSource of IN                                     | 37311 |     | 837I |   |
|            | CareSource OH  | 31114 | Yes | 837P |   |
|            | CareSource OH  | 31114 | Yes | 837I |   |
|            | Careworks  | 10010 |     | 837P |   |
|            | Careworks  | 10010 |     | 837I |   |
|            | CareWorks (Ohio BWC)                                 | 31147 | Yes | 837P |   |
|            | CareWorks (Ohio BWC)                                 | 31147 | Yes | 837I |   |
|            | Cariten Healthcare                                   | 62073 |     | 837P |   |
|            | Cariten Healthcare                                   | 62073 |     | 837I |   |
|            | Cariten Senior Health                                | 62072 |     | 837P |   |
|            | Cariten Senior Health                                | 62072 |     | 837I |   |
|            | Carolina Care Plan                                   | 57105 |     | 837P |   |
|            | Carolina Care Plan                                   | 57105 |     | 837I |   |
| A 01/23/08 | Carolina Crescent Health Plans Inc                   | SX191 |     | 837P |   |
|            | Carolina Summit Healthcare, Inc.                     | 56195 |     | 837P |   |
|            | Carolina Summit Healthcare, Inc.                     | 56195 |     | 837I |   |
|            | Carpenter's Health & Welfare Trust Fund of St. Louis | 25125 |     | 837P |   |
|            | Cascade East Health Plans                            | 93040 |     | 837P |   |
|            | Cascade East Health Plans                            | 93040 |     | 837I |   |
|            | Caterpillar Inc.                                     | 37060 |     | 837P |   |
|            | Caterpillar Inc.                                     | 37060 |     | 837I |   |
|            | CBCA Administrators                                  | 55438 |     | 837P |   |
|            | CBCA Administrators                                  | 55438 |     | 837I |   |
|            | CBSA   | 41124 |     | 837P | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267.   |
|            | CBSA   | 41124 |     | 837I | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267.   |
|            | CCN Managed Care, Inc.                               | 73159 |     | 837P |   |
|            | CCN Managed Care, Inc.                               | 73159 |     | 837I |   |
|            | CDS Group Health                                     | 88022 |     | 837P |   |
|            | CDS Group Health                                     | 88022 |     | 837I |   |
|            | Cedars-Sinai Medical Network Services                | 95166 |     | 837P | Claims  |

|            |   |           |     |      |   |
|------------|---|-----------|-----|------|---|
|            | Cedars-Sinai Medical Network Services             | 95167     |     | 837P | Encounters  |
|            | Cement Masons & Plasterers Health & Welfare Trust | 91136     |     | 837P | Group # required  |
|            | Cement Masons & Plasterers Health & Welfare Trust | 91136     |     | 837I | Group # required  |
|            | Cenpatico Behavioral Health - Kansas              | 68047     | Yes | 837P | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims  |
|            | Cenpatico Behavioral Health - Kansas              | 68047     | Yes | 837I | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims  |
|            | Cenpatico Behavioral Health of Arizona            | 68048     |     | 837P |   |
|            | Cenpatico Behavioral Health of Arizona            | 68048     |     | 837I |   |
|            | Cenpatico Georgia                                 | 68050     | Yes | 837P | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|            | Cenpatico Georgia                                 | 68050     | Yes | 837I | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|            | Cenpatico Indiana                                 | 68052     |     | 837P |   |
|            | Cenpatico Indiana                                 | 68052     |     | 837I |   |
|            | Cenpatico Texas                                   | 68053     |     | 837P |   |
|            | Cenpatico Texas                                   | 68053     |     | 837I |   |
|            | CenterCare  | 13357     |     | 837P |   |
|            | CenterCare  | 13357     |     | 837I |   |
|            | Centra Benefits (Dallas)                          | 75243     |     | 837P |   |
|            | Centra Benefits (Dallas)                          | 75243     |     | 837I |   |
|            | Centra Benefits (Houston)                         | 75196     |     | 837P |   |
|            | Centra Benefits (Houston)                         | 75196     |     | 837I |   |
|            | Central Benefits Life                             | 31118     |     | 837P |   |
|            | Central Benefits Life                             | 31118     |     | 837I |   |
|            | Central Benefits Mutual                           | 31118     |     | 837P |   |
|            | Central Benefits Mutual                           | 31118     |     | 837I |   |
|            | Central Benefits National                         | 31118     |     | 837P |   |
|            | Central Benefits National                         | 31118     |     | 837I |   |
|            | Central Coast Alliance                            | 770395311 |     | 837P |   |
|            | Central Mass Health Care (CMHC)                   | 02041     |     | 837P |   |
|            | Central Mass Health Care (CMHC)                   | 02041     |     | 837I |   |
|            | Central Reserve Life                              | 34097     |     | 837P |   |
|            | Central Reserve Life                              | 34097     |     | 837I |   |
|            | Central States Health & Welfare Funds             | 36215     |     | 837P |   |
|            | Central States Health & Welfare Funds             | 36215     |     | 837I |   |
|            | Central Valley Medical Group                      | E3510     |     | 837P | Only claims from providers in Northern Calif. Please contact the EDI Dept for North American Medical Management (NAMM) Lead/Supervisor at 800-956-8000 prior to initial submission of claims. |
|            | Century Health Solutions                          | 48120     |     | 837P |   |
|            | Century Health Solutions                          | 48120     |     | 837I |   |
|            | CHA - Commonwealth Health Alliance                | 23171     |     | 837P |   |
|            | CHA - Commonwealth Health Alliance                | 23171     |     | 837I |   |
|            | ChampVA - HAC                                     | 84146     |     | 837P | ChampVA - HAC is not associated with and does not process claims for TRICARE (formerly CHAMPUS).  |
|            | ChampVA - HAC                                     | 84146     |     | 837I | ChampVA - HAC is not associated with and does not process claims for TRICARE (formerly CHAMPUS).  |
|            | Chautauqua County Healthcare Plan - Mayville, NY  | 16600     |     | 837P |   |
|            | Chautauqua County Healthcare Plan - Mayville, NY  | 16600     |     | 837I |   |
| A 12/13/07 | CHCcares - South Carolina                         | 25151     |     | 837P |   |
| A 12/13/07 | CHCcares - South Carolina                         | 25151     |     | 837I |   |
|            | Chesapeake Life Insurance Company                 | 59223     |     | 837P |   |
|            | Chesapeake Life Insurance Company                 | 59223     |     | 837I |   |
|            | Chesterfield Resources                            | CRI01     |     | 837P |   |
|            | Chicago Health Systems                            | 36334     |     | 837P |   |
|            | Childhealth Plus by Healthfirst (CHP)             | 80141     |     | 837P |   |
|            | Childhealth Plus by Healthfirst (CHP)             | 80141     |     | 837I |   |
|            | Childrens Treatment Unit (CTU)                    | AMM01     |     | 837P |   |
|            | Childrens Treatment Unit (CTU)                    | AMM01     |     | 837I |   |

|  |  |       |     |      |                                  |
|--|--|-------|-----|------|----------------------------------|
|  | CHIP - ChoiceOne (UTMB)                        | UHSCH |     | 837P |                                  |
|  | CHIP - ChoiceOne (UTMB)                        | UHSCH |     | 837I |                                  |
|  | CHIP - Community First                         | COMMF |     | 837P |                                  |
|  | CHIP - Teens to Tots/ Texas University Health  | TTPCH |     | 837P |                                  |
|  | Chiropractic Care of Minnesota, Inc.           | ACN01 |     | 837P |                                  |
|  | CHOC Health Alliance                           | 33065 |     | 837P |                                  |
|  | Christian Brothers Services                    | 61271 |     | 837P |                                  |
|  | Christian Brothers Services                    | 61271 |     | 837I |                                  |
|  | Christus Spohn Health Network                  | SPOHN |     | 837P |                                  |
|  | Christus Spohn Health Network                  | SPOHN |     | 837I |                                  |
|  | Cigna  | 62308 |     | 837P |                                  |
|  | Cigna  | 62308 |     | 837I |                                  |
|  | Cigna  | 62308 | Yes | 835  |                                  |
|  | Cigna - Behavioral Health                      | 02331 |     | 837P |                                  |
|  | Cigna Flex Care (New Mexico only)              | 95266 |     | 837P |                                  |
|  | Cigna Flex Care (New Mexico only)              | 95266 |     | 837I |                                  |
|  | Cigna HealthCare for Seniors (AZ Medicare)     | 86033 |     | 837P |                                  |
|  | City of Amarillo                               | COA01 |     | 837P |                                  |
|  | City of Amarillo                               | COA01 |     | 837I |                                  |
|  | City of San Antonio                            | TTCEC |     | 837P |                                  |
|  | City of San Antonio                            | TTCEC |     | 837I |                                  |
|  | CL Frates and Company/OSMA Health              | 73071 |     | 837P |                                  |
|  | CL Frates and Company/OSMA Health              | 73071 |     | 837I |                                  |
|  | Claim Management Services                      | 39141 |     | 837P |                                  |
|  | Claim Management Services                      | 39141 |     | 837I |                                  |
|  | ClaimsWare, Inc. DBA ManageMed                 | 57080 |     | 837P |                                  |
|  | ClaimsWare, Inc. DBA ManageMed                 | 57080 |     | 837I |                                  |
|  | Clarendon Kids CHIP Program                    | SHP11 | Yes | 837P |                                  |
|  | Clarendon Kids CHIP Program                    | SHP11 | Yes | 837I |                                  |
|  | CNA  | 71063 |     | 837P |                                  |
|  | CNA  | 71063 |     | 837I |                                  |
|  | CNA Health Partners (PCP Only)                 | 71063 |     | 837P |                                  |
|  | Colorado Access HMO                            | COACC |     | 837P |                                  |
|  | Columbia United Providers                      | 91162 |     | 837P |                                  |
|  | Commerce Benefits Group                        | 34181 |     | 837P |                                  |
|  | Commerce Benefits Group                        | 34181 |     | 837I |                                  |
|  | CommonWealth Administrative Group              | 37237 |     | 837P |                                  |
|  | CommonWealth Administrative Group              | 37237 |     | 837I |                                  |
|  | CommonWealth Administrators                    | 37237 |     | 837P |                                  |
|  | CommonWealth Administrators                    | 37237 |     | 837I |                                  |
|  | Commonwealth Care Alliance                     | 14315 |     | 837P |                                  |
|  | Commonwealth Care Alliance                     | 14315 |     | 837I |                                  |
|  | Community Care Behavioral Health Org.          | 25179 |     | 837P |                                  |
|  | Community Care Behavioral Health Org.          | 25179 |     | 837I |                                  |
|  | Community Care BHO                             | 23282 |     | 837P | North Central - See back of card |
|  | Community Care BHO                             | 23282 |     | 837I | North Central - See back of card |
|  | Community Care Managed Health Care Plans of OK | 73143 |     | 837P |                                  |
|  | Community Care Managed Health Care Plans of OK | 73143 |     | 837I |                                  |
|  | Community Care Organization                    | 39126 |     | 837P |                                  |
|  | Community Care Organization                    | 39126 |     | 837I |                                  |
|  | Community Care Plus                            | 71079 |     | 837P |                                  |
|  | Community Care Plus                            | 71079 |     | 837I |                                  |
|  | Community Choice Health Plan of Westchester    | 61948 |     | 837P |                                  |
|  | Community Choice of Michigan                   | 38325 |     | 837P |                                  |
|  | Community Choice of Michigan                   | 38325 |     | 837I |                                  |

|            |  |       |     |      |  |
|------------|--|-------|-----|------|--|
|            | Community Family Care (SynerMed)                         | SYMED |     | 837P |  |
|            | Community First - Star Health Plan                       | COMMF |     | 837P | All lines of business  |
|            | Community First - Star Health Plan                       | COMMF |     | 837I | All lines of business  |
|            | Community Health Alliance                                | 35193 |     | 837P |  |
|            | Community Health Alliance                                | 35193 |     | 837I |  |
|            | Community Health Choice                                  | 48145 |     | 837P | Please include TPI Number (Texas Medicaid Number)  |
|            | Community Health Choice                                  | 48145 |     | 837I | Please include TPI Number (Texas Medicaid Number)  |
|            | Community Health Electronic Claims - CHEC - webTPA       | 75261 |     | 837P |  |
|            | Community Health Electronic Claims - CHEC - webTPA       | 75261 |     | 837I |  |
|            | Community Health Network of Connecticut                  | 62149 |     | 837P | Payer cannot accept electronic claims for Anesthesia. If you have questions on how to submit these claims, please contact LeAnn Olson, Director of Claims, at (203)-237-4000, #3136. |
|            | Community Health Network of Connecticut                  | 62149 |     | 837I | Payer cannot accept electronic claims for Anesthesia. If you have questions on how to submit these claims, please contact LeAnn Olson, Director of Claims, at (203)-237-4000, #3136. |
|            | Community Health Plan                                    | 90010 |     | 837P |  |
|            | Community Health Plan                                    | 90010 |     | 837I |  |
|            | Community Health Plan - St. Joseph, MO                   | 90010 |     | 837P |  |
|            | Community Health Plan - St. Joseph, MO                   | 90010 |     | 837I |  |
|            | Community Health Plan of Washington (CHPW)               | CHPWA |     | 837P |  |
|            | Community Health Plan of Washington (CHPW)               | CHPWA |     | 837I |  |
|            | Community Premier Plus for Neighborhood Health Providers | 32481 |     | 837P |  |
|            | Community Premier Plus for Neighborhood Health Providers | 32481 |     | 837I |  |
|            | Comp - Ohio (Austintown, OH)                             | 34177 |     | 837P |  |
|            | Comp - Ohio (Austintown, OH)                             | 34177 |     | 837I |  |
|            | Comp One (Ohio BWC)                                      | 31147 | Yes | 837P |  |
|            | Comp One (Ohio BWC)                                      | 31147 | Yes | 837I |  |
|            | CompManagement Health Systems, Inc (Ohio BWC)            | 31147 | Yes | 837P |  |
|            | CompManagement Health Systems, Inc (Ohio BWC)            | 31147 | Yes | 837I |  |
|            | Comprehensive Benefits Administrator, Inc.               | 03036 |     | 837P |  |
|            | Comprehensive Benefits Administrator, Inc.               | 03036 |     | 837I |  |
|            | Comprehensive Medical Care (Ohio BWC)                    | 31147 | Yes | 837P |  |
|            | Comprehensive Medical Care (Ohio BWC)                    | 31147 | Yes | 837I |  |
|            | Compusys of Colorado                                     | COMPU |     | 837P |  |
|            | Concert Health Plan                                      | 36434 |     | 837P |  |
|            | Confed Admin Services, Inc.                              | 80667 |     | 837P |  |
|            | Confed Admin Services, Inc.                              | 80667 |     | 837I |  |
| A 02/25/08 | Connecticare - Medicare                                  | 78375 |     | 837P |  |
| A 02/25/08 | Connecticare - Medicare                                  | 78375 |     | 837I |  |
|            | ConnectiCare, Inc.                                       | 06105 |     | 837P |  |
|            | ConnectiCare, Inc.                                       | 06105 |     | 837I |  |
|            | Connecticut Carpenters Health Fund                       | 37307 |     | 837P |  |
|            | Connecticut Carpenters Health Fund                       | 37307 |     | 837I |  |
|            | Connecticut General - Cigna                              | 62308 |     | 837P |  |
|            | Connecticut General - Cigna                              | 62308 |     | 837I |  |
|            | Connecticut General - Mental Health Claims               | 02331 |     | 837P |  |
|            | Consociate Group (Decatur, IL)                           | 37135 |     | 837P |  |
|            | Consociate Group (Decatur, IL)                           | 37135 |     | 837I |  |
|            | Consolidated Associates Railroad                         | 75284 |     | 837P |  |
|            | Consolidated Associates Railroad                         | 75284 |     | 837I |  |
|            | Consolidated Group/HPS                                   | 04274 |     | 837P |  |
|            | Continental General Insurance Company                    | 71404 |     | 837P |  |
|            | Continental General Insurance Company                    | 71404 |     | 837I |  |
|            | Continuum ABC MSO  | 13397 |     | 837P |  |
|            | Contra Costa Health Plan                                 | CCHP  |     | 837P |  |
|            | Cook Children's Health Plan                              | CCHP1 |     | 837P |  |

|  |  |       |     |      |  |
|--|--|-------|-----|------|--|
|  | Cook Children's Health Plan                        | CCHP1 |     | 837I |  |
|  | Cook Children's Star Plan                          | CCHP9 |     | 837P |  |
|  | Cooperative Benefit Administrators (CBA)           | 52132 |     | 837P |  |
|  | Cooperative Benefit Administrators (CBA)           | 52132 |     | 837I |  |
|  | Cooperative Managed Care Services                  | 35199 |     | 837P |  |
|  | Cooperative Managed Care Services                  | 35199 |     | 837I |  |
|  | Coordinated Medical Specialists                    | 58204 |     | 837P |  |
|  | Core Management Resources Group                    | 58231 |     | 837P |  |
|  | CoreSource of AZ, MN                               | 41045 |     | 837P | Only for claims where the "submit claims to address" on the medical ID card is a CoreSource address in the states of Arizona or Minnesota. For assistance call 800-698-0106. |
|  | CoreSource of AZ, MN                               | 41045 |     | 837I | Only for claims where the "submit claims to address" on the medical ID card is a CoreSource address in the states of Arizona or Minnesota. For assistance call 800-698-0106. |
|  | CoreSource of Little Rock                          | 75136 |     | 837P | Only for claims where the "submit claims to address" on the medical ID card is a Coresource address in Little Rock, Arkansas.  |
|  | CoreSource of Little Rock                          | 75136 |     | 837I | Only for claims where the "submit claims to address" on the medical ID card is a Coresource address in Little Rock, Arkansas.  |
|  | CoreSource of MD, PA, IL                           | 35182 |     | 837P |  |
|  | CoreSource of MD, PA, IL                           | 35182 |     | 837I |  |
|  | CoreSource of NC, IN                               | 35180 |     | 837P |  |
|  | CoreSource of NC, IN                               | 35180 |     | 837I |  |
|  | CoreSource of Ohio                                 | 35183 |     | 837P |  |
|  | CoreSource of Ohio                                 | 35183 |     | 837I |  |
|  | Cornerstone Benefit Administrators                 | 35202 |     | 837P |  |
|  | Cornerstone Benefit Administrators                 | 35202 |     | 837I |  |
|  | Corporate Benefit Services of America (CBSA)       | 41124 |     | 837P | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267.  |
|  | Corporate Benefit Services of America (CBSA)       | 41124 |     | 837I | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267.  |
|  | Corporate Benefits Service, Inc. (NC)              | 56116 |     | 837P | Payer ID valid only for claims submission address of PO Box 12953, Charlotte, NC 28220   |
|  | Corporate Benefits Service, Inc. (NC)              | 56116 |     | 837I | Payer ID valid only for claims submission address of PO Box 12953, Charlotte, NC 28220   |
|  | Corporate Systems Administration                   | 37246 |     | 837P |  |
|  | Corporate Systems Administration                   | 37246 |     | 837I |  |
|  | Correctional Medical Services                      | 43160 |     | 837P |  |
|  | CorSolutions                                       | 48146 |     | 837P |  |
|  | Corvel Corporation (Ohio BWC)                      | 31147 | Yes | 837P |  |
|  | Corvel Corporation (Ohio BWC)                      | 31147 | Yes | 837I |  |
|  | Country Life Insurance Company                     | 62553 |     | 837P |  |
|  | Country Life Insurance Company                     | 62553 |     | 837I |  |
|  | Covenant Administrators, Inc. (Atlanta, GA)        | 58102 |     | 837P |  |
|  | Covenant Administrators, Inc. (Atlanta, GA)        | 58102 |     | 837I |  |
|  | Covenant Management Systems Employee Benefit Plan  | CMSEB |     | 837P |  |
|  | Covenant Management Systems Employee Benefit Plan  | CMSEB |     | 837I |  |
|  | Coventry Health Care National Network              | 87043 |     | 837P | Formerly First Health Direct   |
|  | Coventry Health Care National Network              | 87043 |     | 837I | Formerly First Health Direct   |
|  | Coventry Health Care National Network              | 87043 | Yes | 835  | Formerly First Health Direct   |
|  | Coventry Health Care of Delaware, Inc.             | 25130 |     | 837P |  |
|  | Coventry Health Care of Delaware, Inc.             | 25130 |     | 837I |  |
|  | Coventry Health Care of Georgia                    | 25127 |     | 837P |  |
|  | Coventry Health Care of Georgia                    | 25127 |     | 837I |  |
|  | Coventry Health Care of Iowa, Inc.                 | 25132 |     | 837P |  |
|  | Coventry Health Care of Iowa, Inc.                 | 25132 |     | 837I |  |
|  | Coventry Health Care of Kansas, Inc. - Kansas City | 25133 |     | 837P |  |
|  | Coventry Health Care of Kansas, Inc. - Kansas City | 25133 |     | 837I |  |
|  | Coventry Health Care of Louisiana, Inc.            | 25135 |     | 837P |  |
|  | Coventry Health Care of Louisiana, Inc.            | 25135 |     | 837I |  |

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|--|---|-------|-----|------|--|
|  | Coventry Health Care of Nebraska, Inc.                | 25136 |     | 837P |  |
|  | Coventry Health Care of Nebraska, Inc.                | 25136 |     | 837I |  |
|  | Coventry Health Care of the Carolinas, Inc./ Wellpath | 25129 |     | 837P |  |
|  | Coventry Health Care of the Carolinas, Inc./ Wellpath | 25129 |     | 837I |  |
|  | CRA Managed Care (Ohio BWC)                           | 31147 | Yes | 837P |  |
|  | CRA Managed Care (Ohio BWC)                           | 31147 | Yes | 837I |  |
|  | Crawford & Company (Ohio BWC)                         | 31147 | Yes | 837P |  |
|  | Crawford & Company (Ohio BWC)                         | 31147 | Yes | 837I |  |
|  | Creative Medical Systems                              | 64068 |     | 837P |  |
|  | Creative Medical Systems                              | 64068 |     | 837I |  |
|  | Creative Plan Administrators (East Hartford, CT)      | 37320 |     | 837P |  |
|  | Creative Plan Administrators (East Hartford, CT)      | 37320 |     | 837I |  |
|  | Croy-Hall Management, Inc.                            | 37266 |     | 837P |  |
|  | Croy-Hall Management, Inc.                            | 37266 |     | 837I |  |
|  | Custody Medical Services (CMS)                        | AMM01 |     | 837P |  |
|  | Custody Medical Services (CMS)                        | AMM01 |     | 837I |  |
|  | Custom Benefit Administrators (Lacrosse, WI)          | 39170 |     | 837P |  |
|  | Custom Benefit Administrators (Lacrosse, WI)          | 39170 |     | 837I |  |
|  | CWIBENEFITS   | 57080 |     | 837P |  |
|  | CWIBENEFITS   | 57080 |     | 837I |  |
|  | Definity Services                                     | 64159 |     | 837P |  |
|  | Definity Services                                     | 64159 |     | 837I |  |
|  | Delaware Health Plan Consortium                       | 63081 |     | 837P |  |
|  | Delaware Health Plan Consortium                       | 63081 |     | 837I |  |
|  | Delaware Physicians Care, Inc.                        | 27009 |     | 837P |  |
|  | Delaware Physicians Care, Inc.                        | 27009 |     | 837I |  |
|  | DelawareCare  | 25137 |     | 837P |  |
|  | DelawareCare  | 25137 |     | 837I |  |
|  | Delta Health Systems                                  | DHS01 |     | 837P |  |
|  | Denver Health - Indigent                              | 84134 |     | 837P |  |
|  | Denver Health - Indigent                              | 84134 |     | 837I |  |
|  | Denver Health and Hospital Authority                  | 84133 |     | 837P |  |
|  | Denver Health and Hospital Authority                  | 84133 |     | 837I |  |
|  | Denver Health Medical Plan                            | 84135 |     | 837P |  |
|  | Denver Health Medical Plan                            | 84135 |     | 837I |  |
|  | Denver Health Medical Plan, Inc. - Medicare Choice    | 84131 |     | 837P |  |
|  | Denver Health Medical Plan, Inc. - Medicare Choice    | 84131 |     | 837I |  |
|  | Deseret Mutual  | SX105 | Yes | 837P | Contact Enrollment at 800-763-8484 x 909 prior to submitting claims. |
|  | Deseret Mutual  | SX105 | Yes | 837I | Contact Enrollment at 800-763-8484 x 909 prior to submitting claims. |
|  | Desert Family Practice                                | PPM01 |     | 837P |  |
|  | Desert Family Practice Association                    | PPM01 |     | 837P |  |
|  | Desert Hospital                                       | PPM01 |     | 837P |  |
|  | Desert Medical Group (CA)                             | DESRT |     | 837P |  |
|  | Destiny Health  | 36436 |     | 837P |  |
|  | Destiny Health  | 36436 |     | 837I |  |
|  | Detroit Medical Center                                | 56240 |     | 837P |  |
|  | Detroit Medical Center                                | 56240 |     | 837I |  |
|  | Devon Health  | 43471 |     | 837P |  |
|  | Devon Health  | 43471 |     | 837I |  |
|  | Diamond Plan (Coventry)                               | 25131 |     | 837P |  |
|  | Diamond Plan (Coventry)                               | 25131 |     | 837I |  |
|  | Directors Guild of America - Producer Health Plan     | 23706 |     | 837P |  |

|   |       |     |      |  |
|---|-------|-----|------|--|
| Directors Guild of America - Producer Health Plan       | 23706 |     | 837I |  |
| Diversified Administration                              | 06102 |     | 837P |  |
| Diversified Administration                              | 06102 |     | 837I |  |
| Diversified Group Administration                        | 25160 |     | 837P |  |
| DME Region B, AdminaStar                                | 17003 | Yes | 837P |  |
| DME Region B, AdminaStar                                | 17003 | Yes | 835  |  |
| DME Region C, Palmetto                                  | 18003 | Yes | 837P |  |
| DME Region C, Palmetto                                  | 18003 | Yes | 835  |  |
| DME Region D, Noridian                                  | 19003 | Yes | 837P |  |
| DME Region D, Noridian                                  | 19003 | Yes | 835  |  |
| Doctors Hospital of Montclair- San Bernadino (SynerMed) | SYMED |     | 837P |  |
| Driscoll Children's Health Plan (CHIP) (Texas)          | 74284 |     | 837P |  |
| Driscoll Children's Health Plan (CHIP) (Texas)          | 74284 |     | 837I |  |
| DSCC - Division of Specialized Care for Children        | 37600 |     | 837P |  |
| Dunn and Associates Benefits Administrators, Inc.       | 35186 |     | 837P |  |
| Dunn and Associates Benefits Administrators, Inc.       | 35186 |     | 837I |  |
| EBA - City of San Antonio                               | TTCEC |     | 837P |  |
| EBA - City of San Antonio                               | TTCEC |     | 837I |  |
| EBMC  | CX025 |     | 837P |  |
| EBMS (Employee Benefit Management Services, Inc.)       | SX182 |     | 837P |  |
| EBMS (Employee Benefit Management Services, Inc.)       | SX182 |     | 837I |  |
| EBS of Louisiana  | 41198 |     | 837P |  |
| EBS of Louisiana  | 41198 |     | 837I |  |
| EBS of Ohio   | 34166 |     | 837P |  |
| EBS of Ohio   | 34166 |     | 837I |  |
| El Paso First - CHIP                                    | EPF03 | Yes | 837P | Please contact Provider Relations at 915-532-3778 #1068 to enroll. |
| El Paso First - CHIP                                    | EPF03 | Yes | 837I | Please contact Provider Relations at 915-532-3778 #1068 to enroll. |
| El Paso First Group Health                              | EPF08 | Yes | 837P | Please contact Provider Relations at 915-532-3778 #1068 to enroll. |
| El Paso First Group Health                              | EPF08 | Yes | 837I | Please contact Provider Relations at 915-532-3778 #1068 to enroll. |
| ElderPlan, Inc  | 31625 |     | 837P |  |
| ElderPlan, Inc  | 31625 |     | 837I |  |
| Electronic Transmission Corp                            | 75260 |     | 837I |  |
| Ellis Consultants Inc.                                  | ECISF |     | 837P |  |
| Ellis Consultants Inc.                                  | ECISF |     | 837I |  |
| Elmco   | 37253 |     | 837P |  |
| Elmco   | 37253 |     | 837I |  |
| Emerald Health Network Inc (all PPO)                    | 34167 |     | 837P |  |
| Emerald Health Network Inc (all PPO)                    | 34167 |     | 837I |  |
| Emergency Medical Service Fund (EMSF)                   | AMM01 |     | 837P |  |
| Emergency Medical Service Fund (EMSF)                   | AMM01 |     | 837I |  |
| EMI-KP Ambulance Claims                                 | 59299 |     | 837P |  |
| Empire Physicians Medical Group                         | 33029 |     | 837P |  |
| Empire Physicians MG                                    | PPM01 |     | 837P |  |
| Employee Benefit Concepts, Inc. (Farmington Hills, MI)  | 38241 |     | 837P |  |
| Employee Benefit Concepts, Inc. (Farmington Hills, MI)  | 38241 |     | 837I |  |
| Employee Benefit Corporation                            | 37215 |     | 837P |  |
| Employee Benefit Corporation                            | 37215 |     | 837I |  |
| Employee Benefit Management Corporation                 | CX025 |     | 837P |  |
| Employee Benefit Services (Ft. Mill, SC)                | 37216 |     | 837P |  |
| Employee Benefit Services (Ft. Mill, SC)                | 37216 |     | 837I |  |

|  |       |  |      |                  |
|--|-------|--|------|------------------|
| Employee Benefit Services of Louisiana, Inc. (EBS) | 41198 |  | 837P | Louisiana only   |
| Employee Benefit Services of Louisiana, Inc. (EBS) | 41198 |  | 837I | Louisiana only   |
| Employee Benefits Plan Administration, Inc (EBPA)  | 03036 |  | 837P |                  |
| Employee Benefits Plan Administration, Inc (EBPA)  | 03036 |  | 837I |                  |
| Employee Plans, LLC                                | 35112 |  | 837P |                  |
| Employee Plans, LLC                                | 35112 |  | 837I |                  |
| Employee Security, Inc                             | 54098 |  | 837P |                  |
| Employee Security, Inc                             | 54098 |  | 837I |                  |
| Employer Plan Services                             | 74212 |  | 837P |                  |
| Employer Plan Services                             | 74212 |  | 837I |                  |
| Employers Coalition on Health (ECOH)               | MIDSC |  | 837P |                  |
| Employer's Direct Health                           | 75232 |  | 837P |                  |
| Employer's Direct Health                           | 75232 |  | 837I |                  |
| Employer's Direct Health (Employee Plan)           | 75236 |  | 837P |                  |
| Employer's Direct Health (Employee Plan)           | 75236 |  | 837I |                  |
| Employer's Direct Health (Fully Insured)           | 75235 |  | 837P |                  |
| Employer's Direct Health (Fully Insured)           | 75235 |  | 837I |                  |
| Employer's Direct Health (Self-Funded Plan)        | 75233 |  | 837P |                  |
| Employer's Direct Health (Self-Funded Plan)        | 75233 |  | 837I |                  |
| Employers Health Cooperative (EHC)                 | MIDSC |  | 837P |                  |
| Employers Health Insurance (EHI)                   | 61101 |  | 837P |                  |
| Employers Health Insurance (EHI)                   | 61101 |  | 837I |                  |
| Employers Ins. of Wausau                           | 39026 |  | 837P |                  |
| Employers Ins. of Wausau                           | 39026 |  | 837I |                  |
| Employers Mutual, Inc (Jacksonville, FL)           | 59298 |  | 837P |                  |
| Employers Mutual, Inc (Jacksonville, FL)           | 59298 |  | 837I |                  |
| Employers Mutual, Inc (Stuart, FL)                 | 59331 |  | 837P |                  |
| Employers Mutual, Inc (Stuart, FL)                 | 59331 |  | 837I |                  |
| Encircle PPO                                       | 35206 |  | 837P |                  |
| Encircle PPO                                       | 35206 |  | 837I |                  |
| Encompass  | 37110 |  | 837P |                  |
| Encompass  | 37110 |  | 837I |                  |
| Encore Encore                                      | GTPA1 |  | 837P |                  |
| Encore Encore                                      | GTPA1 |  | 837I |                  |
| Encore Health Networks                             | 35206 |  | 837P |                  |
| Encore Health Networks                             | 35206 |  | 837I |                  |
| ENH Medical Group IPA                              | 36364 |  | 837P |                  |
| ENH Medical Group IPA                              | 36364 |  | 837I |                  |
| Enstar Natural Gas                                 | 91136 |  | 837P | Group # required |
| Enstar Natural Gas                                 | 91136 |  | 837I | Group # required |
| Equicor  | 62308 |  | 837P |                  |
| Equicor  | 62308 |  | 837I |                  |
| Equicor PPO  | 62308 |  | 837P |                  |
| Equicor PPO  | 62308 |  | 837I |                  |
| Equitable Plan Services (Oklahoma City, OK)        | 73126 |  | 837P |                  |
| Equitable Plan Services (Oklahoma City, OK)        | 73126 |  | 837I |                  |
| Erin Group Administrators                          | 23250 |  | 837P |                  |
| Erin Group Administrators                          | 23250 |  | 837I |                  |
| E-V Benefits Management, Inc.                      | 34159 |  | 837P |                  |
| EverCare (all states)                              | 87726 |  | 837P |                  |
| EverCare (all states)                              | 87726 |  | 837I |                  |
| Evergreen Health Plan                              | 58233 |  | 837P |                  |
| Evergreen Health Plan                              | 58233 |  | 837I |                  |
| Excel MSO  | EXC01 |  | 837P |                  |
| ExclusiCare  | 71412 |  | 837P |                  |
| ExclusiCare  | 71412 |  | 837I |                  |

|            |   |       |     |      |   |
|------------|---|-------|-----|------|---|
|            | FABOH (CHP/RPU)                               | Call  |     | 837P | Payer ID, rendering provider and location number required to submit claims. Please call Dave Sell at 608-210-6656 to obtain.                                |
|            | FABOH (CHP/RPU)                               | Call  |     | 837I | Payer ID, rendering provider and location number required to submit claims. Please call Dave Sell at 608-210-6656 to obtain.                                |
|            | Facey Medical Foundation                      | 95432 |     | 837P |   |
|            | FACS Group                                    | 37300 |     | 837P |   |
|            | FACS Group                                    | 37300 |     | 837I |   |
|            | Fallon Community Health                       | 22254 | Yes | 837P |   |
|            | Fallon Community Health                       | 22254 | Yes | 837I |   |
|            | Family Health Partners/MC+ Missouri           | 43173 |     | 837P |   |
|            | Family Health Partners/MC+ Missouri           | 43173 |     | 837I |   |
|            | Family Health Partners--Health Wave of Kansas | 31472 |     | 837P |   |
|            | Family Health Partners--Health Wave of Kansas | 31472 |     | 837I |   |
|            | Family Health Plan                            | 96865 |     | 837P | Six (6) Digit Provider number required. Please call Pam Campbell-Provider Relations at 419-251-0474 to obtain   |
|            | Family Health Plan (Ohio BWC)                 | 31147 | Yes | 837P |   |
|            | Family Health Plan (Ohio BWC)                 | 31147 | Yes | 837I |   |
|            | Family Practice Associates                    | HPN11 |     | 837P | Provider ID required. Contact 713-843-6780 to obtain.   |
|            | Family Practice Associates                    | HPN11 |     | 837I | Provider ID required. Contact 713-843-6780 to obtain.   |
|            | Family Seniors Medical Group                  | AMM01 |     | 837P |   |
|            | Family Seniors Medical Group                  | AMM01 |     | 837I |   |
|            | FARA Benefit Services                         | 37289 |     | 837P |   |
|            | FARA Benefit Services                         | 37289 |     | 837I |   |
|            | Farm Family                                   | 14140 |     | 837P |   |
|            | Farm Family                                   | 14140 |     | 837I |   |
|            | FCE Benefit Administrators, Inc.              | 33033 |     | 837P |   |
|            | FCE Benefit Administrators, Inc.              | 33033 |     | 837I |   |
|            | Federated Benefits                            | 37300 |     | 837P |   |
|            | Federated Benefits                            | 37300 |     | 837I |   |
|            | Federated HR Services                         | 37300 |     | 837P |   |
|            | Federated HR Services                         | 37300 |     | 837I |   |
|            | Federated Mutual Insurance                    | 41041 |     | 837P |   |
|            | Federated Mutual Insurance                    | 41041 |     | 837I |   |
|            | Fidelis Care New York                         | 11315 |     | 837P |   |
|            | Fidelis Care New York                         | 11315 |     | 837I |   |
| A 01/23/08 | First Administrators                          | FAMR1 |     | 837P |   |
|            | First Carolina Care                           | 56196 |     | 837P |   |
|            | First Carolina Care                           | 56196 |     | 837I |   |
|            | First Choice (Connecticut)                    | 14162 |     | 837P |   |
|            | First Choice (Connecticut)                    | 14162 |     | 837I |   |
|            | First Choice Health Network                   | 91131 |     | 837P |   |
|            | First Choice Health Network                   | 91131 |     | 837I |   |
|            | First Choice of Midwest (PPO)                 | 75138 |     | 837P |   |
|            | First Choice of Midwest (PPO)                 | 75138 |     | 837I |   |
|            | First Health Network                          | 73159 |     | 837P | Formerly known as PPO Oklahoma, CCN Managed Care, HVCM  |
|            | First Health Network                          | 73159 |     | 837I | Formerly known as PPO Oklahoma, CCN Managed Care, HVCM  |
|            | First Priority Health                         | 23241 |     | 837P |   |
|            | First Service Administrators, Inc             | 59276 |     | 837P | Also knows as Florida 1st   |
|            | First Service Administrators, Inc             | 59276 |     | 837I | Also knows as Florida 1st   |
|            | Firstcare                                     | 94999 | Yes | 837P | Prov ID reqd in loop 2310B, REF02 consisting of 9 numeric characters. To obtain, call 800-365-1051x 6456 Susan  |
|            | Firstcare                                     | 94999 | Yes | 837I | Prov ID reqd in loop 2310B, REF02 consisting of 9 numeric characters. To obtain, call 800-365-1051x 6456 Susan  |
|            | Firstcare - Star Medicaid                     | 94999 | Yes | 837P | Prov ID reqd in loop 2310B, REF02 consisting of 9 numeric characters. To obtain, call 800-365-1051x 6456 Susan  |
|            | Firstcare - Star Medicaid                     | 94999 | Yes | 837I | Prov ID reqd in loop 2310B, REF02 consisting of 9 numeric characters. To obtain, call 800-365-1051x 6456 Susan  |
|            | FirstGuard Health Plan - Kansas               | 90060 |     | 837P | Please contact Karen Joslin at 816-922-7225 to verify Firstguard Provider ID. Payer requires Insured ID of 8 to 11 numeric characters in Loop 2010BA, NM109 |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | FirstGuard Health Plan - Kansas                      | 90060 |     | 837I | Please contact Karen Joslin at 816-922-7225 to verify Firstguard Provider ID. Payer requires Insured ID of 8 to 11 numeric characters in Loop 2010BA, NM109 |
|            | FirstGuard Health Plan - Missouri                    | 90061 |     | 837P |   |
|            | FirstGuard Health Plan - Missouri                    | 90061 |     | 837I |   |
|            | Fiserv Health - Kansas & Tennessee                   | 62061 |     | 837P | Formerly Willis Administrative Services Corporation   |
|            | Fiserv Health - Kansas & Tennessee                   | 62061 |     | 837I | Formerly Willis Administrative Services Corporation   |
|            | Fitzharris & Company, Inc. (Farmingdale, NY)         | 11244 |     | 837P | Payer ID valid only for claims with a submission address of P.O. Box 9182, Farmingdale, NY 11735  |
|            | Flordiancare/American Pioneer (Jacksonville)         | 75086 |     | 837P |   |
|            | Flordiancare/American Pioneer (Jacksonville)         | 75086 |     | 837I |   |
|            | Florida Health Choice - (Wisconsin)                  | AMS01 |     | 837P |   |
|            | Florida Hospital Healthcare Systems                  | 59321 |     | 837P |   |
|            | Florida Hospital Healthcare Systems                  | 59321 |     | 837I |   |
|            | Florida Hospital Waterman                            | 48116 |     | 837P |   |
|            | Florida Hospital Waterman                            | 48116 |     | 837I |   |
| A 01/29/08 | Florida Netpass                                      | 65063 |     | 837P |   |
|            | Flordiancare/AM Pioneer Hlth Plan (Brevard Co))      | 59093 |     | 837P |   |
|            | Flordiancare/AM Pioneer Hlth Plan (Brevard Co))      | 59093 |     | 837I |   |
|            | Flordiancare/AM Pioneer Hlth Plan (S Florida)        | 20165 |     | 837P |   |
|            | Flordiancare/AM Pioneer Hlth Plan (S Florida)        | 20165 |     | 837I |   |
|            | FMH Benefit Services, Inc                            | 48117 |     | 837P |   |
|            | FMH Benefit Services, Inc                            | 48117 |     | 837I |   |
|            | Ford Meter Box Company Inc.                          | 37305 |     | 837P |   |
|            | Ford Meter Box Company Inc.                          | 37305 |     | 837I |   |
|            | Formax, Inc.   | 87066 |     | 837P |   |
|            | Formax, Inc.   | 87066 |     | 837I |   |
|            | Foundation for Medical Care of Tulare & Kings County | TKFMC |     | 837P |   |
|            | Fox Valley Medicine Site 199                         | FVMCH |     | 837P |   |
|            | Fox Valley Medicine Site 451                         | FVMC1 |     | 837P |   |
|            | Fox-Everett – Ingalls Ship Building                  | 64067 |     | 837P |   |
|            | Fox-Everett – Ingalls Ship Building                  | 64067 |     | 837I |   |
|            | Fox-Everett, Inc                                     | 64069 |     | 837P |   |
|            | Fox-Everett, Inc                                     | 64069 |     | 837I |   |
|            | Freedom Blue Medicare Advantage                      | 71768 |     | 837P | Applicable for subscriber numbers starting with "ZPM". Claims must be submitted separately from other payer ID's.   |
|            | Freedom Life Insurance Company of America            | 62324 |     | 837P |   |
| A 12/13/07 | Fresenius Medical Care Health Plan                   | 23130 |     | 837P |   |
| A 12/13/07 | Fresenius Medical Care Health Plan                   | 23130 |     | 837I |   |
|            | Fringe Benefit Management                            | 59069 |     | 837P | Name changed from "United Benefits"   |
|            | Fringe Benefit Management                            | 59069 |     | 837I | Name changed from "United Benefits"   |
|            | Fringe Benefits Coordinators                         | 59204 |     | 837P |   |
|            | Fringe Benefits Coordinators                         | 59204 |     | 837I |   |
|            | FrontPath Health Coalition                           | 34171 |     | 837P |   |
|            | FrontPath Health Coalition                           | 34171 |     | 837I |   |
|            | Gallagher Benefit Administrators, Inc. (GBA)         | 37283 |     | 837P |   |
|            | Gallagher Benefit Administrators, Inc. (GBA)         | 37283 |     | 837I |   |
|            | Galveston County Indigent Health Care                | 30005 |     | 837P |   |
|            | Galveston County Indigent Health Care                | 30005 |     | 837I |   |
|            | Garfield Medical Center (SynerMed)                   | SYMED |     | 837P |   |
|            | Gates McDonald Health Plus, Inc. (Ohio BWC)          | 31147 | Yes | 837P |   |
|            | Gates McDonald Health Plus, Inc. (Ohio BWC)          | 31147 | Yes | 837I |   |
|            | Gateway Health Plan - Medicare Assured               | 60550 |     | 837P |   |
|            | Gateway Health Plan - Medicare Assured               | 60550 |     | 837I |   |
|            | Gateway Health Plan Medicaid PA                      | 25169 |     | 837P |   |

|            |   |       |     |      |   |
|------------|---|-------|-----|------|---|
|            | Gateway Health Plan Medicaid PA                                     | 25169 |     | 837I |   |
|            | Gateway Health Plan of Ohio, Inc.                                   | 76028 |     | 837P |   |
|            | Gateway Health Plan of Ohio, Inc.                                   | 76028 |     | 837I |   |
|            | Gateway Health Plan Ohio - Medicare Assured                         | 91741 |     | 837P |   |
|            | Gateway Health Plan Ohio - Medicare Assured                         | 91741 |     | 837I |   |
|            | Gateway IPA (Pinnacle Health Resources)<br>(Prospect Medical Group) | PROSP |     | 837P |   |
|            | GEHA Mental Health Claims   | 87726 |     | 837P | Call 800-557-5745 for claim submission questions  |
|            | GEHA Mental Health Claims   | 87726 |     | 837I | Call 800-557-5745 for claim submission questions  |
|            | Geisinger Health Plan   | 75273 | Yes | 837P | Please contact Geisinger Health Plan at 888-281-5338, option 3, to obtain an enrollment form; or download a PDF enrollment form at <a href="http://www.thehealthplan.com">www.thehealthplan.com</a> . |
|            | Geisinger Health Plan   | 75273 | Yes | 837I | Please contact Geisinger Health Plan at 888-281-5338, option 3, to obtain an enrollment form; or download a PDF enrollment form at <a href="http://www.thehealthplan.com">www.thehealthplan.com</a> . |
|            | Genesis Healthcare  | AMM01 |     | 837P |   |
|            | Genesis Healthcare  | AMM01 |     | 837I |   |
|            | GENEX Care of Ohio (Ohio BWC)                                       | 31147 | Yes | 837P |   |
|            | GENEX Care of Ohio (Ohio BWC)                                       | 31147 | Yes | 837I |   |
|            | GHC - Eastern Washington State                                      | 91121 |     | 837P | Please call Payer at 800-919-4325 prior to submitting electronic claims.  |
| A 02/25/08 | GHI - Medicare Private Fee for Service                              | 22937 |     | 837P |   |
| A 02/25/08 | GHI - Medicare Private Fee for Service                              | 22937 |     | 837I |   |
|            | GHI - New York (Group Health Inc.)                                  | 13551 |     | 837P | Payer requires assigned Provider ID be included on claims. Please contact Payer for appropriate Provider ID.  |
|            | GHI - New York (Group Health Inc.)                                  | 13551 |     | 837I | Payer requires assigned Provider ID be included on claims. Please contact Payer for appropriate Provider ID.  |
|            | GHI - New York (Group Health Inc.)                                  | 13551 | Yes | 835  |   |
|            | GHI HMO   | 25531 |     | 837P |   |
|            | GHI HMO   | 25531 |     | 837I |   |
|            | GHI HMO Select  | 25531 |     | 837P |   |
|            | GHI HMO Select  | 25531 |     | 837I |   |
|            | GHP (Group Health Plan)   | 25141 |     | 837P |   |
|            | GHP (Group Health Plan)   | 25141 |     | 837I |   |
|            | GI Innovative Management  | 58204 |     | 837P |   |
|            | GIC Indemnity Plan  | 80314 |     | 837P | License #, not UPIN required. 877-210-4083  |
|            | GIC Indemnity Plan  | 80314 |     | 837I | License #, not UPIN required. 877-210-4083  |
|            | Gilsbar, Inc.   | 07205 |     | 837P |   |
|            | Gilsbar, Inc.   | 07205 |     | 837I |   |
|            | Glendale Physicians Alliance  | AMM01 |     | 837P |   |
|            | Golden Rule Insurance Company                                       | 37602 |     | 837P |   |
|            | Golden Rule Insurance Company                                       | 37602 |     | 837I |   |
|            | Golden Triangle Phys Alliance (GTPA) Selectcare TX                  | 72189 |     | 837P |   |
|            | Golden Triangle Phys Alliance (GTPA) Selectcare TX                  | 72189 |     | 837I |   |
|            | Golden Triangle Physicians Alliance                                 | GTPA1 | Yes | 837P | Provider ID required. Contact (713) 843-6780 to obtain ID: GTPA ID in 2310B REF02.  |
|            | Golden Triangle Physicians Alliance                                 | GTPA1 | Yes | 837I | Provider ID required. Contact (713) 843-6780 to obtain ID: GTPA ID in 2310B REF02.  |
|            | Good Samaritan Medical Practice Assn                                | AMM01 |     | 837P |   |
|            | Good Samaritan Medical Practice Assn                                | AMM01 |     | 837I |   |
|            | Government Employees Hospital Association (GEHA)                    | 44054 |     | 837P |   |
|            | Government Employees Hospital Association (GEHA)                    | 44054 |     | 837I |   |
|            | Government Employees Hospital Association (GEHA)                    | 44054 | Yes | 835  |   |
|            | Grant Physicians Practice Association                               | 37234 |     | 837P |   |
|            | Grant Physicians Practice Association                               | 37234 |     | 837I |   |
|            | Great Lakes Health Plan   | 95467 |     | 837P |   |
|            | Great Lakes Health Plan   | 95467 |     | 837I |   |

|            |   |       |     |      |  |
|------------|---|-------|-----|------|--|
|            | Great West Healthcare - formerly American General | 63665 |     | 837P |  |
|            | Great West Healthcare - formerly American General | 63665 |     | 837I |  |
|            | Great West Life & Annuity Insurance Co            | 80705 |     | 837P |  |
|            | Great West Life & Annuity Insurance Co            | 80705 |     | 837I |  |
|            | Great West Life & Annuity Insurance Co            | 80705 | Yes | 835  |  |
|            | Group Administrators                              | 36338 |     | 837P |  |
|            | Group Administrators                              | 36338 |     | 837I |  |
|            | Group and Pension Administrators                  | 48143 |     | 837P |  |
|            | Group and Pension Administrators                  | 48143 |     | 837I |  |
|            | Group Benefit Administrators                      | 72153 |     | 837P |  |
|            | Group Benefit Administrators                      | 72153 |     | 837I |  |
|            | Group Health Coop South Central WI-Claims         | 39167 |     | 837P |  |
|            | Group Health Coop South Central WI-Claims         | 39167 |     | 837I |  |
|            | Group Health Coop South Central WI-Encounters     | 39168 |     | 837P |  |
|            | Group Health Coop South Central WI-Encounters     | 39168 |     | 837I |  |
|            | Group Health Cooperative - East                   | 91121 |     | 837P | COMMERCIAL Medical Claims Eastern Washington State. Please call (888)-767-4670 prior to first submission of production claims.   |
|            | Group Health Cooperative - West                   | 91051 |     | 837P | COMMERCIAL Medical Claims Western Washington State. Please call (888)-767-4670 prior to first submission of production claims. All GHC products including Options, Alliant, Medicare + Choice and Healthy Options can be submitted electronically. |
|            | Group Health Cooperative - West                   | 91051 |     | 837I | COMMERCIAL Medical Claims Western Washington State. Please call (888)-767-4670 prior to first submission of production claims. All GHC products including Options, Alliant, Medicare + Choice and Healthy Options can be submitted electronically. |
|            | Group Health Cooperative of Eau Claire            | 95192 | Yes | 837P |  |
|            | Group Health Cooperative of Eau Claire            | 95192 | Yes | 837I |  |
|            | Group Health Managers                             | 38194 |     | 837P |  |
|            | Group Health Managers                             | 38194 |     | 837I |  |
|            | Group Insurance Service Center, Inc.              | 37276 |     | 837P |  |
|            | Group Insurance Service Center, Inc.              | 37276 |     | 837I |  |
|            | Group Practice Affiliates                         | 68046 |     | 837P |  |
|            | Group Practice Affiliates                         | 68046 |     | 837I |  |
|            | Guardian Life Insurance Co of America             | 64246 |     | 837P |  |
|            | Guardian Life Insurance Co of America             | 64246 |     | 837I |  |
|            | H.E.R.E.I.U Welfare Pension Funds                 | 37114 |     | 837P |  |
|            | H.E.R.E.I.U Welfare Pension Funds                 | 37114 |     | 837I |  |
|            | HAP/AHL/Curanet                                   | 38224 |     | 837P | Name changed from "Health Alliance Plan of Michigan"   |
|            | HAP/AHL/Curanet                                   | 38224 |     | 837I | Name changed from "Health Alliance Plan of Michigan"   |
|            | Harmony Health Plan of Illinois                   | 36406 |     | 837P |  |
|            | Harmony Health Plan of Illinois                   | 36406 |     | 837I |  |
|            | Harmony Health Plan of Indiana                    | 36405 |     | 837P |  |
|            | Harmony Health Plan of Indiana                    | 36405 |     | 837I |  |
|            | Harmony Health Plan of Missouri                   | 14163 |     | 837P |  |
|            | Harmony Health Plan of Missouri                   | 14163 |     | 837I |  |
|            | Harrington Benefit Services                       | 95266 |     | 837P |  |
|            | Harrington Benefit Services                       | 95266 |     | 837I |  |
|            | Harrington Benefit Services, Inc.                 | 75196 |     | 837P | Formerly Centra  |
|            | Harrington Benefit Services, Inc.                 | 75196 |     | 837I | Formerly Centra  |
|            | Harrington Benefit Services, Inc. - Oklahoma      | 59142 |     | 837P | State of Oklahoma-Healthchoice; City of Oklahoma City; Department of Rehabilitative Services; Department of Corrections; Mayes County Jail   |
|            | Harrington Benefit Services, Inc. - Oklahoma      | 59142 |     | 837I | State of Oklahoma-Healthchoice; City of Oklahoma City; Department of Rehabilitative Services; Department of Corrections; Mayes County Jail   |
| A 01/23/08 | Hartford Underwriters                             | 30104 |     | 837P |  |
|            | Harvard Pilgrim Health Care                       | 04271 |     | 837P |  |
|            | Harvard Pilgrim Health Care                       | 04271 |     | 837I |  |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | HCH Administration (Illinois)                                | 37111 |     | 837P |   |
|            | HCH Administration (Illinois)                                | 37111 |     | 837I |   |
|            | HCH Administrators, Inc                                      | 37215 |     | 837P | Formerly John P Pearl & Associates  |
|            | HCH Administrators, Inc                                      | 37215 |     | 837I | Formerly John P Pearl & Associates  |
|            | HCHA Albq - Self Funded                                      | 37329 |     | 837P |   |
|            | HCHA Albq - Self Funded                                      | 37329 |     | 837I |   |
|            | HCS - Health Claims Service                                  | 82018 |     | 837P |   |
|            | HCS - Health Claims Service                                  | 82018 |     | 837I |   |
|            | HDM Benefit Solutions  | HDMCO |     | 837P |   |
|            | HDM Benefit Solutions  | HDMCO |     | 837I |   |
|            | HDPC-Premier Healthcare                                      | 90023 |     | 837P |   |
|            | HDPC-Premier Healthcare                                      | 90023 |     | 837I |   |
| D 01/29/08 | Health 1, 2, 3, Inc.   | 23173 |     | 837P |   |
| D 01/29/08 | Health 1, 2, 3, Inc.   | 23173 |     | 837I |   |
|            | Health Administration Service, Inc.                          | 34185 |     | 837P |   |
|            | Health Administration Service, Inc.                          | 34185 |     | 837I |   |
|            | Health Alliance Exclusive & Plus                             | 23172 |     | 837P |   |
|            | Health Alliance Exclusive & Plus                             | 23172 |     | 837I |   |
|            | Health Alliance Medical Plans, Inc.                          | 77950 |     | 837P | Requires 6 digit Provider ID.   |
|            | Health Alliance Medical Plans, Inc.                          | 77950 |     | 837I | Requires 6 digit Provider ID.   |
|            | Health Care Network of Wisconsin (HCN)                       | 42102 |     | 837P |   |
|            | Health Care Network of Wisconsin (HCN)                       | 42102 |     | 837I |   |
|            | Health Care Payer's Coalition (Toledo, OH)                   | 34193 |     | 837P |   |
|            | Health Care Payer's Coalition (Toledo, OH)                   | 34193 |     | 837I |   |
| D 02/25/08 | Health Care Savings  | 56142 |     | 837P |   |
| D 02/25/08 | Health Care Savings  | 56142 |     | 837I |   |
|            | Health Cost Solutions  | 62111 |     | 837P |   |
|            | Health Cost Solutions  | 62111 |     | 837I |   |
|            | Health Designs Plus (Hudson, OH)                             | 34158 |     | 837P |   |
|            | Health Designs Plus (Hudson, OH)                             | 34158 |     | 837I |   |
|            | Health EZ  | 16120 |     | 837P |   |
|            | Health Management Solutions (Ohio BWC)                       | 31147 | Yes | 837P |   |
|            | Health Management Solutions (Ohio BWC)                       | 31147 | Yes | 837I |   |
|            | Health Net - California & Oregon                             | 95567 |     | 837P |   |
|            | Health Net - California & Oregon                             | 95567 |     | 837I |   |
|            | Health Net - California (Encounters)                         | 95570 |     | 837P | Requires customer specific submitter ID.  |
|            | Health Net Federal Services                                  | 38520 |     | 837P |   |
|            | Health Net Federal Services                                  | 38520 |     | 837I |   |
|            | Health Net Pearl (PFFS)                                      | SX185 |     | 837P |   |
|            | Health Net Pearl (PFFS)                                      | 12X48 |     | 837I |   |
|            | Health Network America                                       | 20199 |     | 837P |   |
|            | Health Network America                                       | 20199 |     | 837I |   |
|            | Health New England   | 04286 |     | 837P |   |
|            | Health Partners - Jackson, TN                                | 62157 |     | 837P |   |
|            | Health Partners - Jackson, TN                                | 62157 |     | 837I |   |
|            | Health Partners - MN   | 07003 | Yes | 837P |   |
|            | Health Partners - MN   | 07003 | Yes | 837I |   |
|            | Health Partners - Pennsylvania                               | 80142 |     | 837P |   |
|            | Health Partners - Pennsylvania                               | 80142 |     | 837I |   |
|            | Health Partners MN   | 00720 | Yes | 837P | Providers must contact Health Partners MN at 800-444-4558 to receive HPFIN Number prior to sending claims. Payer ID changed from "SX009" to "00720" |
|            | Health Plan of Michigan                                      | 83253 |     | 837P |   |
|            | Health Plan of Michigan                                      | 83253 |     | 837I |   |
|            | Health Plan of Nevada (claims)                               | 76342 |     | 837P |   |
|            | Health Plan of Nevada (claims)                               | 76342 |     | 837I |   |
|            | Health Plan of Nevada (encounters)                           | 76343 |     | 837P |   |
|            | Health Plan of Nevada (encounters)                           | 76343 |     | 837I |   |
|            | Health Plan of San Joaquin/San Joaquin Health Administrators | 68035 |     | 837P |   |

|  |       |     |      |  |
|--|-------|-----|------|--|
| Health Plan of San Joaquin/San Joaquin Health Administrators | 68035 |     | 837I |  |
| Health Plans Inc.  | 44273 |     | 837P |  |
| Health Plans Inc.  | 44273 |     | 837I |  |
| Health Plus PHSP (Brooklyn, NY)                              | 11324 |     | 837P |  |
| Health Plus PHSP (Brooklyn, NY)                              | 11324 |     | 837I |  |
| Health Risk Management (HRM)                                 | 41170 |     | 837P |  |
| Health Risk Management (HRM)                                 | 41170 |     | 837I |  |
| Health Services for Children with Special Needs              | 37290 |     | 837P |  |
| Health Services for Children with Special Needs              | 37290 |     | 837I |  |
| Health Services Management                                   | HSM01 |     | 837P |  |
| Health Services Preferred (HSP) –Emerald Health              | 34167 |     | 837P |  |
| Health Services Preferred (HSP) –Emerald Health              | 34167 |     | 837I |  |
| Healthcare Mangement Administration (HMA)                    | HMA01 |     | 837P |  |
| Healthcare Mangement Administration (HMA)                    | HMA01 |     | 837I |  |
| Healthcare Partners  | HCP01 |     | 837P |  |
| Healthcare Partners  | HCP01 |     | 837I |  |
| HealthCare Partners, IPA                                     | 11328 |     | 837P | Formerly Heritage New York Medical Group   |
| HealthCare Partners, IPA                                     | 11328 |     | 837I | Formerly Heritage New York Medical Group   |
| Healthcare Solutions Group                                   | 73147 |     | 837P |  |
| Healthcare Solutions Group                                   | 73147 |     | 837I |  |
| Healthcare USA   | 25143 |     | 837P | Must send HealthCare USA Provider ID number in the 2310B Loop, REF02 segment (with a G2 qualifier in the REF01). Call 800-625-7602 for Central/Western Missouri or 800-213-7792 for Eastern Missouri to obtain |
| Healthcare USA   | 25143 |     | 837I | Must send HealthCare USA Provider ID number in the 2310B Loop, REF02 segment (with a G2 qualifier in the REF01). Call 800-625-7602 for Central/Western Missouri or 800-213-7792 for Eastern Missouri to obtain |
| Healthcare's Finest Network (HFN)                            | 36335 |     | 837P |  |
| Healthcare's Finest Network (HFN)                            | 36335 |     | 837I |  |
| HealthChoice of AZ   | 62179 |     | 837P |  |
| HealthChoice of AZ   | 62179 |     | 837I |  |
| HealthChoice of Connecticut/Yale Preferred Health            | 95376 |     | 837P |  |
| HealthChoice of Connecticut/Yale Preferred Health            | 95376 |     | 837I |  |
| Healthcomp, Inc.   | 85729 |     | 837P |  |
| Healthcomp, Inc.   | 85729 |     | 837I |  |
| Healthfirst TPA (Tyler, TX)                                  | 75234 |     | 837P |  |
| Healthfirst TPA (Tyler, TX)                                  | 75234 |     | 837I |  |
| Healthfirst 65 Plus  | 80141 |     | 837P |  |
| Healthfirst 65 Plus  | 80141 |     | 837I |  |
| Healthfirst Family Health Plus (FHP)                         | 80141 |     | 837P |  |
| Healthfirst Family Health Plus (FHP)                         | 80141 |     | 837I |  |
| Healthfirst New York (Commercial)                            | 80141 |     | 837P |  |
| Healthfirst New York (Commercial)                            | 80141 |     | 837I |  |
| Healthfirst, Inc. (NY)                                       | 80141 |     | 837P |  |
| Healthfirst, Inc. (NY)                                       | 80141 |     | 837I |  |
| HealthHelp Network, Inc (HHNI)                               | 59087 |     | 837P |  |
| HealthHelp Network, Inc (HHNI)                               | 59087 |     | 837I |  |
| Healthlink HMO   | 96475 | Yes | 837P | Please call Provider Relations Dept at 800-624-2356 for unique provider number.  |
| Healthlink HMO   | 96475 | Yes | 837I | Please call Provider Relations Dept at 800-624-2356 for unique provider number.  |
| Healthlink PPO   | 90001 |     | 837P | Please call Provider Relations Dept at 800-624-2356 for unique provider number.  |
| Healthlink PPO   | 90001 |     | 837I | Please call Provider Relations Dept at 800-624-2356 for unique provider number.  |
| HealthNet - Arizona  | 38309 |     | 837P |  |

|  |  |       |     |      |  |
|--|--|-------|-----|------|--|
|  | HealthNet of the Northeast, Inc.   | 06108 | Yes | 837P | Arizona. Payer requires unique provider ID; please call the Provider Call Unit at 800-438-7886 for enrollment. |
|  | HealthNet of the Northeast, Inc.   | 06108 | Yes | 837I | Arizona. Payer requires unique provider ID; please call the Provider Call Unit at 800-438-7886 for enrollment. |
|  | HealthNet of the Northeast, Inc.   | 06108 | Yes | 835  |  |
|  | HealthPlan Services - Harrington   | 95266 |     | 837P |  |
|  | HealthPlan Services - Harrington   | 95266 |     | 837I |  |
|  | HealthPlan Services (Tampa)  | 59140 |     | 837P |  |
|  | HealthPlan Services (Tampa)  | 59140 |     | 837I |  |
|  | HealthSCOPE Benefits, Inc.   | 71063 |     | 837P |  |
|  | HealthSCOPE Benefits, Inc.   | 71063 |     | 837I |  |
|  | HealthSCOPE Benefits, Inc. (Repricing AR)  | 48153 |     | 837P |  |
|  | HealthSCOPE Benefits, Inc. (Repricing AR)  | 48153 |     | 837I |  |
|  | HealthSmart Preferred Care (HSPC)  | 75250 |     | 837P |  |
|  | HealthSmart Preferred Care (HSPC)  | 75250 |     | 837I |  |
|  | Healthsource - Arkansas  | 71074 | Yes | 837P | Provider ID required. Contact 800-831-6654 to obtain ID.   |
|  | Healthsource - Arkansas  | 71074 | Yes | 837I | Provider ID required. Contact 800-831-6654 to obtain ID.   |
|  | Healthsource - Arkansas (Medicare HMO)(Cigna)  | 71075 | Yes | 837P | Provided ID required. Contact 800-831-6654 to obtain ID.   |
|  | Healthsource - Arkansas (Medicare HMO)(Cigna)  | 71075 | Yes | 837I | Provided ID required. Contact 800-831-6654 to obtain ID.   |
|  | Healthsource - Georgia (Cigna)   | 58210 | Yes | 837P | Provider ID required. Contact 800-909-2227 x 5760 to obtain ID.  |
|  | Healthsource - Georgia (Cigna)   | 58210 | Yes | 837I | Provider ID required. Contact 800-909-2227 x 5760 to obtain ID.  |
|  | Healthsource - Kentucky  | 61127 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Kentucky  | 61127 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Maine   | 01041 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Maine   | 01041 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Massachusetts   | 02041 |     | 837P |  |
|  | Healthsource - Massachusetts   | 02041 |     | 837I |  |
|  | Healthsource - New Hampshire   | 02038 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - New Hampshire   | 02038 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - North Carolina (Cigna)  | 56147 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - North Carolina (Cigna)  | 56147 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Ohio  | 31141 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Ohio  | 31141 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - South Carolina  | 06119 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - South Carolina  | 06119 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Tennessee (Cigna)   | 62129 | Yes | 837P | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource - Tennessee (Cigna)   | 62129 | Yes | 837I | Provider ID required. Contact payer to obtain ID   |
|  | Healthsource CMHC  | 02041 |     | 837P |  |
|  | Healthsource CMHC  | 02041 |     | 837I |  |
|  | Healthsource of North Texas (Cigna)  | 75255 | Yes | 837P | Requires Healthsource Practice ID. Call 800-276-2654 to confirm.   |
|  | Healthsource of North Texas (Cigna)  | 75255 | Yes | 837I | Requires Healthsource Practice ID. Call 800-276-2654 to confirm.   |
|  | Healthsource Provident (Cigna)   | 68195 | Yes | 837P |  |
|  | Healthsource Provident (Cigna)   | 68195 | Yes | 837I |  |
|  | HealthSpring HMO   | 63092 | Yes | 837P | Please contact EDI Coordinator at 866-593-4484 to obtain application. This payer ID is not for PPO claims.     |
|  | HealthStar, Inc  | 36332 |     | 837P |  |
|  | HealthStar, Inc  | 36332 |     | 837I |  |
|  | Heritage Consultants   | 59230 |     | 837P |  |
|  | Heritage Physician Network (Houston) Also see: Family Practice Assoc/Golden Triangle Phy | HPN11 | Yes | 837P | Provider ID required. Contact 713-843-6780 to obtain ID.   |
|  | Heritage Physician Network (Houston) Also see: Family Practice Assoc/Golden Triangle Phy | HPN11 | Yes | 837I | Provider ID required. Contact 713-843-6780 to obtain ID.   |
|  | High Desert Primary Care   | 33069 |     | 837P |  |
|  | High Desert Primary Care   | 33069 |     | 837I |  |
|  | Highmark-Key Family  | 35145 |     | 837P |  |
|  | Highmark-Key Family  | 35145 |     | 837I |  |
|  | Hill Physicians Medical Group  | 00046 |     | 837P | Provider ID required in Loop 2310B REF02 and N5 Qualifier. Call Joan Donham at 925-362-6259 to obtain.         |

|            |   |       |     |      |   |
|------------|---|-------|-----|------|---|
|            | Hillcrest Benefit Administrators                      | 59347 |     | 837P |   |
|            | Hillcrest Benefit Administrators                      | 59347 |     | 837I |   |
|            | HIP-Health Insurance Plan of Greater New York         | 55247 | Yes | 837P | Individual provider enrollment is required by HIP of NY. Please call HIP of NY Provider Relations to obtain the enrollment form at 212-630-8711 or E-mail at edisupport@hipusa.com. |
|            | HIP-Health Insurance Plan of Greater New York         | 55247 | Yes | 837I | Individual provider enrollment is required by HIP of NY. Please call HIP of NY Provider Relations to obtain the enrollment form at 212-630-8711 or E-mail at edisupport@hipusa.com. |
|            | HMA - Health Management Admin                         | 12T11 | Yes | 837I |   |
|            | HMA - Healthcare Management Administration            | HMA01 |     | 837P |   |
|            | HMA - Healthcare Management Administration            | HMA01 |     | 837I |   |
|            | HMA Hawaii  | 86066 |     | 837P |   |
|            | HMO of Colorado                                       | COHMO |     | 837P |   |
|            | Hollywood Presbyterian (SynerMed)                     | SYMED |     | 837P |   |
|            | Hometown Health Plans NV                              | 88023 |     | 837P |   |
|            | Hoosier Alliance Health Plan                          | 20475 |     | 837P |   |
|            | Hoosier Alliance Health Plan                          | 20475 |     | 837I |   |
|            | Horizon HealthCare Admin (HHA)                        | 22304 |     | 837P |   |
|            | Horizon HealthCare Admin (HHA)                        | 22304 |     | 837I |   |
|            | Horizon NJ Health                                     | 22326 |     | 837P | Medicaid managed care. For EDI support, please e-mail edi.hm@kmhp.com.; Formerly Horizon Mercy Health Plan  |
|            | Horizon NJ Health                                     | 22326 |     | 837I | Medicaid managed care. For EDI support, please e-mail edi.hm@kmhp.com.; Formerly Horizon Mercy Health Plan  |
|            | Hotel Employees & Restaurant Employees Health & Trust | 91136 |     | 837P | Group # required  |
|            | Hotel Employees & Restaurant Employees Health & Trust | 91136 |     | 837I | Group # required  |
|            | HPN   | HPN11 | Yes | 837P | Provider ID required. Contact 713-843-6780 to obtain ID.  |
|            | HPN   | HPN11 | Yes | 837I | Provider ID required. Contact 713-843-6780 to obtain ID.  |
|            | HPS Paradigm, Inc.                                    | 58227 |     | 837P |   |
|            | HPS Paradigm, Inc.                                    | 58227 |     | 837I |   |
|            | HRM Claim Management/HRM                              | 41170 |     | 837P |   |
|            | HRM Claim Management/HRM                              | 41170 |     | 837I |   |
|            | Hudson Health Plan                                    | 13335 | Yes | 837P | Provider enrollment is required by this payer.  |
|            | Hudson Health Plan                                    | 13335 | Yes | 837I | Provider enrollment is required by this payer.  |
|            | Humana  | 61101 |     | 837P |   |
|            | Humana  | 61101 |     | 837I |   |
|            | Humana (Encounters)                                   | 61102 |     | 837P |   |
|            | Humana Emphesys                                       | 61101 |     | 837P |   |
|            | Humana Emphesys                                       | 61101 |     | 837I |   |
|            | Humana Employers Health Insurance                     | 61101 |     | 837P |   |
|            | Humana Employers Health Insurance                     | 61101 |     | 837I |   |
|            | Humana Health Plans of Ohio                           | 95348 | Yes | 837P | **ChoiceCare – Cincinnati Platform Claims only** Please call 800-575-2333 to obtain provider ID.  |
|            | Humana Insurance Company Choice Care Network          | 61101 |     | 837P |   |
|            | Humana Insurance Company Choice Care Network          | 61101 |     | 837I |   |
|            | Humana Military, Palmetto                             | 614   | Yes | 837P |   |
|            | Humana Military, Palmetto                             | 614   | Yes | 837I |   |
| A 01/23/08 | Humana Veterans Health Care Services                  | HERO  |     | 837P |   |
|            | Humana, Inc. (Claims)                                 | 61101 |     | 837P |   |
|            | Humana, Inc. (Claims)                                 | 61101 |     | 837I |   |
|            | Humboldt-Del Norte Foundation for Medical Care        | 94154 |     | 837P |   |
|            | Hunt Insurance Group                                  | 37260 |     | 837P |   |
|            | Hunt Insurance Group                                  | 37260 |     | 837I |   |
|            | IBA Self Funded Group                                 | 31107 |     | 837P |   |
|            | IBA Self Funded Group                                 | 31107 |     | 837I |   |
|            | ICM   | 37296 |     | 837P |   |
|            | ICON Benefit Administrators                           | 75185 |     | 837P |   |
|            | ICON Benefit Administrators                           | 75185 |     | 837I |   |
|            | Idaho Physicians Network                              | PRIME |     | 837P |   |

|            |  |       |  |      |                            |
|------------|--|-------|--|------|----------------------------|
|            | IE Shaffer (West Trenton, NJ)  | 22175 |  | 837P |                            |
|            | IE Shaffer (West Trenton, NJ)  | 22175 |  | 837I |                            |
|            | IMcare   | 41600 |  | 837P |                            |
|            | IMcare   | 41600 |  | 837I |                            |
|            | INDECS Corporation   | 40585 |  | 837P |                            |
|            | INDECS Corporation   | 40585 |  | 837I |                            |
|            | Independence Blue Cross  | 54704 |  | 837P |                            |
|            | Independence Medical Group (CA)  | MHM01 |  | 837P |                            |
|            | Indiana Health Network   | 35204 |  | 837P |                            |
|            | Indiana Health Network   | 35204 |  | 837I |                            |
|            | Indiana ProHealth Network  | 35161 |  | 837P |                            |
|            | Indiana ProHealth Network  | 35161 |  | 837I |                            |
|            | Indiana Teamsters Health Benefits Fund                                     | 35107 |  | 837P |                            |
|            | Individual Health Insurance Companies                                      | 31053 |  | 837P |                            |
|            | Individual Health Insurance Companies                                      | 31053 |  | 837I |                            |
|            | Informed, LLC  | 52196 |  | 837P |                            |
|            | Informed, LLC  | 52196 |  | 837I |                            |
|            | Inland Empire Health Plan  | IEHP1 |  | 837P |                            |
|            | Innovative Healthware Solutions  | 04320 |  | 837P |                            |
|            | Innovative Healthware Solutions  | 04320 |  | 837I |                            |
|            | Instil Health HMO  | C60   |  | 837P |                            |
|            | Instil Health PPO  | C61   |  | 837P |                            |
|            | Insurance Administrators of America, Inc. (IAA)                            | 37279 |  | 837P |                            |
|            | Insurance Administrators of America, Inc. (IAA)                            | 37279 |  | 837I |                            |
|            | Insurance Design Administrators  | 13315 |  | 837P |                            |
|            | Insurance Design Administrators  | 13315 |  | 837I |                            |
|            | Insurance Management Services of Texas (IMS)                               | IMSMS |  | 837P | Located in Amarillo, Texas |
|            | Insurance Management Services of Texas (IMS)                               | IMSMS |  | 837I | Located in Amarillo, Texas |
|            | Insurance Services of Lubbock  | ISL11 |  | 837P |                            |
|            | Insurers Administrative Corporation (Phoenix, AZ)                          | 86304 |  | 837P |                            |
|            | Insurers Administrative Corporation (Phoenix, AZ)                          | 86304 |  | 837I |                            |
|            | Integra Administrative Group (Seaford, DE)                                 | 51020 |  | 837P |                            |
|            | Integra Administrative Group (Seaford, DE)                                 | 51020 |  | 837I |                            |
|            | Integra Group  | 31127 |  | 837P |                            |
|            | Integra Group  | 31127 |  | 837I |                            |
|            | Integra Group-CHA  | 31129 |  | 837P |                            |
| A 12/13/07 | Integranet   | 74314 |  | 837P |                            |
| A 12/13/07 | Integranet   | 74314 |  | 837I |                            |
|            | Integrated Care Network by Emerald   | 34167 |  | 837P |                            |
|            | Integrated Care Network by Emerald   | 34167 |  | 837I |                            |
|            | InterCare Health Plans, Inc.   | 37227 |  | 837P |                            |
|            | InterCare Health Plans, Inc.   | 37227 |  | 837I |                            |
|            | Interface EAP  | 60280 |  | 837P |                            |
|            | Interface EAP  | 60280 |  | 837I |                            |
|            | Intergroup Service Corporation   | 23287 |  | 837P |                            |
|            | Intergroup Service Corporation   | 23287 |  | 837I |                            |
|            | International Brotherhood of Boilermakers                                  | 36609 |  | 837P |                            |
|            | International Brotherhood of Boilermakers<br>Employee Health Care          | 48603 |  | 837P |                            |
|            | International Brotherhood of Boilermakers<br>Employee Health Care          | 48603 |  | 837I |                            |
|            | International Medical Group  | IMGIN |  | 837P |                            |
|            | International Medical Group  | IMGIN |  | 837I |                            |
|            | International Union of Operating Engineers:<br>Local 15, 15A, 15C, and 15D | 37269 |  | 837P |                            |
|            | International Union of Operating Engineers:<br>Local 15, 15A, 15C, and 15D | 37269 |  | 837I |                            |

|   |           |     |      |  |
|---|-----------|-----|------|--|
| International Union of Operating Engineers: Local 4 Health & Welfare Fund | 37241     |     | 837P |  |
| Iowa Benefits, Inc (IBI)  | 41124     |     | 837P |  |
| Iowa Benefits, Inc (IBI)  | 41124     |     | 837I |  |
| ISOL  | ISL11     |     | 837P |  |
| IU Medical Group  | 351693695 |     | 837P | Includes Wishard, Methodist and St. Vincent Networks   |
| J. F. Molloy and Associates, Inc  | 61271     |     | 837P |  |
| J. F. Molloy and Associates, Inc  | 61271     |     | 837I |  |
| Jackson Memorial Health Plan (FL)   | 05014     |     | 837P |  |
| JFK Hospital  | PPM01     |     | 837P |  |
| JI Specialty Services, Inc.   | JISSP     |     | 837P |  |
| JI Specialty Services, Inc.   | JISSP     |     | 837I |  |
| John Alden Life Insurance Company   | 41099     |     | 837P |  |
| John Alden Life Insurance Company   | 41099     |     | 837I |  |
| John Hancock  | 80314     |     | 837P |  |
| John Hancock  | 80314     |     | 837I |  |
| Johns Hopkins Healthcare - Priority Partners                              | 52189     | Yes | 837P | Contact Peter Zirpolo at Pzirpolo@JHHC.com prior to submitting claims.   |
| Johns Hopkins Healthcare - Priority Partners                              | 52189     | Yes | 837I | Contact Peter Zirpolo at Pzirpolo@JHHC.com prior to submitting claims.   |
| Joplin Claims   | 43178     |     | 837P |  |
| Joplin Claims   | 43178     |     | 837I |  |
| Joy Medical Group   | AMM01     |     | 837P |  |
| JP Farley Corporation   | 34136     |     | 837P |  |
| JP Farley Corporation   | 34136     |     | 837I |  |
| JSL Administrators  | 37272     |     | 837P |  |
| JSL Administrators  | 37272     |     | 837I |  |
| Kaiser Foundation Health Plan of Colorado                                 | 91617     |     | 837P |  |
| Kaiser Foundation Health Plan of Colorado                                 | 91617     |     | 837I |  |
| Kaiser Foundation Health Plan of Georgia                                  | 21313     |     | 837P |  |
| Kaiser Foundation Health Plan of Georgia                                  | 21313     |     | 837I |  |
| Kaiser Foundation Health Plan of Northern California                      | 94135     |     | 837P | Please contact Cheryl G. Robinson at 866-285-0362 to obtain Kaiser assigned site ID.   |
| Kaiser Foundation Health Plan of Northern California                      | 94135     |     | 837I | Please contact Cheryl G. Robinson at 866-285-0362 to obtain Kaiser assigned site ID.   |
| Kaiser Foundation Health Plan of Southern California                      | 94134     |     | 837P | Commercial Provider ID required by Kaiser (ID can be up to 12 numeric ID's) in Loop 2010BA/2330A, Segment NM109. Please contact Tina Cheung at 626-405-6404. |
| Kaiser Foundation Health Plan of Southern California                      | 94134     |     | 837I | Commercial Provider ID required by Kaiser (ID can be up to 12 numeric ID's) in Loop 2010BA/2330A, Segment NM109. Please contact Tina Cheung at 626-405-6404. |
| Kaiser Foundation Health Plan of the Mid-Atlantic States                  | 52095     |     | 837P | For more information, please contact Kenya Neal at Kaiser 301-625-2264.  |
| Kaiser Foundation Health Plan of the Mid-Atlantic States                  | 52095     |     | 837I | For more information, please contact Kenya Neal at Kaiser 301-625-2264.  |
| Kaiser Foundation of the Northwest  | 93079     |     | 837P |  |
| Kaiser Health Plan of Ohio  | 34092     |     | 837P |  |
| Kaiser Health Plan of Ohio  | 34092     |     | 837I |  |
| Kaiser Permanente (Colorado Plans Only Except Colorado Springs)           | COKSR     |     | 837P |  |
| Kaiser Permanente (Colorado Springs Only)                                 | KSRCSS    |     | 837P |  |
| Kaiser Permanente (Southern California Only)                              | KS001     |     | 837P |  |
| Kanawha HealthCare Solutions, Inc.  | 57038     |     | 837P |  |
| Kanawha HealthCare Solutions, Inc.  | 57038     |     | 837I |  |
| Kanawha Insurance Company   | 57038     |     | 837P |  |
| Kanawha Insurance Company   | 57038     |     | 837I |  |
| Kansas Health Solutions for Medicaid Mental Health                        | 98601     | Yes | 837P | Contact ClaimRemedi Enrollment at 800-763-8484 x 909 for assistance.   |
| Kaweah Delta  | TKFMC     |     | 837P |  |
| Keenan & Associates   | 95279     |     | 837P |  |
| Kelsey-Sebold   | KELSE     |     | 837P |  |
| Kelsey-Sebold   | KELSE     |     | 837I |  |
| Kentucky Health Select  | 63077     |     | 837P |  |
| Kentucky Health Select  | 63077     |     | 837I |  |

|  |   |         |     |      |   |
|--|---|---------|-----|------|---|
|  | Key Benefit Administrators  | 37217   |     | 837P |   |
|  | Key Benefit Administrators  | 37217   |     | 837I |   |
|  | Key Select  | 37321   |     | 837P |   |
|  | Key Select  | 37321   |     | 837I |   |
|  | Keystone Health Plan East   | 95056   |     | 837P |   |
|  | Keystone Mercy Health Plan  | 23284   |     | 837P |   |
|  | Keystone Mercy Health Plan  | 23284   |     | 837I |   |
|  | Keystone Mercy Health Plan East/IBC                                       | 12X25   |     | 837I |   |
|  | Klais & Company   | 34145   |     | 837P |   |
|  | Klais & Company   | 34145   |     | 837I |   |
|  | Klias & Company (Ohio BWC)  | 31147   | Yes | 837P |   |
|  | Klias & Company (Ohio BWC)  | 31147   | Yes | 837I |   |
|  | KPS - Kitsap Physician Services   | KPS01   |     | 837P |   |
|  | KPS - Kitsap Physician Services   | KPS01   |     | 837I |   |
|  | LA Care Health Plan   | LACAR   |     | 837I |   |
|  | Lake Forest Mangaed Care Associates                                       | 37112   |     | 837P |   |
|  | Lakeside Health Services  | 95415   |     | 837P |   |
|  | Lakeside Health Services  | 95415   |     | 837I |   |
|  | Lakeside IPA  | 95416   |     | 837P |   |
|  | Landmark Healthcare   | LNDMK   |     | 837P |   |
|  | Leon Medical Center Plan, Miami, FL                                       | 37316   |     | 837P |   |
|  | Leon Medical Center Plan, Miami, FL                                       | 37316   |     | 837I |   |
|  | Liberty Mutual Group  | 11123   |     | 837P |   |
|  | Liberty Mutual Group  | 11123   |     | 837I |   |
|  | Liberty Mutual Insurance Company  | 11123   |     | 837P |   |
|  | Liberty Mutual Insurance Company  | 11123   |     | 837I |   |
|  | Liberty Mutual Northwest  | 11123   |     | 837P |   |
|  | Liberty Mutual Northwest  | 11123   |     | 837I |   |
|  | Liberty Union   | 37281   |     | 837P |   |
|  | Liberty Union   | 37281   |     | 837I |   |
|  | Life and Health Insurance Co of America                                   | 98205   |     | 837P |   |
|  | Life and Health Insurance Co of America                                   | 98205   |     | 837I |   |
|  | Life Assurance Company  | 37281   |     | 837P |   |
|  | Life Assurance Company  | 37281   |     | 837I |   |
|  | Life Investors Insurance Co of America                                    | LIIC3   |     | 837P | Major Medical customer service 866-792-7615. Also 866-242-2806.   |
|  | Life Investors Insurance Co of America                                    | LIIC3   |     | 837I | Major Medical customer service 866-792-7615. Also 866-242-2806.   |
|  | Life Investors Insurance Co. of America                                   | LIICA   |     | 837P | Accident only, cancer only, first occurrence invasive cancer, heart disease attack or stroke, hospital confinement indemnity, hospital intensive care |
|  | Life Investors Insurance Co. of America                                   | LIIC2   |     | 837P | Long Term care only -PO Box 93019, Hurst TX 76053. Call 866-745-3545 with claim routing questions.  |
|  | Life Investors Insurance Co. of America                                   | LIICA   |     | 837I | Accident only, cancer only, first occurrence invasive cancer, heart disease attack or stroke, hospital confinement indemnity, hospital intensive care |
|  | Life Investors Insurance Co. of America                                   | LIIC2   |     | 837I | Long Term care only - PO Box 93019, Hurst TX 76053. Call 866-745-3545 with claim routing questions.   |
|  | Life Trac   | 41136   |     | 837P |   |
|  | Life Trac   | 41136   |     | 837I |   |
|  | Lifewise Health Plan of Arizona   | 91155   | Yes | 837P |   |
|  | Lifewise Health Plan of Arizona   | 91155   | Yes | 837I |   |
|  | Lifewise of Oregon, A Premera Health Plan                                 | 93093   | Yes | 837P | Oregon Claims only  |
|  | Lifewise of WA  | 00430WA |     | 837P |   |
|  | Lincoln National (EMPHEYSYS, Green Bay and Madison, WI only)              | 61101   |     | 837I |   |
|  | LIPA/Agate Resources  | LIPA1   | Yes | 837P | Please contact Denise Watts at 541-585-2155 x 1178 for EDI enrollment with payer.   |
|  | Local 135 Health Benefits Fund (Indianapolis, IN)                         | 35107   |     | 837P |   |
|  | Local 135 Health Benefits Fund (Indianapolis, IN)                         | 35107   |     | 837I |   |
|  | Loma Linda University Adventist Employee, Resident & Student Health Plans | 37267   |     | 837P |   |

|            |   |       |     |      |   |
|------------|---|-------|-----|------|---|
|            | Loma Linda University Adventist Employee, Resident & Student Health Plans | 37267 |     | 837I |   |
|            | Loma Linda University Healthcare - Managed Care Claims                    | 33036 |     | 837P |   |
|            | London Health Administrators  | 37226 |     | 837P |   |
|            | London Health Administrators  | 37226 |     | 837I |   |
|            | Lovelace Sandia Health Plan   | 90328 |     | 837P |   |
|            | Lovelace Sandia Health Plan   | 90328 |     | 837I |   |
|            | Lumenos   | 54195 |     | 837P |   |
|            | Lumenos   | 54195 |     | 837I |   |
|            | M.D. – Individual Practice Association                                    | 52148 |     | 837P |   |
|            | M.D. – Individual Practice Association                                    | 52148 |     | 837I |   |
|            | Machinist District 9 Welfare  | 37292 |     | 837P |   |
|            | Machinist District 9 Welfare  | 37292 |     | 837I |   |
|            | Magellan Behavioral Health  | 01260 | Yes | 837P | Professional claims only. Use payer ID = 12X27 for institutional claims.  |
|            | Magellan Behavioral Health  | 12X27 | Yes | 837I | Institutional claims only. Use payer ID = 01260 for professional claims. Claims must be submitted including the "PO Box" number to which you mail your claims. This must be included in the payer street address (2010BC N301). |
|            | MagnaCare   | 11303 |     | 837P |   |
|            | MagnaCare   | 11303 |     | 837I |   |
|            | Mail Handlers Benefit Plan  | 62413 |     | 837P | Also known as Mailhandlers CAC (Claims Administration Corp)   |
|            | Mail Handlers Benefit Plan  | 62413 |     | 837I | Also known as Mailhandlers CAC (Claims Administration Corp)   |
|            | Mail Handlers Benefit Plan  | 62413 | Yes | 835  | Also known as Mailhandlers CAC (Claims Administration Corp)   |
|            | Mailhandlers Mental Health Claims   | 87726 |     | 837P | Call 800-557-5745 For claim submission questions  |
|            | Mailhandlers Mental Health Claims   | 87726 |     | 837I | Call 800-557-5745 For claim submission questions  |
|            | Maksin Management Corporation   | 22195 |     | 837P |   |
|            | Maksin Management Corporation   | 22195 |     | 837I |   |
|            | MAMSI Life and Health Insurance Co. (MLH)                                 | 52148 |     | 837P |   |
|            | MAMSI Life and Health Insurance Co. (MLH)                                 | 52148 |     | 837I |   |
|            | Managed Care Services, LLC  | 35162 |     | 837P |   |
|            | Managed Care Services, LLC  | 35162 |     | 837I |   |
|            | Managed Care Systems (Delano Regional Medical Grp)                        | MCS02 |     | 837P |   |
|            | Managed Care Systems (Gemcare)  | MCS01 |     | 837P |   |
|            | Managed Health Networks (MHN)   | 22771 |     | 837P |   |
|            | Managed Health Networks (MHN)   | 22771 |     | 837I |   |
|            | Managed Health Services Indiana (Medicaid HMO)                            | 39186 | Yes | 837P | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|            | Managed Health Services Indiana (Medicaid HMO)                            | 39186 | Yes | 837I | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.   |
|            | Managed Health Services Wisconsin   | 39187 |     | 837P |   |
|            | Managed Health Services Wisconsin   | 39187 |     | 837I |   |
|            | Managed Physical Network  | 41159 |     | 837P |   |
|            | Managed Physical Network  | 41159 |     | 837I |   |
|            | Managed Physician Network   | 93900 |     | 837P |   |
| D 12/13/07 | Manatee Service Center (Bradenton, FL)                                    | 41555 |     | 837P | Payer ID only valid for claims with a billing submission address of PO Box 1098, Bradenton, FL 34206  |
| D 12/13/07 | Manatee Service Center (Bradenton, FL)                                    | 41555 |     | 837I | Payer ID only valid for claims with a billing submission address of PO Box 1098, Bradenton, FL 34206  |
|            | MAPCO, Inc.   | 75258 |     | 837P |   |
|            | MAPCO, Inc.   | 75258 |     | 837I |   |
|            | Marin IPA   | IP097 | Yes | 837P |   |
|            | Marsh Advantage   | 13310 |     | 837P | Also known as Seabury & Smith   |
|            | Marsh Advantage   | 13310 |     | 837P |   |
|            | Marsh Advantage   | 13310 |     | 837I | Also known as Seabury & Smith   |
|            | Marsh Advantage   | 13310 |     | 837I |   |
|            | Maryland Health Insurance Plan (MHIP)                                     | 22347 |     | 837P |   |
|            | Maryland Health Insurance Plan (MHIP)                                     | 22347 |     | 837I |   |
|            | Maryland Individual Practice Association, Inc. (M.D. IPA) - MD            | 52148 |     | 837P |   |
|            | Maryland Individual Practice Association, Inc. (M.D. IPA) - MD            | 52148 |     | 837I |   |

|            |                                       |            |     |      |   |
|------------|---------------------------------------|------------|-----|------|---|
|            | Maryland Physician Care               | 22348      |     | 837P |   |
|            | Maryland Physician Care               | 22348      |     | 837I |   |
|            | Mashantucket Pequot Tribal Nation     | 37121      |     | 837P |   |
|            | Mashantucket Pequot Tribal Nation     | 37121      |     | 837I |   |
|            | Massachusetts Mutual                  | 65935      |     | 837P |   |
|            | Masters, Mates and Pilots Plan        | MMPHB      |     | 837P |   |
|            | Masters, Mates and Pilots Plan        | MMPHB      |     | 837I |   |
|            | Matthew Thornton Health Plan          | 02030      | Yes | 837P | Provider ID required. Contact 603-695-1419 to obtain ID     |
|            | Matthew Thornton Health Plan          | 02030      | Yes | 837I | Provider ID required. Contact 603-695-1419 to obtain ID     |
|            | Mayo Management Services, Inc. (MMSI) | 41154      |     | 837P |   |
|            | Mayo Management Services, Inc. (MMSI) | 41154      |     | 837I |   |
|            | MBS (MedCost Benefit Services)        | 56205      |     | 837P |   |
|            | MBS (MedCost Benefit Services)        | 56205      |     | 837I |   |
|            | Mcare                                 | 38264      |     | 837P |   |
|            | Mcare                                 | 38264      |     | 837I |   |
|            | MCC Behavioral Care                   | 02331      |     | 837P |   |
|            | McKinley Medical Group (CA)           | MHMO2      |     | 837P |   |
|            | McLaren Health Plan                   | 38338      |     | 837P |   |
|            | McLaren Health Plan                   | 38338      |     | 837I |   |
|            | MDNY Healthcare                       | 11338      |     | 837P |   |
|            | MDNY Healthcare                       | 11338      |     | 837I |   |
|            | MedAdmin Solutions                    | 58204      |     | 837P |   |
|            | MedAdmin Solutions                    | 58204      |     | 837I |   |
|            | MedBen (Newark, OH)                   | 74323      |     | 837P |   |
|            | MedBen (Newark, OH)                   | 74323      |     | 837I |   |
|            | MedCom                                | 59231      |     | 837P |   |
|            | MedCom                                | 59231      |     | 837I |   |
|            | MedCost, Inc.                         | 56162      |     | 837P |   |
|            | MedCost, Inc.                         | 56162      |     | 837I |   |
|            | Medfocus                              | 95321      |     | 837P |   |
|            | Medica                                | 87726      | Yes | 837P | Unique 7 digit numeric Provider ID required- Contact Medica |
|            | Medica                                | 87726      | Yes | 837I | Unique 7 digit numeric Provider ID required- Contact Medica |
|            | Medica Choice (ALLINA)                | 87726      |     | 837P |   |
|            | Medica Choice (ALLINA)                | 87726      |     | 837I |   |
|            | Medicaid - Alabama                    | 752548221  |     | 837P |   |
|            | Medicaid - Alabama                    | 752548221  | Yes | 835  |   |
|            | Medicaid - Arizona (AHCCCS)           | 04791      |     | 837P |   |
| C 01/23/08 | Medicaid - Arkansas                   | 07869      | Yes | 837P | Payer ID changed from 716007869                             |
|            | Medicaid - California MediCal         | 610442     | Yes | 837P |   |
|            | Medicaid - California MediCal         | 610442     | Yes | 837I |   |
|            | Medicaid - California MediCal         | 610442     | Yes | 835  |   |
|            | Medicaid - Colorado                   | 77016      | Yes | 837P |   |
|            | Medicaid - Florida                    | 77027      | Yes | 837P |   |
|            | Medicaid - Florida                    | 77027      | Yes | 835  |   |
|            | Medicaid - Georgia                    | 77034      | Yes | 837P |   |
|            | Medicaid - Idaho                      | 54161      | Yes | 837P |   |
|            | Medicaid - Idaho                      | 54161      | Yes | 835  |   |
|            | Medicaid - Illinois, IDPA             | 37-1320188 | Yes | 837P |   |
|            | Medicaid - Indiana                    | EDS        |     | 837P |   |
|            | Medicaid - Indiana                    | EDS        | Yes | 835  |   |
|            | Medicaid - Iowa, Noridian             | 18049      | Yes | 837P |   |
|            | Medicaid - Iowa, Noridian             | 18049      | Yes | 835  |   |
|            | Medicaid - Kansas                     | 481124839  |     | 837P |   |
|            | Medicaid - Kansas                     | 481124839  | Yes | 835  |   |
|            | Medicaid - Kentucky                   | KYMCD      | Yes | 837P |   |
|            | Medicaid - Kentucky                   | KYMCD      | Yes | 835  |   |
|            | Medicaid - Louisiana (Unisys)         | 610551     | Yes | 837P |   |
|            | Medicaid - Louisiana (Unisys)         | 610551     | Yes | 835  |   |

|            |  |            |     |      |   |
|------------|--|------------|-----|------|---|
|            | Medicaid - Louisiana KidMed                        | 610551K    | Yes | 837P | For KidMed claims only  |
|            | Medicaid - Louisiana KidMed                        | 610551K    | Yes | 835  | For KidMed claims only  |
| C 01/23/08 | Medicaid - Maryland, DHMH                          | 02033      | Yes | 837P | Payer ID changed from 526002033MCP                                  |
| C 01/23/08 | Medicaid - Maryland, DHMH                          | 02033      | Yes | 835  | Payer ID changed from 526002033MCP                                  |
|            | Medicaid - Maryland, PMHS                          | 77062      | Yes | 837P |   |
|            | Medicaid - Maryland, PMHS                          | 77062      | Yes | 835  |   |
|            | Medicaid - Massachusetts, MassHealth               | MAMCD      | Yes | 837P |   |
|            | Medicaid - Massachusetts, MassHealth               | MAMCD      | Yes | 835  |   |
|            | Medicaid - Minnesota                               | MNMCD      | Yes | 837P |   |
|            | Medicaid - Missouri                                | 431754897  | Yes | 837P |   |
|            | Medicaid - Montana                                 | 77039      | Yes | 837P |   |
|            | Medicaid - Montana                                 | 77039      | Yes | 835  |   |
|            | Medicaid - Nebraska                                | NEMEDICAID | Yes | 837P |   |
|            | Medicaid - Nebraska                                | NEMEDICAID | Yes | 837I |   |
|            | Medicaid - Nebraska                                | NEMEDICAID | Yes | 835  |   |
|            | Medicaid - Nevada, First Health                    | DHCFP      | Yes | 837P | Includes Nevada Check Up  |
|            | Medicaid - Nevada, First Health                    | DHCFP      | Yes | 835  |   |
|            | Medicaid - New Jersey                              | NJMCD      | Yes | 837P |   |
|            | Medicaid - New Mexico                              | NMMAD      |     | 837I |   |
|            | Medicaid - New York                                | 97357      | Yes | 837P |   |
|            | Medicaid - New York                                | 97357      | Yes | 837I |   |
|            | Medicaid - New York                                | 97357      | Yes | 835  |   |
|            | Medicaid - North Carolina                          | DNC00      | Yes | 837P |   |
|            | Medicaid - North Dakota                            | 00320      | Yes | 837P |   |
|            | Medicaid - North Dakota                            | 00320      | Yes | 835  |   |
|            | Medicaid - Ohio                                    | MMISODJFS  |     | 837P |   |
|            | Medicaid - Ohio                                    | MMISODJFS  | Yes | 835  |   |
|            | Medicaid - Oklahoma                                | 76619      |     | 837P |   |
|            | Medicaid - Oklahoma                                | 76619      | Yes | 835  |   |
|            | Medicaid - South Carolina                          | SCXIX      | Yes | 837P |   |
|            | Medicaid - South Carolina                          | SCXIX      | Yes | 835  |   |
|            | Medicaid - Texas, TMHP                             | 245391167  |     | 837P | Includes Texas Health Network (PCCM)                                |
|            | Medicaid - Texas, TMHP                             | 245391167  |     | 837I | Includes Texas Health Network (PCCM)                                |
|            | Medicaid - Texas, TMHP                             | 245391167  | Yes | 835  |   |
|            | Medicaid - Washington                              | 77045      | Yes | 837P |   |
|            | Medicaid - Washington                              | 77045      | Yes | 835  |   |
|            | Medicaid - West Virginia (Unisys)                  | WVMEDICAID | Yes | 837P |   |
|            | Medical Administrators, Inc. (Ohio BWC)            | 31147      | Yes | 837P |   |
|            | Medical Administrators, Inc. (Ohio BWC)            | 31147      | Yes | 837I |   |
|            | Medical Benefits Administration                    | 680415881  |     | 837P | Includes Sierra Nevada IPA and Golden State Physicians Medical Grp. |
|            | Medical Benefits Administrators, Inc. (Newark, OH) | 74323      |     | 837P |   |
|            | Medical Benefits Administrators, Inc. (Newark, OH) | 74323      |     | 837I |   |
|            | Medical Benefits Companies (Newark, OH)            | 74323      |     | 837P |   |
|            | Medical Benefits Companies (Newark, OH)            | 74323      |     | 837I |   |
|            | Medical Benefits Mutual (Newark, OH)               | 74323      |     | 837P |   |
|            | Medical Benefits Mutual (Newark, OH)               | 74323      |     | 837I |   |
|            | Medical Claims Service, Inc.                       | 04258      |     | 837P |   |
|            | Medical Claims Service, Inc.                       | 04258      |     | 837I |   |
|            | Medical Development International                  | 52181      |     | 837P |   |
|            | Medical Development International                  | 52181      |     | 837I |   |
|            | Medical Mutual of Ohio                             | 29076      |     | 837P |   |
|            | Medical Mutual of Ohio                             | 29076      |     | 837I |   |
|            | Medical Network of Colorado Springs                | CSMED      |     | 837P |   |
|            | Medical Pathways                                   | 33029      |     | 837P |   |
|            | Medical Resource Management                        | 58203      |     | 837P |   |
|            | Medical Resource Management                        | 58203      |     | 837I |   |
|            | Medical Services For Indigents                     | AMM02      |     | 837I |   |

|            |  |        |     |      |                   |
|------------|--|--------|-----|------|-------------------|
|            | Medical Value Plan (MVP) Health Plan of Ohio       | 38224  |     | 837P |                   |
|            | Medical Value Plan (MVP) Health Plan of Ohio       | 38224  |     | 837I |                   |
|            | Medicare - Alabama, Cahaba                         | 00510  | Yes | 837P |                   |
|            | Medicare - Alabama, Cahaba                         | 00510  | Yes | 835  |                   |
|            | Medicare - Alaska, Noridian                        | 00831  | Yes | 837P |                   |
|            | Medicare - Alaska, Noridian                        | 00831  | Yes | 835  |                   |
|            | Medicare - Arizona, Noridian                       | 03102  | Yes | 837P |                   |
|            | Medicare - Arizona, Noridian                       | 03102  | Yes | 835  |                   |
|            | Medicare - Arkansas                                | 00520  | Yes | 837P |                   |
|            | Medicare - Arkansas                                | 00520  | Yes | 835  |                   |
|            | Medicare - California, NHIC Northern               | 31140  | Yes | 837P |                   |
|            | Medicare - California, NHIC Northern               | 31140  | Yes | 835  |                   |
|            | Medicare - California, NHIC Southern               | 31146  | Yes | 837P |                   |
|            | Medicare - California, NHIC Southern               | 31146  | Yes | 835  |                   |
|            | Medicare - Colorado                                | 00824  | Yes | 837P |                   |
|            | Medicare - Colorado                                | 00824  | Yes | 835  |                   |
| A 01/29/08 | Medicare - Colorado, TrailBlazer                   | 04102  | Yes | 837P | Effective 3/19/08 |
|            | Medicare - Delaware, TrailBlazer                   | C00902 | Yes | 837P |                   |
|            | Medicare - Delaware, TrailBlazer                   | C00902 | Yes | 835  |                   |
|            | Medicare - District of Columbia, TrailBlazer Metro | C00903 | Yes | 837P |                   |
|            | Medicare - District of Columbia, TrailBlazer Metro | C00903 | Yes | 835  |                   |
|            | Medicare - DMERC Region B , AdminaStar             | 00635  | Yes | 837P |                   |
|            | Medicare - DMERC Region C , Palmetto               | C00885 | Yes | 837P |                   |
|            | Medicare - DMERC Region D, Noridian                | 19003  | Yes | 837P |                   |
|            | Medicare - Florida, First Coast                    | MBFLA  | Yes | 837P |                   |
|            | Medicare - Florida, First Coast                    | MBFLA  | Yes | 835  |                   |
|            | Medicare - Georgia, Cahaba                         | 00511  | Yes | 837P |                   |
|            | Medicare - Georgia, Cahaba                         | 00511  | Yes | 835  |                   |
|            | Medicare - Hawaii, Noridian                        | 00833  | Yes | 837P |                   |
|            | Medicare - Hawaii, Noridian                        | 00833  | Yes | 835  |                   |
|            | Medicare - Idaho, Cigna                            | 05130  | Yes | 837P |                   |
|            | Medicare - Idaho, Cigna                            | 05130  | Yes | 835  |                   |
|            | Medicare - Illinois, WPS                           | 00952  | Yes | 837P |                   |
|            | Medicare - Illinois, WPS                           | 00952  | Yes | 835  |                   |
|            | Medicare - Indiana, AdminaStar                     | 00630  | Yes | 837P |                   |
|            | Medicare - Indiana, AdminaStar                     | 00630  | Yes | 835  |                   |
|            | Medicare - Iowa, Noridian                          | 00826  | Yes | 837P |                   |
|            | Medicare - Iowa, Noridian                          | 00826  | Yes | 835  |                   |
| A 01/29/08 | Medicare - Iowa, WPS                               | 05102  | Yes | 837P | Effective 2/01/08 |
|            | Medicare - Iowa, WPS                               | 05102  | Yes | 835  | Effective 2/01/08 |
|            | Medicare - Kansas, ASK                             | 00650  | Yes | 837P |                   |
|            | Medicare - Kansas, ASK                             | 00650  | Yes | 835  |                   |
|            | Medicare - Kansas, Kansas City, ASK                | 00740  | Yes | 837P |                   |
|            | Medicare - Kansas, Kansas City, ASK                | 00740  | Yes | 835  |                   |
| A 01/29/08 | Medicare - Kansas, WPS                             | 05202  | Yes | 837P | Effective 3/01/08 |
|            | Medicare - Kentucky, AdminaStar                    | 00660  | Yes | 837P |                   |
|            | Medicare - Kentucky, AdminaStar                    | 00660  | Yes | 835  |                   |
|            | Medicare - Louisiana                               | 00528  | Yes | 837P |                   |
|            | Medicare - Louisiana                               | 00528  | Yes | 835  |                   |
|            | Medicare - Maryland, TrailBlazer                   | C00901 | Yes | 837P |                   |
|            | Medicare - Maryland, TrailBlazer                   | C00901 | Yes | 835  |                   |
|            | Medicare - Massachusetts, NHIC                     | 31143  | Yes | 837P |                   |
|            | Medicare - Massachusetts, NHIC                     | 31143  | Yes | 835  |                   |
|            | Medicare - Michigan , WPS                          | 00953  | Yes | 837P |                   |
|            | Medicare - Michigan , WPS                          | 00953  | Yes | 835  |                   |
|            | Medicare - Minnesota                               | 00954  | Yes | 837P |                   |

|            |                                     |         |     |      |  |
|------------|-------------------------------------|---------|-----|------|--|
|            | Medicare - Missouri                 | 00523   | Yes | 837P |  |
|            | Medicare - Missouri                 | 00523   | Yes | 835  |  |
| A 01/29/08 | Medicare - Missouri Eastern, WPS    | 05392   | Yes | 837P | Effective 3/01/08                                  |
|            | Medicare - Missouri Northwest, ASK  | 00740   | Yes | 837P |  |
|            | Medicare - Missouri Northwest, ASK  | 00740   | Yes | 835  |  |
| A 01/29/08 | Medicare - Missouri Western, WPS    | 05302   | Yes | 837P | Effective 3/01/08                                  |
|            | Medicare - Montana, Noridian        | 03202   | Yes | 837P |  |
|            | Medicare - Montana, Noridian        | 03202   | Yes | 835  |  |
|            | Medicare - Nebraska, Wheatlands     | 00655   | Yes | 837P |  |
|            | Medicare - Nebraska, Wheatlands     | 00655   | Yes | 835  |  |
| A 01/29/08 | Medicare - Nebraska, WPS            | 05402   | Yes | 837P | Effective 3/01/08                                  |
|            | Medicare - Nevada, Noridian         | 00834NV | Yes | 837P |  |
|            | Medicare - Nevada, Noridian         | 00834NV | Yes | 835  |  |
|            | Medicare - New Jersey               | 00805   | Yes | 837P |  |
|            | Medicare - New Jersey               | 00805   | Yes | 835  |  |
|            | Medicare - New Mexico               | 00521   | Yes | 837P |  |
|            | Medicare - New Mexico               | 00521   | Yes | 835  |  |
| A 01/29/08 | Medicare - New Mexico, TrailBlazer  | 04202   | Yes | 837P | Effective 2/28/08                                  |
|            | Medicare - New York Upstate         | 00801   | Yes | 837P |  |
|            | Medicare - New York Upstate         | 00801   | Yes | 835  |  |
|            | Medicare - New York, Empire         | SMNY0   | Yes | 837P |  |
|            | Medicare - NGS                      | 00450   | Yes | 837I | Formerly known as United Government Services (UGS) |
|            | Medicare - NGS                      | 00450   | Yes | 835  | Formerly known as United Government Services (UGS) |
|            | Medicare - North Carolina, Cigna    | 05535   | Yes | 837P |  |
|            | Medicare - North Carolina, Cigna    | 05535   | Yes | 835  |  |
|            | Medicare - North Dakota, Noridian   | 03302   | Yes | 837P |  |
|            | Medicare - North Dakota, Noridian   | 03302   | Yes | 835  |  |
|            | Medicare - Ohio                     | OHMCR   | Yes | 837P |  |
|            | Medicare - Ohio, Palmetto           | 00883OH | Yes | 837P |  |
|            | Medicare - Ohio, Palmetto           | 00883OH | Yes | 835  |  |
|            | Medicare - Oklahoma                 | 00522   | Yes | 837P |  |
|            | Medicare - Oklahoma                 | 00522   | Yes | 835  |  |
| A 01/29/08 | Medicare - Oklahoma, TrailBlazer    | 04302   | Yes | 837P | Effective 2/28/08                                  |
|            | Medicare - Oregon, Noridian         | 00835   | Yes | 837P |  |
|            | Medicare - Oregon, Noridian         | 00835   | Yes | 835  |  |
|            | Medicare - Railroad, Palmetto       | C00882  | Yes | 837P |  |
|            | Medicare - Railroad, Palmetto       | C00882  | Yes | 835  |  |
|            | Medicare - Rhode Island             | 00524   | Yes | 837P |  |
|            | Medicare - Rhode Island             | 00524   | Yes | 835  |  |
|            | Medicare - South Carolina, Palmetto | 00880   | Yes | 837P |  |
|            | Medicare - South Carolina, Palmetto | 00880   | Yes | 835  |  |
|            | Medicare - South Dakota, Noridian   | 03402   | Yes | 837P |  |
|            | Medicare - South Dakota, Noridian   | 03402   | Yes | 835  |  |
|            | Medicare - Tennessee, Cigna         | 05440   | Yes | 837P |  |
|            | Medicare - Tennessee, Cigna         | 05440   | Yes | 835  |  |
| A 01/29/08 | Medicare - Texas, TrailBlazer       | 04402   | Yes | 837P | Effective 6/11/08                                  |
|            | Medicare - Texas, TrailBlazer       | C00900  | Yes | 837P |  |
|            | Medicare - Texas, TrailBlazer       | C00900  | Yes | 837I |  |
|            | Medicare - Texas, TrailBlazer       | C00900  | Yes | 835  |  |
|            | Medicare - Utah, Noridian           | 03502   | Yes | 837P |  |
|            | Medicare - Utah, Noridian           | 03502   | Yes | 835  |  |
|            | Medicare - Virginia, TrailBlazer    | C00904  | Yes | 837P |  |
|            | Medicare - Virginia, TrailBlazer    | C00904  | Yes | 835  |  |
|            | Medicare - Washington, Noridian     | 00836   | Yes | 837P |  |
|            | Medicare - Washington, Noridian     | 00836   | Yes | 835  |  |
|            | Medicare - West Virginia            | WVMCR   | Yes | 837P |  |
|            | Medicare - West Virginia, Palmetto  | 00883   | Yes | 837P |  |
|            | Medicare - West Virginia, Palmetto  | 00883   | Yes | 835  |  |

|  |   |       |     |      |  |
|--|---|-------|-----|------|--|
|  | Medicare - Wisconsin, WPS                                 | 00951 | Yes | 837P |  |
|  | Medicare - Wisconsin, WPS                                 | 00951 | Yes | 835  |  |
|  | Medicare - Wyoming, Noridian                              | 03602 | Yes | 837P |  |
|  | Medicare - Wyoming, Noridian                              | 03602 | Yes | 835  |  |
|  | Medicare Puerto Rico                                      | SMPR0 | Yes | 837P |  |
|  | Medicare Smart  | 58228 |     | 837P |  |
|  | Medigold or Mt. Carmel Health Plan                        | 95655 |     | 837P |  |
|  | Mediversal Claims Administration (Las Vegas, NV)          | 37304 |     | 837P | Does not pay Boyd Gaming Corporation or Coast Benefit claims   |
|  | Mediversal Claims Administration (Las Vegas, NV)          | 37304 |     | 837I | Does not pay Boyd Gaming Corporation or Coast Benefit claims   |
|  | MedSolutions, Inc.  | 62160 |     | 837P |  |
|  | MedSolutions, Inc.  | 62160 |     | 837I |  |
|  | MedStar Physician Partners                                | 00243 |     | 837P |  |
|  | Memorial Clinical Associates                              | MCA11 | Yes | 837P | Provider ID required. Contact 713-843-6780 to obtain ID.   |
|  | Memorial Hermann Health Network                           | MHHNP |     | 837P | Provider PIN is required for all electronic claims submissions. Please contact MHHNP Customer Service at 888-542-5040 for PIN and submission instructions. |
|  | Memorial Hermann Health Network                           | MHHNP |     | 837I | Provider PIN is required for all electronic claims submissions. Please contact MHHNP Customer Service at 888-542-5040 for PIN and submission instructions. |
|  | Memphis Managed Care                                      | 36193 |     | 837P |  |
|  | Memphis Managed Care                                      | 36193 |     | 837I |  |
|  | Mercer Administrators                                     | 13310 |     | 837P | Also known as Seabury & Smith  |
|  | Mercer Administrators                                     | 13310 |     | 837P |  |
|  | Mercer Administrators                                     | 13310 |     | 837I | Also known as Seabury & Smith  |
|  | Mercer Administrators                                     | 13310 |     | 837I |  |
|  | Mercy Care Plan   | 86052 |     | 837P |  |
|  | Mercy Care Plan   | 86052 |     | 837I |  |
|  | Mercy Care Plus   | 71079 |     | 837P |  |
|  | Mercy Care Plus   | 71079 |     | 837I |  |
|  | Mercy Health Plans  | 43166 |     | 837P |  |
|  | Mercy Health Plans  | 43166 |     | 837I |  |
|  | Mercy Physicians Medical Group                            | 33029 |     | 837P |  |
|  | Meridian Health/Agency Services                           | 64158 |     | 837P |  |
|  | Meridian Health/Agency Services                           | 64158 |     | 837I |  |
|  | Mesa Mental Health  | 85035 |     | 837P |  |
|  | Mesa Mental Health  | 85035 |     | 837I |  |
|  | Met Life  | 87726 |     | 837P |  |
|  | Met Life  | 87726 |     | 837I |  |
|  | Methodist First Choice                                    | 23550 |     | 837P |  |
|  | Methodist First Choice                                    | 23550 |     | 837I |  |
|  | MethodistCare   | 80314 |     | 837P |  |
|  | MethodistCare   | 80314 |     | 837I |  |
|  | Metro Alliance  | 82135 |     | 837P |  |
|  | MetroPlus Health Plan                                     | 13265 |     | 837P |  |
|  | Metropolitan Health Plan                                  | 52627 |     | 837P |  |
|  | Metrowest Health Plan - Preferred Care                    | MWP01 |     | 837P |  |
|  | Metrowest Star Medicaid                                   | MWS01 |     | 837P |  |
|  | Michael Reese Physicians Group                            | 37127 |     | 837P |  |
|  | Michael Reese Physicians Group                            | 37127 |     | 837I |  |
|  | Mid America Health (Health Net)                           | 25133 |     | 837P |  |
|  | Mid America Health (Health Net)                           | 25133 |     | 837I |  |
|  | Mid Atlantic Psychiatric Services, Inc. (MAPSI)           | 52149 |     | 837P |  |
|  | Mid-America Associates, Inc.                              | 37281 |     | 837P |  |
|  | Mid-America Associates, Inc.                              | 37281 |     | 837I |  |
|  | Mid-County Physicians Medical Group- San Diego (SynerMed) | SYMED |     | 837P |  |
|  | Midland National Insurance Company                        | 90956 |     | 837P |  |
|  | Midlands Choice, Inc.                                     | 47080 |     | 837P |  |
|  | Midlands Choice, Inc.                                     | 47080 |     | 837I |  |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | MidSouth Administrative Group  | 62168 |     | 837P |   |
|            | MidSouth Administrative Group  | 62168 |     | 837I |   |
|            | Midwest Health Plan  | MHP77 |     | 837P |   |
|            | Midwest Health Plan  | MHP77 |     | 837I |   |
|            | Mid-West National Life Insurance Co. of Tennessee - Insurance Center | 59224 |     | 837P |   |
|            | Mid-West National Life Insurance Co. of Tennessee - Insurance Center | 59224 |     | 837I |   |
|            | Midwest Preferred  | MIDSC |     | 837P |   |
|            | Midwest Securities   | MIDSC |     | 837P |   |
|            | Midwest Security Administrators (MSA)                                | MIDSC |     | 837P |   |
|            | Midwest Security Insurance Co. (MSIC)                                | MIDSC |     | 837P |   |
|            | Mission (St. Joseph Heritage Healthcare)                             | STJOE |     | 837P |   |
|            | Mission Medical Group  | PPM01 |     | 837P |   |
|            | Mississippi Public Entity Employee Benefit Trust (MPEEBT)            | 37233 |     | 837P |   |
|            | Mississippi Public Entity Employee Benefit Trust (MPEEBT)            | 37233 |     | 837I |   |
|            | Mississippi Select Healthcare  | 64088 |     | 837P | Also doing business as Select Administrative Services (SAS).  |
|            | Mississippi Select Healthcare  | 64088 |     | 837I | Also doing business as Select Administrative Services (SAS).  |
|            | Missoula County Medical Benefits Plan                                | 37275 |     | 837P |   |
|            | Missoula County Medical Benefits Plan                                | 37275 |     | 837I |   |
|            | Missouri Care  | 43179 |     | 837P |   |
|            | Missouri Care  | 43179 |     | 837I |   |
|            | MLink  | 37265 |     | 837P |   |
|            | MLink  | 37265 |     | 837I |   |
|            | MMAC (Managed Medical Assurance Co., Ltd.) (Ohio BWC)                | 31147 | Yes | 837P |   |
|            | MMAC (Managed Medical Assurance Co., Ltd.) (Ohio BWC)                | 31147 | Yes | 837I |   |
|            | MMS, LLC   | 62178 |     | 837P |   |
|            | Molina Healthcare of California                                      | 38333 |     | 837P |   |
|            | Molina Healthcare of California                                      | 38333 |     | 837I |   |
|            | Molina Healthcare of Michigan  | 38334 |     | 837P |   |
|            | Molina Healthcare of Michigan  | 38334 |     | 837I |   |
| A 02/25/08 | Molina Healthcare of Nevada  | 20676 |     | 837P |   |
| A 02/25/08 | Molina Healthcare of Nevada  | 20676 |     | 837I |   |
|            | Molina Healthcare of New Mexico                                      | 09824 |     | 837P | Registration is required. Providers must call to register and obtain a Cimarron Salud provider ID prior to claim submission. Please call 505-348-0916.  |
|            | Molina Healthcare of New Mexico                                      | 09824 |     | 837I | Registration is required. Providers must call to register and obtain a Cimarron Salud provider ID prior to claim submission. Please call 505-348-0916.  |
| A 02/25/08 | Molina Healthcare of Ohio  | 20149 |     | 837P |   |
| A 02/25/08 | Molina Healthcare of Ohio  | 20149 |     | 837I |   |
|            | Molina Healthcare of Texas   | 20554 |     | 837P |   |
|            | Molina Healthcare of Washington                                      | 38336 |     | 837P |   |
|            | Molina Healthcare of Washington                                      | 38336 |     | 837I |   |
| A 02/25/08 | Molina Healthcare of Washington ASO                                  | 91128 |     | 837P |   |
| A 02/25/08 | Molina Healthcare Utah (American Family Care)                        | SX109 |     | 837P |   |
|            | Molina of Indiana  | 00076 |     | 837P |   |
|            | Molina of Indiana  | 00076 |     | 837I |   |
|            | Momentum Health Services   | 72135 |     | 837P |   |
|            | Monarch Healthcare IPA   | IP095 | Yes | 837P |   |
|            | Montefiore Contract Management Organization                          | 13174 | Yes | 837P |   |
|            | Montefiore Contract Management Organization                          | 13174 | Yes | 837I |   |
|            | Monumental Life Insurance Company                                    | MMLIC |     | 837P | Accident only, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke only, Hospital confinement indemnity, Hospital intensive care - PO Box 8043 Little Rock, AR 72203-8043, 507-227-1284 |
|            | Monumental Life Insurance Company                                    | MMLI3 |     | 837P | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3543 with claim questions.  |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | Monumental Life Insurance Company                              | MMLIC |     | 837I | Accident only, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke only, Hospital confinement indemnity, Hospital intensive care - PO Box 8043 Little Rock, AR 72203-8043, 507-227-1284 |
|            | Monumental Life Insurance Company                              | MMLI3 |     | 837I | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3543 with claim questions.  |
|            | Mosaic IPA Medical Group                                       | IP083 |     | 837P |   |
|            | Motion Picture Health Plan                                     | MPI01 | Yes | 837P | Please contact Judy Taylor at 818-769-0007, ext. 304, to enroll with Payer.   |
|            | Motorola Inc.  | 36111 |     | 837P |   |
|            | Mountain States Administrative Services, Inc.                  | 86040 |     | 837P |   |
|            | Mountain States Administrative Services, Inc.                  | 86040 |     | 837I |   |
|            | MPLAN, Inc. / HealthCare Group, LLC                            | 95444 |     | 837P |   |
|            | MPLAN, Inc. / HealthCare Group, LLC                            | 95444 |     | 837I |   |
|            | Multicultural Primary Care Medical Group- San Diego (SynerMed) | SYMED |     | 837P |   |
|            | Multiplan for American Family                                  | 39634 |     | 837P | Applicable for AZ, IN, IL and OH only.  |
|            | Multiplan for American Family                                  | 39634 |     | 837I | Applicable for AZ, IN, IL and OH only.  |
|            | Multiplan Wisconsin Preferred Provider Network (MWPPN)         | 34080 |     | 837P |   |
|            | Multiplan Wisconsin Preferred Provider Network (MWPPN)         | 34080 |     | 837I |   |
|            | Mutual Assurance Administrators                                | 37256 |     | 837P |   |
|            | Mutual Assurance Administrators                                | 37256 |     | 837I |   |
|            | Mutual Group (US)  | 59140 |     | 837P |   |
|            | Mutual Group (US)  | 59140 |     | 837I |   |
|            | Mutual Group - TMG Life Insurance Company                      | 70491 |     | 837P |   |
|            | Mutual Group - TMG Life Insurance Company                      | 70491 |     | 837I |   |
|            | Mutual of Omaha  | 71412 |     | 837P |   |
|            | Mutual of Omaha  | 71412 |     | 837I |   |
|            | Mutually Preferred   | 71412 |     | 837P |   |
|            | Mutually Preferred   | 71412 |     | 837I |   |
|            | MVP Health Plan of NY  | 14165 |     | 837P | For your MVP Provider number, call (800) 684-9286.  |
|            | MVP Health Plan of NY  | 14165 |     | 837I | For your MVP Provider number, call (800) 684-9286.  |
|            | N.W. Ironworkers Health & Security Trust Fund                  | 91136 |     | 837P | Group # required  |
|            | N.W. Ironworkers Health & Security Trust Fund                  | 91136 |     | 837I | Group # required  |
|            | N.W. Roofers & Employers Health & Security Trust Fund          | 91136 |     | 837P | Group # required  |
|            | N.W. Roofers & Employers Health & Security Trust Fund          | 91136 |     | 837I | Group # required  |
|            | N.W. Textile Processors  | 91136 |     | 837P | Group # required  |
|            | N.W. Textile Processors  | 91136 |     | 837I | Group # required  |
|            | NAA (North American Administrators, LP)                        | 65085 |     | 837P |   |
|            | NAA (North American Administrators, LP)                        | 65085 |     | 837I |   |
|            | Naperville Health Care Associates                              | NHCA1 |     | 837P |   |
|            | Naperville Health Care Associates                              | NHCA1 |     | 837I |   |
| C 01/01/08 | National Association of Letter Carriers (NALC/Affordable)      | 62308 |     | 837P | DOS January 1, 2008 and after should be submitted to Payer ID 62308.  |
| C 01/01/08 | National Association of Letter Carriers (NALC/Affordable)      | 62308 |     | 837I | DOS January 1, 2008 and after should be submitted to Payer ID 62308.  |
|            | National Benefit Administrators - New Jersey                   | 56175 |     | 837P |   |
|            | National Benefit Administrators - New Jersey                   | 56175 |     | 837I |   |
|            | National Benefit Administrators - North Carolina               | 56176 |     | 837P |   |
|            | National Benefit Administrators - North Carolina               | 56176 |     | 837I |   |
|            | National Capital Preferred Provider Organization (NCPPO)       | 90001 |     | 837P |   |
|            | National Claim Administration, Inc.                            | 37126 |     | 837P |   |
|            | National Claim Administration, Inc.                            | 37126 |     | 837I |   |
|            | National Finance Insurance Company                             | 90956 |     | 837P |   |

|            |   |       |     |      |  |
|------------|---|-------|-----|------|--|
|            | National Foundation Life Insurance Company                              | 98205 |     | 837P |  |
|            | National Imaging Association  | SX190 |     | 837P |  |
|            | National Rural Electric Coop (NRECA)                                    | 52132 |     | 837P |  |
|            | National Rural Letter Carrier Association                               | 71412 |     | 837P |  |
|            | National Rural Letter Carrier Association                               | 71412 |     | 837I |  |
|            | National Teachers Association (NTA)                                     | NTA11 |     | 837I |  |
|            | National Telecommunications Cooperative Association Staff (NTCA- Staff) | 52104 |     | 837P |  |
|            | National Telecommunications Cooperative Association Staff (NTCA- Staff) | 52104 |     | 837I |  |
|            | National Telephone Coop Assn  | 52103 |     | 837P |  |
|            | National Telephone Coop Assn  | 52103 |     | 837I |  |
|            | Nationwide Health Plans   | 31417 |     | 837P |  |
|            | Nationwide Health Plans   | 31417 |     | 837I |  |
|            | NCAS - Charlotte, NC  | 75191 |     | 837P |  |
|            | NCAS - Charlotte, NC  | 75191 |     | 837I |  |
|            | NCAS - Fairfax, VA  | 75190 |     | 837P |  |
|            | NCAS - Fairfax, VA  | 75190 |     | 837I |  |
|            | Neighborhood Health Partnership of FL                                   | 96107 |     | 837P | Payer ID is valid for claims submission address PO Box 025680, Miami, FL 33102-5680. Direct questions to 305-715-4334.               |
|            | Neighborhood Health Partnership of FL                                   | 96107 |     | 837I | Payer ID is valid for claims submission address PO Box 025680, Miami, FL 33102-5680. Direct questions to 305-715-4334.               |
|            | Neighborhood Health Plan (Boston, MA)                                   | 04293 |     | 837P |  |
|            | Neighborhood Health Plan (Boston, MA)                                   | 04293 |     | 837I |  |
|            | Neighborhood Health Plan (Boston, MA)                                   | 04293 | Yes | 835  |  |
|            | Neighborhood Health Plan of Rhode Island                                | 05047 |     | 837P |  |
|            | Neighborhood Health Providers & Suffolk Health Plan                     | 11325 | Yes | 837P | Please submit claims with your unique NHP/SHP provider number. Please call (631) 360-3102 to obtain.                                 |
|            | Neighborhood Health Providers & Suffolk Health Plan                     | 11325 | Yes | 837I | Please submit claims with your unique NHP/SHP provider number. Please call (631) 360-3102 to obtain.                                 |
|            | Nesika Health Group   | 37255 |     | 837P |  |
|            | Nesika Health Group   | 37255 |     | 837I |  |
|            | Netcare Life and Health Insurance (Hagatna, Guam)                       | 66055 |     | 837P |  |
|            | Netcare Life and Health Insurance (Hagatna, Guam)                       | 66055 |     | 837I |  |
|            | Network Health  | 04332 | Yes | 837P | Before initiating submissions, please contact Provider Relations at 617-806-8104 or edi@network-health.org for an EDI start up plan. |
|            | Network Health  | 04332 | Yes | 837I | Before initiating submissions, please contact Provider Relations at 617-806-8104 or edi@network-health.org for an EDI start up plan. |
|            | Network Health Plan of Wisconsin  | 39144 |     | 837P |  |
|            | Network Health Plan of Wisconsin  | 39111 |     | 837I |  |
|            | Nevada Care   | 86067 |     | 837P |  |
| A 02/25/08 | New Century Health - Humana Dermatology                                 | NCH02 |     | 837P |  |
|            | New Era Life Insurance Company  | 75281 |     | 837P |  |
|            | New Era Life Insurance Company  | 75281 |     | 837I |  |
|            | New Market Dimensions   | 65056 |     | 837P |  |
|            | New Market Dimensions   | 65056 |     | 837I |  |
|            | New World Claims Services   | 38332 |     | 837P |  |
|            | New World Claims Services   | 38332 |     | 837I |  |
|            | New York Life - LTC   | NYL11 |     | 837P | Long term care claims  |
|            | New York Life - LTC   | NYL11 |     | 837I | Long term care claims  |
|            | New York Network Management   | 11334 |     | 837P |  |
|            | New York Presbyterian Community Health Plan                             | 48186 |     | 837P |  |
|            | New York Presbyterian Community Health Plan                             | 48186 |     | 837I |  |
|            | New York Presbyterian System Select Health                              | 24819 |     | 837P |  |
|            | New York Presbyterian System Select Health                              | 24819 |     | 837I |  |
|            | NGS American Inc.   | 38225 |     | 837P |  |

|  |   |       |     |      |   |
|--|---|-------|-----|------|---|
|  | NGS American Inc.   | 38225 |     | 837I |   |
|  | Nippon Life Insurance Company of America                  | 81264 |     | 837P |   |
|  | Nippon Life Insurance Company of America                  | 81264 |     | 837I |   |
|  | NJ Carpenters Health Fund                                 | 22603 |     | 837P |   |
|  | NJ Carpenters Health Fund                                 | 22603 |     | 837I |   |
|  | Noble AMA   | 33029 |     | 837P |   |
|  | Noble AMA Select IPA                                      | PDT01 |     | 837P |   |
|  | Noble Mid Orange - HealthSmart (CA)                       | HMS01 |     | 837P |   |
|  | North American Administrators, Inc.                       | 64157 |     | 837P |   |
|  | North American Administrators, Inc.                       | 64157 |     | 837I |   |
|  | North American Administrators, LP                         | 65085 |     | 837P |   |
|  | North American Administrators, LP                         | 65085 |     | 837I |   |
|  | North American Benefits Network (NABN)                    | 34159 |     | 837P |   |
|  | North American Benefits Network (NABN)                    | 34159 |     | 837I |   |
|  | North American Medical Management – Illinois (NAMM)       | 36398 |     | 837P |   |
|  | North American Medical Management - NAMM (Southern Calif) | 33029 |     | 837P |   |
|  | North American Medical Management (NAMM) - Northern CA    | E3510 |     | 837P | Only claims from providers in Northern Calif. Please contact the EDI Dept for North American Medical Management (NAMM) Lead/Supervisor at 800-956-8000 prior to initial submission of claims. |
|  | North Broward Hospital District                           | 37314 |     | 837I |   |
|  | North Broward Hospital District                           | 37314 |     | 837P |   |
|  | North Texas Healthcare Network                            | 35212 |     | 837P |   |
|  | North Texas Healthcare Network                            | 35212 |     | 837I |   |
|  | North Texas Healthcare Network (NTHN)                     | NTX11 |     | 837P |   |
|  | North Texas Healthcare Network (NTHN)                     | NTX11 |     | 837I |   |
|  | North West Life   | PH018 |     | 837P |   |
|  | North West Orange County Medical Group                    | PROSP |     | 837P |   |
|  | North West Orange County Medical Group                    | PROSP |     | 837P |   |
|  | Northern California Sheet Metal Workers Insurance Plan    | 38238 |     | 837P |   |
|  | Northern Illinois Health Plan                             | 36347 |     | 837P |   |
|  | Northern Illinois Health Plan                             | 36347 |     | 837I |   |
|  | Northern Nevada Trust Fund                                | 88027 |     | 837P |   |
|  | Northridge Medical Group (CA)                             | NMG01 |     | 837P |   |
|  | Northstar Advantage (MHP Claims Services)                 | 07037 | Yes | 837P |   |
|  | Northstar Advantage (MHP Claims Services)                 | 07036 | Yes | 837I |   |
|  | Northwest Diag. Clinic/Selectcare of Texas (NWDC)         | 62119 |     | 837P |   |
|  | Northwest Diag. Clinic/Selectcare of Texas (NWDC)         | 62119 |     | 837I |   |
|  | Northwest Suburban IPA (IL)                               | 36346 |     | 837P |   |
|  | Northwest Suburban IPA (IL)                               | 36346 |     | 837I |   |
|  | Nova Healthcare Administrators, Inc. (Grand Island, NY)   | 16644 |     | 837P |   |
|  | Nova Healthcare Administrators, Inc. (Grand Island, NY)   | 16644 |     | 837I |   |
|  | NovaSys Health Network                                    | 71080 |     | 837P |   |
|  | NovaSys Health Network                                    | 71080 |     | 837I |   |
|  | Nuestra Familia Medical Group (Prospect Medical Group)    | PROSP |     | 837P |   |
|  | Nyhart  | 37299 |     | 837P |   |
|  | Nyhart  | 37299 |     | 837I |   |
|  | NYLCare Ethix Northwest                                   | 91135 |     | 837I |   |
|  | NYLCare Health Plans Northwest                            | 91166 |     | 837I |   |
|  | Occupational Health Mgmt, Inc. (HealthManage) (Ohio BWC)  | 31147 | Yes | 837P |   |
|  | Occupational Health Mgmt, Inc. (HealthManage) (Ohio BWC)  | 31147 | Yes | 837I |   |
|  | Ochsner Health Plan                                       | 72127 | Yes | 837P | Payer requires unique Provider ID for each practioner/provider; please contact Jill Brandt, OHP Provider Relations, at 504-219-6682, or jill.brandt@ochsner-hmo.com.                          |

|  |   |       |     |      |  |
|--|---|-------|-----|------|--|
|  | Ochsner Health Plan   | 72127 | Yes | 837I | Payer requires unique Provider ID for each practitioner/provider; please contact Jill Brandt, OHP Provider Relations, at 504-219-6682, or jill.brandt@ochsner-hmo.com.   |
|  | ODS Health Plan   | 13350 |     | 837P |  |
|  | ODS Health Plan   | 13350 |     | 837I |  |
|  | Office of Group Benefits                                    | 72087 |     | 837P |  |
|  | Ohio Bureau of Workers Compensation                         | 31147 | Yes | 837P | Provider Group Number: 11 digits- the first 9 digits are the provider's group Tax ID followed by two additional digits, usually zeros.<br>Rendering Provider Number: 11 digits- the first 9 are the rendering provider's SSN followed by two additional digits, usually zeros. |
|  | Ohio Bureau of Workers Compensation                         | 31147 | Yes | 837I | Provider Group Number: 11 digits- the first 9 digits are the provider's group Tax ID followed by two additional digits, usually zeros.<br>Rendering Provider Number: 11 digits- the first 9 are the rendering provider's SSN followed by two additional digits, usually zeros. |
|  | Ohio BWC  | 31147 | Yes | 837P |  |
|  | Ohio BWC  | 31147 | Yes | 837I |  |
|  | Ohio Comp Choice, Inc. (HMS) (Ohio BWC)                     | 31147 | Yes | 837P |  |
|  | Ohio Comp Choice, Inc. (HMS) (Ohio BWC)                     | 31147 | Yes | 837I |  |
|  | Ohio Employee Health Partnership (Ohio BWC)                 | 31147 | Yes | 837P |  |
|  | Ohio Employee Health Partnership (Ohio BWC)                 | 31147 | Yes | 837I |  |
|  | Ohio Health Choice, PPO                                     | 34189 |     | 837P | Group Number is required. Payer ID valid only for claims with a billing submission address of PO Box 93538, Cleveland, , OH 44101 or PO Box 6086, Cleveland, OH 44101.   |
|  | Ohio Health Choice, PPO                                     | 34189 |     | 837I | Group Number is required. Payer ID valid only for claims with a billing submission address of PO Box 93538, Cleveland, , OH 44101 or PO Box 6086, Cleveland, OH 44101.   |
|  | Ohio Health Group   | 95435 |     | 837P | Name changed from "Health Pledge HMO/Health Pledge Plus" to "Ohio Health Group"  |
|  | Olympic Health Management Systems, Inc.                     | 91151 |     | 837P |  |
|  | Olympic Health Management Systems, Inc.                     | 91151 |     | 837I |  |
|  | Omnicare Health Plan of Michigan                            | 38252 |     | 837P | For claims with Dates of Service BEFORE 10/01/04. Claims sent to this Payer ID with Dates of Service after 10/01/04 will be rejected.  |
|  | Omnicare Health Plan of Michigan                            | 38252 |     | 837I | For claims with Dates of Service BEFORE 10/01/04. Claims sent to this Payer ID with Dates of Service after 10/01/04 will be rejected.  |
|  | Omnicare, A Coventry Health Plan                            | 25150 |     | 837P | For claims with Dates of Service AFTER 10/01/04.   |
|  | Omnicare, A Coventry Health Plan                            | 25150 |     | 837I | For claims with Dates of Service AFTER 10/01/04.   |
|  | One Health Plan of California, Inc.                         | 95379 |     | 837P |  |
|  | One Health Plan of Georgia, Inc.                            | 95569 |     | 837P |  |
|  | One Health Plan of Illinois, Inc.                           | 95388 |     | 837P |  |
|  | Operating Engineers Locals 302 & 612 Health & Security Fund | 91136 |     | 837P | Group # required   |
|  | Operating Engineers Locals 302 & 612 Health & Security Fund | 91136 |     | 837I | Group # required   |
|  | OptiCare Eye Health Network                                 | 56190 |     | 837P | Rendering Network ID required by Payer in 2310B REF02 Field. Please contact Payer at 800-840-7032 to obtain ID.  |
|  | Optima Health Plan  | 54154 |     | 837P |  |
|  | Optima Health Plan  | 54154 |     | 837I |  |
|  | Optima Insurance Co.  | 54154 |     | 837P |  |
|  | Optima Insurance Co.  | 54154 |     | 837I |  |
|  | Optimum Choice of the Carolinas (OCCI)                      | 52152 |     | 837P |  |
|  | Optimum Choice, Inc (OCI)                                   | 52148 |     | 837P |  |
|  | Optimum Choice, Inc (OCI)                                   | 52148 |     | 837I |  |
|  | Orange County Foundation for Medical Care                   | OCFMC |     | 837P |  |
|  | Orthonet (Aetna)  | 13383 |     | 837P |  |
|  | Orthonet (Uniformed Services Family Health Plan)            | 13382 |     | 837P | Claims are printed and mailed to the payer. For Payable USFHP (NY & NJ) outpatient therapy claims only. Contact Theresa Malgioglio at (914) 681-8800.  |
|  | OrthoNet Corporation - Cigna                                | 13381 |     | 837P |  |
|  | Orthonet-Healthnet (White Plains, NY)                       | 25681 |     | 837P |  |
|  | OSF Care Advantage  | OSFMC |     | 837P | Requires UPIN #.   |
|  | OSF Health Plans (Peoria, IL)                               | 62171 |     | 837P |  |
|  | OSF Health Plans (Peoria, IL)                               | 62171 |     | 837I |  |

|            |   |          |     |      |   |
|------------|---|----------|-----|------|---|
|            | OSG - St. Therese Physicians Association                      | 37116    |     | 837P |   |
|            | OSG - St. Therese Physicians Association                      | 37116    |     | 837I |   |
|            | Oxford Health Plans   | 06111    | Yes | 837P |   |
|            | Oxford Health Plans   | 06111    | Yes | 837I |   |
|            | Oxford Health Plans   | 06111    | Yes | 835  |   |
|            | P5 Health Plan Solutions of Utah                              | 87068    |     | 837P |   |
|            | P5 Health Plan Solutions of Utah                              | 87068    |     | 837I |   |
|            | Pacific Alliance Medical Group and Hospital (SynerMed)        | SYMED    |     | 837P |   |
|            | Pacific IPA (CA)  | PCFCI    |     | 837P |   |
|            | Pacific Life & Annuity Company                                | 67466    |     | 837P |   |
|            | Pacific Life & Annuity Company                                | 67466    |     | 837I |   |
|            | PacifiCare - (HMO Claims)                                     | 95959    |     | 837P | For Payable PacifiCare HMO Claims only. NOT for PPO claims. For further questions you may inquire via email at edihmoinfo@phs.com                                 |
|            | PacifiCare - (HMO, POS, Medicare + Choice, Managed Care Plan) | 95959    |     | 837P | CA, OK, TX, OR, WA  |
|            | PacifiCare (HMO, EPO, Medicare + Choice)                      | 95964    |     | 837P | AZ  |
|            | PacifiCare (PPO, SDHP, EPO, Indemnity)                        | 95999    |     | 837P | CA, OK, TX, OR, WA, CO, NV  |
|            | PacifiCare (PPO, SDHP, EPO, Indemnity)                        | 95999    |     | 837I | CA, OK, TX, OR, WA, CO, NV  |
|            | PacifiCare Behavioral Health (PBH)                            | 33053    |     | 837P | CA, OK, TX, OR, WA, AZ, CO, NV  |
|            | PacifiCare Behavioral Health (PBH)                            | 33053    |     | 837I | CA, OK, TX, OR, WA, AZ, CO, NV  |
|            | PacifiCare Colorado   | 95962    |     | 837P |   |
|            | PacifiCare Colorado   | 95962    |     | 837I |   |
|            | PacifiCare Encounters   | 95958    |     | 837P | CA, OK, TX, OR, WA  |
|            | PacifiCare PPO - All States                                   | 95999    |     | 837P | For Payable PacifiCare PPO Claims only. NOT for HMO claims. For further questions you may inquire via email at edihmoinfo@phs.com                                 |
|            | PacifiCare/Secure Horizons                                    | 95959    |     | 837P |   |
|            | PacificSource Health Plans                                    | 93029    |     | 837P |   |
|            | PacificSource Health Plans                                    | 93029    |     | 837I |   |
|            | Paper claims  | PAPER    |     | 837P |   |
|            | Paper claims  | PAPER    |     | 837I |   |
|            | Paragon Benefits, Inc.  | 58174    |     | 837P |   |
|            | Paragon Benefits, Inc.  | 58174    |     | 837I |   |
|            | Paramount Health  | SX158    |     | 837P | Provider ID required  |
| A 02/25/08 | Paramount Healthcare  | PHCAR    |     | 837P |   |
|            | Paramount Preferred Network (Ohio BWC)                        | 31147    | Yes | 837P |   |
|            | Paramount Preferred Network (Ohio BWC)                        | 31147    | Yes | 837I |   |
|            | Parity Healthcare, LLC.                                       | 58204    |     | 837P |   |
|            | Parkland Community Health Plan                                | 66917    |     | 837P |   |
|            | Parkland Community Health Plan                                | 66917    |     | 837I |   |
|            | Partners National Health Plans of North Carolina, Inc.        | 56152    | Yes | 837P | Contracted providers only. Please call Partners National Health Plan of NC provider services department at (888) 296-9790; option 2 for electronic claims set-up. |
|            | Partners National Health Plans of North Carolina, Inc.        | 56152    | Yes | 837I | Contracted providers only. Please call Partners National Health Plan of NC provider services department at (888) 296-9790; option 2 for electronic claims set-up. |
|            | Partnership Health Plan                                       | PHC10068 |     | 837P | California  |
|            | Passport Advantage  | SX154    |     | 837P | Use only for professional claims. Use payer ID 12X24 for institutional claims.  |
|            | Passport Advantage  | 12X24    |     | 837I |   |
|            | Passport Health Plan  | 61129    |     | 837P |   |
|            | Passport Health Plan  | 61129    |     | 837I |   |
|            | Patient Advocates, Inc.                                       | 10525    |     | 837P |   |
|            | Patient Advocates, Inc.                                       | 10525    |     | 837I |   |
|            | Patient Choice  | 39026    |     | 837P |   |
|            | Patient Choice  | 39026    |     | 837I |   |
|            | PAYNET, INC   | 37210    |     | 837P |   |
|            | PAYNET, INC   | 37210    |     | 837I |   |
|            | PCA Health Plan of Florida                                    | 65018    |     | 837P |   |
|            | Peach State Health Plan                                       | 68049    |     | 837P |   |
|            | Peach State Health Plan                                       | 68049    |     | 837I |   |

|  |   |       |     |      |   |
|--|---|-------|-----|------|---|
|  | Pediatric Associates Health Plan                      | 20472 |     | 837P |   |
|  | Pediatric Associates Health Plan                      | 20472 |     | 837I |   |
|  | Peoples Benefit Life Insurance                        | PBLIC |     | 837P | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.                    |
|  | Peoples Benefit Life Insurance                        | PBLIC |     | 837I | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.                    |
|  | Peoples Health Network (Kenner, LA)                   | 72126 |     | 837P | Requires assigned network ID  |
|  | Peoples Health Network (Kenner, LA)                   | 72126 |     | 837I | Requires assigned network ID  |
|  | Performax, Inc.                                       | 41124 |     | 837P | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267. |
|  | Performax, Inc.                                       | 41124 |     | 837I | Payer ID valid only for claims with a billing submission address of P.O. Box 27267, Minneapolis, MN 55427-0267. |
|  | Personal Physician Care                               | 34173 |     | 837P |   |
|  | PersonalCare  | 25146 |     | 837P |   |
|  | PersonalCare  | 25146 |     | 837I |   |
|  | PHA Insurance Services (Orlando, FL)                  | 95183 |     | 837P |   |
|  | PHA Insurance Services (Orlando, FL)                  | 95183 |     | 837I |   |
|  | Phifer Wire Products, Inc.                            | PHIF4 |     | 837P |   |
|  | Phifer Wire Products, Inc.                            | PHIF4 |     | 837I |   |
|  | Phoenix Health Plan                                   | 03440 |     | 837P |   |
|  | Phoenix Health Plan                                   | 03440 |     | 837I |   |
|  | PHP of Kansas, ASK                                    | 00023 | Yes | 837P |   |
|  | PHP of Kansas, ASK                                    | 00023 | Yes | 835  |   |
|  | PHP of Mid-Michigan                                   | 87726 |     | 837P |   |
|  | PHP of Mid-Michigan                                   | 87726 |     | 837I |   |
|  | PHP of Missouri, ASK                                  | 00023 | Yes | 837P |   |
|  | PHP of Missouri, ASK                                  | 00023 | Yes | 835  |   |
|  | PHP of South Carolina                                 | 87726 |     | 837P |   |
|  | PHP of South Carolina                                 | 87726 |     | 837I |   |
|  | PHP of South Michigan                                 | 87726 |     | 837P |   |
|  | PHP of South Michigan                                 | 87726 |     | 837I |   |
|  | PHP of Southwest Michigan                             | 87726 |     | 837P |   |
|  | PHP of Southwest Michigan                             | 87726 |     | 837I |   |
|  | PHP of West Michigan                                  | 87726 |     | 837P |   |
|  | PHP of West Michigan                                  | 87726 |     | 837I |   |
|  | PHP/Physicians Health Plan Mid-Michigan               | 37330 |     | 837P | Only for dates of service on or after 10/01/06 and for subscribers with Group Number 100000001                  |
|  | PHP/Physicians Health Plan Mid-Michigan               | 37330 |     | 837I | Only for dates of service on or after 10/01/06 and for subscribers with Group Number 100000001                  |
|  | Physician Associates of Louisiana                     | 58204 |     | 837P |   |
|  | Physicians Care Network                               | 36345 |     | 837P | Rockford, IL only   |
|  | Physicians Care Network                               | 36345 |     | 837I | Rockford, IL only   |
|  | Physicians Corporation of America (Florida Plan Only) | 65018 |     | 837P |   |
|  | Physicians Data Trust                                 | PDT01 |     | 837P |   |
|  | Physicians Health Association of Illinois             | 37136 |     | 837P |   |
|  | Physicians Health Association of Illinois             | 37136 |     | 837I |   |
|  | Physicians Health Choice - Claims                     | PHCS1 |     | 837P |   |
|  | Physicians Health Choice - Claims                     | PHCS1 |     | 837I |   |
|  | Physicians Health Choice - Encounters                 | PHCEN |     | 837P |   |
|  | Physicians Health Choice - Encounters                 | PHCEN |     | 837I |   |
|  | Physicians Health Collaborative                       | 20398 |     | 837P |   |
|  | Physicians Health Collaborative                       | 20398 |     | 837I |   |
|  | Physician's Health Plan- SC                           | 09173 |     | 837P |   |
|  | Physician's Health Plan- SC                           | 09173 |     | 837I |   |
|  | Physicians Mutual Insurance Company                   | 47027 |     | 837P |   |
|  | Physicians Mutual Insurance Company                   | 47027 |     | 837I |   |
|  | Physicians Plus Insurance Corporation                 | 39156 |     | 837P |   |
|  | Physicians Plus Insurance Corporation                 | 39156 |     | 837I |   |
|  | Pinnacle Claims Management, Inc                       | 24735 |     | 837P |   |
|  | Pinnacle Claims Management, Inc                       | 24735 |     | 837I |   |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | Pinnacle Health Resources (Prospect Medical Group) | PROSP |     | 837P |   |
| A 01/23/08 | Pinnacol Assurance                                 | 84109 |     | 837P |   |
| A 12/31/07 | Pinnacol Assurance                                 | 84109 |     | 837I |   |
|            | Pioneer Medical Group / Pioneer Physicians Network | 33029 |     | 837P |   |
|            | Pittman & Associates                               | 37224 |     | 837P |   |
|            | Planned Administrators, Inc. (PAI)                 | 37287 |     | 837P |   |
|            | Planned Administrators, Inc. (PAI)                 | 37287 |     | 837I |   |
|            | PM Group   | 67466 |     | 837P |   |
|            | PM Group   | 67466 |     | 837I |   |
|            | Podi Care Managed Care                             | 58204 |     | 837P |   |
|            | Poly America Medical Benefits Plan                 | 32680 |     | 837P |   |
|            | Poly America Medical Benefits Plan                 | 32680 |     | 837I |   |
|            | POMCO  | 16111 |     | 837P |   |
|            | POMCO  | 16111 |     | 837I |   |
|            | PPO Plus, LLC                                      | 72148 |     | 837P |   |
|            | PPO Plus, LLC                                      | 72148 |     | 837I |   |
|            | PPOM (Southfield, MI)                              | 38335 |     | 837P |   |
|            | PPOM (Southfield, MI)                              | 38335 |     | 837I |   |
|            | Practicare, Inc.                                   | 04334 |     | 837P |   |
|            | Prairie Medical Group (La Vida)                    | LVIPA |     | 837P |   |
|            | Prairie States Enterprises, Inc.                   | 36373 |     | 837P |   |
|            | Prairie States Enterprises, Inc.                   | 36373 |     | 837I |   |
|            | Preferred Benefits Administrator                   | 61665 |     | 837P |   |
|            | Preferred Benefits Administrator                   | 61665 |     | 837I |   |
|            | Preferred Care Inc. - Florida                      | 59291 |     | 837P |   |
|            | Preferred Care Inc. - Florida                      | 59291 |     | 837I |   |
|            | Preferred Care Inc. - North Carolina               | 56178 |     | 837P |   |
|            | Preferred Care Inc. - North Carolina               | 56178 |     | 837I |   |
|            | Preferred Care NY                                  | SX089 | Yes | 837P | Requires payer assigned provider ID and enrollment  |
|            | Preferred Care NY                                  | SX089 | Yes | 837I | Requires payer assigned provider ID and enrollment  |
|            | Preferred Care Partners (Miami, FL)                | 65088 |     | 837P |   |
|            | Preferred Care Partners (Miami, FL)                | 65088 |     | 837I |   |
|            | Preferred Community Choice / PCCSelect / CompMed   | 73145 |     | 837P |   |
|            | Preferred Community Choice / PCCSelect / CompMed   | 73145 |     | 837I |   |
|            | Preferred Health Plan (Louisville, KY)             | 61106 |     | 837P |   |
|            | Preferred Health Plan (Louisville, KY)             | 61106 |     | 837I |   |
|            | Preferred Health Professionals                     | 00023 | Yes | 837P |   |
|            | Preferred Health Professionals                     | 00023 | Yes | 835  |   |
|            | Preferred Health Systems Insurance Company         | 60110 |     | 837P |   |
|            | Preferred Health Systems Insurance Company         | 60110 |     | 837I |   |
|            | Preferred IPA                                      | PFIPA |     | 837P |   |
|            | Preferred Network Access, Inc. (Darien, IL)        | 36401 |     | 837P | Payer ID valid only for claims with a submission address of P.O. Box 2248, Darien, IL 60561 |
|            | Preferred Network Access, Inc. (Darien, IL)        | 36401 |     | 837I | Payer ID valid only for claims with a submission address of P.O. Box 2248, Darien, IL 60561 |
|            | Preferred One (CT), a Division of First Choice     | 14163 |     | 837P |   |
|            | Preferred One (CT), a Division of First Choice     | 14163 |     | 837I |   |
|            | Preferred One (MN)                                 | 41147 |     | 837P |   |
|            | Preferred One (MN)                                 | 41147 |     | 837I |   |
|            | Preferred Plus of Kansas PPO                       | 60110 |     | 837P |   |
|            | Premier Benefits, Inc.                             | 43166 |     | 837P |   |
|            | Premier Benefits, Inc.                             | 43166 |     | 837I |   |
|            | Premier Comp of Hometown Health Network (Ohio BWC) | 31147 | Yes | 837P |   |
|            | Premier Comp of Hometown Health Network (Ohio BWC) | 31147 | Yes | 837I |   |

|  |   |       |     |      |  |
|--|---|-------|-----|------|--|
|  | Premier Health Plan                                       | 43166 |     | 837P |  |
|  | Premier Health Plan                                       | 43166 |     | 837I |  |
|  | Premier Health Systems                                    | 90440 |     | 837P | Please make sure that this payer ID is used only for Premier Health Systems with a mailing address in South Carolina |
|  | Premier Health Systems                                    | 90440 |     | 837I | Please make sure that this payer ID is used only for Premier Health Systems with a mailing address in South Carolina |
|  | Premier Managed Care, Inc. (Ohio BWC)                     | 31147 | Yes | 837P |  |
|  | Premier Managed Care, Inc. (Ohio BWC)                     | 31147 | Yes | 837I |  |
|  | Presbyterian Health Plan (Commercial)                     | PREHP |     | 837P | Please include 5-digit numeric provider ID number in 2310B REF02. Contact 888-923-5757, #6 then #2 to obtain ID.     |
|  | Presbyterian Health Plan (Commercial)                     | PREHP |     | 837I | Please include 5-digit numeric provider ID number in 2310B REF02. Contact 888-923-5757, #6 then #2 to obtain ID.     |
|  | Presbyterian Salud!                                       | PRESA |     | 837P | Please include 5-digit numeric provider ID number in 2310B REF02. Contact 888-923-5757, #6 then #2 to obtain ID.     |
|  | Presbyterian Salud!                                       | PRESA |     | 837I | Please include 5-digit numeric provider ID number in 2310B REF02. Contact 888-923-5757, #6 then #2 to obtain ID.     |
|  | Prevea Health Insurance Plan                              | 39185 |     | 837P |  |
|  | Prevea Health Insurance Plan                              | 39185 |     | 837I |  |
|  | Prima Health IPA (CA)                                     | IPO96 |     | 837P |  |
|  | Primary Health Plan                                       | PRIME |     | 837P |  |
|  | Primary PhysicianCare, Inc.                               | 56144 |     | 837P |  |
|  | Primary PhysicianCare, Inc.                               | 56144 |     | 837I |  |
|  | Prime Care Health Plan                                    | UH015 |     | 837P |  |
|  | Prime Vision Health                                       | 56190 |     | 837P | Rendering Network ID required by Payer in 2310B REF02 Field. Please contact Payer at 800-840-7032 to obtain ID.      |
|  | Prime West Health Plan                                    | 61604 |     | 837P |  |
|  | Prime West Health Plan                                    | 61604 |     | 837I |  |
|  | PrimeCare of Chino Valley                                 | 33029 |     | 837P |  |
|  | PrimeCare of Corona                                       | 33029 |     | 837P |  |
|  | PrimeCare of Hemet Valley                                 | 33029 |     | 837P |  |
|  | PrimeCare of Inland Valley                                | 33029 |     | 837P |  |
|  | PrimeCare of Moreno Valley                                | 33029 |     | 837P |  |
|  | PrimeCare of Redlands                                     | 33029 |     | 837P |  |
|  | PrimeCare of Riverside                                    | 33029 |     | 837P |  |
|  | PrimeCare of Sun City                                     | 33029 |     | 837P |  |
|  | PrimeCare of Temecula                                     | 33029 |     | 837P |  |
|  | PrimeSource Health Network                                | 04320 |     | 837P |  |
|  | PrimeSource Health Network                                | 04320 |     | 837I |  |
|  | Principal Financial Group                                 | 61271 |     | 837P |  |
|  | Principal Financial Group                                 | 61271 |     | 837I |  |
|  | Principal Life Insurance Company                          | 61271 |     | 837P |  |
|  | Principal Life Insurance Company                          | 61271 |     | 837I |  |
|  | Principal Mutual Life Insurance Company                   | 61271 |     | 837P |  |
|  | Principal Mutual Life Insurance Company                   | 61271 |     | 837I |  |
|  | Priority Health   | 38217 |     | 837P | Please call Wendell Broome at 616-975-8284 prior to submitting claims to obtain the 'pay to' code                    |
|  | Priority Health   | 38217 |     | 837I | Please call Wendell Broome at 616-975-8284 prior to submitting claims to obtain the 'pay to' code                    |
|  | Prism - First Health                                      | 37303 |     | 837P |  |
|  | Prism - First Health                                      | 37303 |     | 837I |  |
|  | Prism - Univera   | 37315 |     | 837P |  |
|  | Prism - Univera   | 37315 |     | 837I |  |
|  | Prism Network, Inc.                                       | 37268 |     | 837P |  |
|  | Pro Care Health Plan, Inc. (Detroit, MI)                  | 38329 |     | 837P |  |
|  | Pro Care Health Plan, Inc. (Detroit, MI)                  | 38329 |     | 837I |  |
|  | ProCare (Prospect)  | PROSP |     | 837P |  |
|  | Professional Benefit Administrators                       | 59296 |     | 837P |  |
|  | Professional Benefit Administrators                       | 59296 |     | 837I |  |
|  | Professional Benefit Administrators, Inc. (Oak Brook, IL) | 36331 |     | 837P |  |
|  | Professional Benefit Administrators, Inc. (Oak Brook, IL) | 36331 |     | 837I |  |
|  | Professional Claim Administrators (ProClaim)              | 41163 |     | 837P |  |
|  | Professional Claim Administrators (ProClaim)              | 41163 |     | 837I |  |

|            |   |       |     |      |   |
|------------|---|-------|-----|------|---|
|            | Professional Claims Management                                | 37242 |     | 837P |   |
|            | Professional Claims Management                                | 37242 |     | 837I |   |
|            | Professional Insurance Company (PIC)                          | 59041 |     | 837P |   |
|            | Professional Insurance Company (PIC)                          | 59041 |     | 837I |   |
|            | Professional Risk Management                                  | 34134 |     | 837P |   |
|            | Professional Risk Management                                  | 34134 |     | 837I |   |
|            | ProMed HealthCare Administrators (CA)                         | IP057 |     | 837P | Includes Pomona Valley Medical Group, Inc., d.b.a. ProMed Health Network and Upland Medical Group |
|            | Promina   | 58226 |     | 837P |   |
|            | Promina   | 58226 |     | 837I |   |
|            | Prospect Health Network                                       | PROSP |     | 837P |   |
|            | Prospect Medical Group  | PROSP |     | 837P |   |
|            | Prospect Sherman Oaks Medical Group (Prospect Medical Group)  | PROSP |     | 837P |   |
|            | Protegrity Services (Ohio BWC)                                | 31147 | Yes | 837P |   |
|            | Protegrity Services (Ohio BWC)                                | 31147 | Yes | 837I |   |
|            | Providence Choice Option                                      | PHP01 |     | 837P |   |
|            | Providence Good Health Plan                                   | PHP01 |     | 837P |   |
|            | Providence of Oregon Choice Option                            | SX131 |     | 837P |   |
|            | Providence of Oregon Good Health Plan                         | SX132 |     | 837P |   |
|            | Providence of Oregon Health Plan                              | SX133 | Yes | 837P | Contact Enrollment at 800-763-8484 x 909 prior to submitting claims.                              |
|            | Providence of Oregon Health Plan HMO                          | SX134 |     | 837P |   |
|            | Providence of Oregon Medicaid                                 | SX135 |     | 837P |   |
|            | Providence of Oregon Medicaid Option                          | SX136 |     | 837P |   |
|            | Providence of Oregon Medicare Extra                           | SX137 |     | 837P |   |
|            | Providence of Oregon Option                                   | SX138 |     | 837P |   |
|            | Providence of Oregon Traditional Option                       | SX139 |     | 837P |   |
|            | Provident Life and Accident Insurance                         | 68195 |     | 837P |   |
|            | Provident Life and Accident Insurance                         | 68195 |     | 837I |   |
|            | Provident Preferred of Washington/First Choice Health Network | 91131 |     | 837P |   |
|            | Provident Preferred of Washington/First Choice Health Network | 91131 |     | 837I |   |
|            | PSN - Florida Medicaid (JMH)                                  | 09822 |     | 837P |   |
|            | Puget Sound Benefits Trust                                    | 91136 |     | 837P | Group # required  |
|            | Puget Sound Benefits Trust                                    | 91136 |     | 837I | Group # required  |
|            | Puget Sound Electrical Workers Trust                          | 91136 |     | 837P | Group # required  |
|            | Puget Sound Electrical Workers Trust                          | 91136 |     | 837I | Group # required  |
| A 01/23/08 | Puget Sound Health Partners, Inc                              | 42172 |     | 837P |   |
| A 01/23/08 | Puget Sound Health Partners, Inc                              | 42172 |     | 837I |   |
|            | Qual Choice of Arkansas                                       | 35174 | Yes | 837P | Please call Customer Service to verify Provider ID 800-235-7111.                                  |
|            | Qual Choice of Arkansas                                       | 35174 | Yes | 837I | Please call Customer Service to verify Provider ID 800-235-7111.                                  |
|            | Qual Choice of North Carolina                                 | 35172 |     | 837P |   |
|            | Qual Choice of Virginia                                       | 35171 |     | 837P |   |
|            | Qual Choice of Virginia                                       | 35171 |     | 837I |   |
|            | QualCare, Inc   | 23342 |     | 837P |   |
|            | QualCare, Inc   | 23342 |     | 837I |   |
|            | Qual-Med Colorado EPO   | QMDCE |     | 837P |   |
|            | Qual-Med New Mexico   | QUANM |     | 837P |   |
|            | Qual-Med New Mexico   | QUANM |     | 837I |   |
|            | Qual-Med Portland (PO)  | QMDPO |     | 837P |   |
|            | Quincy Health Care Management, Inc.                           | 37129 |     | 837P |   |
|            | Quincy Health Care Management, Inc.                           | 37129 |     | 837I |   |
|            | R & N Market  | TKFMC |     | 837P |   |
|            | R. E. Harrington, Inc.  | 95266 |     | 837I |   |
|            | RBMS, LLC   | 91176 |     | 837P |   |
|            | RBMS, LLC   | 91176 |     | 837I |   |
|            | Redlands IPA (Synermed)                                       | SYMED |     | 837P |   |
|            | Regal Medical Group (CA)                                      | REGAL |     | 837P |   |

|  |  |           |     |      |   |
|--|--|-----------|-----|------|---|
|  | Regency Employee Benefits                              | 38221     |     | 837P |   |
|  | Regency Employee Benefits                              | 38221     |     | 837I |   |
|  | Regional Care, Inc.                                    | 47076     |     | 837P |   |
|  | Regional Care, Inc.                                    | 47076     |     | 837I |   |
|  | ResourceOne Administrators                             | 37278     |     | 837P |   |
|  | ResourceOne Administrators                             | 37278     |     | 837I |   |
|  | River Quest Network, Inc.                              | 37129     |     | 837P |   |
|  | River Quest Network, Inc.                              | 37129     |     | 837I |   |
|  | RMSCO, INC. (Liverpool, NY)                            | 16117     |     | 837P |   |
|  | RMSCO, INC. (Liverpool, NY)                            | 16117     |     | 837I |   |
|  | Robert Kennedy IPA                                     | 33029     |     | 837P |   |
|  | Rooney Life Inc  | 37602     |     | 837P |   |
|  | Rooney Life Inc  | 37602     |     | 837I |   |
|  | Rosemont of Des Plaines, IL                            | 36215     |     | 837P |   |
|  | Rosemont of Des Plaines, IL                            | 36215     |     | 837I |   |
|  | Rush Prudential Health Plans (HMO Only)                | 36389     |     | 837P |   |
|  | Rush Prudential Health Plans (HMO Only)                | 36389     |     | 837I |   |
|  | S & S Healthcare Strategies                            | 31441     |     | 837P |   |
|  | S & S Healthcare Strategies                            | 31441     |     | 837I |   |
|  | Sagamore Health Network                                | 35164     |     | 837P |   |
|  | Sagamore Health Network                                | 35164     |     | 837I |   |
|  | Saint Mary's Health Plans                              | 88029     |     | 837P |   |
|  | Saint Mary's Health Plans                              | 88029     |     | 837I |   |
|  | SAMBA (Special Agents Mutual Benefit Association)      | 37259     |     | 837P |   |
|  | SAMBA (Special Agents Mutual Benefit Association)      | 37259     |     | 837I |   |
|  | San Luis Obispo (SLO) Select IPA                       | 33029     |     | 837P |   |
|  | Santa Barbara Regional Health Authority                | 953865941 |     | 837P |   |
|  | Santa Cruz Monterey Managed Medical Care               | 12K82     |     | 837I |   |
|  | Sante Health System and Affiliates                     | 77038     |     | 837P |   |
|  | Sante Health System and Affiliates                     | 77038     |     | 837I |   |
|  | Schaller Anderson Catholic Healthcare West             | 12X45     |     | 837I |   |
|  | Schaller Anderson Catholic Healthcare West             | SX183     |     | 837P |   |
|  | SCHC Total Care Inc. (Acceptus Gateway payer)          | 16146     |     | 837P |   |
|  | SCINET - Claims - OSNA Cigna Commercial                | SX193     |     | 837P |   |
|  | SCINET - Claims - OSNA Cigna Medicare                  | SX194     |     | 837P |   |
|  | SCINET - Claims - OSNA United Health Care              | SX195     |     | 837P |   |
|  | Scott & White Healthcare                               | 88030     | Yes | 837P | 5 digit Scott/White ID must be in loop 2310B REF02 if rendering provider is different. Contact 254-298-3195 to obtain ID. |
|  | Scott & White Healthcare                               | 88030     | Yes | 837I | 5 digit Scott/White ID must be in loop 2310B REF02 if rendering provider is different. Contact 254-298-3195 to obtain ID. |
|  | Seabury & Smith  | 13310     |     | 837P |   |
|  | Seabury & Smith  | 13310     |     | 837I |   |
|  | Seaview IPA  | SVIPA     |     | 837P |   |
|  | Secure Health Plans of Georgia, LLC                    | 28530     |     | 837P |   |
|  | Secure Health Plans of Georgia, LLC                    | 28530     |     | 837I |   |
|  | Secure Horizons Arizona - Claims                       | 95964     |     | 837P |   |
|  | Secure Horizons Arizona - Claims                       | 95964     |     | 837I |   |
|  | Security Health Plan                                   | 39045     |     | 837P |   |
|  | Security Health Plan                                   | 39045     |     | 837I |   |
|  | Select Administrative Services (SAS)                   | 64088     |     | 837P | Also known as Mississippi Select Health Care  |
|  | Select Administrative Services (SAS)                   | 64088     |     | 837I | Also known as Mississippi Select Health Care  |
|  | Select Benefit Administrators (Des Moines, Iowa)       | 42137     |     | 837P |   |
|  | Select Benefit Administrators (Des Moines, Iowa)       | 42137     |     | 837I |   |
|  | Select Benefit Administrators of America (Ashland, WI) | 37282     |     | 837P |   |
|  | Select Benefit Administrators of America (Ashland, WI) | 37282     |     | 837I |   |
|  | Select Health of South Carolina                        | 23285     |     | 837P |   |

|  |       |     |      |  |
|--|-------|-----|------|--|
| Select Health of South Carolina                      | 23285 |     | 837I |  |
| Selectcare   | 00014 |     | 837P |  |
| Selectcare   | 00014 |     | 837I |  |
| SelectCare of Texas (Beaumont)                       | GTPA1 |     | 837P | Provider ID required - contact 713-843-6780 to obtain ID.  |
| SelectCare of Texas (Houston)                        | HPN11 |     | 837P | Provider ID required - contact 713-843-6780 to obtain ID.  |
| SelectCare of Texas (Kelsey-Sebold)                  | KLSY1 |     | 837P | Provider ID required - contact 713-843-6780 to obtain ID.  |
| Self Insured Benefit Administrators (Clearwater, FL) | 59111 |     | 837P | Payer ID valid only for claims with a submission address of 18167 US Highway 19 North, Suite 300, Clearwater, FL 33764.  |
| Self Insured Plans                                   | 36404 |     | 837P |  |
| Self Insured Plans                                   | 36404 |     | 837I |  |
| Self-Funded Plans (IL, PA, OH)                       | 34131 |     | 837P |  |
| Self-Funded Plans (IL, PA, OH)                       | 34131 |     | 837I |  |
| Senior Care Action Network (SCAN) Health Plan        | 73172 |     | 837P |  |
| Senior Care Action Network (SCAN) Health Plan        | 73172 |     | 837I |  |
| Sentara Family Care                                  | 54154 |     | 837P |  |
| Sentara Family Care                                  | 54154 |     | 837I |  |
| Sentara Health Management                            | 54154 |     | 837P |  |
| Sentara Health Management                            | 54154 |     | 837I |  |
| Sentinel Management Services                         | 23249 |     | 837P |  |
| Sentinel Management Services                         | 23249 |     | 837I |  |
| Sentry Insurance a Mutual Company                    | 39033 |     | 837P |  |
| Sentry Insurance a Mutual Company                    | 39033 |     | 837I |  |
| Seton Employee Plan                                  | SHEBP |     | 837P | For group ID's SHP I and SHP II  |
| Seton Employee Plan                                  | SHEBP |     | 837I | For group ID's SHP I and SHP II  |
| Seton Health Plan - Exclusive Provider Network       | EPNSH |     | 837P |  |
| Seton Health Plan - Exclusive Provider Network       | EPNSH |     | 837I |  |
| Seton Health Plan - Map Program                      | SHMAP |     | 837P |  |
| Seton Health Plan - Map Program                      | SHMAP |     | 837I |  |
| Seton Health Plan (CHIP)                             | SHPCH | Yes | 837P |  |
| Seton Health Plan (CHIP)                             | SHPCH | Yes | 837I |  |
| Share Health Plan - ILL/HMO                          | UH005 |     | 837P |  |
| Share Health Plan - ILL/PPO                          | UH006 |     | 837P |  |
| Shasta Administrative Services                       | 75280 |     | 837P |  |
| Shasta Administrative Services                       | 75280 |     | 837I |  |
| Sheakley UNICOMP (Ohio BWC)                          | 31147 | Yes | 837P |  |
| Sheakley UNICOMP (Ohio BWC)                          | 31147 | Yes | 837I |  |
| Sheffield, Olson & McQueen, Inc.                     | 41143 |     | 837P |  |
| Sheffield, Olson & McQueen, Inc.                     | 41143 |     | 837I |  |
| Sierra Health Services (Claims)                      | 76342 |     | 837P |  |
| Sierra Health Services (Claims)                      | 76342 |     | 837I |  |
| Sierra Health Services (Encounters)                  | 76343 |     | 837P |  |
| Sierra Health Services (Encounters)                  | 76343 |     | 837I |  |
| Signature Health Alliance                            | 62159 |     | 837P |  |
| Signature Health Alliance                            | 62159 |     | 837I |  |
| Sinclair Health Plan                                 | 84076 |     | 837P |  |
| Sinclair Health Plan                                 | 84076 |     | 837I |  |
| Sloans Lake Managed Care                             | 84096 |     | 837P | Insured's Policy Group Field must include a double hyphen (- -) and Sloans Lake's internal group number. The insured's policy number or carrier group number should preface the Sloans Lake internal group number. |
| Sloans Lake Managed Care                             | 84096 |     | 837I | Insured's Policy Group Field must include a double hyphen (- -) and Sloans Lake's internal group number. The insured's policy number or carrier group number should preface the Sloans Lake internal group number. |
| Smith Administrators                                 | 02057 |     | 837P |  |
| Smith Administrators                                 | 02057 |     | 837I |  |
| Solidarity Managed Care Organization (Ohio BWC)      | 31147 | Yes | 837P |  |
| Solidarity Managed Care Organization (Ohio BWC)      | 31147 | Yes | 837I |  |

|  |   |       |     |      |  |
|--|---|-------|-----|------|--|
|  | Sonoma County Primary Care IPA Medical                | E3510 | Yes | 837P |  |
|  | Sooner Health Network - (Wisconsin)                   | AMS01 |     | 837P |  |
|  | South Point Hotel & Casino                            | 35227 |     | 837P |  |
|  | SouthCare/Healthcare Preferred                        | 25147 |     | 837P |  |
|  | SouthCare/Healthcare Preferred                        | 25147 |     | 837I |  |
|  | Southeast Texas Gov't Employees Benefit Pool          | STGEB |     | 837P |  |
|  | Southern Benefit Services                             | 37318 |     | 837P |  |
|  | Southern Benefit Services                             | 37318 |     | 837I |  |
|  | Southern CA Children's Network (Synermed)             | SYMED |     | 837P |  |
|  | Southern Desert Health Plan - (Wisconsin)             | AMS01 |     | 837P |  |
|  | Southern Health Services, Inc.                        | 25128 |     | 837P |  |
|  | Southern Health Services, Inc.                        | 25128 |     | 837I |  |
|  | Southern Indiana Healthcare Org                       | SX142 |     | 837P |  |
|  | Southwest Administrators                              | SWADM |     | 837P |  |
|  | Southwest Service Life                                | 37266 |     | 837P |  |
|  | Southwest Service Life                                | 37266 |     | 837I |  |
|  | Special Risk International                            | 52190 |     | 837P |  |
|  | Special Risk International                            | 52190 |     | 837I |  |
|  | St. Barnabas System Health Plan                       | 22240 |     | 837P |  |
|  | St. Barnabas System Health Plan                       | 22240 |     | 837I |  |
|  | St. John's Claims Administration                      | 37264 |     | 837P |  |
|  | St. John's Claims Administration                      | 37264 |     | 837I |  |
|  | St. Joseph Health Foundation of Northern California   | 68033 |     | 837P |  |
|  | St. Joseph Heritage Healthcare                        | STJOE |     | 837P |  |
|  | St. Jude (St. Joseph Heritage Healthcare)             | STJOE |     | 837P |  |
|  | St. Therese Physician Association                     | 37116 |     | 837P |  |
|  | St. Therese Physician Association                     | 37116 |     | 837I |  |
|  | St. Thomas Medical Network (Gulfquest)                | STM01 |     | 837P |  |
|  | St. Vincent Catholic Medical Centers                  | 13407 |     | 837P |  |
|  | St. Vincent Catholic Medical Centers                  | 13407 |     | 837I |  |
|  | St. Vincent IPA                                       | PDT01 |     | 837P |  |
|  | State Employees Group Benefits                        | 72087 |     | 837P |  |
|  | State Employees Group Benefits                        | 72087 |     | 837I |  |
|  | State Farm Insurance Companies                        | 31053 |     | 837P |  |
|  | State Farm Insurance Companies                        | 31053 |     | 837I |  |
|  | State of Texas Dental Plan                            | 57254 |     | 837I |  |
|  | States General Life Insurance                         | 75087 |     | 837P |  |
|  | States General Life Insurance                         | 75087 |     | 837I |  |
|  | Staywell Health Plan                                  | 14163 |     | 837P |  |
|  | Staywell Health Plan                                  | 14163 |     | 837I |  |
|  | Sterling Option 1                                     | 91151 |     | 837P |  |
|  | Sterling Option 1                                     | 91151 |     | 837I |  |
|  | Stoner and Associates (Cincinnati, OH)                | 31121 |     | 837P | Payer ID valid only for claims with a submission address of 205 West Fourth Street, #225, Cincinnati, OH 45202.  |
|  | Stoner and Associates (Cincinnati, OH)                | 31121 |     | 837I | Payer ID valid only for claims with a submission address of 205 West Fourth Street, #225, Cincinnati, OH 45202.  |
|  | Student Insurance - Boston Mutual Life Insurance Co.  | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025. |
|  | Student Insurance - Boston Mutual Life Insurance Co.  | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025. |
|  | Student Insurance - Chesapeake Life Insurance Company | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025. |
|  | Student Insurance - Chesapeake Life Insurance Company | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025. |

|            |  |       |     |      |   |
|------------|--|-------|-----|------|---|
|            | Student Insurance - Life Ins. Co. of Boston and NY     | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Student Insurance - Life Ins. Co. of Boston and NY     | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Student Insurance - Mid-West Nat'l Life Ins. Co. of TN | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Student Insurance - Mid-West Nat'l Life Ins. Co. of TN | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Student Insurance - Reliance National Insurance Co.    | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Student Insurance - Reliance National Insurance Co.    | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.  |
|            | Suffolk Health Plan of New York                        | 88331 |     | 837P |   |
|            | Suffolk Health Plan of New York                        | 88331 |     | 837I |   |
|            | SummaCare Health Plans                                 | 95202 |     | 837P |   |
|            | SummaCare Health Plans                                 | 95202 |     | 837I |   |
|            | Summit America Insurance Services, Inc.                | 37301 |     | 837P |   |
|            | Summit America Insurance Services, Inc.                | 37301 |     | 837I |   |
|            | Summit Health Plan (Vista)                             | 20197 |     | 837P |   |
|            | SummitCorp (Ohio BWC)                                  | 31147 | Yes | 837P |   |
|            | SummitCorp (Ohio BWC)                                  | 31147 | Yes | 837I |   |
|            | Sun Health   | SX186 |     | 837P |   |
| C 12/31/07 | Sun Life and Health Insurance Co                       | 67815 |     | 837P | Formerly known as Genworth Life and Health (GLHIC)  |
| C 12/31/07 | Sun Life and Health Insurance Co                       | 67814 |     | 837P | Formerly known as Phoenix Home Life   |
| C 12/31/07 | Sun Life and Health Insurance Co                       | 67815 |     | 837I | Formerly known as Genworth Life and Health (GLHIC)  |
| C 12/31/07 | Sun Life and Health Insurance Co                       | 67814 |     | 837I | Formerly known as Phoenix Home Life   |
|            | Sunamerica Life Insurance Company                      | 90956 |     | 837P |   |
|            | Superior Administrators, Inc. (Santa Ana, CA)          | 23218 |     | 837P |   |
|            | Superior Administrators, Inc. (Santa Ana, CA)          | 23218 |     | 837I |   |
|            | Superior Health Plan                                   | SHP11 | Yes | 837P | Contact 800-225-2573 Ext. 25550 to enroll in EDI.   |
|            | Superior Health Plan                                   | SHP11 | Yes | 837I | Contact 800-225-2573 Ext. 25550 to enroll in EDI.   |
|            | Superior Health Plan CHIPS EPO                         | SHP11 | Yes | 837P | For DOS 9-1-04 and after. Superior's Trading Partner Profile (enrollment document) is required and may be found at <a href="http://www.superiorhealthplan.com">www.superiorhealthplan.com</a> . Enrollment forms may be faxed to 314-558-2427. Must submit Superior Healthplan 6 digit PIN in the Medicaid ID field (Loop 2010AA REF01 with a 1D Qualifier or 2310B REF02 with a 1D Qualifier). |
|            | Superior Health Plan CHIPS EPO                         | SHP11 | Yes | 837I | For DOS 9-1-04 and after. Superior's Trading Partner Profile (enrollment document) is required and may be found at <a href="http://www.superiorhealthplan.com">www.superiorhealthplan.com</a> . Enrollment forms may be faxed to 314-558-2427. Must submit Superior Healthplan 6 digit PIN in the Medicaid ID field (Loop 2010AA REF01 with a 1D Qualifier or 2310B REF02 with a 1D Qualifier). |
|            | Superior Health Plan of Texas                          | 39188 | Yes | 837P |   |
|            | Superior Health Plan of Texas                          | 39188 | Yes | 837I |   |
| C 12/05/07 | Sutter Connect - Alta Bates                            | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Santa Rosa                            | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter Delta Medical Group            | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter Gould                          | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter Independent Physicians         | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter Medical Group                  | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter Regional Medical Foundation    | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |
| C 12/05/07 | Sutter Connect - Sutter West Medical Group             | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157   |

|            |  |       |     |      |  |
|------------|--|-------|-----|------|--|
| C 12/05/07 | Sutter Connect - Yolo Health Alliance                            | 09157 | Yes | 837P | California - Payer ID changed from 68-0209157  |
|            | Synermed   | SYMED |     | 837P |  |
|            | Talbert Medical Group  | TALMG |     | 837P |  |
|            | Tall Tree Administrators   | 88067 |     | 837P |  |
|            | Tall Tree Administrators   | 88067 |     | 837I |  |
|            | Tarrant Health Services  | 37228 |     | 837P |  |
|            | TBG Administrative Services                                      | 39157 |     | 837P |  |
|            | TBG Administrative Services                                      | 39157 |     | 837I |  |
|            | Teachers Health Trust  | 88019 |     | 837P |  |
|            | Team Choice - Alpha Care Gold                                    | ADSL1 |     | 837P |  |
|            | Team Choice - Alpha Care Gold                                    | ADSL1 |     | 837I |  |
|            | Team Choice - Gold   | 75139 |     | 837P |  |
|            | Team Choice - Gold   | 75139 |     | 837I |  |
|            | Team Choice PNS  | 75133 |     | 837P |  |
|            | Team Choice PNS  | 75133 |     | 837I |  |
|            | Team Choice UMC  | 75134 |     | 837P |  |
|            | Team Choice UMC  | 75134 |     | 837I |  |
|            | Teamcare   | 36215 |     | 837P |  |
|            | Teamcare   | 36215 |     | 837I |  |
|            | Teamsters Local Union #301                                       | 36612 |     | 837P |  |
|            | Teamsters Local Union #301                                       | 36612 |     | 837I |  |
|            | Tennessee PHP TennCare   | 62155 |     | 837P |  |
|            | Tennessee PHP TennCare   | 62155 |     | 837I |  |
|            | Texan Plus (Beaumont)  | GTPA1 |     | 837P | Provider ID required – contact 713-843-6780 to obtain ID.  |
|            | Texan Plus (Houston)   | HPN11 |     | 837P | Provider ID required – contact 713-843-6780 to obtain ID.  |
|            | Texan Plus (Houston)   | HPN11 |     | 837I | Provider ID required – contact 713-843-6780 to obtain ID.  |
|            | Texan Plus (Kelsey-Sebold)                                       | KLSY1 |     | 837P | Provider ID required – contact 713-843-6780 to obtain ID.  |
|            | Texan Plus (Kelsey-Sebold)                                       | KLSY1 |     | 837I | Provider ID required – contact 713-843-6780 to obtain ID.  |
|            | Texas Association of School Boards                               | TTASB |     | 837P |  |
|            | Texas Children Star Medicaid                                     | TXCSM | Yes | 837P | Rendering Providers Secondary Identification Number which is the Texas State Medicaid Number. (TPI#) or Billing providers secondary identification number (TPI) when the billing is different than rendering. Enrollment Verification calls should be directed to 800-990-TCHP (8247). |
|            | Texas Children's Health Plan                                     | 76048 |     | 837P |  |
|            | Texas Children's Health Plan                                     | 76048 |     | 837I |  |
|            | Texas Childrens Health Plan STAR (Medicaid)                      | 75228 |     | 837P |  |
|            | Texas Childrens Health Plan STAR (Medicaid)                      | 75228 |     | 837I |  |
|            | Texas Children's Star  | TH077 |     | 837P |  |
|            | Texas Municipal League Group                                     | 74214 |     | 837P |  |
|            | Texas Municipal League Group                                     | 74214 |     | 837I |  |
| A 01/23/08 | Texas Mutual Insurance Co  | 22945 |     | 837P |  |
|            | Texas Premier Plan   | TH089 |     | 837P |  |
|            | Texas True Choice  | TTCEC |     | 837P |  |
|            | Texas True Choice  | TTCEC |     | 837I |  |
|            | Texas University Plan - UPG Commercial                           | UPGUT |     | 837P |  |
|            | The City of Odessa   | 75600 |     | 837P |  |
|            | The City of Odessa   | 75600 |     | 837I |  |
|            | The Epoch Group  | 28777 |     | 837P |  |
|            | The Epoch Group  | 28777 |     | 837I |  |
|            | The Health Exchange (Cerner Corp)                                | 20356 |     | 837P |  |
|            | The Health Exchange (Cerner Corp)                                | 20356 |     | 837I |  |
|            | The Health Plan (Massillon, Ohio and St. Clairsville, Ohio only) | 34150 |     | 837P | Services ordered by outside provider require referring provider. Please provide physician name and UPIN if available.  |
|            | The Health Plan (Massillon, Ohio and St. Clairsville, Ohio only) | 34150 |     | 837I | Services ordered by outside provider require attending physician. Please provide physician name and UPIN if available.   |
|            | The Health Plan (Ohio BWC)                                       | 31147 | Yes | 837P |  |
|            | The Health Plan (Ohio BWC)                                       | 31147 | Yes | 837I |  |
|            | The Healthcare Group   | 35206 |     | 837P |  |

|  |  |       |     |      |   |
|--|--|-------|-----|------|---|
|  | The Healthcare Group   | 35206 |     | 837I |   |
|  | The Integrity Benefit Group                                  | 58200 |     | 837P |   |
|  | The Integrity Benefit Group                                  | 58200 |     | 837I |   |
|  | The Mega Life & Health Insurance Co.                         | 59221 |     | 837P | Payer ID valid only if the address on the Health ID Card matches the following: P.O. Box 982009, North Richland Hills, TX 76182.  |
|  | The Mega Life & Health Insurance Co.                         | 59221 |     | 837I | Payer ID valid only if the address on the Health ID Card matches the following: P.O. Box 982009, North Richland Hills, TX 76182.  |
|  | The Mega Life & Health Insurance Co. - Starbridge StarHRG    | 59225 |     | 837P | Claims are printed and mailed to the payer. Payer ID valid only if address on the Health ID Card matches one of the following: PO Box 55270, 30870, 30888, 54150, 30069, or 55400, Phoenix AZ 85270-5270. |
|  | The Mega Life & Health Insurance Co. - Starbridge StarHRG    | 59225 |     | 837I | Claims are printed and mailed to the payer. Payer ID valid only if address on the Health ID Card matches one of the following: PO Box 55270, 30870, 30888, 54150, 30069, or 55400, Phoenix AZ 85270-5270. |
|  | The MEGA Life & Health Insurance Company - Student Insurance | 74227 |     | 837P | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.                        |
|  | The MEGA Life & Health Insurance Company - Student Insurance | 74227 |     | 837I | Payer ID only valid if the P.O. Box on the Health ID Card matches one of the following P.O. Boxes: P.O. Box 890025, 809067, 809079, 809066, 809036, 809081, Dallas, Tx 75380-9025.                        |
|  | The Mega Life OKC  | 59227 |     | 837P | Payer ID valid only if the P.O. Box on the health ID card matches P.O. Box 548801, Oklahoma City, OK 73154  |
|  | The Mega Life OKC  | 59227 |     | 837I | Payer ID valid only if the P.O. Box on the health ID card matches P.O. Box 548801, Oklahoma City, OK 73154  |
|  | The Oath - Health Partners of Alabama                        | 63092 | Yes | 837P |   |
|  | The Perfect Health Insurance Company                         | 13522 |     | 837P |   |
|  | The Perfect Health Insurance Company                         | 13522 |     | 837I |   |
|  | The Preferred Healthcare System - PPO                        | 04320 |     | 837P |   |
|  | The Preferred Healthcare System - PPO                        | 04320 |     | 837I |   |
|  | The TPA (Benesight)  | 87265 |     | 837P |   |
|  | The Wellness Plan  | 38200 |     | 837P | Provider ID required.   |
|  | The Wellness Plan  | 38200 |     | 837I | Provider ID required.   |
|  | Theraphysics   | THERA |     | 837P |   |
|  | Theraphysics - Colorado Only                                 | COTHE |     | 837P |   |
|  | Third Party Administrators, Inc. (TPA)                       | 37225 |     | 837P |   |
|  | Third Party Administrators, Inc. (TPA)                       | 37225 |     | 837I |   |
|  | Third Party Claims Management                                | 95266 |     | 837P |   |
|  | Third Party Claims Management                                | 95266 |     | 837I |   |
|  | Time Insurance Company (Assurant Health)                     | 39065 |     | 837P | Formerly known as Fortis Insurance Company  |
|  | Time Insurance Company (Assurant Health)                     | 39065 |     | 837I | Formerly known as Fortis Insurance Company  |
|  | TML Intergovernmental Employee Benefit Pool                  | 74214 |     | 837P |   |
|  | TML Intergovernmental Employee Benefit Pool                  | 74214 |     | 837I |   |
|  | Today's Health Wisconsin/Abri Health Plan                    | 20081 |     | 837P |   |
|  | Today's Health Wisconsin/Abri Health Plan                    | 20081 |     | 837I |   |
|  | Tongass Timber Trust   | 92620 |     | 837P |   |
|  | Tongass Timber Trust   | 92620 |     | 837I |   |
|  | Tooling & Manufacturing Assn                                 | 61425 |     | 837P |   |
|  | Tooling & Manufacturing Assn                                 | 61425 |     | 837I |   |
|  | Total Carolina Care  | 68055 |     | 837P |   |
|  | Total Carolina Care  | 68055 |     | 837I |   |
|  | Total Community Care   | 31182 |     | 837P |   |
|  | Total Community Care   | 31182 |     | 837I |   |
|  | Total Health Management - PBM (Ohio BWC)                     | 31147 | Yes | 837P |   |
|  | Total Health Management - PBM (Ohio BWC)                     | 31147 | Yes | 837I |   |
|  | Total Healthcare, Inc.                                       | 38201 |     | 837P |   |
|  | Total Healthcare, Inc.                                       | 38201 |     | 837I |   |
|  | Touchpoint Health Plan HMO                                   | 97910 |     | 837P |   |
|  | Touchstone Health PSO  | 23856 |     | 837P |   |
|  | Touchstone Health PSO  | 23856 |     | 837I |   |

|  |  |       |     |      |   |
|--|--|-------|-----|------|---|
|  | Touchstone Health/ Health Net Smart Choice     | 13402 |     | 837P |   |
|  | Touchstone Health/ Health Net Smart Choice     | 13402 |     | 837I |   |
|  | Tower Life Insurance Co.                       | 69493 |     | 837P |   |
|  | Tower Life Insurance Co.                       | 69493 |     | 837I |   |
|  | TR Paul, Inc.                                  | 37230 |     | 837P |   |
|  | TR Paul, Inc.                                  | 37230 |     | 837I |   |
|  | TransAmerica Life Financial Insurance Company  | TFLIC |     | 837P | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.  |
|  | TransAmerica Life Financial Insurance Company  | TFLIC |     | 837I | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.  |
|  | TransAmerica Life Insurance Company            | TSAA2 |     | 837P | Use this payer ID for the following: Group off the job accident, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke, Hospital confinement indemnity, Hospital intensive care, Universal life with ADB rider for LTC. For questions please call (501) 227-1284. |
|  | TransAmerica Life Insurance Company            | TLINS |     | 837P | Accident only, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke only, Hospital confinement indemnity, Hospital intensive care - PO Box 8043 Little Rock, AR 72203-8043 (501) 227-1284  |
|  | TransAmerica Life Insurance Company            | TLIN2 |     | 837P | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.  |
|  | TransAmerica Life Insurance Company            | 59222 |     | 837P |   |
|  | TransAmerica Life Insurance Company            | TSAA2 |     | 837I | Use this payer ID for the following: Group off the job accident, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke, Hospital confinement indemnity, Hospital intensive care, Universal life with ADB rider for LTC. For questions please call (501) 227-1284. |
|  | TransAmerica Life Insurance Company            | TLINS |     | 837I | Accident only, Cancer only, First occurrence invasive cancer, Heart disease attack or stroke only, Hospital confinement indemnity, Hospital intensive care - PO Box 8043 Little Rock, AR 72203-8043 (501) 227-1284  |
|  | TransAmerica Life Insurance Company            | TLIN2 |     | 837I | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3542 with claim questions.  |
|  | TransAmerica Life Insurance Company            | 59222 |     | 837I |   |
|  | TransAmerica Occidental Life Insurance Company | TOLI2 |     | 837P | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3544 with claim questions.  |
|  | Transamerica Occidental Life Insurance Company | 12T76 |     | 837I |   |
|  | TransAmerica Occidental Life Insurance Company | TOLI2 |     | 837I | Long Term Care only - PO Box 93019, Hurst TX, 76053. Call 866-745-3544 with claim questions.  |
|  | TransChoice - Key Benefit Administrators       | 37284 |     | 837P |   |
|  | TransChoice - Key Benefit Administrators       | 37284 |     | 837I |   |
|  | Transwestern Insurance Admin, Inc.             | TRAN1 |     | 837P |   |
|  | Tricare, North & South                         | 614   | Yes | 837P |   |
|  | Tricare, North & South                         | 614   | Yes | 837I |   |
|  | Tricare, North & South                         | 614   | Yes | 835  |   |
|  | Tricities IPA                                  | PDT01 |     | 837P |   |
|  | Trilogy Health                                 | 98514 |     | 837P |   |
|  | Trilogy Health                                 | 98514 |     | 837I |   |
|  | TriWest  | WESTR | Yes | 837P | For Dates of Service of 7/1/2004 and thereafter. For dates of service 6/30/2004 and prior, use payer ID = 38520   |
|  | TriWest  | WESTR | Yes | 835  |   |
|  | True Choice USA                                | TCUSA |     | 837P |   |
|  | True Choice USA                                | TCUSA |     | 837I |   |
|  | True Choice USA - Christus Health Plan         | TCUCH |     | 837P |   |
|  | True Choice USA - Christus Health Plan         | TCUCH |     | 837I |   |
|  | Trusted Plans Service Corporation              | 91078 |     | 837P |   |
|  | Trusted Plans Service Corporation              | 91078 |     | 837I |   |
|  | Trustmark Insurance Co                         | 61425 |     | 837P |   |
|  | Trustmark Insurance Co                         | 61425 |     | 837I |   |
|  | TTPA Comm                                      | 76054 |     | 837P |   |
|  | TTPA Comm                                      | 76054 |     | 837I |   |
|  | Tufts Health Plan                              | 04298 | Yes | 837P | Note to Providers: To avoid claim rejection, please contact Tufts prior to submitting claims.   |
|  | Tufts Health Plan                              | 04298 | Yes | 837I | Note to Providers: To avoid claim rejection, please contact Tufts prior to submitting claims.   |
|  | TXEN AltPros                                   | 75206 |     | 837P |   |

|  |       |     |      |  |
|--|-------|-----|------|--|
| UBH - United Behavioral Health (Health Plan HMO)         | 87726 |     | 837P |  |
| UBH - United Behavioral Health (Health Plan HMO)         | 87726 |     | 837I |  |
| UBH - United Behavioral Health –Employer division        | UBHRI |     | 837P | Nine (9) digit ID, Not HMO or PPO business. Call 800-557-5745 if questions.  |
| UBH RIOS   | 87726 |     | 837P |  |
| Ucare of MN  | 52629 | Yes | 837P |  |
| Ucare of MN  | 52629 | Yes | 837I |  |
| UCSF/CSL Pulmonary                                       | 65006 |     | 837P |  |
| UGS Medicare   | 00450 | Yes | 837I |  |
| UHP of New Jersey (Centene)                              | 22329 | Yes | 837P | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.  |
| UHP of New Jersey (Centene)                              | 22329 | Yes | 837I | Enrollment required. Please call 800-225-2573 ext 25525 prior to submitting claims.  |
| UICI Administrators                                      | 74223 |     | 837P |  |
| UICI Administrators                                      | 74223 |     | 837I |  |
| UMMH   | 37292 |     | 837P |  |
| UMMH   | 37292 |     | 837I |  |
| UMWA Health & Retirement Funds                           | 52180 |     | 837P |  |
| UMWA Health & Retirement Funds                           | 52180 |     | 837I |  |
| UniCare - Major Accounts                                 | 80314 |     | 837P | License #, not UPIN#, required. Call 877-210-4083 if questions. Includes Major Accounts, Special Accounts, Individual and Small Group.                           |
| UniCare - Major Accounts                                 | 80314 |     | 837I | License #, not UPIN#, required. Call 877-210-4083 if questions. Includes Major Accounts, Special Accounts, Individual and Small Group.                           |
| Unified Group Services                                   | 35198 |     | 837P |  |
| Unified Group Services                                   | 35198 |     | 837I |  |
| Unified Health Services                                  | 62170 |     | 837P | Workers Comp claims  |
| Unified Health Services                                  | 62170 |     | 837I | Workers Comp claims  |
| Uniform Medical Plan/ Harrington Benefit Services        | 75243 |     | 837P |  |
| Uniform Medical Plan/ Harrington Benefit Services        | 75243 |     | 837I |  |
| Uniformed Service Family Health Plan                     | 13407 |     | 837P |  |
| Uniformed Service Family Health Plan                     | 13407 |     | 837I |  |
| Union Labor Life Insurance Company (King of Prussia, PA) | 13142 |     | 837P |  |
| Union Labor Life Insurance Company (King of Prussia, PA) | 13142 |     | 837I |  |
| Union Pacific Railroad Employees                         | 87042 |     | 837P |  |
| Union Pacific Railroad Employees                         | 87042 |     | 837I |  |
| Union Security Insurance Co. (Assurant Health)           | 70408 |     | 837P | Formerly known as Fortis Benefits Insurance  |
| Union Security Insurance Co. (Assurant Health)           | 70408 |     | 837I | Formerly known as Fortis Benefits Insurance  |
| Unison Health Plan/Better Health                         | 62183 |     | 837P | Name changed from "Better Health Plan"   |
| Unison Health Plan/Better Health                         | 62183 |     | 837I | Name changed from "Better Health Plan"   |
| Unison Health Plan/Three Rivers                          | 25175 |     | 837P | Formerly Three Rivers Health Plan, Inc. Loop 2310B REF 02 must be 12 characters in length and begin with '00'  |
| Unison Health Plan/Three Rivers                          | 25175 |     | 837I | Formerly Three Rivers Health Plan, Inc. Loop 2310B REF 02 must be 12 characters in length and begin with '00'  |
| United Furniture Workers Insurance                       | UFWIF |     | 837P |  |
| United Healthcare  | 87726 |     | 837P |  |
| United Healthcare  | 87726 |     | 837I |  |
| United Healthcare  | 87726 | Yes | 835  |  |
| United Healthcare of the River Valley                    | 95378 | Yes | 837P | Contact Payer at 866-509-1593 for EDI enrollment. "John Deere Healthcare" has changed their name to "United Healthcare of the River Valley", effective 08-01-07. |
| United Healthcare of the River Valley                    | 95378 | Yes | 837I | Contact Payer at 866-509-1593 for EDI enrollment. "John Deere Healthcare" has changed their name to "United Healthcare of the River Valley", effective 08-01-07. |
| United Medical Resources                                 | 31107 |     | 837P |  |
| United Medical Resources                                 | 31107 |     | 837I |  |
| United of Omaha  | 71412 |     | 837P |  |
| United of Omaha  | 71412 |     | 837I |  |
| United Physicians of N. Colorado                         | 84132 |     | 837P |  |

|            |   |       |     |      |  |
|------------|---|-------|-----|------|--|
|            | United Resource Group                                 | 41194 |     | 837P |  |
|            | United Resource Group                                 | 41194 |     | 837I |  |
|            | United States Life Insurance Company                  | 13545 |     | 837P |  |
|            | UnitedHealthcare (Metrahealth)                        | 87726 |     | 837P |  |
|            | UnitedHealthcare (Metrahealth)                        | 87726 |     | 837I |  |
|            | UnitedHealthcare (Travelers)                          | 87726 |     | 837P |  |
|            | UnitedHealthcare (Travelers)                          | 87726 |     | 837I |  |
|            | UnitedHealthcare of the Mid-Atlantic                  | 87726 |     | 837P |  |
|            | UnitedHealthcare of the Mid-Atlantic                  | 87726 |     | 837I |  |
|            | UnitedHealthcare of the Midlands HMO (Choice, Select) | 87726 |     | 837P |  |
|            | UnitedHealthcare of the Midlands HMO (Choice, Select) | 87726 |     | 837I |  |
|            | UnitedHealthcare of the Midwest                       | 87726 |     | 837P |  |
|            | UnitedHealthcare of the Midwest                       | 87726 |     | 837I |  |
|            | UnitedHealthcare of Upstate New York                  | 87726 |     | 837P |  |
|            | UnitedHealthcare of Upstate New York                  | 87726 |     | 837I |  |
|            | UnitedHealthcare Plans of Puerto Rico                 | 87726 |     | 837P |  |
|            | UnitedHealthcare Plans of Puerto Rico                 | 87726 |     | 837I |  |
|            | Unity Health Insurance Corp                           | 66705 | Yes | 837P | Enrollment: Providers go to website <a href="http://www.unityhealth.com/Providers/EDI/index.htm">http://www.unityhealth.com/Providers/EDI/index.htm</a> and complete the EDI Sign Up Form and NPI Appendix A documents found there. Or call Joe Boerboom at 608-643-1531 to request these forms. |
|            | Unity/Precision Health Plans                          | AMS01 |     | 837P |  |
|            | Univera - Healthcare Plan/ChoiceCare Buffalo          | SX087 |     | 837P |  |
|            | Univera - Pre Paid Health Plan of NY                  | SX086 |     | 837P |  |
|            | Univera - Univera Health Southern Tier                | SX088 |     | 837P |  |
|            | Univera Healthcare CNY                                | 12X17 |     | 837I |  |
|            | Univera Healthcare SSA ENY                            | 12X20 |     | 837I |  |
|            | Univera Healthcare SSA WNY, PPO, Traditional          | 12X19 |     | 837I |  |
|            | Univera Healthcare WNY                                | 12X18 |     | 837I |  |
|            | Univera SSA ENY                                       | SX090 |     | 837P |  |
|            | Univera SSA WNY                                       | SX091 |     | 837P |  |
|            | Universal Care-California                             | 33001 |     | 837P |  |
|            | Universal Care-California                             | 33001 |     | 837I |  |
|            | Universal Care-Tennessee                              | 33002 |     | 837P |  |
|            | Universal Care-Tennessee                              | 33002 |     | 837I |  |
|            | Universal Health Care, Inc. (St. Petersburg, FL)      | 50528 |     | 837P |  |
|            | Universal Health Care, Inc. (St. Petersburg, FL)      | 50528 |     | 837I |  |
|            | University Comp Care (Ohio BWC)                       | 31147 | Yes | 837P |  |
|            | University Comp Care (Ohio BWC)                       | 31147 | Yes | 837I |  |
|            | University Family Care                                | 09830 |     | 837P |  |
|            | University Family Care                                | 09830 |     | 837I |  |
|            | University Family Care - Healthcare Group             | 07503 |     | 837P |  |
|            | University Family Care - Maricopa Health Plan         | 09908 | Yes | 837P | Only for claims with DOS on or after 10/01/2005. Provider ID is 7-8 numeric.   |
|            | University Health Plan of New Jersey                  | 59000 |     | 837P |  |
|            | University Health Plan of New Jersey                  | 59000 |     | 837I |  |
|            | University of Washington Students & Graduate Students | 91136 |     | 837P | Group # required   |
|            | University of Washington Students & Graduate Students | 91136 |     | 837I | Group # required   |
|            | Upland Medical Group (CA)                             | IPO56 |     | 837P |  |
|            | UPMC Health Plan (Commercial)                         | 23281 |     | 837P |  |
|            | UPMC Health Plan (Commercial)                         | 23281 |     | 837I |  |
| A 01/28/08 | UPMC Health Plan (Commercial)                         | 23281 |     | 835  |  |
|            | Upper Peninsula Health Plan                           | 38337 |     | 837P |  |
|            | Upper Peninsula Health Plan                           | 38337 |     | 837I |  |
|            | US Benefits   | 93092 |     | 837P |  |

|            |  |            |     |      |  |
|------------|--|------------|-----|------|--|
|            | US Benefits  | 93092      |     | 837I |  |
|            | US Family Health TX & LA                                 | FUSFHP     |     | 837P |  |
|            | US/Healthcare (HMO)                                      | 23222      |     | 837P | Aetna Provider number Reqd   |
|            | US/Healthcare (HMO)                                      | 23222      |     | 837I | Aetna Provider number Reqd   |
|            | USAA (United States Automobile Association)              | 74095      |     | 837P | Property and Casualty Division only  |
|            | USAA (United States Automobile Association)              | 74095      |     | 837I | Property and Casualty Division only  |
|            | USFHP-St. Vincent Catholic Medical Center                | 13407      |     | 837P |  |
|            | USFHP-St. Vincent Catholic Medical Center                | 13407      |     | 837I |  |
|            | Utah - Altius  | 12X38      |     | 837I |  |
|            | Utah - Deseret Mutual Benefit Administration             | 12X35      |     | 837I |  |
|            | Utah Public Employee Health Plan (UT-PEHP)               | 12X36      |     | 837I |  |
|            | Valley Baptist Health Plan                               | 94999      |     | 837P |  |
|            | Valley Health Plan - CHDP                                | 94600533CH | Yes | 837P |  |
|            | Valley Health Plan - Commercial                          | 946000533C | Yes | 837P |  |
|            | Valley Health Plan - Managed Care                        | 946000533  | Yes | 837P |  |
|            | Valley Preferred - PPO Allentown, PA (HIS Gateway Payer) | 23253      |     | 837P |  |
|            | Value Options - Commercial                               | VOCOM      | Yes | 837P | Behavioral Health & Substance Abuse claims in AZ, CO, KS, MA, NM, PA and TX                                      |
|            | Value Options - Medicaid AZ                              | VOMAZ      | Yes | 837P | Behavioral Health & Substance Abuse claims in AZ   |
|            | Value Options - Medicaid CO                              | VOMCO      | Yes | 837P | Behavioral Health & Substance Abuse claims in CO   |
|            | Value Options - Medicaid KS                              | VOMKS      | Yes | 837P | Behavioral Health & Substance Abuse claims in KS   |
|            | Value Options - Medicaid MA                              | VOMMA      | Yes | 837P | Behavioral Health & Substance Abuse claims in MA   |
|            | Value Options - Medicaid NM                              | VOMCD      | Yes | 837P | Behavioral Health & Substance Abuse claims in NM   |
|            | Value Options - Medicaid PA                              | VOMPA      | Yes | 837P | Behavioral Health & Substance Abuse claims in PA   |
|            | Value Options - Medicaid TX                              | VOMTX      | Yes | 837P | Behavioral Health & Substance Abuse claims in TX   |
| D 01/29/08 | Vanderbilt Health Plan                                   | 23173      |     | 837P |  |
| D 01/29/08 | Vanderbilt Health Plan                                   | 23173      |     | 837I |  |
|            | Vanguard Health Systems (SynerMed)                       | SYMED      |     | 837P |  |
|            | Vantage Health Plan, Inc.                                | 72128      |     | 837P |  |
|            | Vantage Health Plan, Inc.                                | 72128      |     | 837I |  |
|            | Vantage Health Plan, Inc. (Ohio BWC)                     | 31147      | Yes | 837P |  |
|            | Vantage Health Plan, Inc. (Ohio BWC)                     | 31147      | Yes | 837I |  |
|            | Vantage Medical Group                                    | PPM01      |     | 837P |  |
|            | Verity National Group                                    | 75256      |     | 837P |  |
|            | Verity National Group                                    | 75256      |     | 837I |  |
| D 01/29/08 | VHP Community Care                                       | 23173      |     | 837P |  |
| D 01/29/08 | VHP Community Care                                       | 23173      |     | 837I |  |
|            | Victor Valley IPA  | VVIPA      |     | 837P |  |
|            | Vida Care  | 24818      |     | 837P |  |
|            | Vida Care  | 24818      |     | 837I |  |
| A 01/29/08 | Village Family Health                                    | 73743      |     | 837P |  |
| A 01/29/08 | Village Family Health                                    | 73743      |     | 837I |  |
|            | Virginia Fee Basis Programs                              | 12115      |     | 837P |  |
|            | Virginia Fee Basis Programs                              | 12115      |     | 837I |  |
|            | Vision Care Incorporated                                 | 37297      |     | 837P |  |
|            | Vista Health Plan  | 55248      |     | 837P | Includes Vista South Florida, Foundation Health and Health Plan Southeast claims                                 |
|            | Vista Health Plan  | 55248      |     | 837I | Includes Vista South Florida, Foundation Health and Health Plan Southeast claims                                 |
|            | Vytra Healthcare   | 22264      |     | 837P | Rendering Provider ID assigned by Payer required on claim. Please call Provider Service Line at 631-420-4100, #4 |
|            | Vytra Healthcare   | 22264      |     | 837I | Rendering Provider ID assigned by Payer required on claim. Please call Provider Service Line at 631-420-4100, #4 |
|            | Washington Employer's Trust                              | 37294      |     | 837P |  |
|            | Washington Employer's Trust                              | 37294      |     | 837I |  |
|            | Washington Labor & Industry                              | SX063      |     | 837P |  |
|            | Washtenaw Community Health Org                           | 38356      |     | 837P |  |
|            | Washtenaw Community Health Org                           | 38356      |     | 837I |  |
|            | Waterloo Municipal Employees Health Plan                 | OBALB      |     | 837P |  |

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|--|--|-------|--|------|--|
|  | Waterloo Municipal Employees Health Plan               | OBALB |  | 837I |  |
|  | Waterstone Benefits Administration (Oklahoma City, OK) | 73155 |  | 837P |  |
|  | Waterstone Benefits Administration (Oklahoma City, OK) | 73155 |  | 837I |  |
|  | Watkins Associated Industries, Inc.                    | 58082 |  | 837P |  |
|  | Watkins Associated Industries, Inc.                    | 58082 |  | 837I |  |
|  | Wausau Benefits, Inc.                                  | 39026 |  | 837P |  |
|  | Wausau Benefits, Inc.                                  | 39026 |  | 837I |  |
|  | Wausau Insurance Company                               | 11123 |  | 837P |  |
|  | Wausau Insurance Company                               | 11123 |  | 837I |  |
|  | WEA Insurance Group                                    | 39151 |  | 837P | Providers submitting UPIN #s must submit either 1 alpha digit followed by 5 numeric digits, or 3 alpha digits followed by 3 numeric digits in Loop 2010AA segment. |
|  | WEA Insurance Group                                    | 39151 |  | 837I | Providers submitting UPIN #s must submit either 1 alpha digit followed by 5 numeric digits, or 3 alpha digits followed by 3 numeric digits in Loop 2010AA segment. |
|  | WEBTPA   | 75261 |  | 837P |  |
|  | WEBTPA   | 75261 |  | 837I |  |
|  | Well Path of Carolina                                  | 25129 |  | 837P |  |
|  | Well Path of Carolina                                  | 25129 |  | 837I |  |
|  | Wellcare Health Plan, Inc. (Encounters)                | 59354 |  | 837P |  |
|  | Wellcare Health Plan, Inc. (Encounters)                | 59354 |  | 837I |  |
|  | Wellcare HMO, Inc.                                     | 14163 |  | 837P |  |
|  | Wellcare HMO, Inc.                                     | 14163 |  | 837I |  |
|  | Wellcare of Florida                                    | 59608 |  | 837P |  |
|  | Wellcare of Florida                                    | 59608 |  | 837I |  |
|  | Wellcare of Louisiana                                  | 14163 |  | 837P |  |
|  | Wellcare of Louisiana                                  | 14163 |  | 837I |  |
|  | Wellcare of Ohio                                       | 14163 |  | 837P |  |
|  | Wellcare of Ohio                                       | 14163 |  | 837I |  |
|  | WellCare Private Fee For Service Plans                 | 77072 |  | 837P |  |
|  | WellCare Private Fee For Service Plans                 | 77072 |  | 837I |  |
|  | WellMed (Claims)                                       | WELM2 |  | 837P |  |
|  | WellMed (Claims)                                       | WELM2 |  | 837I |  |
|  | WellMed (Encounters)                                   | WELMD |  | 837P |  |
|  | WellMed/Secure Horizons                                | WELM2 |  | 837P | Payer ID only applies to WellMed Medical Management Members.   |
|  | Wells Fargo Third Party Administrators, Inc            | 87815 |  | 837P | Name change from "Acordia National" Only one rendering provider per claim - Must be in the 2310B Loop  |
|  | Wells Fargo Third Party Administrators, Inc            | 87815 |  | 837I | Name change from "Acordia National" Only one rendering provider per claim - Must be in the 2310B Loop  |
|  | Wels Benefit Plan Office                               | 22925 |  | 837P |  |
|  | Wels Benefit Plan Office                               | 22925 |  | 837I |  |
|  | West Coast Stationary Engineers Hlth & Sec. Trust Fund | 91136 |  | 837P | Group # required   |
|  | West Coast Stationary Engineers Hlth & Sec. Trust Fund | 91136 |  | 837I | Group # required   |
|  | West Virginia Workers Comp - Brickstreet               | 77025 |  | 837P |  |
|  | Western Growers Assurance Trust                        | 24735 |  | 837P |  |
|  | Western Growers Insurance Company                      | 24735 |  | 837P |  |
|  | Western Health Inc                                     | 37306 |  | 837P |  |
|  | Western Health Inc                                     | 37306 |  | 837I |  |
|  | Western Mutual Insurance / WMI-TPA                     | 37247 |  | 837P |  |
|  | Western Mutual Insurance / WMI-TPA                     | 37247 |  | 837I |  |
|  | Western Southern Financial Group--Cincinnati OH        | 31048 |  | 837P | Payer ID valid only for claims with a submission address of: Benefit Department, P.O. Box 5735, Cincinnati, OH 45201-5735  |
|  | Western Southern Financial Group--Cincinnati OH        | 31048 |  | 837I | Payer ID valid only for claims with a submission address of: Benefit Department, P.O. Box 5735, Cincinnati, OH 45201-5735  |
|  | Westlake Financial Group                               | WESTL |  | 837P |  |
|  | Weyco Inc  | 38232 |  | 837P |  |
|  | Weyco Inc  | 38232 |  | 837I |  |
|  | William C. Earhart Co., Inc.                           | 93050 |  | 837P |  |
|  | William C. Earhart Co., Inc.                           | 93050 |  | 837I |  |

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| William J. Sutton & Company                   | 98010   |     | 837P |  |
| William J. Sutton & Company                   | 98010   |     | 837I |  |
| Windsor Home Network, LLC                     | 11696   |     | 837P |  |
| Windsor Medicare Extra                        | 62153   |     | 837P |  |
| Windsor Medicare Extra                        | 62153   |     | 837I |  |
| Winhealth Partners - Wyoming                  | WNHLT   |     | 837P |  |
| Wisconsin Auto & Truck Dealers Insurance Plan | 39200   |     | 837P |  |
| Wisconsin Auto & Truck Dealers Insurance Plan | 39200   |     | 837I |  |
| Woodman Accident and Life Company             | 81949   |     | 837P |  |
| Workers Comp - West Virginia, (ASC)           | WVWCOMP | Yes | NSF  |  |
| Worker's Compensation - Texas                 | TWCCP   |     | 837P |  |
| Worksite Benefit Services, LLC                | 20333   |     | 837P |  |
| Worksite Benefit Services, LLC                | 20333   |     | 837I |  |
| World Insurance Company                       | 75276   |     | 837P |  |
| World Insurance Company                       | 75276   |     | 837I |  |
| Writer's Guild Industry Health Plan           | 23710   |     | 837P |  |
| Writer's Guild Industry Health Plan           | 23710   |     | 837I |  |
| Yale New Haven Health - MSO INC               | 06121   |     | 837P |  |
| Yale New Haven Health - MSO INC               | 06121   |     | 837I |  |
| Yavapai County                                | 09829   |     | 837P |  |
| Yavapai County                                | 09829   |     | 837I |  |
| Yorba Park (St. Joseph Heritage Healthcare)   | STJOE   |     | 837P |  |
|   |         |     |      |  |
|   |         |     |      |  |