

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read Y	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	3P Admin	20413	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	A & I Benefit Plan Administrators	93044	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	A & I Benefit Plan Administrators	93044		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Enrollment requires your Tax ID Number plus a 4-digit suffix that can be found on the same line as your provider TIN on your most recent explanation of benefits.	Tax ID & Provider ID required				
	A.D.N. Administrators, Inc.	CXADN	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	AARP	AARP1	Par	COMMERCIAL	Yes	No		Claims	Y	Y			5	AARP Claims with a mailing address of PO Box 2059, Mechanicsburg, PA					
	AARP	AARP1		COMMERCIAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
	Accentius (Benefit Management Inc. of MO (BMI))	43178	Par	COMMERCIAL	Yes	No		Claims	R										
	Access Dental	CX097	Par	COMMERCIAL	Yes	No		Claims	R					via Performance Health Technology					
	Access Dental	CX097		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID - For Providers, use their Facility/Office NPI. For Brokers, use their Agency ID which is either a 4 or 5 digit code. The 4 digit code starts with a 5 and the 5 digit code start with a 7.	Tax ID & NPI required				
	Acclaims	64071	Par	COMMERCIAL	Yes	No		Claims	Y										
	ACS Benefit Services Inc.	72468	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. ACS Consulting Services, Inc.					
	ACS Benefit Services, Inc.	61474	Par	COMMERCIAL	Yes	No		Claims	Y	Y				ACS Branded Dental Product (Formerly Amway Corporation/Dental)					
	Activa Benefit Services, LLC/Dental	38255	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Administrative Concepts, Inc.	22384		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Administrative Services Only, Inc.	CX076	Par	COMMERCIAL	Yes	No		Claims	Y					Additional enrollment is not required by the payer, however, providers wishing to submit Claims electronically must be credentialed with the payer. Please ensure you have successfully process one paper Claims with the payer prior to submitting your first electronic Claims.					
	Advantage by Superior	CPPSA	Par	COMMERCIAL	Yes	Yes	Payer's discretion	Claims	R					Effective only for Dates of Service prior to 2-01-13. Call DentalQuest at 800-996-2374 and MCNA Dental at 855-776-6262 for Dates of Service 2-1-13 and thereafter.					
	Advantage Dental Plan, Inc.	93524	Par	COMMERCIAL	No	No		Claims	Y	Y									
	Advantek Benefit Administrators	83077	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Advantica Benefits	43168	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Advantica Benefits	43168		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Advantica Benefits	43168		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required				
	Advantica Benefits	43168		COMMERCIAL				Eligibility Inquiry						Detailed Benefits					
	Advantica Benefits	43168		COMMERCIAL				Claim Status Inquiry											
	Adventist Health System West - Roseville, CA	95340	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Adventist Health System West - Roseville, CA	95340		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Adventist Health System West - Roseville, CA	95340		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Aetna	60054	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Aetna	60054		COMMERCIAL		Yes	35-40 Business Days	ERA		Y				ERAs returned for claims and pre-treatment estimates.	Tax ID / NPI combination	Payer requires paper enrollment form.	No	Yes	30 Days
	Aetna	60054		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	Aetna	60054		COMMERCIAL		No		Claim Status Inquiry											
	Aetna	68246	Par	COMMERCIAL	Yes	No		Encounters	Y	Y				Use this Payer ID for submitting FMM services nmiv					
	Aetna Affordable Health Choices (SM) - SBC	57604	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Aetna Medicare EPO/PPO Dental	18014	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Affordable Benefits Admin	95426	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	AFLAC GA	58066		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	AFLAC GA - GRP	58066	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Group Plan coverage please refer to your ID card for group coverage/number verification. This plan also shares the same mailing address as payer ID 58066 and the only difference between the plans is that the insured ID for the NY based plan begins with "NY" as "PXXXXXX" (followed by 6-digits)					
	AFLAC NY	52080	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	AFLAC NY	52080		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	AFLAC NY - GRP	52080	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Group Plan Coverage please refer to your ID card for group coverage/number verification. Please enter group # F07 when submitting claims. A Welfare and Pension Administration Services member.					
	AIGG International Union of Operating Engineers Local 701	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y									

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	AGC International Union of Operating Engineers Local 701	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	AGC International Union of Operating Engineers Local 701	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	AK United Food and Commercial Workers (AK UFCW)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F45 when submitting claims. A Welfare and Pension Administration Services payer.					
	AK United Food and Commercial Workers (AK UFCW)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alameda Alliance	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	Alaska Carpenters	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F40 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Carpenters	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Carpenters	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Alaska Electrical Health & Welfare Fund	92600	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Alaska Hotel Employees, Restaurant & Camp Employees (AK HERE)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F41 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Hotel Employees, Restaurant & Camp Employees (AK HERE)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Hotel Employees, Restaurant & Camp Employees (AK HERE)	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Alaska Laborers Construction Industry Health & Security Trust	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F23 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Laborers Construction Industry Health & Security Trust	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Laborers Construction Industry Health & Security Trust	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Alaska Machinists Health and Welfare Trust	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F21 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Machinists Health and Welfare Trust	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Pipe Trades U A Local 375	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F24 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Pipe Trades U A Local 375	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Public Employees Association (APEA/JESS Health & WelfareTrust)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F60 when submitting claims. A Welfare and Pension Administration Services payer.					
	Alaska Public Employees Association (APEA/JESS Health & WelfareTrust)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Alaska Public Employees Association (APEA/JESS Health & WelfareTrust)	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Alexian Brothers Community Services of TN	44423	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	AllCare CCO Dental	CXALC	Par	COMMERCIAL	Yes	No		Claims	R	Y				via Performance Health Technology					
	Alloeaant	52193	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. LBA Health Plans					
	Alloeaant	52193		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						f.k.a. LBA Health Plans	Tax ID only				
	Alloeaant Benefit Plan	81040	Par	COMMERCIAL	Yes	No		Claims	R	Y									

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	Alliant Services	70106	Par	COMMERCIAL	Yes	No		Claims	R	Y				Claims mailing address of PO Box 12009, Cheshire, CT					
	Alliant Benefit Systems	37308	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Alliant Benefit Systems	37308		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & Provider ID Required				
	Allied Metal Crafts Security Plan Trust Fund	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F18 when submitting claims. A Welfare and Pension Administration Services member.					
	Allied Metal Crafts Security Plan Trust Fund	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Allied Metal Crafts Security Plan Trust Fund	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	AlwaysCare Benefit	STR01	Non	COMMERCIAL	Yes	No		Claims	R	Y									
	Amalgamated Life - PA Allcare	13343	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	AmeriBen Solutions	76137	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	American Administrators dba Select Benefit Administrators (West Des Moines, IA)	42137	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please check the Insured ID card to verify the Payer ID before submitting claims. If you have questions, please contact Provider Relations at 800-456-4584.					
	American Benefit Corporation	CX084	Par	COMMERCIAL	Yes	No		Claims	Y					Only limited plans may be sent electronically. Group name is required with one of the following plan names: Sheet Metal, Brickley, Boone, Carpenter, Casell, Clarksbur, Doodridge, Hancock, Harrison, Marlon, Monongalia, Mingo, Mineral, Morgan, Nicholas, Putnam, Taylor, Tyler, Weitzel, A United Healthcare Payer					
	American Medical Security	CX001	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	American Postal Workers Union Health Plan	44444	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Americas TPA	41178	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Americas TPA	41178		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required NPI optional				
	AmeriHealth Administrators	54763	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Ameritas Life Insurance Corp.	47009	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Ameritas Life Insurance Corp.	47009		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
	Ameritas Life Insurance Corp.	47009		COMMERCIAL		No		Eligibility Inquiry						Yes/No Response					
	Ameritas Life Insurance Corp. of New York	72630	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y									
	Ameritas Life Insurance Corp. of New York	72630		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
	Ameritas Life Insurance Corp. of New York	72630		COMMERCIAL		No		Eligibility Inquiry						Yes/No Response					
	Ameritas Life Insurance Corp. of New York	72630		COMMERCIAL		No		Claim Status Inquiry											
	Amway Corporation	38256	Par	COMMERCIAL	Yes	No		Claims	Y	Y				(Formerly Amway Corporation/Dental)					
	Anchor Benefit	53085	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Antares Management Solutions	34192	Par	COMMERCIAL	No	No		Claims	Y	Y									
	Anthem Health Plans - HMO & HMOG	CX084	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Health Plans of Kentucky - OSB High & Low	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Health Plans of Kentucky - PPOB & PPOD	CX084	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Health Plans of Virginia - OSB High & Low	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Health Plans of Virginia - PPOB & PPOD	CX084	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem HMO Colorado - HMO-B	CX081	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Insurance - OSB High & Low	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Anthem Insurance - PPOB & PPOD	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	ARC Administrators	CXARC	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Arava Dental Plans, Inc.	ARCLUS	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Arskhan Best Corporation - Choice Benefits	75278	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Aspen	16180	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	ASR Corporation	38265	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Association Benefit Plan	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Association Benefit Plan	25133		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y				Formerly payer ID 62413. Now part of Coventry Consolidate payer ID. Including Combined Government Health Plan & Contract Health Insurance Plan. Payer RA will be turned off within 30 days of enrollment. PDRs are available through Coventry's provider portal www.directoraidr.com	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Assurant Employee Benefits	70408	Par	COMMERCIAL	Yes	No		Claims	Y	Y				PO Box 2877, Clinton, IA 52733					
	Assurant Health (IM & GROUP FULLY - INSURED)	39065	Par	COMMERCIAL	Yes	No		Claims	Y	Y				PO Box 2806, Clinton, IA 52733					
	Assurant Health (IM & GROUP FULLY - INSURED)	39065		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y				PO Box 2806, Clinton, IA 52733	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Assurant Health (IM & GROUP FULLY - INSURED)	39065		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Supplemental Coverage	ASHC1	Par	COMMERCIAL	Yes	No		Claims	Y	Y				PO Box 2829 Clinton, IA 52733					
	Assurant, Inc.	70408		COMMERCIAL		Yes		Claims	Y	Y				PO Box 2877, Clinton, IA 52733					
	Assured Benefits Administrators	74240	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Atlantic Dental Inc. (ADI) - Commercial	CX085	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Automated Group Administration, Inc. (AGA)	37280	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Basis	84291	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S						
	Banner Health Systems	SX145	Par	COMMERCIAL	Yes	No		Claims	R	Y									

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	Banner Plan Administration	77078	Par	COMMERCIAL	Yes	No	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	Claims	R	Y										
	Banner Plan Administration	77078		COMMERCIAL		Yes		EFT							Tax ID & NPI required					
	Bay Area Automotive Group	CHSBA	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Administered by Health Services Benefit Administrators, Inc. (HSBA)						
	Bay Area Delivery Drivers	CHSBD	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Administered by Health Services Benefit Administrators, Inc. (HSBA)						
	BCI Administrators, Inc.	49153	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	BEAM Dental Insurance	CXBMD	Par	COMMERCIAL	Yes	No		Claims	R	Y				Administered by DentaQuest						
	Bell Atlantic	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	BestCare Dental Plans	23210	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Benefit Administrative Systems	36149	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Benefit Coordinators Corporation (Pittsburgh, PA)	25145	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with a submission address of 111 Ryan Court, Suite 300, Pittsburgh, PA, 15206						
	Benefit Inc.	R7003	Non	COMMERCIAL	No	No		Claims	Y	Y										
	Benefit Inc.	R7003		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / NPI combination	Payer handles enrollment directly with provider.	No	No		Immediately
	Benefit Management Group NY	36459	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Benefit Management Services of MS	32212	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Benefit Management Services, Inc.	56139	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Benefit Management, Inc. of KS	48611	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Benefit Plan Administrators Co. (Eau Claire, WI)	39081	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid for Benefit Plan Administrators (Eau Claire, WI submission address only) and Custom Benefit Administrators						
	Benefit Systems & Services, Inc. (BSSI)	36342	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Benefit Systems & Services, Inc. (BSSI)	36342		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / Legacy ID optional	Payer accepts enrollment request from Change Healthcare.	No	No		Minimum of 31 Business days or 3 payment cycles
	Benefit Systems & Services, Inc. (BSSI)	36342		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional					
	Benefits Administration Corporation, Inc.	44357	Par	COMMERCIAL	Yes	Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment request from Change Healthcare.	Yes	No		Minimum of 31 Business days or 3 payment cycles
	Benefits Administration Corporation, Inc.	44357	Par	COMMERCIAL	Yes	Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT												
	Best Life & Health Insurance Co.	95604	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	BHP-Unity	44219	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer - a.k.a. Reading Hospital Employer Group						
	Blue Benefit Administrators of MA	03036	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. CRA Blue						
	Blue Care Family Plan	GWD01	Par	COMMERCIAL	No	No		Claims	R	Y				Administered by Golden West (Well point)						
	Blue Care Family Plan	GWD01		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes		30 days
	Blue Cross Blue Shield of North Carolina	61472	Par	COMMERCIAL	Yes	No		Claims	Y	Y				EHB Pediatric Dental Claims						
	Blue Cross Blue Shield of North Carolina	61473	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Dental Blue Product						
	Blue Cross Blue Shield of North Carolina	61474	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Dental Blue Select Product						
	Blue Cross Blue Shield of Wisconsin - PPOD	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Blue Cross Dental	CX081	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Non EEP claims						
	Blue Cross of California - OSB High & Low	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Blue Cross of California - Plan SS10 & SS20	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Boon Administrative Services, Inc.	BOONG	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Boon Administrative Services, Inc.	BOONG		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No		Minimum of 31 Business days or 3 payment cycles
	Boon Administrative Services, Inc.	BOONG		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Not all employer groups are live for EFT	Tax ID / NPI Combination					
	Blue Cross of California - PPOA	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Boltonmakers National Health & Welfare Fund	36609	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Boon Chairman Benefit Administrators	74237	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	BridgesHealth (Renewance Group)	BRIDG	Non	COMMERCIAL	Yes	No		Claims	R	Y										
	Brooks National	CX072	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Broward Health	37314	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Butler Benefits	42150	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	C.L. Trates	CX075	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Cal Optimal - OneCare	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	California State Government Programs	CPBCA	Par	COMMERCIAL	Yes	No		Claims	R				S							

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	CNIC Health Solutions Inc.	37227		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Commerce Benefits Group	34181	Par	COMMERCIAL	Yes	No	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	Claims	Y	Y										
	Commerce Benefits Group	34181		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	Community Health Alliance of TN	27905	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Community Health Electronic Claims/CHEC/webTPA	75261	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Community Health Electronic Claims/CHEC/webTPA	75261		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Community Health Electronic Claims/CHEC/webTPA	75261		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Community Insurance - HMOA & PPOB	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Community Insurance - PPOB & PPOF	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Comco - Ohio (Austintown OH)	34177	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Companion Life	77829	Non	COMMERCIAL	Yes	No		Claims	R	Y										
	ComBenefits	CX021	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Comprehensive Healthcare Options.com Inc	CHC21	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	CompuSys / Erisa Group, Inc.	74234	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Consumers Choice Health Plan - State of SC	45321	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Connecticut Careenters Health Fund	37307	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Connecticut General (CIGNA)	62308	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Connecticut General (CIGNA)	62308		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Consolidated Group Dental	61305	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Cook Group Health Plan	51439	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Cooperative Benefit Administrators (CBA)	52132	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Administered by LMR Wausau						
	Cooperative Benefit Administrators (CBA)	52132		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Cooperative Benefit Administrators (CBA)	52132		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	Core V	60601	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Core Management Resources Group	58231	Par	COMMERCIAL	Yes	No		Claims	Y											
	Core Management Resources Group	58231		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT	Y						Tax ID only					
	CoreSource AZ MN	41045	Par	COMMERCIAL	Yes	No		Claims	Y	Y				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 KC	48117	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. FMH Benefit Services, Inc.						
	CoreSource Little Rock	75136	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	CoreSource Little Rock	75136		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	CoreSource MD PA IL	35182	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Only for Claims where the "submit Claims to address" on the medical ID card is a CoreSource address in the states of Maryland, Pennsylvania or Illinois. For assistance call 800-689-0106.						
	CoreSource MD PA IL	35182		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	CoreSource NC IN	35180	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Only for Claims where the "submit Claims to address" on the medical ID card is a CoreSource address in the states of North Carolina or Indiana. For assistance call 800-689-0106.						
	CoreSource NC IN	35180		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	CoreSource OH	35183	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	CoreStar	41045	Par	COMMERCIAL	Yes	No		Claims	Y	Y				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.						
	Governant Administrators, Inc. (Atlanta GA)	58102	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Benvestis, Inc.						
	Coventry Dental	CX049	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Coventry Dental	CX049		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	Coventry Dental	CX049		COMMERCIAL		No		Claim Status Inquiry												
	Coventry Health Care Carolink	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Coventry Health Care Carolink	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				West Virginia Only Payer RA will be turned off within 30 days of enrollment; PDFs are available through Coventry's provider portal www.ftscntrncovaldtr.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Coventry Health Care Carolink Medicaid	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Coventry Health Care Carolink Medicaid	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				West Virginia Only Payer RA will be turned off within 30 days of enrollment; PDFs are available through Coventry's provider portal www.ftscntrncovaldtr.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Coventry Health Care National Network	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID 87043. Now part of Coventry Consolidated payer ID.						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read Y	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	Coventry Health Care National Network	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Payer RA will be turned off within 30 days of enrollment. PDFs are available through Coventry's provider portal www.dtrctorraider.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Coventry Healthcare of Georgia	128FL		COMMERCIAL		Yes	1-3 Business Days	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Coventry Healthcare of Florida	No	Yes	Minimum of 31 Business days or 3 payment cycles
	Coventry Health Care of Georgia	25148	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Coventry Missouri	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID 87043. Now part of Coventry Consolidated payer ID					
	Coventry Missouri	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Payer RA will be turned off within 30 days of enrollment. PDFs are available through Coventry's provider portal www.dtrctorraider.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	CoventryCares	86098	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S	Kentucky Medicaid CoventryCares administered by Avelis					
	Crescent Plan Administrators	37290	Par	COMMERCIAL	No	No		Claims	Y										
	Crescent Dental - Meritain Health	CX074	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Crescent Health Solution	56213	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	CTI Administrators	42141	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	CTI Administrators	42141		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	CTI Administrators	42141		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required				
	CustomCare	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Dart Management Corp.	06172	Par	COMMERCIAL	Yes	No		Claims	R										
	Dart Management Corp.	06172		COMMERCIAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID	Auto approved after 1st claim	No	No	None
	DeCare Dental Health Insurance	07035	Non	COMMERCIAL	Yes	No		Claims	Y	Y									
	DeCare Dental Health Insurance	07035		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / NPI Combination	Payer handles enrollment directly with provider.	No	No	Immediately
	DeCare Dental Health Insurance	07035		COMMERCIAL		No		Eligibility Inquiry	R					Detailed Benefits					
	DeCare Dental Health Insurance	07035		COMMERCIAL		No		Claim Status Inquiry											
	Denex Dental	CX049	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Denex Dental	CX049		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	Denex Dental	CX049		COMMERCIAL		No		Claim Status Inquiry											
	UnitedHealthcare Dental	52133	Non	COMMERCIAL		No		Claims	R	Y				Formerly OptumHealth Dental Dental Benefit Providers/DBP and NBP of California					
	UnitedHealthcare Dental	52133	Non	COMMERCIAL		Yes	4-6 weeks	ERA						Formerly OptumHealth Dental Dental Benefit Providers/DBP and DBP of California	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	Yes	No	Minimum of 31 Business days or 3 payment cycles
	Dental Care Plus	CX035	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Dental Care Plus	CX035		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Dental Health & Wellness	46278	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Dental Network of MD	CX034	Non	COMMERCIAL	Yes	No		Claims	Y	Y									
	Dental Professionals of Wisconsin	39148	Par	COMMERCIAL	Yes	No		Claims	Y					f.k.a. Southeast Dental Associates. Effective 7-1-14 payer name must be listed as DPOW-CCHP OR DPOW-ANTHEM OR DPOW-ICA					
	Dental Select	CX093	Non	COMMERCIAL	Yes	No		Claims	Y	Y									
	Dental Select	CX093		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Dental Select	CX093		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Dentaquest Commercial Plans (Group and Individual)	04356	Par	COMMERCIAL	No	No		Claims	Y	Y									
	Deseret Mutual Benefit Administrators	CX089	Non	COMMERCIAL	Yes	Yes	10-15 Business Days	Claims	R	Y			S						
	Deseret Mutual Benefit Administrators	CX089		COMMERCIAL		Yes	10-15 Business Days	ERA	R	Y					Tax ID / NPI Combination	Payer handles enrollment directly with provider.	No	No	Only if provider requests
	DH Evans	CX065	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer					

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	District 9 Machinists Welfare Trust	MWELT		COMMERCIAL		Yes		ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	District 9 Machinists Welfare Trust	MWELT		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID / NPI Combination				
	Diversified Administration Corporation	CX040	Par	COMMERCIAL	Yes	No		Claims	Y										
	Downstream Casino	19191	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Dunn & Associates Benefits Administrators, Inc.	35188	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	EasyChoice Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y										
	EBC, Inc.	37257	Par	COMMERCIAL	No	No		Claims	Y	Y				Admin by LIBERTY Dental Plan Payer Id valid only for Claims with a billing submission address of Employee Benefit Consultants, located in Broadview Hts, OH, Appleton, WI, Albuquerque, NM, Findlay, OH, Louisville, KY and Milwaukee, WI					
	EBMC	CX025	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	EBMS (Employee Benefit Management Services, Inc.)	81039	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	EBS - BRSCO	EB284	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	EBS Benefits Solutions	CX043	Non	COMMERCIAL	No	No		Claims	Y	Y									
	EHI	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Electrical Workers Welfare Trust	52611		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Electrical Workers Welfare Trust	52611		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID / NPI Optional				
	Emblem Health (GHI - New York Group Health Inc.)	13551	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Emblem Health (GHI - New York Group Health Inc.)	13551		COMMERCIAL				Eligibility Inquiry	R	Y									
	EMI Health	CX079		COMMERCIAL		Yes	Payer's discretion	ERA						f.k.a. Educators Mutual Insurance Association	Tax ID / NPI Combination	Payer handles enrollment directly with provider.	No	No	None
	EMI Health	CX079	Non	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Educators Mutual Insurance Association. Prior to accepting claims electronically EMIA requires the provider to call 801-282-7476 or 800-662-5850. Providers should advise EMIA that they will be submitting their claims through Change Healthcare Business Services, Inc. UHIN submitter ID HT000214-001.					
	EMPHYSYS	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	EmpireHealthChoice Assurance - OSB Low & PPOB	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	EmpireHealthChoice HMO	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	Employee Benefit Concepts (Farmington Hills, MI)	38241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Employee Benefit Consultants	37257	Par	COMMERCIAL	No	No		Claims	Y	Y				Payer Id valid only for Claims with a billing submission address of Employee Benefit Consultants, located in Broadview Hts, OH, Appleton, WI, Albuquerque, NM, Findlay, OH, Louisville, KY and Milwaukee, WI					
	Employee Benefit Management Core (EBMC)	CX025	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Employee Benefits Plan Administration, Inc. (E.B.P.A.)	03034	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Employee Benefits Systems of IA	42149	Par	COMMERCIAL	Yes	No		Claims	Y					a.k.a. CBA Blue					
	Employee Plans, LLC	35112	Par	COMMERCIAL	Yes	No		Claims	Y										
	Employee Plans, LLC	35112		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID and Provider ID required				
	Employer Plan Services, Inc.	CX031	Par	COMMERCIAL	Yes	No		Claims	Y										
	Employers Direct Health	75232	Par	COMMERCIAL	Yes	No		Claims	Y										
	Employers Health	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Employers Health Insurance	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Employers Mutual, Inc.	59297	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Employers Mutual, Inc.	59297		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Encara	WDENC	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	EPSP Dental II	CX027	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Capital Dental					
	EQUICOR	62308	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	EQUICOR	62308		COMMERCIAL		Yes	5-7 Business Days	ERA	Y	Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Equitable Plan Services (Oklahoma City, OK)	73126	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with a billing submission address of P.O. Box 720460, Oklahoma City, OK 73172 An Innovative Healthcare Services Payer					
	ES Beverage and Associates	34108	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S						
	E-V Benefits Management, Inc (Columbus, OH)	34159	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Everence	35605	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Everence	35605		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Everence	35605		COMMERCIAL		No		Eligibility Inquiry	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Evergreen Health Co-Op	93240	Par	COMMERCIAL		No		Claims	R	Y										
	Evergreen Health Co-Op	93240		COMMERCIAL		Yes	5-7 Business Days	ERA	Y	Y					Tax ID only	Payer accepts enrollment request from Change Healthcare	No	No	Minimum of 31 business days or 3 payment cycles	
	ExclusiCare	71412	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	ExclusiCare	71412		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Fairbanks North Star Borough	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F62 when submitting claims. A Welfare and Pension Administration Services payer.						
	Fairbanks North Star Borough	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Fairbanks North Star Borough School District Plan A (FNSBSD)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F62 when submitting claims. A Welfare and Pension Administration Services payer.						
	Fairbanks North Star Borough School District Plan A (FNSBSD)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Fairbanks North Star Borough School District Plan B (FNSBSD)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F62 when submitting claims. A Welfare and Pension Administration Services payer.						
	Fairbanks North Star Borough School District Plan B (FNSBSD)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Family Dental	CX096	Par	COMMERCIAL	Yes	No		Claims	R					via Performance Health Technology.						
	FamilyCare CCO	CX096	Par	COMMERCIAL	Yes	No		Claims	R	Y				via Performance Health Technology.						
	Federated Mutual Insurance	41041	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Fidelis Dental Insurance Company	FDIC1	Par	COMMERCIAL	Yes	No		Claims	R											
	First Administrators	FAMR1		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						You must enroll with your TIN and Sub TIN. To obtain your Sub TIN call 1-800-206-0827.	Tax ID and Provider ID required					
	First Care/Southwest Life & Health	CX050	Par	COMMERCIAL	Yes	No		Claims	R	Y				To obtain EFTs please enroll using payer ID 4996A.						
	First Continental Life & Accident Insurance	CX090	Par	COMMERCIAL	Yes	No		Claims	R											
	First Dental Health of CA	CX088	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	First Reliance Standard Life Ins. Co. (NY Business)	13317	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	First Reliance Standard Life Ins. Co. (NY Business)	13317		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None	
	First Reliance Standard Life Ins. Co. (NY Business)	13317		COMMERCIAL		No		Eligibility Inquiry						Yes/No Response						
	First Reliance Standard Life Ins. Co. (NY Business)	13317		COMMERCIAL		No		Claim Status Inquiry												
	Fitzharris & Company, Inc.	11244	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Flex Compensation	R7004	Non	COMMERCIAL	Yes	No		Claims	Y	Y										
	Flex Compensation	R7004		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID	Payer handles enrollment directly with provider.	No	No	Immediately	
	FlexCare	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Florida Combined Life	CBFLU	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Florida Combined Life	CBFLU		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Florida Power & Light	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Foreign Service Benefit Plan	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID 62413. Now part of Coventry Consolidated payer ID. Including AFSPA Staff Plan.						
	Foreign Service Benefit Plan	25133		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y				Payer RA will be turned off within 30 days of enrollment. PDRs are available through Coventry's provider portal www.directorofidc.com .	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Formula Card Dental	LX050	Non	COMMERCIAL	Yes	No		Claims	Y											
	Foundation Benefit Admin (FBA) - Boon Group	BOONG	Par	COMMERCIAL	Yes	No		Claims	Y											
	Foundation Benefit Admin (FBA) - Boon Group	BOONG		COMMERCIAL		Yes	5-7 Business Days	ERA	Y						Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Foundation Benefit Admin (FBA) - Boon Group	BOONG		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Not all employer groups are live for EFT	Tax ID / NPI Combination					
	Fox Everett, Inc.	64069	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Fraternal Order of Police - Dental Division (Philadelphia, PA)	CX041	Par	COMMERCIAL	No	No		Claims	Y	Y										
	Prime Benefits Coordinators	52024	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	GDS	CX036	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	GDS	CX036		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	GDS	CX036		COMMERCIAL		No		Claim Status Inquiry												

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	Gerber Life Insurance Company - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer - 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.					
	Gettysburg	CX064	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer					
	GIC Indemnity Plan	80314	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	GIC Indemnity Plan	80314		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form to be utilized.	Yes	Yes	30 days
	Gilbar, Inc.	07206	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Golden State Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	Golden West Dental	GWD01	Par	COMMERCIAL	No	No		Claims	R	Y									
	Golden West Dental	GWD01		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form to be utilized.	Yes	Yes	30 days
	Government Employees Hospital Association (GEHA)	44054	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Government Employees Hospital Association (GEHA)	44054		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Government Employees Hospital Association (GEHA)	44054		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						GEHA EFT enrollment requires tax ID plus GEHA provider ID. In order to get your GEHA provider ID please contact GEHA at 816.257.5500.	Tax ID only				
	Government Employees Hospital Association (GEHA)	44054		COMMERCIAL		No		Eligibility Inquiry						Yes / No Response					
	Government Employees Hospital Association (GEHA)	44054		COMMERCIAL		No		Claim Status Inquiry											
	Government Employees Hospital Association (GEHA)	57254	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Government Employees Hospital Association (GEHA)	57254		COMMERCIAL		No		Eligibility Inquiry						Yes / No Response					
	Government Employees Hospital Association (GEHA)	57254		COMMERCIAL		No		Claim Status Inquiry											
	Great-West Healthcare	63665	Par	COMMERCIAL	Yes	No		Claims	Y	Y				I.k.a. General American					
	Great-West Healthcare	63665		COMMERCIAL		No		Claim Status Inquiry											
	Great-West Healthcare	80705	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Great-West Healthcare	80705		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Great-West Healthcare	80705		COMMERCIAL		No		Claim Status Inquiry											
	Group Administrators Ltd.	36338	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Group Administrators Ltd.	36338		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required				
	Group and Pension Administrators	48143	Par	COMMERCIAL	Yes	No		Claims	Y										
	Group Benefit Administrators	72153		COMMERCIAL		No		Claims											
	Group Benefit Administrators	72153		COMMERCIAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID	Auto approved after 1st claim	No	No	None
	Group Health Coop (Individual & Family, and Small Business Groups)	89070	Par	COMMERCIAL	Yes	No		Claims	R	Y			5	Administered by United Concordia					
	Group Insurance Service Center, Inc.	37276	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Group Link of Indiana	CX015	Non	COMMERCIAL	Yes	No		Claims	Y	Y									
	Guardian (DINA)	CX090	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Guardian Life Insurance Company of America	64246	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Guardian Life Insurance Company of America	64246		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Guardian Life Insurance Company of America	64246		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Guardian Life Insurance Company of America	64246		COMMERCIAL		No		Eligibility Inquiry						Distilled Benefits					
	Guardian Life Insurance Company of America	64246		COMMERCIAL		No		Claim Status Inquiry											
	Hamessek Choice	47738	Par	COMMERCIAL	No	No		Claims	R										
	Harrington Health Colonial Dental	59143	Par	COMMERCIAL	No	No		Claims	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	Harvard Pilgrim Health Care (HPHC) - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.					
	Hawaii - Mainland Administrators	86066	Par	COMMERCIAL		No		Claims	R	Y									
	Hawaii - Mainland Administrators	86066		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Hawaii - Mainland Administrators	86066		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI optional				
	Hawaii Medical Service Association (HMSA)	HMSA1	Par	COMMERCIAL	Yes	No		Claims	R	Y				Federal Employee claims cannot be sent electronically.					
	Hawaii Medical Service Association (HMSA)	HMSA1		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None
	HCS - Health Claims Service (Boise, ID)	82018	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Choice Arizona	62179	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Choice Arizona	62179		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Health Choice Arizona	62179		COMMERCIAL		No		Eligibility Inquir y	Y	Y				Detailed Benefits					
	Health Choice Generations	62180		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Health Choice Insurance	46221	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Health Choice Insurance	46221		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Health Choice Integrated Care	22100	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Health Choice Integrated Care	22100		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Health Choice Utah	45399		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Health Economics Group, Inc	CX029	Non	COMMERCIAL	No	No		Claims	Y	Y									
	Health Net - LA & Sacramento	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Net Healthy Families A, B & C	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Health Net Los Angeles PHP	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Health Net Sacramento GMC	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y					Admin by LIBERTY Dental Plan				
	Health Partners - Jackson, TN	62157	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Plan Services	59140	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Plans, Inc	CX095	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Resources Incorporated (HRI)	CX019	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Health Services for Children with Special Needs	37290		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required				
	Healthcare Management Administrators, Inc.	HMA01	Par	COMMERCIAL	Yes	No		Claims	Y	Y				The insured ID number is required. Maximum of 25 procedure lines per Claims. Secondary Claims cannot be sent electronically. Claims remarks exceeding 80 bytes in length cannot be sent electronically.					
	Healthcomp, Inc.	85729	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	HEALTH Exchange Inc.	20356	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	HealthEZ	41178	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	HealthEZ	41178		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional				
	Healthgram, Inc.	56144	Par	COMMERCIAL	Yes	No		Claims											
	Healthgram, Inc.	56144		COMMERCIAL			1-3 Business Days	ERA						f.k.a. Primary Physician Care	Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Healthgram, Inc.	56144		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						f.k.a. Primary Physician Care	Tax ID required & Provider ID optional				
	Healthgram, Inc.	56144	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Primary Physician Care					
	HealthPartners MN	CX009	Non	COMMERCIAL	Yes	No	1-3 Business Days	Claims	R	Y									
	HealthPartners MN	CX009		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
	HealthPartners MN	CX009		COMMERCIAL		Yes	Payer's discretion	Eligibility Inquir y						Detailed Benefits					
	HealthPartners, Inc.	11271	Par	COMMERCIAL	Yes	No		Claims	Y	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Healthplex, Inc.	11271		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None	
	HealthSCOPE Benefits, Inc. (Formerly CNA Health Partners of Arkansas)	71063	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	HealthSCOPE Benefits, Inc. (Formerly CNA Health Partners of Arkansas)	71063		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	HealthShare CCO	CXHSC	Par	COMMERCIAL	Yes	No		Claims	R	Y				via Performance Health Technology						
	HealthSmart Benefit Solutions	37272	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Wells Fargo TPA, Inc., Newnan GA and Fayetteville, NC						
	HealthSmart Benefit Solutions	37272		COMMERCIAL		Yes	1-3 Business Days	ERA						f.k.a. Wells Fargo TPA, Inc., Newnan GA and Fayetteville, NC	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	HealthSmart Benefit Solutions	37272		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						f.k.a. Wells Fargo TPA, Inc., Newnan GA and Fayetteville, NC	Tax ID only					
	HealthSmart Benefit Solutions	37283	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	HealthSmart Benefit Solutions	87815	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Wells Fargo, TPA, Inc., Charleston, WV						
	HealthSmart Benefit Solutions	87815		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				f.k.a. Wells Fargo, TPA, Inc., Charleston, WV	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	HealthTrans	31172	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. Innovante Benefit Administrators						
	Healthy Alliance Life Insurance - PROB	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Healthy Michigan Dental	HMD01	Non	COMMERCIAL	No	No		Claims	R	Y										
	Hometown Health Plans Nevada	88024	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Hosler Dental (in Indianapolis, Indiana)	CX015	Non	COMMERCIAL	Yes	No		Claims	Y	Y										
	Hotel Employees Restaurant Employees Health Trust (HERE)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F19 when submitting claims. A Welfare and Pension Administration Services cover						
	Hotel Employees Restaurant Employees Health Trust (HERE)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Hotel Employees Restaurant Employees Health Trust (HERE)	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	HSMS Medical Group IPA	37137	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Hospital Sisters Health System Medical Group IPA						
	Humana	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Humana, Inc.	61101	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Humana, Inc.	61101		COMMERCIAL		Yes	Payer's discretion	ERA		Y					Tax ID / NPI Combination	Payer requires online enrollment tool be utilized	No	Yes	Immediately upon approval	
	J. F. Shaffer (West Trenton, NJ)	22175	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	IBT - Local 145 Health Service & Ins Plan	CX18T	Par	COMMERCIAL	Yes	No		Claims	R	Y				Only for claims with date of service prior to 1-1-16. Dates of service greater than 12-31-15 should be sent using payer ID 60054						
	IEHP	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	IMCare	41600	Par	COMMERCIAL	Yes	No		Claims	R	Y				f.k.a. Itasca Medical Care						
	Indiana Teamsters Health Benefits Fund (Indianapolis, IN)	35107	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly known as Local 135 Health Benefits Fund (Indianapolis, IN)						
	Inetico	43471	Par	COMMERCIAL	Yes	No		Claims	R	Y				An Innovative Healthcare Services Payer						
	Innovate Benefit Administrators	31172	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. HealthTrans						
	Innovation Health	40025	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Insurance Administrators of America	37279	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Insurance Design Administrators	11313	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Insurance Management Services	15688	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Insurance Program Managers Group (IPMG)	36342	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Insurance Program Managers Group (IPMG)	36342		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / Legacy ID optional	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Insurance Program Managers Group (IPMG)	36342		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional					
	Insurance Systems Inc.	74385	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Insurers Administrative Corp.	86304	Par	COMMERCIAL	Yes	No		Claims	Y					Please visit website prior to submitting Claims: ethisic.iaicus.com						
	Integra Administrative Group (Seaford, DE)	51020	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with a billing submission address of 110 S. Shipley Street, Seaford, DE 19973						
	International Brotherhood of Boilermakers	36609	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Jensen Administrative Services, Inc.	CX185	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	John Alden Life Insurance Co.	41099	Par	COMMERCIAL	Yes	No		Claims	Y	Y				PO Box 2877, Clinton, IA 52733						
	John Alden Life Insurance Co.	41099		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				PO Box 2877, Clinton, IA 52733	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	John Morrell Company - AHBPA	38310	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Joint Benefit Trust	CHST	Par	COMMERCIAL	Yes	No		Claims	R	Y				Administered by Health Services Benefit Administrators, Inc. (HSBA)						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	JP Farley Corporation	34136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with a billing submission address of PO Box 458022, Westlake, OH 44145					
	Kaiser	CX073	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Kaiser	CX073	Par	COMMERCIAL	Yes	No		Eligibility Inquiry											
	Kaiser	CX073	Par	COMMERCIAL	Yes	No		Claim Status Inquiry						Detailed Benefits					
	Kaiser Health	40137	Par	COMMERCIAL	Yes	No		Claims											
	Kansawha Insurance Co	47038	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Kansas City Life	CX058	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Keenan Associates	95279	Par	COMMERCIAL	No	No		Claims	R	Y									
	Kemeton Company	73100	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Kemeton Group Administrators	73100	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S						
	Kentucky Health Co. Co	77894	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Kentucky Spirit	65030	Par	COMMERCIAL	Yes	No		Claims	Y					Kentucky Medicaid Kentucky Spirit administered by MENA					
	Key Family	37217		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Klais & Company	34145	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	LA BCBS AdvantagePlus Network	53021	Par	COMMERCIAL	Yes	No		Claims	R	Y				Administered by United Concordia					
	LA BCBS AdvantagePlus Network	53021		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None
	LA Care Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Lake County Physicians Association	37116	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	Land of Lincoln	90096	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Liberty Dental Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Life Gift Cards	33LC	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Life Insurance Company of Boston & New York	78140	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	LIFE St. Joseph of the Pines	59847	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	LIFE St Mary	76184	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	LifeMap Assurance Company	RLH01	Non	COMMERCIAL	Yes	No		Claims	R	Y									
	Lifestyle Dental	27005	P	COMMERCIAL	Yes	No		Claims	R	Y									
	Lifewise Health Plan of Oregon	93093	Par	COMMERCIAL	Yes	No		Claims	R	Y			S						
	Lincoln Financial Group	CX061	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a Jefferson Pilot					
	Lincoln Financial Group	CX061	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits					
	Lincoln Financial Group	CX061	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y									
	Lincoln National (WI)	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Line Construction Benefit Fund	118011	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Local 135 Health Benefits Fund (Indianapolis, IN)	35107	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Local 17 Fund - International Association of Heat and Frost Insulators	1AHEI	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Locals 302 & 612 of the Internation Union of Operating Engineers	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F12 when submitting claims. A Welfare and Pension Administration Services cover					
	Locals 302 & 612 of the Internation Union of Operating Engineers	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Locals 302 & 612 of the Internation Union of Operating Engineers	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	Lockard & Williams	GB752	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Mail Handlers Benefit Plan	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID 62413. Now part of Coventry Consolidated payer ID. Including AFSPA Staff Plan.					
	Mail Handlers Benefit Plan	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Payer RA will be turned off within 30 days of enrollment. PDFs are available through Coventry's provider portal www.directoraidler.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	MAMSI	CX033	Non	COMMERCIAL	No	No		Claims	Y	Y									
	Managed Care Services, LLC	35162	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Managed Dental Guard	G1813	Par	COMMERCIAL	Yes	No		Claims	R	Y				Only for the individual marketplace, not for Group/SHOP business.					
	Manulife W. J. Sutton Company	98010	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	MAPFRE	PRFRE	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	Claims	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions - Electronic Claims (8370), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.					
	MAPFRE	PRFRE	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	ERA						Completing this enrollment request will enroll the provider(s) for 3 transactions - Electronic Claims (8370), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.	Tax ID / NPI Combination	Payer requires a paper enrollment form	No	Yes	Pending Payer Response

State	Payer	ID	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	MAPFRE	PRFRE	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	Eligibility Inquiry	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.						
	Masonry Institute/Administrative D.C. No. 1 Welfare Fund	CX098	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mayo Clinic Health Solutions	41154	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Mayo Clinic Health Solutions	41154	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	MBA Benefit Administrators, Inc. (Salt Lake City, UT)	83028	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MBA of Wyoming (Worland, WY)	87065	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MBS	56205		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	MBS	56205		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional					
	McGranger PACE	31149	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	MCNA Dental	45033	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S							
	MD Care Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	MED3000 CMS Early Steps	EM350		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	MED3000 CMS Early Steps	EM350		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	Med3000 CMS Safety Net	EM284	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MED3000 CMS Safety Net	EM284		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	Med3000 CMS Title 19 Reform	EM843	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Med3000 CMS Title 19 Reform	EM843		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Med3000 CMS Title 19 Reform	EM843		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	MED3000 CMS Title 21	EM205	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Med3000 CMS Title 21	EM205		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Med3000 CMS Title 21	EM205		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	MED3000 Medicare Title 19	EM039	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MED3000 Medicare Title 19	EM039		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	MED3000 Medicare Title 21	EM522	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MED3000 Medicare Title 21	EM522		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	MED3000 Medicare Title 21	EM522		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Legacy ID Required to enroll and may be obtained by calling the payer at 800-664-0146	Tax ID required & Provider ID required					
	MedCost Benefit Services	56205		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	MedCost Benefit Services	56205		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional					
	MEDICA of Minnesota	CX026	Non	COMMERCIAL	Yes	No		Claims	Y	Y										

State	Payer	ID#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	MEDICA of Minnesota	CX026		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / NPI Combination	Payer handles enrollment directly with provider.	No	No	Immediately
	MEDICA of Minnesota	CX026		COMMERCIAL		No		Eligibility Inquiry	R					Detailed Benefits					
	Medical Associate Health Plan (HEALTH CHOICES)	MAHC1	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Medical Benefits Mutual Administrators (MedBen)	74323	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Medical Benefits Mutual Administrators (MedBen)	74323		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Medical Benefits Mutual Administrators (MedBen)	74323		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional				
	Medical Card System (MCS)	PRMCS	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	Claims	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.					
	Medical Card System (MCS)	PRMCS	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	ERA						Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.	Tax ID / NPI Combination	Payer requires paper enrollment form	No	Yes	Pending Payer's Response
	Medical Card System (MCS)	PRMCS	Non	COMMERCIAL			7-10 Business Days	Eligibility Inquiry						Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.					
	Medical Mutual of Ohio	29076	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Medical Mutual of Ohio	29076		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Please enroll under payer ID CBB33.	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Medical Mutual of Ohio	29076		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	Medical Mutual of Ohio	29076		COMMERCIAL		No		Claim Status Inquiry											
	Medical Mutual of Ohio	CBB33	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Medical Mutual of Ohio	CBB33		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Medical Mutual of Ohio	CBB33		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits					
	Medical Mutual of Ohio	CBB33		COMMERCIAL		No		Claim Status Inquiry											
	Medico Insurance Company	23160	Par	COMMERCIAL		No		Claims	Y	Y				Only for Policy Numbers that begin with 000M1D and claims mailed to PO Box 21660, Eagan, MN 55121					
	Medico Insurance Company	23160		COMMERCIAL		Yes	5-7 Business Days	ERA		Y				Only for Policy Numbers that begin with 000M1D and claims mailed to PO Box 21660, Eagan, MN 55121	Tax ID	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payer cycles
	Medico Insurance Company	23160		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						Only for Policy Numbers that begin with 000M1D and claims mailed to PO Box 21660, Eagan, MN 55121	Tax ID only				
	MedPartners Administrative Services	35205		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only				
	MedsavUSA	59069	Par	COMMERCIAL	Yes	No		Claims	Y					f.k.a. Fringe Benefit Management and 21st Century Health and Benefits					
	Mercy Care Plan	B6052	Par	COMMERCIAL	Yes	No		Claims	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Mercy Care Plan	86052		COMMERCIAL		No	5-7 Business Days	ERA		Y				Providers must enroll using the Mercy Care ERA Enrollment form, and this must be submitted to MercyCareProviderRelations@aetn.com	Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Minimum of 31 Business days or 3 payment cycles	
	Mercy Care Plan	86052		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							N/A Payer enrolls provider					
	Mercy LIFE of Alabama	63002	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Mercy Maricopa Integrated Care	33628	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Mercy Maricopa Integrated Care	33628		COMMERCIAL		Yes	Payer's discretion	ERA		Y					Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Minimum of 31 Business days or 3 payment cycles	
	Meridian Health Minneapolis	41124	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. CBSA						
	Methodist First Choice	23550	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MetLife	65978	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	MetLife	65978		COMMERCIAL		No	Payer's discretion	ERA		Y					Unknown payer handles directly with CAQH	Unknown payer handles directly with CAQH	Yes	Unknown payer handles directly with CAQH	Minimum of 31 Business days or 3 payment cycles	
	MetLife	65978		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	MetLife	65978		COMMERCIAL		No		Claim Status Inquiry												
	MGM Resorts International	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan.						
	Michigan Regional Council of Carpenters Employees Benefit Plan	38238	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Michigan UFCW	27401	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Michigan UFCW	27401		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID only	Payer accepts enrollment requests from Change Healthcare	No	No	Minimum of 31 Business days or 3 payment cycles	
	Michigan UFCW	27401		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Mid-America Associates, Inc.	37281	Par	COMMERCIAL	Yes	No		Claims	Y											
	Mid-American Benefits	22823	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer.						
	Midwest Dental Benefits	41101	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mid-West National Life Insurance Co. of Tennessee - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.						
	Mississippi Select Health Care	64088	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Missoula County Medical Benefits Plan	37275	Par	COMMERCIAL	Yes	No		Claims	Y											
	MMA	35316		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Molina HealthCare	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan.						
	Momentum Insurance Plan	31415	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Morris Associates	35992	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Motrolada	36111	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mountain States Administrative Services (Tucson AZ)	86040	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MPERITY AME Services, Inc.	17233	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MSA CareGuard	20572	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	MultiFlex Dental (Merchant's Benefit)	MBAAZ	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Municipal Health Benefit Fund	81883	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Municipal Health Benefit Fund	81883		COMMERCIAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Municipal Health Benefit Fund	81883		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	HSBS Oklahoma City	37254	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Mutual Assurance Administrators						
	Mutual of Omaha Commercial	CX087	Non	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mutual of Omaha Commercial	CX087		COMMERCIAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None	
	Mutual of Omaha Insurance Company	71412	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mutual of Omaha Insurance Company	71412		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Mutually Preferred	71412	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Mutually Preferred	71412		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	MVP Health Care	14166		COMMERCIAL		No		Eligibility Inquiry						Yes/No Response						
	NAA (North America Administrators, L.P.) (Nashville, TN)	65085	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	NABN (Cleveland, OH)	34159	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with billing submission address of P.O. Box 94928, Cleveland, OH 44101-4928 or P.O. Box 89476, Cleveland, OH 44101-5476.						
	NAPHCARE, Inc.	58182	Par	COMMERCIAL	No	No		Claims	R	Y										
	National Elevator Industry Benefit Plan (NEIB)	CX045	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	NyDecision	18640	Par	COMMERCIAL	No	No		Claims	R	Y										
	National Elevator Industry Benefit Plan (NEIB)	CX045		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID	Payer accepts enrollment requests from Change Healthcare	No	No	Minimum of 31 business days or 3 payment cycles	

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 D Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	National Elevator Industry Benefit Plan (NEIB)	CX045		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	National Pacific of TX (NCFLEX)	CX057	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer						
	National Rural Letter Carrier Association	71412	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	National Rural Letter Carrier Association	71412		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	National Telecommunications Cooperative Association	52120	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Nationwide Health Plans	31417	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Native Care Health	11251	Par	COMMERCIAL	Yes	No		Claims	R											
	NCAS - Charlotte	75191	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	NCAS - Fairfax, VA	75190	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Netscare Life and Health Insurance (NLH)	66955	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Nevada Health Co-Op	90091	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	New England Dental Administrators	43351	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	New England Dental Administrators	43351		DELTA DENTAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Optional	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	New England Dental Administrators	43351		DELTA DENTAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	NGS AMERICAN	38225	Par	COMMERCIAL	Yes	No		Claims	v	Y										
	Nippon Life Insurance Company of America	81264	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Nippon Life Insurance Company of America	81264		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately	
	Nippon Life Insurance Company of America	81264		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	Nippon Life Insurance Company of America	81264		COMMERCIAL		No		Claim Status Inquiry												
	NERET (Northern New England Benefit Trust)	38238	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	North American Benefits Network ((Cleveland, OH)	34159	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID valid only for Claims with billing submission address of P.O. Box 94928, Cleveland, OH 44101-4928 or P.O. Box 89476, Cleveland, OH 44101-5476.						
	North Broward Hospital District	37314	Par	COMMERCIAL	Yes	No		Claims	Y											
	Northern California Pipe Trades Trust Funds	CX099	Par	COMMERCIAL	Yes	No		Claims	Y					For Dates of Service beginning 1-1-15 please use payer ID 77777.						
	Northern Illinois Health Plan	36347	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Northern Minnesota Dental	13062	Non	COMMERCIAL	Yes	No		Claims	Y											
	Northern Nevada Trust Fund	88027	Par	COMMERCIAL	Yes	No		Claims	Y					Please call (775) 826-7200 to verify if you should be sending claims to Northern Nevada Trust Fund.						
	NorthShore University Health System Medical Group	36364	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Northwest Administrators	91068		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	Northwest Dental Services	93525	Par	COMMERCIAL	No	No		Claims	Y	Y										
	Northwest Ironworkers Health & Security Fund	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F15 when submitting claims. A Welfare and Pension Administration Services payer.						
	Northwest Ironworkers Health & Security Fund	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Northwest Ironworkers Health & Security Fund	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Northwest Roofers & Employers Health & Security Trust Fund	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F26 when submitting claims. A Welfare and Pension Administration Services payer.						
	Northwest Roofers & Employers Health & Security Trust Fund	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Northwest Roofers & Employers Health & Security Trust Fund	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Northwest Suburban IPA	36346	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Northwest Textile Processors and Service Trades	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F14 when submitting claims. A Welfare and Pension Administration Services payer.						
	Northwest Textile Processors and Service Trades	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Nova Healthcare Administrators, Inc. (Grand Island, NY)	16644	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	NW International Association of Machinists (NW IAM)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F39 when submitting claims. A Welfare and Pension Administration Services payer.						
	NW International Association of Machinists (NW IAM)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	NW International Association of Machinists (NW IAM)	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	NW Plumbers & Pipefitters Health & Welfare Trust	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F31 when submitting claims. A Welfare and Pension Administration Services payer.						
	NW Plumbers & Pipefitters Health & Welfare Trust	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	NW Plumbers & Pipefitters Health & Welfare Trust	91136		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Nyhart	37299	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	OH Dental / UHC Dental Government Programs	GP133	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	OH Dental / UHC Dental Government Programs	GP133		COMMERCIAL		No		Eligibility Inquiry	R					f.k.a. Optum Specialty Svcs / Americhoice of NJ						
	Ohana Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Yes / No Response. f.k.a. Optum Specialty Svcs / Americhoice of NJ						
	Ohio AFSCME Care Plan	AFSCM	Non	COMMERCIAL	Yes	No		Claims	R	Y				Admin by LIBERTY Dental Plan						
	Ohio Dept of Corrections (Careworks)	J1410		COMMERCIAL	Yes	No		Claims	Y	Y										
	Ohio Dept of Corrections (Careworks)	J1410		COMMERCIAL	Yes	Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA							Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	Immediately when claim is submitted EDI. Claims submitted on paper will receive paper remit.	
	OK State Employees & Educators (EDS)	22521	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	OK State Employees & Educators (EDS)	22521		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / NPI Combination	Payer requires paper enrollment form	No	Yes	31 days & minimum of 3 payments; longer/shorter at provider's request	
	Olympus Managed Health Care	65074	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Ozark Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	PA Faculty Health & Welfare	CX066	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer						
	PACE Southeast Michigan	86711	Par	COMMERCIAL	Yes	No		Claims	R	Y				A United Healthcare Payer						
	Pacific Union	CX084	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer						
	Pacificare Dental and Vision HMO	CX060	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer						
	Pacificare Dental and Vision PPO	CX053	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer						
	PacificSource Administrators	93031	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. Select Benefit Administrators						
	PacificSource Administrators	93031		COMMERCIAL		Yes	2-3 Weeks	ERA	Y					Use pacificSource payer ID 93029 to register for ERA	Tax ID / NPI combination for each physical location. Pacificsource requires direct deposit. A form should be completed for each address because it is possible for different locations having different bank accounts.	Payer requires paper enrollment form.	Yes	Yes	Minimum of 31 Business days or 3 payment cycles	
	PacificSource Community	CXPS0	Par	COMMERCIAL	Yes	No		Claims	R	Y				via Performance Health Technology						
	PacificSource Health Plans	93029	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S							
	PacificSource Health Plans	93029		COMMERCIAL		Yes	2-3 Weeks	ERA	Y						Tax ID / NPI combination for each physical location. Pacificsource requires direct deposit. A form should be completed for each address because it is possible for different locations having different bank accounts.	Payer requires paper enrollment form.	Yes	Yes	Minimum of 31 Business days or 3 payment cycles	
	PALMS Casino Resort	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Pan American Life Insurance Group	64218	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Partners Benefit Group	PRGSM	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Partners Health Plan	12313	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Patient Advocates, LLC	10526	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	PDO	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	PEHP (Public Employees Health Program)	CX080	Non	COMMERCIAL	Yes	Yes	1-2- Business Days	Claims	Y	Y				Prior to accepting claims electronically PEHP requires the provider to call EDI Support at 801-366-7544 or 800-753-7818. Providers should advise PEHP that they will be submitting their claims through Change Healthcare Business Services, Inc. UHIN submitter ID HT000158-001.						
	PEHP (Public Employees Health Program)	CX080		COMMERCIAL		Yes	1-2- Business Days	ERA	Y						Tax ID / NPI Combination	Payer handles enrollment directly with provider.	No	No	If EFT is selected than shut off immediately.	
	Pfizer Pharmaceutical	37121	Par	COMMERCIAL	Yes	No		Claims	Y											
	Personal Insurance Administrators, Inc.	95397	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Physician Health Partners, Ltd.	PHMA	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Physicians Care Network	36345	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Physicians Health Associates of Illinois	37136	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Physicians Health Plan of Northern Indiana, Inc.	12399	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Physicians Mutual	CX068	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Physicians Mutual	CX068		COMMERCIAL		Yes	1-3 Business Days	ERA	Y						Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None	

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	Physicians United Plan PUP	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan					
	Dionakis Claims Management, Inc.	24735	Par	COMMERCIAL	Yes	No		Claims	Y										
	HSBS Memphis	37224	Par	COMMERCIAL	Yes	No		Claims	Y					f.k.a. Pittman & Associates					
	HSBS Memphis	37224	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y				f.k.a. Pittman & Associates	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Planned Administrators, Inc.	37287	Par	COMMERCIAL	Yes	No		Claims	Y										
	POMCO	16111	Par	COMMERCIAL	Yes	No		Claims	Y										
	POMCO	16111	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Prairie States Enterprises, Inc.	36373	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Preferred Care Partners	65088	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Preferred Dental Organization	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Preferred Health Plan of the Carolinas	08494	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Preferred Health Professionals	31478	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. Freedom Network Dental					
	Preferred One	41147	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Preferred One	41147	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Premier Access Insurance Company	CX078	Par	COMMERCIAL	Yes	No		Claims	Y										
	Premier Access Insurance Company	CX078	Par	COMMERCIAL	Yes	Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT	Y	Y				Legacy ID - For Providers, use their facility/office NPI. For Brokers, use their Agency ID which is either a 4 or 5 digit code. The 4 digit code starts with a 5 and the 5 digit code start with a 7	Tax ID & Provider ID required				
	Premier Access UT Government	CX110	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. UT CHIP & UT Medicaid					
	Premier Access UT Government	CX110	Par	COMMERCIAL	Yes	Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT	Y	Y				f.k.a. UT CHIP & UT Medicaid	Tax ID required & NPI optional				
	Premier Dental Plan of MN	CX029	Non	COMMERCIAL	Yes	No		Claims	Y										
	PrimeWest Health	LX049	Non	COMMERCIAL	Yes	No		Claims	Y					New providers, learn about submitting your first claim. Please visit https://www.primewest.org/new-facility-claims					
	PrimeWest Health	LX049	Par	COMMERCIAL	Yes	Yes	Payer's discretion	ERA	R	Y					Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Paper remits discontinue by payer on 1-1-13 for all providers.
	Principal Financial Group	61271	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer Only accepts VISION and DENTAL claims.					
	Principal Financial Group	61271	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
	Principal Financial Group	61271	Par	COMMERCIAL	No	No		Eligibility Inquiry						Detailed Benefits					
	Prominence Health Plan	88029	Par	COMMERCIAL	Yes	No		Claim Status Inquiry											
	Priority Health	38217	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Priority Health	38217	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
	Professional Benefit Administrators, Inc. (Oak Brook, IL)	36331	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Payer ID is valid only for claims with billing submission name, city, and state of Professional Benefit Administrators, Inc., Oak Brook, IL					
	Prudential for Health	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare & Life Ins. Co of America	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare Health Maintenance Organization	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare HMO for Small Business	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare of America, Inc.	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare POS for Small Business	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Prudential HealthCare PPO for Small Business	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Puget Sound Electrical Workers Healthcare Trust (PSEW)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F33 when submitting claims. A Welfare and Pension Administration Services payer					
	Puget Sound Electrical Workers Healthcare Trust (PSEW)	91136	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Puget Sound Electrical Workers Healthcare Trust (PSEW)	91136	Par	COMMERCIAL	Yes	Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT	Y	Y					Tax ID only				
	Quasaw Casino	19191	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Quasaw Tribe Employee Plan	19191	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Quasaw Tribal Member Plan	19191	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Quality Care Partners	89461	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer					
	Quality Plan Administrators, Inc.	CX077	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Quartz ASD	46571	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	RBMS, LLC	91176	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Reading Hospital Employer Group	44219	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer, a.k.a. BHP-Unity					
	ReGENCY Employee Benefits	38221	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Reliance Standard Life	36088	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Reliance Standard Life	36088	Par	COMMERCIAL	Yes	Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
	Reliance Standard Life	36088	Par	COMMERCIAL	No	No		Eligibility Inquiry						Yes/No Response					
	Reliance Standard Life	36088	Par	COMMERCIAL	No	No		Claim Status Inquiry											

State	Payer	ID#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read Y	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Reliastar	80314	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Reliastar	80314		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
	Reliastar (now known as CoreStar formerly NW National Life)	41045	Par	COMMERCIAL	Yes	No		Claims	Y	Y				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.						
	Renaissance Life and Health	RLHA1	Non	COMMERCIAL	Yes	No		Claims	Y	Y										
	Renaissance Life and Health	RLHA1		COMMERCIAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA							Tax ID / NPI Combination	Auto approved after 1st claim	No	No	None	
	Reserve National Insurance Company	73066		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Reserve National Insurance Company	73066		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependent upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	Riverside San Bernardino County Indian Health Inc.	50664	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	RMSCO, INC.	16117	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Rochester Public Schools	41625	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Rocky Mountain Hospital & Medical Service - OSB High & High	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Rocky Mountain Life Dental	84102	Par	COMMERCIAL	Yes	No		Claims	R	Y				Admin by LIBERTY Dental Plan						
	Rocky Mountain Life Dental	84102		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
	Rural Carrier Benefit Plan	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID 62413. Now part of Coventry Consolidated payer ID. Including NRELCA Staff Plan.						
	Rural Carrier Benefit Plan	25133		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Payer RA will be turned off within 30 days of enrollment. PDFs are available through Coventry's provider portal www.director.toddler.com	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	S&S Health Strategies	31441	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Safeguard HMO	CX048	Par	COMMERCIAL	No	No		Claims	R	Y										
	Safeguard PPO	CX030	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Safeguard PPO	CX030		COMMERCIAL		No	Payer's discretion	ERA		Y					Unknown payer handles directly with CACH	Unknown payer handles directly with CACH	Yes	Unknown payer handles directly with CACH	Minimum of 31 Business days or 3 payment cycles	
	Sage Technologies	37105	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Cannon Cochran Management Services, Inc. Claims with a mailing address of PO Box 17009, Rockford, IL ONLY may be sent electronically with this payer ID.						
	Salvation Army	34154	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. Chesterfield Resource, Inc.						
	SAMBA	37259	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Sand's Bethworks Gaming	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Sanford Health Plan	91184	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Santa Clara Family Health Plan	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Scan Health Plan	72261		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependent upon the provider's responsiveness.	EFT							Tax ID & Provider ID required					
	Scion Dental Commercial	SDCOM	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Scion Gateway Health Plan	96938	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Secure Health Plan of GA	28530	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Secure Health Plan of GA	28530		COMMERCIAL		Yes	5-7 Business Days	ERA		Y	Y				Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Secure Health Plan of GA	28530		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependent upon the provider's responsiveness.	EFT							Tax ID / NPI combination					
	SecurCare Dental	86057	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	SecurCare	93742	Non	COMMERCIAL	No	No		Claims	Y	Y										

State	Payer	ID#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	Securian	93742		COMMERCIAL			Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately
	Securian	93742		COMMERCIAL				Eligibility Inquiry	R					Detailed Benefits					
	Security Life Insurance Co of America	CX092	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Select Administrative Services (SAS)	64088	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Select Benefit Administrators	93031	Par	COMMERCIAL	Yes	No		Claims	Y	Y				a.k.a. PacificSource Administrators					
	Select Benefit Administrators	93031		COMMERCIAL			2-3 Weeks	ERA		Y				Use PacificSource payer ID 93029 to Register for ERA	Tax ID / NPI combination for each physical location. PacificSource requires direct deposit. A form should be completed for each address because it is possible for different locations having different bank accounts.	Payer requires paper enrollment form.	Yes	Yes	Minimum of 31 Business days or 3 payment cycles
	Select Health	CX107	Non	COMMERCIAL	Yes	No		Claims	R	Y									
	Select Health	CX107		COMMERCIAL			Depends solely on the provider's responsiveness to Select Health.	ERA	R	Y				Electronic fund transfer (EFT) is available from select health but not required for ERA enrollment. Please contact Select Health directly to sign up for EFT. 801-442-5442	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	30 DAYS
	SelectCare (Coca Cola)	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Sele-Dent	CX099	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Self-Insured Services Company (SIS/CO)	CX050	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Self-Funded Plans, Inc.	34131	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Self-Insured Dental Services (SIDS)	CX076	Par	COMMERCIAL	Yes	No		Claims	Y					Additional enrollment is not required by the payer, however, providers wishing to submit Claims electronically must be credentialed with the payer. Please ensure you have successfully process one paper Claims with the payer prior to submitting your first electronic Claims.					
	Self-Insured Plans, LLC	36404	Par	COMMERCIAL	Yes	No		Claims	Y										
	Sendero Health Plans	36426	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Sentry Life Insurance Company	39033	Par	COMMERCIAL	Yes	No		Claims	Y					39033 is only to be used for Sentry employees claims with rates of service through 2010					
	Set Sec	38630	Par	COMMERCIAL	Yes	No		Claims	Y										
	Sheffield, Olson and McQueen	41143	Non	COMMERCIAL	Yes	No		Claims	Y										
	Sheffield, Olson and McQueen	41143		COMMERCIAL			30-45 Business Days	ERA							Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	Yes	Yes	Immediately
	Shelter Point Life	81434	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Sierra Health Services	76342	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer					
	Sierra Health Services	76342		COMMERCIAL			1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare	No	No	Minimum of 31 Business days or 3 payment cycles
	Sinifica Benefits Services, Inc.	CX046	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Erin Group Admin.					
	Sinclair Health Plan	84076	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Sinlice Benefits, Inc.	76578	Par	COMMERCIAL	Yes	No		Claims	Y										
	South Central Preferred - PPO York, PA (I H S Gateway Payer)	23266	Par	COMMERCIAL	Yes	No		Claims	Y	Y				An Innovative Healthcare Services Payer					
	South FL Community Care Network - NBHD	37214	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	South Point Hotel & Casino	35227	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Southern Benefit Services	37318	Par	COMMERCIAL	Yes	No		Claims	Y										
	Southern Indiana Health Organization (SIHO)	77183	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Southwest Service Administrators	CX100	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Southwestern Bell	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Southwestern Bell Exec	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Southwestern Bell Exec - Custom Care	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Southwestern Bell Exec - Southwestern Bell	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y									
	Spectrum Admin.	23253	Par	COMMERCIAL	Yes	No		Claims	R	Y			S	An Innovative Healthcare Services Payer					
	Standard Ins. Co. (OR Business)	93024	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Standard Ins. Co. (OR Business)	93024		COMMERCIAL			1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
	Standard Ins. Co. (OR Business)	93024		COMMERCIAL				Eligibility Inquiry						Yes/No Response					
	Standard Ins. Co. (OR Business)	93024		COMMERCIAL				Claim Status Inquiry											
	Standard Insurance Company (NY)	13411	Par	COMMERCIAL	Yes	No		Claims	R	Y									
	Standard Insurance Company (NY)	13411		COMMERCIAL			1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
	Standard Insurance Company (NY)	13411		COMMERCIAL				Eligibility Inquiry						Yes/No Response					
	Standard Insurance Company (NY)	13411		COMMERCIAL				Claim Status Inquiry											
	STAR +Plus Value Added	CPPSP	Par	COMMERCIAL	Yes	Yes	Payer's discretion	Claims	R					Effective only for Dates of Service prior to 2-01-13. Call DentalQuest at 800-896-2374 and MCNA Dental at 855-776-6262 for Dates of Service 2-1-13 and greater.					
	Star Health	CX090	Par	COMMERCIAL	Yes	No		Claims	R					Use this payer ID for Dates of Service prior to June 1, 2010.					
	StarDent	CX090	Par	COMMERCIAL	Yes	No		Claims	R										
	State Auto	46450	Par	COMMERCIAL	Yes	No		Claims	R										
	State of Texas Dental Plan	73268	Par	COMMERCIAL	Yes	No		Claims	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Sterling Medicare Advantage	67829		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & NPI optional					
	Stoner and Associates (Cincinnati, OH)	31121	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Summit America Insurance Services	37301	Par	COMMERCIAL	Yes	No		Claims	Y											
	Sun Life and Health Insurance Company	67814	Par	COMMERCIAL	Yes	No		Claims	Y					F.k.a Genworth Life and Health Insurance Company (GLHC) (formerly GECC Ac)						
	Sun Life and Health Insurance Company	67814		COMMERCIAL		Yes	1-3 Business Days	ERA		Y					Tax ID / NPI Combination	Change Healthcare creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None	
	Superior Dental Care	31117	Par	COMMERCIAL	Yes	No		Claims	Y											
	SuperiorSTAR Pregnant Women	CPSPW	Par	COMMERCIAL	Yes	Yes	Payer's discretion	Claims	R					Effective only for Dates of Service prior to 2-01-13. Call DentaQuest at 800-896-2374 and MCNA Dental at 855-776-6262 for Dates of Service 2-1-13 and greater						
	Surency Life and Health	CX088	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Surency Life and Health	CX088		COMMERCIAL		Yes	Payer's discretion	ERA		Y					Tax ID / NPI Combination	ERAs are returned to all providers currently receiving EFT. Providers wishing to receive ERAs must contact Surency Life and Health to enroll for EFTs.	No	No	None	
	Tall Tree Administrators	88047	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	TDC	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	The Chesapeake Life Insurance Company - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.						
	The Dental Cosmocon	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	The Dental Concern	73288	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	The Dental Shop	DSHOP		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	The health Plan of the Upper Ohio Valley	34150	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	The Humboldt-DeNorte	CRHB	Par	COMMERCIAL	Yes	No		Claims	R	Y				For Select offices only. Please call 707-443-4563 for approval.						
	The Loomis Company - TPA Wyomissing, PA (IHS Gateway Payer)	23223	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S	An Innovative Healthcare Services Payer						
	The MEGA Life & Health Insurance Company - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.						
	The Physicians Assurance Corp (TPAC) /Employee Benefit Management Corp (EBMC)	CX025	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Time Insurance Company	39065	Par	COMMERCIAL	Yes	No		Claims	Y	Y				PO Box 2806, Clinton, IA 52733						
	Time Insurance Company	39065		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				PO Box 2806, Clinton, IA 52733	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Time Insurance Company	39065		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Total Broker Benefits	36342	Par	COMMERCIAL	Yes	No		Claims	Y											
	Total Broker Benefits	36342		COMMERCIAL		Yes	Payer's discretion	ERA							Tax ID / Legacy ID optional	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Total Broker Benefits	36342		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required & Provider ID optional					
	Total Dental Administrators	CX112	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Total Dental Administrators	CX112		COMMERCIAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA							Tax ID / NPI Combination	ERA enrollments are completed on a daily basis automatically by Change Healthcare. All providers who participate with ERAs through Change Healthcare will have ERAs activated for Total Dental Administrators the same day as their first claim submission to the payer, after activating their ERA account.	No	No	None	
	TPAC/Employee Benefit Management Corp	CX025	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	TR Paid, Inc	37330	Par	COMMERCIAL	Yes	No		Claims	Y	Y			S							
	TransChoice - Key Benefit Administrators	37284		COMMERCIAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	TransChoice - Key Benefit Administrators	37284		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID only					
	Travelers (now MetLife)	65978	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Treble Health Partners	36397	Par	COMMERCIAL	Yes	No		Claims	R	Y										

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Triple-S Salud	CBPR1	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	Claims	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.						
	Triple-S Salud	CBPR1	Non	COMMERCIAL			7-10 Business Days	ERA						Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.	Tax ID / NPI Combination	Payer requires paper enrollment form	Non	Yes	Pending payers response	
	Triple-S Salud	CBPR1	Non	COMMERCIAL	Yes	Yes	7-10 Business Days	Eligibility Inquiry	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.						
	TriState Benefit Solutions	31144	Par	COMMERCIAL	Yes	No		claims	R	Y										
	Tri-Counties Welfare Trust Fund	CHSWT	Par	COMMERCIAL	Yes	No		Claims	R	Y				Administered by Health Services Benefit Administrators, Inc. (HSBA)						
	TruAssure	ILDTA	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Trusted Plans Service Corporation	91078	Par	COMMERCIAL	Yes	No		claims	Y	Y										
	Trustmark Insurance Company	61425	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Trustmark Insurance Company	61425	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	Y	Y				Yes/No Response						
	Trustmark Insurance Company	61425	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	Y	Y										
	UFCW Local 695	04111	Par	COMMERCIAL	No	No		claims	R	Y										
	UMR-Benefits, Inc.	41206	Par	COMMERCIAL	No	No		claims	R	Y										
	UMR - Cincinnati	33108	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. United Medical Resources						
	UMR - Cincinnati	33108	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Cincinnati	33108	Par	COMMERCIAL	Yes	No		claim Status Inquiry	R	Y										
	UMR - Harrington	75196	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Harrington Benefit Services (Harrington)						
	UMR - Harrington	75196	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Harrington	75196	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y										
	UMR - Harrington	95266	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Harrington Benefit Services (Columbus)						
	UMR - Harrington	95266	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Harrington	95266	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y										
	UMR - Lexington	37237	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Commonwealth Administrative Group						
	UMR - Lexington	37237	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Lexington	37237	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y										
	UMR - Onalaska	79480	Par	COMMERCIAL	Yes	No		claims	Y	Y				f.k.a. Midwest Security of WI						
	UMR - Onalaska	79480	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Onalaska	79480	Par	COMMERCIAL	Yes	No		claim Status Inquiry	R	Y										
	UMR - San Antonio	74223	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Benefit Planners Inc., UIC1 Administrators - State of Nevada						
	UMR - San Antonio	74223	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - San Antonio	74223	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y										
	UMR - Wausau/UHS	39026	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Fiserv Health - Wausau Benefits/Benesight, Employers Insurance of Wisconsin						
	UMR - Wausau/UHS	39026	Par	COMMERCIAL	Yes	No	1-3 Business Days	ERA		Y				f.k.a. Fiserv Health - Wausau Benefits/Benesight, Employers Insurance of Wisconsin	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	Non	No	30 DAYS	
	UMR - Wausau/UHS	39026	Par	COMMERCIAL	Yes	No		Eligibility Inquiry	R	Y				Detailed Benefits						
	UMR - Wausau/UHS	39026	Par	COMMERCIAL	Yes	No		Claim Status Inquiry	R	Y										
	UNICARE	80314	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	UNICARE	80314	Par	BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
	Unified Group Services	35198	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Uniform Medical Plan	75243	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Uniform Medical Plan / Harrington Benefit Services, PO Box 2877, Clinton, IA 52733						
	Union Security Insurance Company	70408	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	United Concordia - Dental Plus	CD143	Non	COMMERCIAL	Yes	No		Claims	R	Y										

State	Payer	ID#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	United Concordia - Dental Plus	CX013		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	United Concordia - Dental Plus	CX013	Non	COMMERCIAL	Yes	No		Real Time Claims	R	Y										
	United Concordia - Dental Plus	CX013		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	United Concordia - Dental Plus	CX013		COMMERCIAL		No		Claim Status Inquiry												
	United Concordia - Fee for Service	CX007	Non	COMMERCIAL	Yes	No		Claims	R	Y										
	United Concordia - Fee for Service	CX007		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	United Concordia - Fee for Service	CX007	Non	COMMERCIAL	Yes	No		Real Time Claims	R	Y										
	United Concordia - Fee for Service	CX007		COMMERCIAL		No		Eligibility Inquiry						Detailed Benefits						
	United Concordia - Fee for Service	CX007		COMMERCIAL		No		Claim Status Inquiry												
	United Food & Comm Workers Union & Employers Midwest Health Benefit Funds	36659	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	United HealthCare Insurance Company - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.						
	United HealthCare Insurance Company of New York - Student Insurance	74227	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer. 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 809024, 809025, 809026, 809027, 809035, 809036, 809066, 809067, 809079, or 809081 Dallas, TX 75380-9025.						
	United Healthcare of River Valley	95378	Par	COMMERCIAL	Yes	No		Claims	Y	Y				A United Healthcare Payer						
	United Healthcare of River Valley	95378		COMMERCIAL		No		Eligibility Inquiry						Yes/No Response						
	United of Omaha	71412	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	United of Omaha	71412		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	United States Life Insurance Company	13545	Par	COMMERCIAL	Yes	No		Claims	Y					f.k.a. American General						
	Unity Health Insurance Corp	66705	Par	COMMERCIAL	Yes	No		Claims	R	Y				Only claims for Oral Surgery, TMJ or Accidents can be sent electronically to this payer ID						
	University of Missouri	25133	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Formerly payer ID B7043. Now part of Coventry Consolidated payer ID						
	University of Missouri	25133		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y				Payer RA will be turned off within 30 days of enrollment; PDFs are available through Coventry's provider portal www.directoroutside.com	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	UPMC Health Plan	23281	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	UPMC Health Plan	23281		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None unless specifically requested by the provider.	
	Upper Peninsula Health Group (TPA)	37324	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	US Benefits Inc	93892	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	US Life Ins. Co.	70106	Par	COMMERCIAL	Yes	No		Claims	R	Y				Claims mailing address of PO Box 12009 Cheshire, CT						
	VA Fee Basis Programs	12116	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	VA Fee Basis Programs	12116		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Valley Baptist Health Plan	89070	Par	COMMERCIAL	Yes	No		Claims	R	Y			S	Administered by United Concordia						
	Warrior Health Care Plan	68241	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Wellnet	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Wentiv National Group	75256	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	WisCare Life Beaver and Life Lawrence Counties	25924	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	WisCare - LIFE Armstrong	25922	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	WisCare - LIFE Butler	25293	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Voluntary Benefits Plan	70106	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Claims mailing address of PO Box 12009 Cheshire, CT						
	Volusia Health Network	59266	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Volusia Health Network	59266		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required					
	Washington State Council of County & City Employees (WSCCCE)	91136	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Please enter group # F36 when submitting claims. A Welfare and Pension Administration Services payer						
	Washington State Council of County & City Employees (WSCCCE)	91136		COMMERCIAL		Yes	1-3 Business Days	ERA							Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Washington State Council of County & City Employees (WSCCCE)	91136		COMMERCIAL		Yes		EFT							Tax ID only					
	Waterstone Benefit Administrators (Oklahoma Providers)	73155	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	WEA Trust	39151	Non	COMMERCIAL	Yes	No		Claims	R	Y										
	Web TPA, Inc. of TX	59332	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Web TPA, Inc. of TX	59332		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Wellcare	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Wellpoint	CX083	Par	COMMERCIAL	Yes	No		Claims	Y	Y				Admin by LIBERTY Dental Plan						
	Wells Fargo TPA, Inc. (Charleston, WV)	87815	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. Acordia National						
	Wells Fargo TPA, Inc. (Charleston, WV)	87815		COMMERCIAL		Yes	1-3 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Wells Fargo TPA, Inc. (Newnan, GA and Fayetteville, NC)	37272	Par	COMMERCIAL	Yes	No		Claims	Y	Y				f.k.a. JSI Administrators						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
	Wells Fargo TPA, Inc. (Newman, GA and Fayetteville, NC)	37272		COMMERCIAL		Yes	1-3 Business Days	ERA						f.k.a. JSL Administrators	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Payer remits continue unless provider is enrolled in EFT. Once print suppression countdown starts, paper will suppress if provider also has EFT.	
	Wells Fargo TPA, Inc. (Newman, GA and Fayetteville, NC)	37272		COMMERCIAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependent upon the provider's responsiveness.	EFT						f.k.a. JSL Administrators	Tax ID only					
	Western Crowder's Assurance Trust	24735	Par	COMMERCIAL	Yes	No		Claims	Y											
	Western Growers Insurance Company	24735	Par	COMMERCIAL	Yes	No		Claims	Y											
	WestLake Financial Group, Inc. (Buffalo Grove, IL)	90560	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	WestMain Health	36242	Par	COMMERCIAL	Yes	No		Claims	R	Y				f.k.a. Westco						
	Willamette Valley	CGWVC	Par	COMMERCIAL	Yes	No		Claims	R	Y				via Performance Health Technology						
	William C. Farhart	83059	Par	COMMERCIAL	No	No		Claims	Y	Y										
	WilsonMcShane	R7002	Non	COMMERCIAL	No	No		Claims	Y	Y										
	WilsonMcShane	R7002		COMMERCIAL		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately	
	Wichita and Affiliated Tribes	19191	Par	COMMERCIAL	Yes	No		Claims	R	Y										
	Worksite Benefit Services, LLC	20333	Par	COMMERCIAL	Yes	No		Claims	Y	Y										
	Zenith Administrators	R7001	Non	COMMERCIAL	No	No		Claims	Y	Y										
	Blue Cross Blue Shield Association - FFP Dental	BCAFD	Par	BCBS	Yes	No		Claims	R	Y										
	Dearborn National	36123	Non	BCBS	No	No		Claims	R	Y										
	Dearborn National	36123		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDS CB621, CB900, SB840, SB790, 36123, and CBM1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
	Dearborn National	36123		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependent upon the provider's responsiveness.	EFT						All enrollments for payer IDS CB621, CB900, SB840, SB790, 36123, and CBM1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID & NPI required					
	Horizon Healthcare Dental Services	22099	Par	BCBS	Yes	No		Claims	Y	Y										
	Horizon Healthcare Dental Services	22099		BCBS		Yes	3-4 Weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
	Horizon Healthcare Dental Services	22099		BCBS		No		Eligibility Inquiry						Detailed Benefits						
	Horizon Healthcare Dental Services	22099		BCBS		No		Claim Status Inquiry												
	NorthStar Administrators	47570	Par	BCBS	Yes	No	5-7 Business Days	Claims	Y	Y			S							
	NorthStar Administrators	47570		BCBS		Yes	4-5 Weeks	ERA							Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	None	
	NorthStar Administrators	47570		BCBS		No		Eligibility Inquiry						Detailed Benefits						
	NorthStar Administrators	47570		BCBS		No		Claim Status Inquiry												
	Premera Blue Cross	47570	Par	BCBS	Yes	No	5-7 Business Days	Claims	Y	Y			S							
	Premera Blue Cross	47570		BCBS		Yes	4-5 Weeks	ERA							Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	None	
	Premera Blue Cross	47570		BCBS		No		Eligibility Inquiry						Detailed Benefits						
	Premera Blue Cross	47570		BCBS		No		Claim Status Inquiry												
AK	Blue Cross of Alaska and Washington	47570	Par	BCBS	Yes	No	5-7 Business Days	Claims	Y	Y			S							
AK	Blue Cross of Alaska and Washington	47570		BCBS		Yes	4-5 Weeks	ERA							Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	None	
AK	Blue Cross of Alaska and Washington	47570		BCBS		No		Eligibility Inquiry						Detailed Benefits						
AK	Blue Cross of Alaska and Washington	47570		BCBS		No		Claim Status Inquiry												
AL	Blue Cross of Alabama	CBAL1	Non	BCBS	Yes	No		Claims	R	Y										
AL	Blue Cross of Alabama	CBAL1		BCBS		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	If EFT is selected than shut off immediately.	
AR	Blue Cross of Arkansas	CBAR1	Non	BCBS	Yes	No		Claims	R	Y				Mailing address for claims: Dental Claims Administrator PO Box 1206 Elk Grove Village IL 60002-1206						
AR	Blue Cross of Arkansas	CBAR1		BCBS		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
AZ	Arizona Blue Cross Blue Shield	53589	Non	BCBS	Yes	No		Claims												
AZ	Arizona Blue Cross Blue Shield	53589		BCBS		Yes	10-14 Business	ERA							Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Minimum of 31 Business days or 3 payment cycles	
CA	Anthem Blue Cross CA	47198	Par	BCBS	Yes	No		Claims	R	Y				f.k.a. Blue Cross of California-Wellpoint						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
KY	Anthem Blue Cross CA	47198		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
CA	Anthem Blue Cross CA	47198		BCBS		No		Eligibility Inquiry												
CA	CA Blue Shield	84029	Par	BCBS		No		Claims	R	Y										
CO	Blue Cross of Colorado	84029	Par	BCBS	Yes	No		Claims	R	Y										
CO	Blue Cross of Colorado	84099		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
CO	Trigon Blue Cross Blue Shield - Colorado Dental Office	84103	Par	BCBS	Yes	No		Claims	R	Y				Claims Mailing Address: Trigon Dental Admin, 555 Middle Creek Parkway, MS 400, Colorado Springs, CO 80921						
CO	Trigon Blue Cross Blue Shield - Colorado Dental Office	84103		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
CT	Anthem Blue Cross Blue Shield Connecticut	84105	Par	BCBS	Yes	No		Claims	R	Y										
CT	Anthem Blue Cross Blue Shield Connecticut	84105		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
CT	Blue Care Family Plan (BCBS of CT)	00700	Par	BCBS	Yes	No		Claims	R	Y										
CT	Blue Care Family Plan (BCBS of CT)	00700		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
DE	Blue Cross Blue Shield Delaware Fully - Insured Dental Group Business	53287	Non	BCBS	Yes	No		Claims	R	Y				Effective 5-18-13 FEP claims must be mailed to PO Box 1991, Wilmington, DE 19899						
DE	Blue Cross Blue Shield Delaware Fully - Insured Dental Group Business	53287		BCBS		Yes	1-3 Business Days	ERA		Y				Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
FL	Florida Blue FFP	CBFL	Non	BCBS		No		Claims	R	Y										
GA	Blue Cross of Georgia	CBGA1	Par	BCBS	Yes	No		Claims	R	Y										

State	Payer	IDC	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
GA	Blue Cross of Georgia	CBGA1		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
IA	Blue Cross of Iowa	CBIA2	Non	BCBS	Yes	Yes	3-4 Weeks	Claims	R	Y										
IA	Blue Cross of Iowa	CBIA2		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	Yes	None	
IA	Blue Cross of Iowa (FEP Claims Only)	CBIA1	Non	BCBS	Yes	Yes	3-4 Weeks	Claims	R	Y				FEP Claims only						
ID	Blue Cross of Idaho	CBID1	Non	BCBS	Yes	Yes	10-15 Business Days	Claims	Y	Y										
ID	Blue Shield of Idaho	CBID2		BCBS		Yes	Payer's discretion	ERA						Effective May 1, 2013, Regence requires all claim payments to be received via EFT. If not already receiving payments from Regence via EFT, please register using the automatic Deposit (EFT/ACH Credits) authorization agreement enrollment and / or update form (PDF). EFT begins on the first payment after set up is complete.	Tax ID / NPI Combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	Yes	No	None	
ID	Blue Shield of Idaho	CBID2	Non	BCBS	Yes	No		Claims		Y										
IL	Blue Cross of Illinois	CB621	Non	BCBS	Yes	No		Claims	R	Y										
IL	Blue Cross of Illinois	CB621		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDS CB621, CB900, SB840, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeondental.com/dps/registration/CreateAccount.as	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
IL	Blue Cross of Illinois	CB621		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDS CB621, CB900, SB840, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeondental.com/dps/registration/CreateAccount.as	Tax ID required & NPI optional					
KS	Blue Cross of Kansas	CBKS1	Non	BCBS	Yes	No		Claims	R	Y										
KS	Blue Cross of Kansas	CBKS1		BCBS		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Beginning January 1, 2014, trading partners enrolled to receive the ERA (835), will no longer receive a paper remittance.	
KY	Blue Cross of Kentucky Anthem	84105	Par	BCBS	Yes	No		Claims	R	Y										
KY	Blue Cross of Kentucky Anthem	84105		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
LA	Blue Cross Blue Shield of Louisiana	23739	Par	BCBS	Yes	No		Claims	R	Y				Payer requires providers be tied to our submitter ID of P0003784						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
LA	Blue Cross Blue Shield of Louisiana	23739		BCBS		Yes	5-7 Business Days	ERA	R	Y				If a provider does not have a 10 byte (digit) alpha numeric Louisiana Blue Cross Blue Shield provider ID the provider must contact Louisiana Blue Cross Blue Shield to obtain one. Only in state providers may apply for a provider number.	Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	If EFT is selected than shut off immediately.	
MA	Blue Cross of Massachusetts	CBMA1	Non	BCBS	Yes	No		Claims	R	Y			S							
MA	Blue Cross of Massachusetts	CBMA1		BCBS		Yes	7-10 Business Days	ERA		Y				ERAs returned for claims and pre-treatment estimates.	Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None	
MA	Blue Cross of Massachusetts	CBMA1		BCBS		No		Eligibility Inquiry						Detailed Benefits						
MA	Blue Cross of Massachusetts	CBMA1		BCBS		No		Claim Status Inquiry												
MI	Blue Cross Blue Shield of Michigan	CBM11	Non	BCBS	Yes	No		Claims	R	Y										
MI	Blue Cross Blue Shield of Michigan	CBM11		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare for non Non Medicare Advantage and FEP plans. Medicare Advantage and FEP for BCBS Michigan, you will also need to enroll with BCBSM at https://edtest.bcbsm.com/psalog on.html	No	No	Minimum of 31 Business days or 3 payment cycles	
MI	Blue Cross Blue Shield of Michigan	CBM11		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID & NPI required					
MN	Blue Cross Blue Shield of Minnesota	CBMN1	Non	BCBS		No		Claims	R	Y				Use for claims mailed to PO Box 64338, St. Paul, MN 55164-0338						
MO	Blue Cross Blue Shield of Kansas City MO	47171	Par	BCBS	Yes	Yes	7-10 Business Days	Claims	R	Y										
MO	Blue Cross Blue Shield of Kansas City MO	47171		BCBS				Eligibility Inquiry						Yes / No Response						
MO	Blue Cross Blue Shield of Kansas City MO	47171		BCBS		Yes		Claim Status Inquiry												
MS	Blue Cross of Mississippi	CBMS1	Non	BCBS	Yes	Yes	1-2 Weeks	Claims	R	Y										
MS	Blue Cross of Mississippi	CBMS1		BCBS		Yes	1-2 Weeks	ERA						ERAs returned for claims and pre-treatment estimates.	Unknown as payer handles directly with provider.	Electronic vouchers are generated for all claims submitted. Please call MS BCBS to confirm delivery of ERA/BS transactions to Change Healthcare. MS BCBS EDI Services 800-825-4068.	No	Yes	None	
MT	Blue Cross Blue Shield of Montana	CBMT1	Par	BCBS	Yes	No		Claims	R	Y										
MT	Blue Cross Blue Shield of Montana	CBMT1		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
MT	Blue Cross Blue Shield of Montana	CBMT1		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdeodental.com/dps/registration/CreateAccount as	Tax ID required & NPI required					
NC	Blue Cross Blue Shield of North Carolina	61472	Par	COMMERCIAL	Yes	No		Claims	Y					Federal Employee Claims						
ND	Blue Cross of North Dakota (ND Dental Services)	CX004	Non	BCBS	Yes	Yes	1-2 Business Days	Claims	R	Y										
ND	Blue Cross of North Dakota (ND Dental Services)	CX004		BCBS		Yes	1-2 Business Days	ERA		Y					Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	Yes	Immediately	
ND	North Dakota Dental Service	CX004	Non	BCBS	Yes	Yes	1-2 Business Days	Claims	R	Y										
NE	Blue Cross of Nebraska	CBNE1	Par	BCBS	No	No		Claims	R	Y										
NE	Blue Cross of Nebraska	CBNE1		BCBS		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None	
NM	Blue Cross of New Mexico	CBNM1	Non	BCBS	No	No		Claims	R	Y										

State	Payer	IDC	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
NM	Blue Cross of New Mexico	SB790		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDS CB621, CB900, SBB40, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdedental.com/dps/registration/CreateAccount.aspx	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
NM	Blue Cross of New Mexico	SB790		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDS CB621, CB900, SBB40, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdedental.com/dps/registration/CreateAccount.aspx	Tax ID & NPI required					
NV	Blue Cross of Nevada	84101	Par	BCBS		No		Claims	R	Y				No FEP Claims. Please send FEP Claims on paper or use Payer ID #6126.						
NV	Blue Cross of Nevada	84101		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
NY	BCBS of Rochester New York	CBNYR	Non	BCBS	No	No	1-2 Weeks	Claims	R	Y										
NY	BCBS of Rochester New York	CBNYR		BCBS				Eligibility Inquiry	R					Yes / No Response						
NY	BCBS of Western NY	CBNYW	Par	BCBS	Yes	Yes	1-2 Weeks	Claims	R	Y			S							
NY	BS of Northeastern NY	CBNYE	Par	BCBS	Yes	Yes	1-2 Weeks	Claims	R	Y										
NY	Empire Blue Cross Blue Shield	CBNY1	Non	BCBS	No	No	1-2 Weeks	Claims	Y	Y				FEP claims may not be sent electronically.						
NY	Empire Blue Cross Blue Shield	CBNY1		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately	
NY	Empire Blue Cross Blue Shield	CBNY1		BCBS		No		Eligibility Inquiry	R					Detailed Benefits						
NY	Healthnow of Northeastern NY	CBNYE	Par	BCBS	Yes	Yes	1-2 Weeks	Claims	R	Y										
NY	Healthnow of Western NY	CBNYW	Par	BCBS	Yes	Yes	1-2 Weeks	Claims	R	Y										
OH	Blue Cross of Ohio Anthem	84105	Par	BCBS	Yes	No		Claims	R	Y										
OH	Blue Cross of Ohio Anthem	84105		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days	
OK	Blue Cross blue Shield of Oklahoma	SBB40	Non	BCBS		No		Claims												
OK	Blue Cross blue Shield of Oklahoma	SBB40		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDS CB621, CB900, SBB40, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdedental.com/dps/registration/CreateAccount.aspx	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles	
OK	Blue Cross blue Shield of Oklahoma	SBB40		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDS CB621, CB900, SBB40, SB790, 36123, CBMI1 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emdedental.com/dps/registration/CreateAccount.aspx	Tax ID & NPI required					
OR	Blue Cross blue Shield of Oregon	CB850		BCBS		Yes	Payer's discretion	ERA						Effective May 1, 2013, Regence requires all claim payments to be received via EFT. If not already receiving payments from Regence via EFT, please register using the automatic Deposit (EFT/ACH Credits) authorization agreement enrollment and / or update form (PDF). EFT begins on the first payment after set up is complete.	Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None	
OR	Blue Cross Blue Shield of Oregon	CB850	Non	BCBS	Yes	No		Claims												
PA	Pennsylvania Blue Shield	CB865	Non	BCBS	Yes	No		Claims	R	Y										

State	Payer	IDC	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
PA	Pennsylvania Blue Shield	CB865		BCBS		Yes	1-3 Business Days	ERA			Y			Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None
PA	Pennsylvania Blue Shield	CB865		BCBS		No		Eligibility Inquiry						Detailed Benefits					
PA	Pennsylvania Blue Shield	CB865		BCBS		No		Claim Status Inquiry			Y								
PA	Pennsylvania Blue Shield Dental Plus	CBPA2	Non	BCBS	Yes	No		Claims			R	Y							
PA	Pennsylvania Blue Shield Dental Plus	CBPA2		BCBS		Yes	1-3 Business Days	ERA			Y			Administered by United Concordia	Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None
PA	Pennsylvania Blue Shield Dental Plus	CBPA2		BCBS		No		Eligibility Inquiry						Detailed Benefits					
PA	Pennsylvania Blue Shield Dental Plus	CBPA2		BCBS		No		Claim Status Inquiry			Y								
RI	Blue Cross of Rhode Island	CB870	Non	BCBS	Yes	No		Claims			Y	Y							
RI	Blue Cross of Rhode Island	CB870		BCBS		Yes	3 weeks FEP 1-3 Business Days Non FEP	ERA			Y			FEP transactions administered by RI BCBS Non FEP transactions administered by United Concordia	Tax ID / NPI combination for each physical location	FEP requires enrollment form Non FEP accepts request from Change Healthcare	FEP - Yes Non FEP - No	FEP - Yes Non FEP - No	Non FEP: None
SC	South Carolina BCBS	38520	Non	BCBS	Yes	No		Claims			R	Y							
SC	South Carolina BCBS	38520		BCBS		Yes	30-35 Business Days	ERA			Y				Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	Yes	Yes	None
SC	South Carolina BCBS	38520		BCBS		No		Eligibility Inquiry						Detailed Benefits					
SC	South Carolina BCBS	38520		BCBS		No		Claim Status Inquiry											
SD	Blue Cross Blue Shield of South Dakota	CBSD1	Non	BCBS	Yes	Yes	3-4 Weeks	Claims			R	Y							
TN	Blue Cross of Tennessee	CBTN1	Non	BCBS	Yes	Yes	30 - Business Days	Claims			R	Y							
TX	Blue Cross of Texas	CB900	Non	BCBS	Yes	No		Claims			Y	Y							
TX	Blue Cross of Texas	CB900		BCBS		Yes	1-3 Business Days	ERA						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emcdental.com/dps/registration/CreateAccount.as	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
TX	Blue Cross of Texas	CB900		BCBS		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT						All enrollments for payer IDs CB621, CB900, SB840, SB790, 36123, CBM11 and CBMT1 must be completed using Change Healthcare's Dental Connect for Provider's portal. Please log into your DC-p account or register for one at https://www.emcdental.com/dps/registration/CreateAccount.as	Tax ID & NPI required				
UT	Regence UT BCBS	CBUT1	Non	BCBS	Yes	No		Claims											
UT	Regence UT BCBS	CBUT1		BCBS		Yes	Payer's discretion	ERA						Effective May 1, 2013, Regence requires all claim payments to be received via EFT. If not already receiving payments from Regence via EFT, please register using the automatic Deposit (EFT/ACH Credits) authorization agreement enrollment and / or update form (PDF). EFT begins on the first payment after set up is complete.	Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
UT	Regence UT BCBS FEP	CBUTF	Non	BCBS	Yes	No		Claims											
UT	Regence UT BCBS FEP	CBUTF		BCBS		Yes	Payer's discretion	ERA						Effective May 1, 2013, Regence requires all claim payments to be received via EFT. If not already receiving payments from Regence via EFT, please register using the automatic Deposit (EFT/ACH Credits) authorization agreement enrollment and / or update form (PDF). EFT begins on the first payment after set up is complete. ERAs for Regence Blue Cross Blue Shield of Utah (FEP) are delivered denoting payer ID CBUT1.	Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	None
VA	Trippa Blue Cross of Virginia (Anthem BCBS-VA/BCBS Anthem-VA (formerly Trippa))	CB921	Par	BCBS	Yes	No		Claims			R	Y							

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
VA	Trigon Blue Cross of Virginia (Anthem BCBS-VA/ BCBS Anthem-VA formerly Trigon)	CB923		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days
WA	Blue Cross of Alaska and Washington	47570	Par	BCBS	Yes	No		claims	Y	Y			S						
WA	Blue Cross of Alaska and Washington	47570		BCBS		Yes	4-5 Weeks	ERA							Tax ID / NPI combination	Payer requires paper enrollment form.	No	Yes	None
WA	Blue Cross of Alaska and Washington	47570		BCBS		No		Eligibility Inquiry						Detailed Benefits					
WA	Blue Cross of Alaska and Washington	47570		BCBS		No		Claim Status Inquiry											
WA	Regence Blue Shield	93200		BCBS		Yes	Payer's discretion	ERA						Effective May 1, 2013, Regence requires all claim payments to be received via EFT. If not already receiving payments from Regence via EFT, please register using the automatic Deposit (EFT/ACH Credits) authorization agreement enrollment and / or update form (PDF). EFT begins on the first payment after set up is complete.	Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer, after the ERA account is activated.	No	No	None
WA	Regence Blue Shield	93200	Non	BCBS	Yes	No		Claims											
WA	Regence Blue Shield FEP	93200	Non	BCBS	Yes	No		Claims											
WA	Regence Northwest Health	93200	Non	BCBS	Yes	No		Claims											
WI	Blue Cross of Wisconsin	CB950	Par	BCBS		Yes				R	Y								
WI	Blue Cross of Wisconsin	CB950		BCBS		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment form be utilized.	Yes	Yes	30 days
	Delta Dental Insurance Co. (DDIC) - All Payers	94276	Par	DELTA DENTAL	No	No		claims	Y	Y			S						
	Delta Dental Insurance Co. (DDIC) - All Payers	94276		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
	Delta Dental Insurance Co. (DDIC) - All Payers	94276		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
	Delta Dental Insurance Co. (DDIC) - All Payers	94276		DELTA DENTAL		No		Claim Status Inquiry											
	Delta Health Systems	94235	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
	DeltaCare USA Claims	DDCA2	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
	DeltaCare USA Claims	DDCA2		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
	DeltaCare USA Claims	DDCA2		DELTA DENTAL		No		Claim Status Inquiry											
	DeltaCare USA Encounters	DDCA3	Par	DELTA DENTAL	Yes	No		Encounters	Y	Y									
	DeltaCare USA Encounters	DDCA3		DELTA DENTAL		No		Claim Status Inquiry											
	Dentendra	88888	Par	DELTA DENTAL	No	No		claims	Y	Y									
	Northeast Delta Dental (ME, NH, VT)	02027	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
	Northeast Delta Dental (ME, NH, VT)	02027		DELTA DENTAL		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Optional	Payer accepts enrollment request from Change Healthcare.	No	No	Minimum of 31 Business days or 3 payment cycles
	Northeast Delta Dental (ME, NH, VT)	02027		DELTA DENTAL		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID & NPI required				
	Northeast Delta Dental (ME, NH, VT)	02027		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
	Northeast Delta Dental (ME, NH, VT)	02027		DELTA DENTAL		No		Claim Status Inquiry											
AR	Delta Dental of Arkansas	CDAR1	Non	DELTA DENTAL	Yes	No		claims	Y	Y									
AR	Delta Dental of Arkansas	CDAR1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA							Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
AR	Delta Dental of Arkansas	CDAR1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
AR	Delta Dental of Arkansas	CDAR1		DELTA DENTAL		No		Claim Status Inquiry											
AZ	Delta Dental of Arizona	86027		DELTA DENTAL		Yes	Payer's discretion	ERA		Y					Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	Yes	No	Immediately
AZ	Delta Dental of Arizona	86027	Par	DELTA DENTAL	Yes	No		Real Time Claims	Y	Y									
AZ	Delta Dental of Arizona	86027		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
AZ	Delta Dental of Arizona - CA00 Claims Office	86027		DELTA DENTAL		No		Claim Status Inquiry											
CA	Delta Dental of California - CA00 Claims Office	77777	Par	DELTA DENTAL	Yes	No		claims	Y	Y			S						
CA	Delta Dental of California - CA00 Claims Office	77777		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
CA	Delta Dental of California - CA00 Claims Office	77777		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
CA	Delta Dental of California - CA00 Claims Office	77777		DELTA DENTAL		No		Claim Status Inquiry											
CA	Delta Dental of California/Trikore Retiree Dental	CDCA1	Par	DELTA DENTAL	Yes	No		claims	Y	Y									

State	Payer	IDC	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
CA	Delta Dental of California/Tricare Retiree Dental	CDCA1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA		Y					Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
CA	Delta Dental of California/Tricare Retiree Dental	CDCA1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
CA	Delta Dental of California/Tricare Retiree Dental	CDCA1		DELTA DENTAL		No		Claim Status Inquiry											
CO	Delta Dental of Colorado	B4096	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
DC	Delta Dental of Washington DC	52147	Par	DELTA DENTAL	Yes	No		claims	Y	Y			S						
DC	Delta Dental of Washington DC	52147		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	Yes	No	Immediately
DC	Delta Dental of Washington DC	52147		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
DC	Delta Dental of Washington DC	52147		DELTA DENTAL		No		Claim Status Inquiry											
DE	Delta Dental of Delaware	51022	Par	DELTA DENTAL	Yes	No		claims	Y	Y			S						
DE	Delta Dental of Delaware	51022		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
DE	Delta Dental of Delaware	51022		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
DE	Delta Dental of Delaware	51022		DELTA DENTAL		No		Claim Status Inquiry											
FL	Delta Dental of Florida (DDIC)	DDFL1	Par	DELTA DENTAL	No	No		claims	Y	Y			S						
FL	Delta Dental of Florida (DDIC)	DDFL1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
FL	Delta Dental of Florida (DDIC)	DDFL1		DELTA DENTAL		No		Claim Status Inquiry											
GA	Delta Dental of Georgia (DDIC)	DDGA1	Par	DELTA DENTAL	No	No		claims	Y	Y			S						
GA	Delta Dental of Georgia (DDIC)	DDGA1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
GA	Delta Dental of Georgia (DDIC)	DDGA1		DELTA DENTAL		No		Claim Status Inquiry											
IA	Delta Dental of Iowa	CDIA1	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
IA	Delta Dental of Iowa	CDIA1		DELTA DENTAL		Yes	5-10 Business Days	ERA		Y					Tax ID / NPI combination for each location. Delta Dental Requires direct deposit and requires form for each address even if the bank information is the same.	Payer requires paper enrollment form.	Yes	Yes	Immediately
IA	Delta Dental of Iowa	CDIA1	Par	DELTA DENTAL	Yes	No		Real Time Claims	Y	Y									
IA	Delta Dental of Iowa	CDIA1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
IA	Delta Dental of Iowa	CDIA1		DELTA DENTAL		No		Claim Status Inquiry											
ID	Delta Dental of Idaho	B2029	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
ID	Delta Dental of Idaho	B2029		DELTA DENTAL		Yes	Payer's discretion	ERA		Y					Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	None
ID	Delta Dental of Idaho	B2029		DELTA DENTAL		No		Eligibility Inquiry	R	Y				Detailed Benefits					
IL	Delta Dental of Illinois Group Plans	05030	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
IL	Delta Dental of Illinois Group Plans	05030		DELTA DENTAL		Yes	30-35 Business Days	ERA		Y				Enrollment in Electronic Fund Transfer (EFT) is required for enrollment in ERAs.	Tax ID / NPI combination for each location. Delta Dental Requires direct deposit and requires form for each address even if the bank information is the same.	Payer requires paper enrollment form.	Yes	Yes	Immediately
IL	Delta Dental of Illinois Group Plans	05030	Par	DELTA DENTAL	Yes	No		Real Time Claims	Y	Y									
IL	Delta Dental of Illinois Group Plans	05030		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
IL	Delta Dental of Illinois Individual Plan	IDIND	Par	DELTA DENTAL	Yes	No		claims	R	Y									
IN	Delta Dental of Indiana	CDIN1	Non	DELTA DENTAL	Yes	No		claims	Y	Y									
IN	Delta Dental of Indiana	CDIN1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
IN	Delta Dental of Indiana	CDIN1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
IN	Delta Dental of Indiana	CDIN1		DELTA DENTAL		No		Claim Status Inquiry											
KS	Delta Dental of Kansas	CDKS1	Par	DELTA DENTAL	Yes	No		claims	Y	Y									
KS	Delta Dental of Kansas	CDKS1		DELTA DENTAL		Yes	Payer's discretion	ERA		Y					Unknown as payer handles directly with provider.	ERAs are returned to all providers currently receiving EFT. Providers wishing to receive ERAs must contact Delta Dental of Kansas to enroll for EFTs.	No	No	None
KS	Delta Dental of Kansas	CDKS1		DELTA DENTAL		No		Eligibility Inquiry		Y				Detailed Benefits					
KS	Delta Dental of Kansas	CDKS1		DELTA DENTAL		No		Claim Status Inquiry		Y									
KY	Delta Dental of Kentucky	CDKY1	Non	DELTA DENTAL	Yes	No		claims	R	Y									
KY	Delta Dental of Kentucky	CDKY1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA		R	Y				Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
KY	Delta Dental of Kentucky	CDKY1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
KY	Delta Dental of Kentucky	CDKY1		DELTA DENTAL		No		Claim Status Inquiry											
LA	Delta Dental of Louisiana (DDIC)	DDLA1	Par	DELTA DENTAL	No	No		claims	Y	Y			S						
LA	Delta Dental of Louisiana (DDIC)	DDLA1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
LA	Delta Dental of Louisiana (DDIC)	DDLA1		DELTA DENTAL		No		Claim Status Inquiry											
MA	Delta Dental Massachusetts	04614	Par	DELTA DENTAL	No	No		claims	Y	Y									
MA	Delta Dental Massachusetts	04614		DELTA DENTAL		No		Eligibility Inquiry		R	Y			Detailed Benefits					
MA	Delta Dental Massachusetts	04614		DELTA DENTAL		No		Claim Status Inquiry		Y	Y								
MD	Delta Dental of Maryland and Pennsylvania	23166	Par	DELTA DENTAL	Yes	No		claims	Y	Y			S						
MD	Delta Dental of Maryland and Pennsylvania	23166		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
MD	Delta Dental of Maryland and Pennsylvania	23166		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
MD	Delta Dental of Maryland and Pennsylvania	23166		DELTA DENTAL		No		Claim Status Inquiry											
MI	Delta Dental of Michigan	CDMIO	Non	DELTA DENTAL	Yes	No		claims	Y	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
MI	Delta Dental of Michigan	CDM0		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
MI	Delta Dental of Michigan	CDM0		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
MI	Delta Dental of Michigan	CDM0		DELTA DENTAL		No		Claim Status Inquiry											
MN	Delta Dental of Minnesota	CDMN1	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
MN	Delta Dental of Minnesota	CDMN1		DELTA DENTAL		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately
MN	Delta Dental of Minnesota	CDMN1		DELTA DENTAL		No		Eligibility Inquiry	R	Y				Detailed Benefits					
MN	Delta Dental of Minnesota	CDMN1		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
MO	Delta Dental of Missouri	43090	Par	DELTA DENTAL	Yes	No		Claims	Y	Y				Detailed Benefits					
MO	Delta Dental of Missouri	43090		DELTA DENTAL		No		Eligibility Inquiry	Y	Y									
MO	Delta Dental of Missouri	43090		DELTA DENTAL		No		Claim Status Inquiry	Y	Y									
MS	Delta Dental of Mississippi (DDIC)	DDMS1	Par	DELTA DENTAL	No	No		Claims	Y	Y			S	Detailed Benefits					
MS	Delta Dental of Mississippi (DDIC)	DDMS1		DELTA DENTAL		No		Eligibility Inquiry	Y	Y									
MS	Delta Dental of Mississippi (DDIC)	DDMS1		DELTA DENTAL		No		Claim Status Inquiry	Y	Y									
MT	Delta Dental of Montana (DDIC)	DDMT1	Par	DELTA DENTAL	No	No		Claims	Y	Y			S	Detailed Benefits					
MT	Delta Dental of Montana (DDIC)	DDMT1		DELTA DENTAL		No		Eligibility Inquiry	Y	Y									
MT	Delta Dental of Montana (DDIC)	DDMT1		DELTA DENTAL		No		Claim Status Inquiry	Y	Y									
NC	Delta Dental of North Carolina	56101	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
NC	Delta Dental of North Carolina	56101		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
NC	Delta Dental of North Carolina	56101		DELTA DENTAL		No		Eligibility Inquiry	R					Detailed Benefits					
NC	Delta Dental of North Carolina	56101		DELTA DENTAL		No		Claim Status Inquiry	R										
ND	Delta Dental of North Dakota	CDND1	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
ND	Delta Dental of North Dakota	CDND1		DELTA DENTAL		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately
ND	Delta Dental of North Dakota	CDND1		DELTA DENTAL		No		Eligibility Inquiry	R					Detailed Benefits					
ND	Delta Dental of North Dakota	CDND1		DELTA DENTAL		No		Claim Status Inquiry	R										
NE	Delta Dental of Nebraska	CDNE1	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
NE	Delta Dental of Nebraska	CDNE1		DELTA DENTAL		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	Immediately
NE	Delta Dental of Nebraska	CDNE1		DELTA DENTAL		No		Eligibility Inquiry	R					Detailed Benefits					
NE	Delta Dental of Nebraska	CDNE1		DELTA DENTAL		No		Claim Status Inquiry	R										
NJ	Delta Dental of New Jersey	22189	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
NJ	Delta Dental of New Jersey	22189		DELTA DENTAL		Yes	Payer's discretion	ERA							Tax ID / NPI combination	Change Healthcare Creates an auto approval for each active ERA account upon submission of the first claim for the payer after the ERA account is activated.	No	No	31 days & minimum of 3 payments; longer/shorter at provider's request
NJ	Delta Dental of New Jersey	22189		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
NJ	Delta Dental of New Jersey	22189		DELTA DENTAL		No		Claim Status Inquiry											
NM	Delta Dental of New Mexico	85022	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
NM	Delta Dental of New Mexico	85022		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
NM	Delta Dental of New Mexico	85022		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
NM	Delta Dental of New Mexico	85022		DELTA DENTAL		No		Claim Status Inquiry											
NV	Delta Dental of Nevada (DDIC)	DDNV1	Par	DELTA DENTAL	No	No		Claims	Y	Y			S	Detailed Benefits					
NV	Delta Dental of Nevada (DDIC)	DDNV1		DELTA DENTAL		No		Eligibility Inquiry	Y	Y									
NV	Delta Dental of Nevada (DDIC)	DDNV1		DELTA DENTAL		No		Claim Status Inquiry	Y	Y									
NV	Delta Dental of New York	11198	Par	DELTA DENTAL	Yes	No		Claims	Y	Y			S						
NY	Delta Dental of New York	11198		DELTA DENTAL		Yes	30 Business Days	ERA	Y	Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
NY	Delta Dental of New York	11198		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
NY	Delta Dental of New York	11198		DELTA DENTAL		No		Claim Status Inquiry											
OH	Delta Dental of Ohio	CDOH1	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
OH	Delta Dental of Ohio	CDOH1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
OH	Delta Dental of Ohio	CDOH1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
OH	Delta Dental of Ohio	CDOH1		DELTA DENTAL		No		Claim Status Inquiry											
OK	Delta Dental of Oklahoma	CDOK1	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
OK	Delta Dental of Oklahoma	CDOK1		DELTA DENTAL		Yes	5-7 Business Days	ERA							Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare	No	No	None
OK	Delta Dental of Oklahoma	CDOK1		DELTA DENTAL		No		Eligibility Inquiry	R	Y				Detailed Benefits					
OK	Delta Dental of Oklahoma	CDOK1		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
OR	Delta Dental of Oregon (Oregon Dental Service)	CDOS1	Non	DELTA DENTAL	Yes	No		Claims	R	Y									

State	Payer	ID	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
PA	Delta Dental of Maryland and Pennsylvania	23166	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
PA	Delta Dental of Maryland and Pennsylvania	23166		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
PA	Delta Dental of Maryland and Pennsylvania	23166		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
PR	Delta Dental Puerto Rico	66043	Par	DELTA DENTAL	Yes	No		Claims	R	Y			S						
PR	Delta Dental Puerto Rico	66043		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
PR	Delta Dental Puerto Rico	66043		DELTA DENTAL		No		Eligibility Inquiry	R	Y				Detailed Benefits					
RI	Aflac	50503	Par	DELTA DENTAL	Yes	No		Claims	R	Y									
RI	Aflac	50503		DELTA DENTAL		No		Eligibility Inquiry	Y	Y				Detailed Benefits					
RI	Aflac	50503		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
RI	Delta Dental of Rhode Island	05029	Par	DELTA DENTAL	Yes	No		Claims	R	Y									
RI	Delta Dental of Rhode Island	05029		DELTA DENTAL		No		Eligibility Inquiry	Y	Y				Detailed Benefits					
RI	Delta Dental of Rhode Island	05029		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
SC	Delta Dental of South Carolina	43091	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
SC	Delta Dental of South Carolina	43091		DELTA DENTAL		No		Eligibility Inquiry	Y	Y				Detailed Benefits					
SD	Delta Dental of South Dakota	64097	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
TN	Delta Dental of Tennessee	CDTN1	Non	DELTA DENTAL	Yes	No		Claims	Y	Y									
TN	Delta Dental of Tennessee	CDTN1		DELTA DENTAL		Yes	Automatic enrollment approval is granted after the ERA product is activated and the first claim is submitted to the payer.	ERA						ERAs are only returned to Change Healthcare if the claim is processed by Change Healthcare.	Tax ID / NPI combination	Auto approved after 1st claim	No	No	None
TN	Delta Dental of Tennessee	CDTN1		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
TN	Delta Dental of Tennessee	CDTN1		DELTA DENTAL		No		Claim Status Inquiry	R	Y			S						
TX	Delta Dental of Texas (DDIC)	DDTX1	Par	DELTA DENTAL	No	No		Claims	Y	Y			S						
TX	Delta Dental of Texas (DDIC)	DDTX1		DELTA DENTAL		No		Eligibility Inquiry	Y	Y				Detailed Benefits					
TX	Delta Dental of Texas (DDIC)	DDTX1		DELTA DENTAL		No		Claim Status Inquiry	R	Y			S						
UT	Delta Dental of Utah (DDIC)	DDUT1	Par	DELTA DENTAL	No	No		Claims	Y	Y			S						
UT	Delta Dental of Utah (DDIC)	DDUT1		DELTA DENTAL		No		Eligibility Inquiry	Y	Y				Detailed Benefits					
UT	Delta Dental of Utah (DDIC)	DDUT1		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
VA	Delta Dental of Virginia	CDVA1	Non	DELTA DENTAL	No	No		Claims	Y	Y									
WA	Delta Dental of Washington	91062	Par	DELTA DENTAL	Yes	No		Claims	Y	Y				f.k.a. Washington Dental Service					
WA	Delta Dental of Washington	91062		DELTA DENTAL		Yes	Payer's discretion	ERA						f.k.a. Washington Dental Service	Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	Yes	No	DDWA will deliver both electronic (ERA/835) and paper remittance advices for a minimum of 31 calendar days or at least 3 payment cycles. At the conclusion of this time period, the provider should turn off the paper remittance by selecting the paperless option on their DDWA web account.
WA	Delta Dental of Washington	91062	Par	DELTA DENTAL	Yes	No		Real Time Claims	Y	Y				Pre-treatment Estimates only					
WA	Delta Dental of Washington	91062		DELTA DENTAL		No		Eligibility Inquiry	Y					Detailed Benefits, f.k.a. Washington Dental Service.					
WA	Delta Dental of Washington	91062		DELTA DENTAL		No		Claim Status Inquiry	Y					Payer also supports RT status on Pre-Treatment Estimates, f.k.a. Washington Dental Service.					
WI	Delta Dental of Wisconsin	39069	Par	DELTA DENTAL	Yes	No		Claims	Y	Y									
WI	Delta Dental of Wisconsin	39069		DELTA DENTAL		Yes	5-7 Business Days	ERA		Y				Enrollment in Electronic Fund Transfer (EFT) is required for enrollment in ERAs.	Tax ID / NPI combination for each location. Delta Dental Requires direct deposit and requires form for each address even if the bank information is the same.	Payer requires paper enrollment form.	Yes	Yes	Immediately
WI	Delta Dental of Wisconsin	39069	Par	DELTA DENTAL	Yes	No		Real Time Claims	Y	Y				Detailed Benefits					
WI	Delta Dental of Wisconsin	39069		DELTA DENTAL		No		Eligibility Inquiry	Y										
WI	Delta Dental of Wisconsin	39069		DELTA DENTAL		No		Claim Status Inquiry	Y										
WV	Delta Dental of West Virginia	31096	Par	DELTA DENTAL	Yes	No		Claims	Y	Y			S						
WV	Delta Dental of West Virginia	31096		DELTA DENTAL		Yes	30 Business Days	ERA		Y					Tax ID / NPI combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately
WV	Delta Dental of West Virginia	31096		DELTA DENTAL		No		Eligibility Inquiry						Detailed Benefits					
WV	Delta Dental of West Virginia	31096		DELTA DENTAL		No		Claim Status Inquiry	R	Y									
WY	Delta Dental of Wyoming	CDWY1	Par	DELTA DENTAL	Yes	No		Claims	Y										
	A&D Charitable Foundation, Inc. (Ibsa Croatt Lakes DACE)	39640	Par	Medicaid		No		Claims	R	Y									
	DeltaQuest - Government Plans	CX014	Par	Medicaid		No		Claims	R	Y			S						

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
	DentaQuest - Government Plans	CX014		MEDICAID		Yes	Payer's discretion	ERA		Y					Tax ID / NPI combination	Payer requires online enrollment tool be utilized.	No	Yes	Minimum of 31 Business days or 3 payment cycles
	DentaQuest - Government Plans	CX014		Medicaid		No		Eligibility Inquiry						Detailed Benefits					
	DentaQuest - Government Plans	CX014		Medicaid		No		Claim Status Inquiry											
	Dentlogix			Medicaid		No		Claims											
	Edny SeniorCare	08754	Par	Medicaid		No		Claims											
	Ridgewood Health	03664	Par	Medicaid		No		Claims	R	Y									
	FirstCare Health Plans	49096		MEDICAID		Yes	EFT Enrollment is processed between the provider and Change Healthcare. Approval time is dependant upon the provider's responsiveness.	EFT							Tax ID required and Provider ID optional				
	Fresno PACE	99660	Par	MEDICAID		No		claims	R	Y									
	Life Circles PACE	71498	Par	Medicaid		No		Claims	R	Y									
	Next Level Health Partners, LLC	69821	Par	Medicaid		No		Claims	R	Y									
	PACE CNY	70454	Par	Medicaid		No		claims	R	Y									
	San Diego PACE	94409	Par	Medicaid		No		Claims	R	Y									
	SCION Dental	SCION	Par	MEDICAID		No		Claims	R	Y			S						
	U. S. Virgin Island Medicaid	CUSVI	Non	MEDICAID		No		claims	R	Y									
	Waik PACE	44009	Par	Medicaid		No		Claims	R	Y									
	Via Christi HOPE	48123	Par	Medicaid		No		Claims	R	Y									
AK	Medicaid of Alaska	CKAK1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									
AK	Medicaid of Alaska	CKAK1		MEDICAID		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	None
AL	Medicaid of Alabama	CKAL1	Non	MEDICAID		Yes	1-2 Business Days	Claims	R	Y									
AL	Medicaid of Alabama	CKAL1		MEDICAID		Yes	2-4 Weeks	ERA		Y					Tax ID / NPI / Legacy ID combination	Payer requires paper enrollment form.	No	Yes	Immediately
AL	Medicaid of Alabama	CKAL1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
AR	Medicaid of Arkansas	CKAR1	Non	MEDICAID		No	1-2 Business Days	Claims	R	Y									
AR	Medicaid of Arkansas	CKAR1		MEDICAID		Yes	Payer's discretion	ERA		Y					Tax ID / NPI / Legacy ID combination for each physical location	Payer handles enrollment directly with provider.	No	No	None
AR	Medicaid of Arkansas	CKAR1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
AZ	Arizona Medicaid	CKAZ1	Non	MEDICAID		No		Claims	R	Y				http://www.azarecs.gov/commercial/ProviderRegistration/registration.aspx for provider registration information prior to submitting claims.					
AZ	Arizona Medicaid	CKAZ1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
AZ	Department of Economic Security	DES42	Non	MEDICAID		No		Claims	R	Y									
CA	Denti-Cal / Medicaid of California	94146	Non	MEDICAID		No		Claims	R	Y									
CA	Denti-Cal / Medicaid of California	94146		MEDICAID		Yes	Payer's discretion	ERA		Y					Unknown as payer handles directly with provider.	Payer handles enrollment directly with provider.	No	No	None
CA	Denti-Cal / Medicaid of California	94146		MEDICAID		Yes	Payer's discretion	Eligibility Inquiry						Yes/No Response. Please call (916) 636-1200 for PIN. Claims sent in the institutional format 837I.					
CA	Medi-Cal / Medicaid of California	57016		MEDICAID		Yes	45-60 days	Claims	R	Y									
CO	Medicaid of Colorado	CKCO1	Par	MEDICAID		No		Claims	R	Y									
CO	Medicaid of Colorado	CKCO1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
CT	Medicaid of Connecticut	CKCT1	Non	MEDICAID		No		Claims	R	Y			S						
CT	Medicaid of Connecticut	CKCT1		MEDICAID		Yes	2-3 Weeks	ERA		Y					Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	None
CT	Medicaid of Connecticut	CKCT1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
DC	District of Columbia Medicaid	CKDC1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									
DC	District of Columbia Medicaid	CKDC1		MEDICAID		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Immediately
DC	District of Columbia Medicaid	CKDC1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
DE	Delaware Medicaid	CKDE1	Non	MEDICAID		Yes	3-4 Weeks	Claims	R	Y									
DE	Delaware Medicaid	CKDE1		MEDICAID		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	None
FL	Florida Medicaid	CKFL1	Non	MEDICAID		Yes	3-4 Weeks	Claims	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
FL	Florida Medicaid	CKFL1		MEDICAID		Yes	2-3 Weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Immediately
FL	Florida Medicaid	CKFL1		MEDICAID		Yes	2-3 Weeks	Eligibility Inquiry						Yes/No Response					
FL	Florida Medicaid	CKFL1		MEDICAID		No		Claim Status Inquiry											
FL	Medicaid of Florida	CKFL1	Non	MEDICAID		Yes	3-4 Weeks	Claims	R	Y									
FL	Medicaid of Florida	CKFL1		MEDICAID		Yes	2-3 Weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Immediately
FL	Medicaid of Florida	CKFL1		MEDICAID		Yes	2-3 Weeks	Eligibility Inquiry						Yes/No Response					
FL	Medicaid of Florida	CKFL1		MEDICAID		No		Claim Status Inquiry											
FL	DentaQuest - Government Plans	CK052	Par	MEDICAID		No		Claims	R	Y									
FL	DentaQuest - Government Plans	CK052		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
FL	DentaQuest - Government Plans	CK052		MEDICAID		No		Claim Status Inquiry											
GA	Medicaid of Georgia	CKGA1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
IA	Medicaid of Iowa	CKIA1	Non	MEDICAID		Yes	1-2 Business Days	Claims	R	Y			S						
IA	Delta Dental of Iowa Medicaid Program	CDIAM	non	MEDICAID		No		Claims	R	Y									
IA	Delta Dental of Iowa Medicaid Program	CDIAM		MEDICAID		Yes	5-10 Business Days	ERA		Y					Tax ID / NPI combination for each location. Delta Dental Requires direct deposit and requires form for each address even if the bank information is the same.	Payer requires paper enrollment form.	Yes	Yes	Immediately
IA	Delta Dental of Iowa Medicaid Program	CDIAM		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
IA	Delta Dental of Iowa Medicaid Program	CDIAM		MEDICAID		No		Claim Status Inquiry											
IA	Medicaid of Iowa	CKIA1		MEDICAID		Yes	1-2 Business Days	ERA						Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	Yes	Effective 3-1-10 all paper EOBs ceased to be printed and mailed.	
IA	Medicaid of Iowa	CKIA1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
ID	DentaQuest - Government Plans	CKID1	Par	MEDICAID		No		Claims	R	Y									
ID	DentaQuest - Government Plans	CKID1		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
ID	DentaQuest - Government Plans	CKID1		MEDICAID		No		Claim Status Inquiry											
IL	Aetna Better Health of Illinois	26337		MEDICAID		Yes	Payer's discretion	ERA							Tax ID / NPI combination	Contact Aetna Better Health of Illinois	No	Yes	Minimum of 31 Business days or 3 payment cycles
IL	Aetna Better Health of Illinois	26337		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
IL	DentaQuest - Government Plans	CKIL1	Par	MEDICAID		No		Claims	R	Y									
IL	DentaQuest - Government Plans	CKIL1		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
IL	DentaQuest - Government Plans	CKIL1		MEDICAID		No		Claim Status Inquiry											
IN	Indiana Children's Special Healthcare	CK070	Non	MEDICAID		No		Claims	R	Y									
IN	Medicaid of Indiana	CKIN1	Non	MEDICAID		No		Claims	R	Y	Y								
IN	Medicaid of Indiana	CKIN1		MEDICAID		Yes	3-5 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Effective 9-1-09 paper RA is no longer printed or mailed to providers.
IN	Medicaid of Indiana	CKIN1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
KS	Medicaid of Kansas	CKKS1	Non	MEDICAID		No		Claims	R	Y			S						
KS	Medicaid of Kansas	CKKS1		MEDICAID		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Immediately unless the provider calls the EDI Help desk and requests paper continue to be sent
KS	Medicaid of Kansas	CKKS1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
KY	Aetna Better Health of Kentucky	128KY		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Kentucky	No	Yes	Minimum of 31 Business days or 3 payment cycles
KY	Aetna Better Health of Kentucky	128KY		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
KY	Medicaid of Kentucky	CKKY1		MEDICAID		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer accepts enrollment request from Change Healthcare.	No	No	None
KY	Medicaid of Kentucky	CKKY1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
KY	Medicaid of Kentucky	CKKY1		MEDICAID		No		Claim Status Inquiry											
KY	Medicaid of Kentucky	CKKY1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									
KY	DentaQuest - Government Plans	CKKY3	Non	MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
KY	DentaQuest - Government Plans	CKKY3		MEDICAID		No		Claim Status Inquiry											
KY	DentaQuest - Government Plans	CKKY3		MEDICAID		No		Eligibility Inquiry											
KY	DentaQuest - Government Plans	CKKY3		MEDICAID		No		Claim Status Inquiry											
LA	Aetna Better Health Plan of Louisiana	128LA		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Louisiana	No	Yes	Minimum of 31 Business days or 3 payment cycles

State	Payer	IDC	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
LA	Aetna Better Health Plan of Louisiana	128LA		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
MA	Massachusetts Health Program	CKMA1	Par	MEDICAID		No		Claims	R	Y				Please place MASS Health or MA Medicaid or MASS Medicaid in the carrier name field.					
MA	Massachusetts Health Program	CKMA1		MEDICAID		No		Eligibility Inquiry	R	Y				Yes/No Response					
MD	DentaQuest - Government Plans	CKMD1	Par	MEDICAID		No		Claims	R	Y									
MD	DentaQuest - Government Plans	CKMD1		MEDICAID		No		Eligibility Inquiry	R	Y				Yes/No Response					
ME	Medicaid of Maine	CKME1	Non	MEDICAID		Yes	1-2 Business Days	Claims	Y	Y									
ME	Medicaid of Maine	CKME1		MEDICAID		Yes	Payer's discretion	ERA						Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	No	No	None unless provider elects to turn off paper remit.
ME	Medicaid of Maine	CKME1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
MI	Aetna Better Health of Michigan	128MI		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Michigan	No	Yes	Minimum of 31 Business days or 3 payment cycles
MI	Aetna Better Health of Michigan	128MI		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
MI	Medicaid of Michigan	CKMI1	Non	MEDICAID		No		Claims	R	Y			S						
MI	Medicaid of Michigan	CKMI1		MEDICAID		Yes	1-2 Weeks	ERA		Y				Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	Yes	None	
MI	Medicaid of Michigan	CKMI1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
MN	Medicaid of Minnesota	CKMN1	Non	MEDICAID		Yes	30-35 Business Days	Claims	R	Y									
MN	Medicaid of Minnesota	CKMN1		MEDICAID		Yes	30-35 Business Days	ERA		Y				Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Immediately	
MN	Medicaid of Minnesota	CKMN1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
MN	HealthPartners MN	CX010	Non	COMMERCIAL		Yes	1-3 Business Days	Claims	R	Y									
MN	HealthPartners MN	CX010		COMMERCIAL		Yes	1-3 Business Days	ERA		Y				Tax ID / NPI Combination	Payer accepts enrollment request from Change Healthcare.	No	No	Immediately	
MO	Aetna Better Health Plan of Missouri	128MO		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Missouri	No	Yes	Minimum of 31 Business days or 3 payment cycles
MO	Aetna Better Health Plan of Missouri	128MO		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
MO	Medicaid of Missouri	CKMO1	Non	MEDICAID		No		Claims	R	Y									
MO	Medicaid of Missouri	CKMO1		MEDICAID		Yes	7-10 Business Days	ERA		Y				Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	No	Immediately	
MO	Medicaid of Missouri	CKMO1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
MO	Medicaid of Missouri	CKMO1		MEDICAID		No		Claim Status Inquiry											
MS	Medicaid of Mississippi	CKMS1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
MS	Medicaid of Mississippi	CKMS1		MEDICAID		Yes	7-10 Business Days	ERA							Tax ID only	Payer requires paper enrollment form.	No	Yes	1-1-2007 all paper EOBs ceased.
MS	Medicaid of Mississippi	CKMS1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
MT	Medicaid of Montana	CKMT1	Non	MEDICAID		No		Claims	R	Y									
MT	Medicaid of Montana	CKMT1		MEDICAID		Yes	2-3 weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	2 Weeks
MT	Medicaid of Montana	CKMT1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NC	Medicaid of North Carolina	CKNC1	Non	MEDICAID		No		Claims	R	Y									
NC	Medicaid of North Carolina	CKNC1		MEDICAID		Yes	Payer's discretion	ERA		Y				Effective July 1, 2013 all Provider Enrollment Applications and updates must be completed through the NCTracks system. You can learn more about how to register in NCTracks at the following DHHS website: http://www.nctracks.com	Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	No	Payer's discretion
NC	Medicaid of North Carolina	CKNC1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
ND	North Dakota Medicaid	CKND1	Non	MEDICAID		No		Claims	R	Y				Additional enrollment is not required by the payer; however, providers wishing to submit Claims electronically must submit their ND Medicaid assigned provider ID(s) within the Claims. Provider IDs are always 5 digits long and begin with the number					
ND	North Dakota Medicaid	CKND1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NE	Aetna Better Health of Nebraska	42130		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Nebraska	No	Yes	Minimum of 31 Business days or 3 payment cycles
NE	Aetna Better Health of Nebraska	42130		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
NE	Medicaid of Nebraska	CKNE1	Non	MEDICAID		Yes	1-2 Weeks	Claims	Y	Y									
NE	Medicaid of Nebraska	CKNE1		MEDICAID		Yes	3-5 Business Days	ERA		Y				Enrollment in Electronic Fund Transfer (EFT) is required for enrollment in ERAs.	Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	Yes	Yes	Immediately
NH	Medicaid of New Hampshire	CKNH1	Non	MEDICAID		No		Claims	R	Y									
NH	Medicaid of New Hampshire	CKNH1		MEDICAID		Yes	2-3 weeks	ERA							Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Effective with the Remittance Advice dated April 2, 2010, download in PDF format will become mandatory. Paper Remittance Advices will no longer be supplied and providers will need to download their Remittance Advices from the provider website www.nhmedicaid.com under the transaction service page.
NH	Medicaid of New Hampshire	CKNH1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NJ	Aetna Better Health Plan of New Jersey	46320		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of New Jersey	No	Yes	Minimum of 31 Business days or 3 payment cycles
NJ	Aetna Better Health Plan of New Jersey	46320		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
NJ	Medicaid of New Jersey	CKNJ1	Non	MEDICAID		Yes	2-3 weeks	Claims	R	Y			S						

State	Payer	ID	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Read y	ICD10 Testin g	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
NJ	Medicaid of New Jersey	CKN1		MEDICAID		Yes	3-4 Weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	None
NJ	Medicaid of New Jersey	CKN1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NM	New Mexico Medicaid	CKM1	Non	MEDICAID		Yes	1-2 Business Days	Claims	R	Y			S						
NM	New Mexico Medicaid	CKM1		MEDICAID		Yes	1-2 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form	No	Yes	None
NM	New Mexico Medicaid	CKM1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NV	Medicaid of Nevada	CKNV1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NV	Medicaid of Nevada	CKNV1	Non	MEDICAID		Yes	7-10 Business Days	claims	R	Y			Y						
NV	Medicaid of Nevada	CKNV1		MEDICAID		Yes	3-4 Weeks	ERA		Y					Tax ID / NPI combination	Payer requires paper enrollment form.	No	Yes	6 Weeks
NY	Aetna Better Health of New York	34734		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of New York	No	Yes	Minimum of 31 Business days or 3 payment cycles
NY	Aetna Better Health of New York	34734		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
NY	Medicaid of New York	CKNY1	Non	MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NY	Medicaid of New York	CKNY1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									
NY	Medicaid of New York	CKNY1		MEDICAID		Yes	3-4 Weeks	ERA		Y				Providers must be currently linked to Change Healthcare Dental's ETIN 002 for the submission of Dental Claims before submitting an ERA enrollment request.	Billing NPI only	Payer requires a paper enrollment form	Yes	Yes	4 Payment Cycles
NY	Medicaid of New York (Dental Clinics Only)	CKNY2	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y									
NY	Medicaid of New York (Dental Clinics Only)	CKNY2		MEDICAID		Yes	3-4 Weeks	ERA		Y				Providers must be currently linked to Change Healthcare Dental's ETIN 002 for the submission of Dental Claims before submitting an ERA enrollment request.	Billing NPI only	Payer requires a paper enrollment form	Yes	Yes	4 Payment Cycles
NY	Medicaid of New York (Dental Clinics Only)	CKNY2	Non	MEDICAID		No		Eligibility Inquiry						Yes/No Response					
NY	NYS DOH UCP	14142	Par	MEDICAID		Yes	Payer's discretion	Claims	R	Y				Dept of Health AIDS Drug Assistance Program (ADAP) - UCP is Uninsured Care Program					
NY	NYS DOH UCP	14142		MEDICAID		Yes	1-2 Business Days	ERA		Y					Tax ID only	Payer accepts enrollment request from Change Healthcare.	No	No	None
OH	Aetna Better Health of Ohio	50023		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Ohio	No	Yes	Minimum of 31 Business days or 3 payment cycles
OH	Aetna Better Health of Ohio	50023		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
OH	Medicaid of Ohio	CKOH1	Non	MEDICAID		No		Claims	R	Y									
OH	Medicaid of Ohio	CKOH1		MEDICAID		Yes	1-2 Business Days	ERA							Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Effective July 1, 2007 Paper Remittance Advices will no longer be mailed to providers. Instead Medicaid provider will access their remittance advices from the internet. ODPS has established a secure internet website for Medicaid providers to log onto, view, download, save and print their remittance advices. https://medicaidremitt.ohio.gov .
OH	Medicaid of Ohio	CKOH1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
OH	CareSource	CKOH2	Non	MEDICAID		No		Eligibility Inquiry		R	Y			Yes/No Response					
OK	Medicaid of Oklahoma	CKOK1	Non	MEDICAID		No		claims	R	Y									
OK	Medicaid of Oklahoma	CKOK1		MEDICAID		Yes	5-7 Business Days	ERA		Y				Provider logs into the secure web account for EACH ID and designates the Receiver of the transactions. This is a ONE TIME process and will remain in effect until designation is revoked. Secure web account can be accessed at: https://www.ohcaprovider.com/Oklahoma/Security/login.xhtml Change Healthcare Dental's receiver name is Change Healthcare Business Services - Dental Submitter ID is XXXXXXXXXX	Tax ID / NPI combination for each physical location. Providers can be setup for more than one location under same NPI. Each Soonercare legacy DI must be listed.	Payer requires paper enrollment form.	No	Yes	2 Weeks
OK	Medicaid of Oklahoma	CKOK1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
OR	Medicaid of Oregon	CKOR1	Non	MEDICAID		Yes	2-4 Weeks	Claims	R	Y									
OR	Medicaid of Oregon	CKOR1		MEDICAID		Yes	2-4 Weeks	ERA							Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	Immediately
OR	Medicaid of Oregon	CKOR1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
PA	Medicaid of Pennsylvania	CKPA1	Non	MEDICAID		No		Claims	R	Y									

State	Payer	IDC#	Type	Model	Group #	Enroll #	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 O Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off
PA	Medicaid of Pennsylvania	CKPA1		MEDICAID		Yes	2-3 weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	No	None
PA	Medicaid of Pennsylvania	CKPA1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
PR	Triple-5 Medicaid Advantage	PRADV		MEDICAID		Yes	7-10 Business Days	Claims	R	Y				Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.					
PR	Triple-5 Medicaid Advantage	PRADV		MEDICAID		Yes	7-10 Business Days	ERA						Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.	Tax ID / NPI Combination	Payer requires paper enrollment form.	No	Yes	Pending Payer Response
PR	Triple-5 Medicaid Advantage	PRADV		MEDICAID		Yes	7-10 Business Days	Eligibility Inquiry						Completing this enrollment request will enroll the provider(s) for 3 transactions – Electronic Claims (837D), Electric Remittance Advice (835) and Real Time Eligibility Inquiry and Response (270/271) with all 3 payers listed above. Please ensure you have an active ERA and Real Time account with Change Healthcare prior to submitting the enrollment request form. Please feel free to contact your software vendor or Change Healthcare to confirm account status.					
RI	Medicaid of Rhode Island	CKRI1	Non	MEDICAID		No		Claims	R	Y									
RI	Medicaid of Rhode Island	CKRI1		MEDICAID		Yes	3-4 Weeks	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	None
SC	DentaQuest - Government Plans	CKSC1	Par	MEDICAID		No		Claims	R	Y									
SC	DentaQuest - Government Plans	CKSC1		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
SC	DentaQuest - Government Plans	CKSC1		MEDICAID		No		Claim Status Inquiry											
SD	South Dakota Medicaid	CKSD1	Non	MEDICAID		No		Claims	Y					South Dakota's Medicaid contractor is South Dakota Delta					
SD	South Dakota Medicaid	CKSD1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
TN	DentaQuest - Government Plans	62154	Non	MEDICAID		No		Claims	R	Y									
TN	DentaQuest - Government Plans	62154		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
TN	DentaQuest - Government Plans	62154		MEDICAID		No		Claim Status Inquiry											
TN	Tennessee Medicaid	CKTN1		MEDICAID		No		Eligibility Inquiry											
TX	Cook Children's Dental	CKCC1	Par	MEDICAID		No		Claims	R	Y				Yes/No Response					
TX	Medicaid of Texas	CKTX1	Non	MEDICAID		No		Claims	R	Y									
TX	Medicaid of Texas	CKTX1		MEDICAID		No		Eligibility Inquiry						Yes/No Response					
UT	Medicaid of Utah	CKUT1	Non	MEDICAID		No		Claims	R										
UT	Medicaid of Utah	CKUT1		MEDICAID		Yes	1-2 Business Days	ERA		Y				Tax ID / Rendering NPI at each physical address	Payer accepts enrollment request from Change Healthcare.	No	No	None	
VA	Aetna Better Health of Virginia	128VA		MEDICAID		Yes	Payer's discretion	ERA						Enroll with Payer	Tax ID / NPI combination	Contact Aetna Better Health of Virginia	No	Yes	Minimum of 31 Business days or 3 payment cycles
VA	Aetna Better Health of Virginia	128VA		MEDICAID		Yes	Payer's discretion	EFT						Enroll with Payer	N/A payer enrolls provider				
VA	DentaQuest - Government Plans	CKVA1	Par	MEDICAID		No		Claims	R	Y									
VA	DentaQuest - Government Plans	CKVA1		MEDICAID		No		Eligibility Inquiry						Detailed Benefits					
VA	DentaQuest - Government Plans	CKVA1		MEDICAID		No		Claim Status Inquiry											

State	Payer	ID#	Type	Model	Group #	Enroll	Payer Enrollment Turnaround Time	Service	NPI	5010	ICD10 Reading	ICD10 Testing	ICD10 Required as of Compliance Date	Additional Info	ERA/EFT Enrollment Level	ERA Enrollment Type	Requires EFT for ERA Enrollment	ERA Payer Enrollment Form Required	ERA Paper RA Shut Off	
VT	Medicaid of Vermont	CKYT1	Non	MEDICAID		Yes	7-10 Business Days	Claims	R	Y										
VT	Medicaid of Vermont	CKYT1		MEDICAID		Yes	7-10 Business Days	ERA		Y					Tax ID / NPI combination	Payer requires paper enrollment form.	No	Yes	None	
VT	Medicaid of Vermont	CKYT1		MEDICAID		No		Eligibility Inquiry						Yes/No Response						
WA	Medicaid of Washington	CKWA1	Non	MEDICAID		Yes	1-2 Business Days	Claims	Y	Y										
WA	Medicaid of Washington	CKWA1		MEDICAID		Yes	Payer's discretion	ERA		Y					Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	No	Immediately	
WA	Medicaid of Washington	CKWA1		MEDICAID		No		Eligibility Inquiry						Yes/No Response						
WI	Medicaid of Wisconsin	CKW11	Non	MEDICAID		No		Claims	Y	Y										
WI	Medicaid of Wisconsin	CKW11		MEDICAID		Yes	5-7 Business Days	ERA		Y					Tax ID / NPI combination	Payer requires paper enrollment form.	No	Yes	None	
WI	Medicaid of Wisconsin	CKW11		MEDICAID		No		Eligibility Inquiry						Yes/No Response						
WV	Medicaid of West Virginia	CKWV1	Non	MEDICAID		No		Claims	R	Y										
WV	Medicaid of West Virginia	CKWV1		MEDICAID		Yes	Payer's discretion	ERA							Unknown as payer handles directly with provider.	Payer requires online enrollment tool be utilized.	No	No	None	
WV	Medicaid of West Virginia	CKWV1		MEDICAID		No		Eligibility Inquiry						Yes/No Response						
WY	Medicaid of Wyoming	CKWY1	Non	MEDICAID		Yes	5-7 Business Days	Claims	R	Y										
WY	Medicaid of Wyoming	CKWY1		MEDICAID		Yes	1-2 Business Days	ERA		Y					Tax ID / NPI combination for each physical location	Payer requires paper enrollment form.	No	Yes	None	

<u>Legend</u>		
St.		State abbreviation
Payer		The name of the electronic payer in Change Healthcare's payer network.
ID		The Electronic Payer ID number assigned to the payer by Change Healthcare.
Type	Par	Participating
	Non	Non Participating
Model		Represents Payer Model - There are 5 Dental Models Commercial, BCBS, Delta Dental and Medicaid.
Group #	Y	Payer requires group number to be submitted within the transaction
	N	Payer does not require a group number to be submitted within the transaction.
Enroll	Y	Payer requires Dental providers to complete additional enrollment and/or a registration process before transactions will process electronically.
	N	Payer DOES NOT requires Dental providers to complete additional enrollment and/or a registration process before transactions will process electronically.
Payer Enrollment Turnaround Time		Average historical timeframe required by the payer to process an ERA enrollment request
Service		Claims
		Encounters
		Electronic Remittance Advice (ERA) 835
		Electronic Funds Transfer (EFT)
		Remittance Image
		Real-Time Claims
		Real-Time Eligibility Inquiry (270/271)
NPI	Y	Payer accepting NPI.
	R	Payer requires NPI.
5010	Y	Payer processing in x12 5010 format
	N	Payer not processing in x12 5010 format
ICD10 Ready	Y	Payer has indicated they are or will be ready to accept ICD10 claim data where situationally required effective on and after the compliance date.
	N	Payer cannot accept ICD10 and will continue to require ICD9 where situationally required.
	Blank	Payer has not indicated readiness to Change Healthcare.
ICD10 Testing		<u>For testing requests or questions please email DentalCD10@ChangeHealthcare.com</u>
ICD10 Required as of Compliance Date	S	Where diagnosis codes are situationally required, Payer requires ICD10 for claims with dates of service on and after the compliance date.
	N	Where situationally required, Payer requires ICD10 but will accept ICD9 for a limited contingency period.
	Y	Payer requires ICD10 for claims with dates of service on and after the compliance date.
	Blank	Payer has not indicated ICD10 requirements to Change Healthcare.
ERA Enrollment Level		Tax ID
		Billing NPI only
		Tax ID / NPI combination (Each unique combination of the tax ID and NPI at the billing level must enroll.)
		Tax ID / NPI combination for each physical location (Each physical location must have at least one unique tax ID / NPI combination and must enroll.)
		same.
		Tax ID / NPI combination for each physical location. Providers can be setup for more than one location under same NPI. Each Soonercare legacy DI must be listed.
		Tax ID / NPI combination for each physical location. Pacificsource requires direct deposit. A form should be completed for each address because it is possible for different locations having different bank accounts.
	Unknown as payer handles directly with provider. (We don't participate in the enrollment process, it is handled directly between the payer and the provider.)	
ERA Enrollment Type		A description of the type of enrollment process required by the payer.