



## **PC Products**

### **Input Guide for Claim Status Transactions**

**Emdeon MAX<sup>®</sup>, Emdeon  
Assistant<sup>®</sup>, and Emdeon  
NetDirect<sup>®</sup>**

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## Overview

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### About This Guide

This guide provides:

- General instructions for entering a claim status inquiry.
- Payer-specific input requirements and special considerations.

The section "[Payer Details](#)" on page 7 lists each claim status transaction by payer name, including any claim or service period date restrictions, special considerations, and a hyperlink to the appropriate response guide.

"[Appendix A: Reference Guides](#)" on page 39 lists additional reference materials.

For transactions other than claim status (for example, eligibility, referral inquiry, credit report, etc.), see the guides specific to those transactions.

### Customer Support

***Emdeon Customer Support***

800.333.0263

[customer.service@emdeon.com](mailto:customer.service@emdeon.com)



# General Information

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## Requests

### Determine the Transaction Type

If all members of a plan have a unique member ID, regardless of their relationship to other family members covered under the same plan, you will have only one option as the claim status transaction type: **Claim Status**. If plan dependents have the same member ID as the plan subscriber, select **Subscriber Claim Status** if the claim is for the plan subscriber or **Dependent Claim Status** if the claim is for a plan dependent.

### Determine the Search Types

Most claim status transactions provide only one search option, which typically consists of:

- ID and name of the information requester.
- ID and name of the service provider.
- Patient name, date of birth, and sometimes gender.
- For most dependent searches, the subscriber name is also required.

Additional claim data, such as the claim period begin and end dates or claim control number, is usually necessary to locate the correct claim.

Occasionally, the payer may allow more than one search option, for example:

- Provider and patient data plus the claim control number.
- Provider and patient data plus the total charge, period begin, and period end date.

Or:

- Medical Claims.
- Pharmacy Claims.

You must make sure that at least one search type is complete by verifying that there is data in every input field underscored by one single color (for example, all fields underscored by a black bar). If you want the Emdeon software to automatically initiate another search if the first search does not find the patient's record, make sure that you enter enough data to perform more than one search type (for example, there is data in input fields underscored by both black and red bars).

The query may also contain optional input fields (for example, middle initial, gender, or group number). In certain cases, these optional input fields may help the payer find the patient's record.

Be sure to read the help lines for each optional input field. This information will assist you in constructing your query.

#### ***If you enter data for more than one search type:***

If you enter data for more than one search type, you enable Emdeon's SmartSearch™ feature. This feature causes the software to resend the query, using each different search type, until the patient's record is found. This process is referred to as a search cascade.

The SmartSearch cascade process works like this:

1. When the query is processed, the software sends the combination of data that is most likely to locate the patient's record.
2. If the database responds that the patient's record was not found, the software sends the combination of data which is the next most likely to locate the record.

3. If again the patient's record is not found, the process repeats until one of the following occurs:
  - The record is found.
  - All search types from the query have been sent.
  - Certain types of errors occur.
  - You cancel processing.

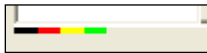
## Enter the Search Data

### Data Input Area

Requester ID	Requester Last	Requester First	Requester Middle	Svc Prov ID
6088999	Jones	Robert		5447729

The data input area contains the information Emdeon will use to query the payer's database. You can manually enter or change information, if necessary.

### Color Bars



The color bars beneath input fields identify the input data required to complete each search type. All input fields with the same color bar compose a search type. For example, to complete entries for a search using provider and patient data plus the claim control number, you would need to make an entry in each input field that has a black color bar.

Note the following:

- The position of the color bar beneath an input field indicates the sequence in which the search will be conducted in the event of a SmartSearch cascade. The left-most position indicates that the input field is used in the highest priority search type. The next position from the left is for the second priority search type, and so on.
- The colors themselves also indicate the priority of the search type, in this sequence:
  - Black
  - Red
  - Yellow
  - Light green
  - Blue
  - White

Optional input fields do not have a color bar. The **Account #** and **Amount** input fields are always optional input fields that are not sent to the payer in the request. These input fields may be used for your internal use only. The account number is the number you have assigned to the account. The amount is the dollar amount applicable to the query.

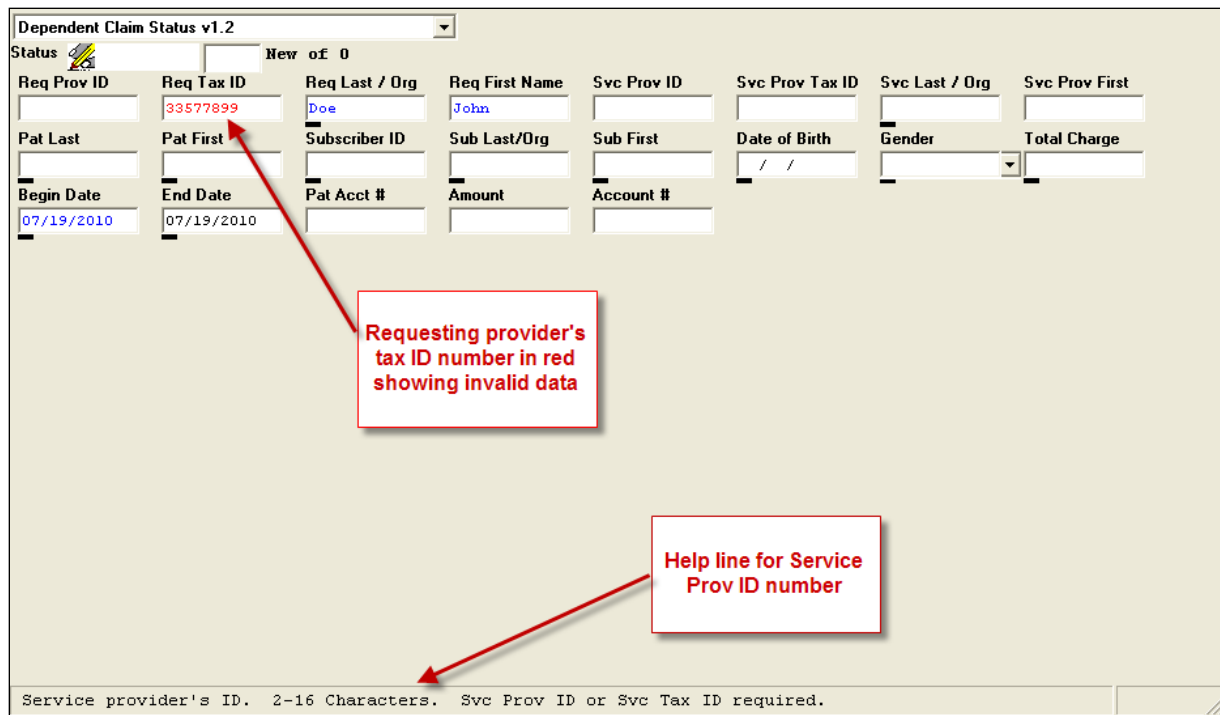
### Text Color in Input Fields

The initial entry you make in an input field in a new query will be blue text if it is valid or red text if it is invalid (for example, letters in a numeric field or an entry that is the wrong length).


Black text indicates that you changed the original entry, but that the change is valid.

### Help Line

For information about an input field in which the cursor is resting, consult the help line at the bottom of the screen. See the following example.



Dependent Claim Status v1.2

Status  New of 0

Req Prov ID	Req Tax ID	Req Last / Org	Req First Name	Svc Prov ID	Svc Prov Tax ID	Svc Last / Org	Svc Prov First
	33577899	Doe	John				
Pat Last	Pat First	Subscriber ID	Sub Last/Org	Sub First	Date of Birth	Gender	Total Charge
					/ /		
Begin Date	End Date	Pat Acct #	Amount	Account #			
07/19/2010	07/19/2010						

Service provider's ID. 2-16 Characters. Svc Prov ID or Svc Tax ID required.

Requesting provider's tax ID number in red showing invalid data

Help line for Service Prov ID number

### Requesting and Service Provider Identifiers

Commonly, you are required to enter two provider identifiers: one for the requesting provider and one for the service provider.

Many payers allow either a provider ID or a tax ID to be used as the provider identifier. In this case, you will see an input field for each, but you are required to enter only one of them. Rest your cursor in one of the input fields, and note the entry requirements listed on the help line at the bottom of the screen.

As a provider ID, a payer may accept or require your National Provider Identifier, or they may accept your ETIN (Electronic Transmitter Identification Number) or your payer-assigned ID.

In order for you to use the NPI, the following conditions must exist:

- The payer must be ready to accept NPI. Consult our payer lists at [www.emdeon.com/PayerLists/payerlists.php](http://www.emdeon.com/PayerLists/payerlists.php) for this payer's NPI-readiness status.
- The provider must have fulfilled all of the payer's NPI registration requirements.

You can set up a default provider ID number or a drop-down list of frequently used provider IDs. For more information, see your product's user guide.

### Claim Level versus Service Level Inquiries

Claim level inquiries allow you to inquire about the status of an entire claim.

Service level inquiries, when supported by the payer, allow you to inquire about the status of a specific line item in the claim (for example, a charge for a specific service or procedure performed). Payers who support service level inquiries generally allow you to inquire at the claim level as well, simply by not entering line level information.

### Common Claim Level Input Fields

The majority of claim status transactions allow you to request the status of claims at the *claim level*, versus specific line items within the claim.

Common claim level input fields include:

- Claim control number: the control number the payer has assigned to the claim. It is recommended that you provide this information whenever possible because it is the most specific identifier of the claim.
- Total charge: the total dollar amount of the claim; recommended.
- Patient account number: your internal tracking number for the claim.
- Bill type: the institutional bill type submitted on the original claim. For institutional claims only.
- Medical record number: the medical record number submitted on the original claim; recommended.
- Claim period begin and end dates: the begin and end dates of service on the claim. Usually required for claim level inquiries. If the claim is for a single date, enter the same date as the begin and end date.
- Group number: can be a system location identifier or the plan group number. See the help line.
- Pharmacy prescription number: can be used for pharmacy claim status inquiries.

### ***Common Service Level Input Fields***

Common service level input fields include:

- Procedure code and modifiers.
- Line item charge amount.
- NUBC revenue code. For institutional claims only.
- Quantity or number of service units.
- Line item control number: control number assigned by the payer to the line item.
- Service line date or date range: typically the claim period dates are not required if the service line dates are provided.

### ***Date Entries***

Claim period and service line dates can be entered either in six-digit (mmddy) or eight-digit (mmdccyy) format.

If you enter a two-digit year, the software will convert the century, as follows, when you move off the date of service field:

- If the figure you enter is equal to or less than **20**, the century converts to a date in the 2000s. For example, if you enter **03**, the software converts the century to **2003**.
- If the figure you enter is greater than **20**, the century converts to a date in the 1900s. For example, if you enter **50**, the software converts the century to **1950**.

You must enter all eight digits for a date of birth.

### ***Dates of Service Restrictions***

The date of inquiry appears in the claim period date or service line date input fields by default. To accept the date of inquiry, press the **Tab** key to go to the next input field.

However, if you want to enter other dates, be aware that your payer may or may not have restrictions on the claim period or service line dates. To determine your payer's date restrictions, see "[Payer Details](#)" on page 7.

### ***Dollar Amounts***

An input field for a dollar amount places a static decimal point two decimal places to the left of the right-most two digits. Therefore, you must enter a cent value even for whole dollar amounts.

### **Bill Type**

Some transactions may have an input field for the bill type. The bill type indicator may be found on UB92 record 40-4, paper form locator 4, or 837 claim in composite element CLM05.

### **Add New Button**

In some cases, a query will allow you to enter several occurrences of an input field or group of input fields (such as procedure codes and modifiers), but only one instance of the input field is initially displayed. The presence of an **Add New** button beside the input field indicates that the additional input fields are hidden.

You can display additional occurrences of the field by clicking the **Add New** button.

### **Special Considerations**

The payer may have guidelines for the information that you enter. For example, the claim control number may be an optional input field, but the payer may recommend that you enter the claim control number to narrow your search. To determine if there are any special considerations for the transaction, see "[Payer Details](#)" on page 7.

## **Responses**

There are three types of claim status responses available through your product:

- A response using version 4 of Emdeon's standard response format.
- A response using version 5 of Emdeon's standard response format.
- A response that uses a non-standard format.

For information on the response used for each payer, see "[Payer Details](#)" on page 7. Here, the **Response Guide** column provides a hyperlink to the appropriate response guide.

The response guides are also available on your installation CD or on the Emdeon resource library at [www.emdeon.com/resourcelibrary/#84](http://www.emdeon.com/resourcelibrary/#84); click **User Manuals**.

## Payer-Specific Information

### Payer Details

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>AARP</b> Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. If you enter the patient account number, you must enter the claim control number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Aetna</b> Subscriber Claim Status v2.0 Dependent Claim Status v2.0	Date span of up to 90 days.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Administrator – Medicare Supplemental</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a tax ID as the service provider identifier.  The requesting and servicing provider’s first names are required if the provider is a person.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health of FL</b> Claim Status v1.1	Any date on file. If no end date is entered, the ending date of service will default to the begin date.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting and service provider identifier. This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health – PA</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health of KY</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health of LA</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Aetna Better Health of MO</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health of VA</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Better Health of WV</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Long Term Care</b> Claim Status v1.2	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number, total charge, or patient account number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Aetna Senior Supplemental Insurance</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Affinity Essentials</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file. If no date is entered, the date of service will default to the current date.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the provider identifier. Entry if the tax ID is preferred, but if the NPI is submitted instead, it will be used.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>AGIA Inc</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file. If no date is entered, the date of service will default to the current date.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Alabama Medicaid</b> Claim Status v1.1	Any date on file.	This payer supports medical and pharmacy claims inquiries. For medical claims, entry of the claim control number is recommended. For pharmacy claims, entry of the line item control number, line item quantity, and claim control number is recommended.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Allied Benefit Systems, Inc.</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Alternative Insurance Resources, Inc.</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file. If no date is entered, the date of service will default to the current date.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the provider identifier. Entry if the tax ID is preferred, but if the NPI is submitted instead, it will be used.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>American Community Mutual</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	Entry of the claim control number or medical record number is recommended to narrow the response to a specific claim.  Entry of product/service information, line item begin and end dates, line item control number, or line item charge is recommended to narrow the response to specific line items.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>American Family Insurance Group</b> (Medicare Supplemental and PPO Policies) Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>American General Life and Accident</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>American Income Life Insurance Company</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>American National Insurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>



Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>American National Life Insurance Company of Texas</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>American Republic Insurance Company</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim.  Entry of the claim control number, total charge, or patient account number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>AmeriHealth Caritas Iowa</b> Claim Status v1.0	Any date on file, future dates not allowed.	This payer permits use of a National Provider ID or a Service Provider ID as the requesting and service provider identifiers.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>AmeriHealth Caritas Pennsylvania</b> Claim Status v1.1	Any date on file, future dates not allowed.	This payer permits use of a provider ID or a tax ID as the requesting provider identifier. It is recommended that you use the service provider identifier that was used on the claim.  If you enter the claim control number, detailed line item information for the specific claim will be returned. If you do not enter the claim control number, a brief summary for each claim submitted during the date of service range will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Ameritas Dental Group</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	This payer supports multiple plans; see " <a href="#">Ameritas Dental Group Plans</a> " on page 36.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Anthem BlueCross of California</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Avalon Administrative Service</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier.  This payer permits use of an NPI as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Banner Health Plans</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Arkansas</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to 18 months in the past, future dates not allowed.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number, total charge, or medical record number is recommended to narrow the response to a specific claim.  If you enter the patient account number, you must enter the claim control number, total charge, or medical record number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Colorado</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to one year in the past, future dates not allowed.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Georgia</b> Subscriber Claim Status v2.0 Dependent Claim Status v2.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. For dependent searches, entry of the dependent's first name is recommended to increase the likelihood of finding the patient's record.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Illinois</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	The claim date cannot be later than the current date.	The requesting provider's tax ID is required. The service provider's National Provider Identifier (NPI) is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Indiana</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to one year in the past, future dates not allowed.	This payer permits use of a National Provider Identifier (NPI) as the requesting and servicing provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Kansas</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Kansas City</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>BCBS LA Medicare Advantage</b> Claim Status v1.0	Any date on file.	The requesting provider's tax ID is required. The service provider's National Provider Identifier (NPI), Tax ID, or Service Provider ID is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Massachusetts</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number is recommended to narrow the response to a specific claim. Entry of the bill type is required for out-of-state members.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Mississippi</b> Claim Status v1.0	Any date on file.	The requesting and service providers' NPI is required. Do not enter the three-character prefix when you enter the subscriber ID. The prefix is not required on electronic claims, but it is required on paper claims. The prefix is not stored in the payer's database.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Missouri</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to one year in the past, future dates not allowed.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Nebraska</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the patient account number, you must enter the claim control number or total charge.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS New Mexico</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	The claim date cannot be later than the current date.	The requesting provider's tax ID is required. The service provider's National Provider Identifier (NPI) is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS New Jersey (Horizon)</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Ohio</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to one year in the past, future dates not allowed.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>BCBS Pennsylvania (Highmark)</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to two years in the past, future dates not allowed, date span of up to 90 days.	Entry of the claim control number, total charge, or medical record number is recommended to narrow the response to a specific claim. If you enter the patient account number, you must enter the claim control number, total charge, or medical record number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS South Carolina</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the total charge is recommended to narrow the response to a specific claim. If you enter the patient account number, you must enter the total charge.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Tennessee</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	The requesting and service providers' NPI is required.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Texas</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	The claim date cannot be later than the current date.	The requesting provider's tax ID is required. The service provider's National Provider Identifier (NPI) is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Texas-Medicaid</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a National Provider ID (NPI) as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Vermont</b> Claim Status v1.0	Any date in the past, future dates not allowed, date span of up to 90 days.	This payer permits use of a National Provider Identifier (NPI) or a provider ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BCBS Virginia</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Up to one year in the past, future dates not allowed.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BCBSMT Health Economic Livelihood Partnership</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) as the requesting and service provider identifiers.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Best Life and Health</b>  Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a provider ID or tax ID as the requesting and service provider identifier. If the total claim charge amount is unknown, enter <b>0</b> (zero).	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Better Health Plans of Tennessee</b> Claim Status v1.1	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim. If you enter line item detail, you must enter the product/service source, the product/service ID, and the line item charge amount.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>BlueCross Community Options</b> Claim Status v1.0	Any date on file.	The requesting provider's National Provider Identifier (NPI), Tax ID, or Service Provider ID is required. The service provider's National Provider Identifier (NPI), or Tax ID is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>BlueCross Medicare Advantage</b> Claim Status v1.0	Any date on file.	The requesting provider's National Provider Identifier (NPI), Tax ID, or Service Provider ID is required. The service provider's National Provider Identifier (NPI), or Tax ID is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Bridgeway Health Solutions (Arizona)</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Capital BlueCross</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Care Improvement Plus</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>CarePlus Health Plan</b> Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>CarePoint Medicare Advantage</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CareSource Health</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Carpenters Health and Welfare Trust Fund of St Louis</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CeltiCare Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Central Reserve Life Insurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Central Reserve Life Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

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<b>Central States Funds</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Christie Student Health Plans</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CHRISTUS Health Plan Medicaid</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CHRISTUS Health Plan New Mexico Health Insurance Exchange</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CHRISTUS Health Plan NM MA</b>  Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Cigna</b> Subscriber Claim Status v1.3 Dependent Claim Status v1.3	Date span of up to 180 days.	For medical and dental claims, enter the service provider's tax ID. For behavioral claims, enter the service provider's provider ID.  Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Colorado Medicaid</b> Claim Status v1.0	Any date on file.	Entry of the requesting provider's tax ID is required.  This payer permits use of a National Provider Identifier (NPI) or provider ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Community Care of Oklahoma</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

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<b>Concentrix Insurance Solutions</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Consumer Mutual of Michigan</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Continental General Insurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Continental General Life Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Cooperative Benefit Administrators</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>CoreSource</b> Subscriber Claim Status v2.1 Dependent Claim Status v2.1	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number. This payer supports multiple plans; see <a href="#">“CoreSource Plans”</a> on page 36.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>



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<b>CountyCare</b> Subscriber Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Coventry</b> Claim Status v2.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.  This payer supports multiple plans; see " <a href="#">Coventry Plans</a> " on page 36.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Coventry/Dentex Dental</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Create</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier.  This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>CSA Fraternal Life – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Dell Childrens Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits NPI as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>District No. 9, I. A. of M. &amp; A. W. Welfare Trust</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier.  This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

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<b>Diversified Administration Corp</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Emblem Health</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) as the requesting provider identifier. This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Essence Healthcare</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Farm Bureau Health Plans</b> Claim Status v1.0	Any date on file.	This payer permits use of a tax ID as the requesting provider identifier. This payer permits use of a NPI as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Federated Insurance Company</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>First Carolina Care</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>First Community Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>First United American Insurance Company</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Florida Medicaid</b> Claim Status v2.2	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

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<b>Fresenius Health Partners</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Glassman</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  This payer supports multiple plans; see " <a href="#">Glassman Plans</a> " on page 37.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Globe Life and Accident Insurance Company</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Government Employees Hospital Association (GEHA)</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Great American Life Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Great-West Healthcare</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Up to 18 months in the past, future dates not allowed.	If you enter the total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Group and Pension Administrators</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier.  This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Group Dental Service</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of a NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Health Choice of Arizona</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or a tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Health Partners of Philadelphia</b> Claim Status v1.1	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Health Services for Children with Special Needs</b> Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>HEALTHe Exchange</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the requesting provider's tax ID is required. This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Healthfirst of New Jersey</b> Claim Status v1.0	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Healthfirst of New York</b> Claim Status v1.2	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Healthplan Services – First Life &amp; Health Insurance Company (New England Series)</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>HealthSmart Benefit Solutions</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>HealthSmart Benefit Solutions WV</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>HealthSpring</b> Claim Status v2.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI), provider ID, or a tax ID as the requesting provider identifier.  This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>HMA</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Hometown Health</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Horizon New Jersey Health</b> Claim Status v1.0	Any date on file, future dates not allowed.	This payer permits use of a provider ID or a tax ID as the requesting provider identifier. It is recommended that you use the service provider identifier that was used on the claim. If you enter the claim control number, line item detail will be returned. If you do not enter the claim control number, a brief summary for each claim submitted during the date of service range will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>HSBS Oklahoma City</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Humana</b> Subscriber Claim Status v1.3 Dependent Claim Status v1.3	Any date on file.	The service provider's National Provider Identifier (NPI) is required.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Johns Hopkins HealthCare LLC</b> Claim Status v1.0	Any date on file.	The requesting provider's tax ID is required. This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Kaiser Foundation Health Plan of Colorado</b> Claim Status v1.0	Any date on file.	The requesting provider's tax ID is required. This payer permits use of a National Provider Identifier (NPI), provider ID, or a tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Kaiser NW Dental</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or a tax ID as the requesting provider identifier.  This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Kempton Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or a tax ID as the requesting provider identifier.  This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Kentucky Medicaid</b> Claim Status v2.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number (TCN) or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Key Benefit Administrators</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Key Benefit Administrators (Indianapolis, IN)</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.  Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Keystone First</b> Claim Status v1.1	Any date on file, future dates not allowed.	This payer permits use of a provider ID or a tax ID as the requesting provider identifier. It is recommended that you use the service provider identifier that was used on the claim. If you enter the claim control number, line item detail will be returned. If you do not enter the claim control number, a brief summary for each claim submitted during the date of service range will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>L.A. Care</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Liberty National Life Insurance Company</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>LifeCare Assurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a Federal Tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Loyal American Life Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>MagnaCare</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Managed Health Network (MHN)</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Massachusetts Medicaid</b> Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI) as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>MDwise, Inc</b> Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Medi-Share</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Medica</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	<p>If you enter the service provider's provider ID or NPI, claim detail will be returned. If you enter the service provider's tax ID, claim summary will be returned.</p> <p>Entry of the claim control number is recommended to narrow the response to a specific claim.</p> <p>Entry of the group number is recommended to identify a specific member in the case of a multiple group match.</p>	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Medica Health Plans</b> Claim Status v1.0	Any date on file.	<p>The requesting provider's National Provider Identifier (NPI) is required.</p> <p>This payer permits use of the provider's NPI or tax ID as the servicing provider identifier.</p>	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>MEDICA2</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Medical Mutual of Ohio (MMO)</b> Subscriber Claim Status v2.0 Dependent Claim Status v2.0	Up to three years in the past.	<p>This payer permits use of a provider ID or tax ID as the requesting provider identifier.</p> <p>It is recommended that you use the service provider identifier that was used on the claim.</p> <p>Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.</p>	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>MegaLife Oklahoma City</b> Claim Status v1.3	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>MetroPlus Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>



Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Mississippi Medicaid</b> Claim Status v1.0	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Mississippi State Employees' Health Plan (SEHP)</b> Claim Status v1.4	Up to one year in the past, future dates not allowed.	None.	<a href="#">Mississippi-SEHP-Claim-Status-PC.pdf</a>
<b>Missouri Medicaid</b> Claim Status v3.1	Any date on file, future dates up to end of the current month.	Entry of the claim control number (ICN) is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>MMSI</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Molina Healthcare</b> Claim Status v1.6	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  This payer supports multiple plans; see " <a href="#">Molina Healthcare Plans</a> " on page 37.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Molina of Puerto Rico</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Municipal Health Benefit Fund</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier.  This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the servicing provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Mutual Health Services</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	The requesting provider's tax ID is required. This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the servicing provider identifier.  Entry of either the claim number or the total charge amount is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>NaphCare, Inc.</b> Claim Status v1.0	Any date on file.	The requesting and service providers' National Provider Identifier (NPI) is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>National Association of Letter Carriers (NALC)</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>New Era Life Insurance Company. Includes the following two plan names:</b> <b>- New Era Life Insurance of the Midwest</b> <b>- Philadelphia American Life Insurance</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier. This payer includes the following plans under the same payer ID: <ul style="list-style-type: none"> <li>• New Era Life Insurance Company of the Midwest</li> <li>• Philadelphia American Life Insurance Company</li> </ul>	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>New Mexico Medicaid</b> Claim Status v1.0	Any date on file.	This payer permits use of a tax ID only as the requesting provider identifier.  This payer permits use of a National Provider Identifier (NPI) or provider ID service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Nippon Life Benefits</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>North American Medical Management California</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) only as the requesting provider identifier.  This payer permits use of a National Provider Identifier (NPI) only as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Northwest Administrators, Inc.</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Oxford Health Plans</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number is recommended to narrow the response to a specific claim.  If you enter the claim control number, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Pan-American Life Insurance</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>PacificSource Community Solutions</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.  Entry of the patient's gender is required, if known; otherwise, entry is optional.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Passport Health Plan</b> Claim Status v1.2	Up to one year in the past, future dates not allowed.	This payer permits use of a provider ID or a tax ID as the requesting provider identifier. It is recommended that you use the service provider identifier that was used on the claim. If you enter the claim control number, line item detail will be returned. If you do not enter the claim control number, a brief summary for each claim submitted during the date of service range will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Peoples Health</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>PerformCare</b> Claim Status v1.0	The date cannot be greater than the current day, and 1461 days in the past (4 years).	This payer permits use of a National Provider Identifier (NPI), or provider ID the requesting provider identifier.  This payer permits use of an NPI or provider ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

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<b>PHCS Savility Payers</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Pittman and Associates</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Planned Administrators, Inc.</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier. Entry of the requesting and service providers' tax ID is required.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Preferred Health Systems</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Premera Blue Cross</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	Entry of the service provider's National Provider Identifier (NPI) is required.  This payer includes the following plans under the same payer ID: <ul style="list-style-type: none"> <li>• Premera Blue Cross (PPO/PAR, Indemnity, Traditional)</li> <li>• Premera Blue Cross Blue Shield of Alaska (PPO/PAR, Indemnity, Traditional)</li> <li>• Premera Dimensions – Foundation, Access, Global and Heritage</li> <li>• LifeWise Health Plan of Washington</li> <li>• LifeWise Health Plan of Oregon</li> <li>• Federal Employee Program</li> </ul>	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Principal Financial</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number is recommended to narrow the response to a specific claim. This payer supports multiple plans; see " <a href="#">Principal Financial Plans</a> " on page 38.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Provident American Life &amp; Health Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>QuikTrip Corporation</b> Subscriber Claim Status v2.0 Dependent Claim Status v2.0	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>SAMBA Health Benefit Plan</b> Subscriber Claim Status v2.1 Dependent Claim Status v2.1	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Santa Clara Family Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of a National Provider Identifier (NPI) as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Select Health of South Carolina</b> Claim Status v1.0	Any date on file, future dates not allowed.	This payer permits use of a provider ID or a tax ID as the requesting provider identifier. It is recommended that you use the service provider identifier that was used on the claim. If you enter the claim control number, line item detail will be returned. If you do not enter the claim control number, a brief summary for each claim submitted during the date of service range will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Selman and Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Sharp Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Significa Benefit Services</b> Subscriber Claim Status v1.2 Dependent Claim Status v1.2	Any date on file.	None.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>SPJST – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Standard Life and Accident Insurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Stonebridge Life Insurance Company</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>TexanPlus (North Texas Area)</b> Claim Status v1.0	Any date on file.	If you enter service level information, line item detail will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>TexanPlus (Southeast Texas Area)</b> Claim Status v1.0	Any date on file.	If you enter service level information, line item detail will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Three Rivers Health Plan</b> Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number is recommended to narrow the response to a specific claim.  If you enter the line item control number, line item detail will be returned. You must enter the line charge amount and one or two product/service type codes.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Today's Options</b> Claim Status v1.0	Any date on file.	If you enter service level information, line item detail will be returned.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Transamerica Financial Life Insurance Company</b>  Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Transamerica Premier Life Insurance Company</b>  Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Trillium Community Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier.  This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Trustmark</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>UHC StudentResources</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>UMWA Health and Retirement Funds</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of an NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Union Pacific Railroad Employes Health Systems</b> Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim. If you enter the claim control number or total charge, you must enter the patient account number.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>United American Insurance Company</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>United Teacher Associates Insurance Company – Medicare Supplement</b> Claim Status v1.0	Any date on file.	This payer permits use of a provider ID or a tax ID as the requesting and service provider identifier. Entry of the claim control number and total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>UnitedHealthcare (UHC)</b> Subscriber Claim Status v1.1 Dependent Claim Status v1.1	Any date on file.	If you enter the service provider’s provider ID or NPI, claim detail will be returned. If you enter the service provider’s tax ID, claim summary will be returned. Entry of the claim control number is recommended to narrow the response to a specific claim. Entry of the group number is recommended to identify a specific member in the case of a multiple group match.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>USAA – Medicare Supplemental</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of a tax ID as the requesting provider identifier. This payer permits use of a provider ID or a tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>



Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Vermont Medicaid</b> Claim Status v1.1	Any date on file.	It is recommended that you use the service provider identifier that was used on the claim. The recipient ID is either the patient's Social Security number or Vermont Medicaid unique ID. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Veterans Affairs Fee Basis Programs</b> Claim Status v1.2	Date span of up to 90 days.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>Veterans Affairs Health Administration Center</b> Claim Status v1.1	Date span of up to 90 days.	It is recommended that you use the service provider identifier that was used on the claim. Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.  This payer is not affiliated with TRICARE/CHAMPUS.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>VNS CHOICE Medicare</b> Claim Status v1.0	Any date on file.	Entry of the claim control number or total charge is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>
<b>WEB-TPA, Inc.</b> Subscriber Claim Status v2.0 Dependent Claim Status v2.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of the provider's National Provider Identifier (NPI) or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Western Health Advantage</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI), provider ID, or tax ID as the requesting provider identifier. This payer permits use of the provider's NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Western Southern Financial Group</b> Subscriber Claim Status v1.0 Dependent Claim Status v1.0	Any date on file.	This payer permits use of the provider's National Provider Identifier (NPI), or tax ID as the requesting provider identifier. This payer permits use of the provider's NPI or tax ID as the service provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>

Payer Name / Version	Claim or Service Date Restrictions	Special Considerations	Response Guide
<b>Windsor Health Plan</b> Claim Status v1.0	Any date on file.	This payer permits use of a National Provider Identifier (NPI) or tax ID as the requesting and servicing provider identifier.	<a href="#">PC-v5-Standard-Claim-Status-Response.pdf</a>
<b>Wyoming Medicaid</b> Claim Status v1.0	Any date on file.	Entry of the claim control number is recommended to narrow the response to a specific claim.	<a href="#">PC-v4-Standard-Claim-Status-Response.pdf</a>

## Plan Network IDs

### Ameritas Dental Group Plans

For details, see "[Ameritas Dental Group](#)" on page 10.

Plan Name	Plan ID
<b>Ameritas Life Insurance Company</b>	00425
<b>First Ameritas of New York</b>	00426
<b>Reliance Standard Life Insurance Company</b>	00427
<b>First Reliance Standard Life Insurance Company</b>	00428
<b>Standard Insurance Company</b>	00429
<b>Standard Insurance Company of New York</b>	00430

### CoreSource Plans

For details, see "[CoreSource](#)" on page 17.

Plan Name	Plan ID
<b>CoreSource – Little Rock</b>	00205
<b>CoreSource – Maryland, Pennsylvania, and Illinois</b>	00236
<b>CoreSource – Ohio</b>	00239

### Coventry Plans

For details, see "[Coventry](#)" on page 18.

Plan Name	Plan ID
<b>Health America of PA</b>	00148
<b>CHC Georgia</b>	00154
<b>CHC Virginia</b>	00156
<b>CHC Louisiana</b>	00158
<b>CHC West Virginia*</b>	00160
<b>CHC of Carolinas</b>	00164
<b>CHC Delaware</b>	00166
<b>CHC Iowa</b>	00170
<b>CHC Kansas / CHC Oklahoma</b>	00172
<b>CHC Nebraska</b>	00176
<b>CHC Illinois</b>	00179
<b>CoventryCares of West Virginia</b>	00182

Plan Name	Plan ID
<b>CHC of MO, MS, AK , TN</b>	00184
<b>CHC Healthcare USA*</b>	00186
<b>CoventryCares of Virginia*</b>	00190
<b>CvtyNatnlAccts/UofMO/CvtyOne</b>	00250
<b>Mail Handlers &amp; FEHBP</b>	00251
<b>CHC Altius Health Plan/CHC Nevada</b>	00364
<b>CoventryCares of Michigan</b>	00413
<b>CHC Texas</b>	00453
<b>Vista</b>	00508
<b>CoventryCares of Pennsylvania</b>	00510
<b>CoventryCares of Nebraska*</b>	00511
<b>CHC Florida</b>	00512
<b>MHNET Behavioral Health</b>	00514
<b>Aetna Better Health of Kentucky</b>	00515
*Medicaid Plans	

### Glassman Plans

For details, see "[Glassman](#)" on page 20.

Plan Name	Plan ID
<b>Best Life and Health</b>	00257
<b>AFTRA Health Fund</b>	00258

### Molina Healthcare Plans

For details, see "[Molina Healthcare](#)" on page 26.

Plan Name	Plan ID
<b>Molina CA (California)</b>	00222
<b>Molina FL (Florida)</b>	00506
<b>Molina MI (Michigan)</b>	00226
<b>Molina NM (New Mexico)</b>	00071
<b>Molina OH (Ohio)</b>	00445
<b>Molina TX (Texas)</b>	00451
<b>Molina UT (Utah)</b>	00227
<b>Molina WA (Washington)</b>	00228
<b>Molina WI (Wisconsin)</b>	00516

## Principal Financial Plans

For details, see "[Principal Financial](#)" on page 30.

<b>Plan Name</b>	<b>Plan ID</b>
<b>Principal Financial Life Insurance Company of America</b>	00143
<b>Principal Financial – Nippon Life Insurance Company of America</b>	00144

## Appendices

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### Appendix A: Reference Guides

Guide Name	Link
<b>Common Response Abbreviations</b>	<a href="#">Common-Response-Abbreviations.pdf</a>
<b>Country Codes</b>	<a href="#">Country-Codes.pdf</a>
<b>Emdeon MAX User's Guide</b>	<a href="#">Emdeon-MAX-Users-Guide.pdf</a>
<b>Error Messages Dictionary</b>	<a href="#">Error-Messages-Dictionary.pdf</a>
<b>Insurance Types</b>	<a href="#">Insurance-Types.pdf</a>
<b>Payer Maintenance Schedule</b>	<a href="#">Payer-Maintenance-Windows.pdf</a>

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