

Use this guide as a reference tool when submitting professional claims. The information was current at the time of publication. We will announce changes on the Provider News Center and the Provider Engagement, Analytics & Reporting (PEAR) portal.

Prefix	Payer informatio Product name for electronic clair			Paper claim mailing address	Billing provider
		ISA-08	GS-03	mailing address	
	Keystone Health Plan East	Indepe	ndence		
QCG, YQG, XBU	Keystone Health Plan East POS				Valid and registered NPI is required. Electronic (837P) Loop 2010AA NM108 = XX NM109 = NPI # Paper (CMS-1500) NPI # – Box 33A
QCH, YQJ, XCA	Keystone Health Plan East HMO				
	Keystone 65 HMO				
	Keystone 65 Preferred HMO				
OCI VEC OWA	Keystone 65 Select HMO				
QCI, YPC, QWM	Keystone 65 Basic Rx HMO				
	Keystone 65 Liberty HMO				
	Keystone 65 Focus Rx HMO-POS				
QCJ, YPE, QWN	Local POS				
QCK, QAM	Keystone 65 HMO-POS				
QCL, YPG, QWE	Keystone Health Plan East ERISA HMO	54704	05050	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
QHX, QAC	Keystone HMO Proactive Individual – Off Exchange	54704	95056		
QSP, XRF	Keystone HMO Proactive Small Group				
QXJ, QND	Keystone HMO Proactive Individual – On Exchange				
	Keystone HMO Gold – On Exchange				
	Keystone HMO Silver Classic – On Exchange				
YXQ, QEB	Keystone HMO Silver Basic – On Exchange				
	Keystone HMO Bronze – On Exchange				
	Keystone HMO Gold Classic – On Exchange				
	Keystone HMO Gold – Off Exchange				
YXW, QBW	Keystone HMO Silver Classic – Off Exchange*				
	Keystone HMO Bronze – Off Exchange				

Prefix	Product name	Payer information for electronic claims		Paper claim	Billing provider
		ISA-08	GS-03	mailing address	
	Personal Choice®	Independence			
WYX, QAQ, QAZ	Personal Choice EPO – HSA			Claims Receipt Center 54704 P.O. Box 211184 Eagan, MN 55121	
YXF, XZJ, YQB	Personal Choice PPO				
YXK, XZK, YQC	Personal Choice 65 <sup>SM</sup> PPO				
	Personal Choice 65 Prime Rx PPO				
	Personal Choice 65 Saver Rx PPO				Valid and registered NPI is required. Electronic (837P) Loop 2010AA NM108 = XX NM109 = NPI # Paper (CMS-1500) NPI # – Box 33A
	Personal Choice 65 Elite Rx PPO				
	Personal Choice PPO Gold – Off Exchange				
YXO, QBJ	Personal Choice PPO Gold Preferred – Off Exchange				
TAO, QD0	Personal Choice PPO Silver – Off Exchange*	E 4704	F 4704		
	Personal Choice PPO Bronze – Off Exchange	54704	54704		
	Personal Choice PPO Gold – On Exchange				
	Personal Choice PPO Gold Preferred – On Exchange				
YXP, QBU	Personal Choice PPO Gold Classic – On Exchange				
	Personal Choice PPO Silver Classic – On Exchange				
	Personal Choice PPO Bronze – On Exchange				
YXX, QBY	Personal Choice EPO Catastrophic, Bronze Basic, Bronze Classic, and Bronze Reserve – On Exchange				
YXY, QBZ	Personal Choice EPO Catastrophic, Bronze Basic, Bronze Classic, and Bronze Reserve – Off Exchange				
	BlueCard <sup>®</sup>	Independence			
All National PPO Prefixes	PPO Professional Blue Cross or Blue Shield member ID card with "PPO" in a suitcase and a prefix not defined previously <sup>†‡</sup> Medicare Advantage PPO Blue Cross or Blue Shield member ID card with "MA PPO" in a suitcase and a prefix not defined previously	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	

Prefix	Product name	Payer information for electronic claims ISA-08 GS-03		Paper claim mailing address	Billing provider
	BlueHPN®	Independence			
All BlueHPN Prefixes	ID Card Front: BlueHPN members will be identified by the Blue High Performance Network name and the "BlueHPN in a suitcase" logo  ID Card Back: A disclaimer indicates that the member has limited benefits outside of BlueHPN product areas  Prefixes will be added to this grid, as assigned.	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	Valid and registered NPI is <b>required</b> . Electronic (837P) Loop 2010AA
	Blue Cross®	Independence			NM109 = NPI #
QMO, XCE, YQP	MedigapFreedom	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	Paper (CMS-1500) NPI # – Box 33A
	Blue Shield®	Highmark			
QCA, QZW, YQX QCC, QWC, YPA	Traditional Blue Cross <sup>®</sup> Blue Shield <sup>®</sup> Concurrent Major Medical	54771	Highmark Blue Shield 54771 54771 P.O. Box 890062 Camp Hill, PA 17089-0062		
QCE, QHY, QHV	Security 65®, 65 Special, and MedigapSecurity				
QCR	Medigap, Blue Cross only			, · · · · · · · · · · · · · · · · ·	
	Federal Blue Cross	Highmark			
R followed by 8 numeric characters	Federal Employee Program (FEP) member ID starts with an "R"	54771	54771	Highmark Blue Shield P.O. Box 890062 Camp Hill, PA 17089-0062	

Prefix	Product name	Payer information for electronic claims ISA-08 GS-03		Paper claim mailing address	Billing provider
	Third-party administrators	Independence Administrators			
Independence Administrators National PPO prefixes	Independence Administrators logo on the ID card with "PPO" in a suitcase and a prefix not defined previously  Independence Administrators  For additional claims information, visit <a href="www.ibxtpa.com/providers">www.ibxtpa.com/providers</a> .				
Independence Administrators Blue HPN prefixes	ID card front: Blue HPN members will be identified by the Blue High Performance Network name and the "Blue HPN in a suitcase" logo  ID card back: A disclaimer indicates that the member has limited benefits outside of Blue HPN product areas  Prefixes will be added to this grid, as assigned.  Independence Administrators For additional claims information, visit <a href="https://www.ibxtpa.com/providers">www.ibxtpa.com/providers</a> .	54704	TA720 or 54763	Independence Administrators c/o Processing Center P.O. Box 21974 Eagan, MN 55121	Valid and registered NPI is required. Electronic (837I) Loop 2010AA NM108 = XX NM109 = NPI # Paper (UB-04) NPI # – Box 56

<sup>\*</sup> This product is no longer offered as of 12/31/2023.

<sup>&</sup>lt;sup>†</sup> When treating Highmark members, professional claims must be submitted directly to Highmark.

<sup>&</sup>lt;sup>‡</sup> When treating non-Independence members, professional providers contracted with other local area Blue Cross and/or Blue Shield (BCBS) health plans (e.g., Capital Blue Cross and Horizon Blue Cross Blue Shield of New Jersey) must submit claims to the contracted BCBS health plan for the member based on their member ID card.