

Payer ID provider number reference — Facility

Use this guide as a reference tool when submitting facility claims. This information was current at the time of publication. We will announce changes on the Provider News Center.

Prefix	Product name	Payer information for electronic claims		Paper claim mailing address	Billing provider
		ISA-08	GS-03	manning audress	
	AmeriHealth [®] HMO	AmeriHealth			
Q1C, QC1	AmeriHealth – HMO	54704	95044	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
Q1P, QP1	AmeriHealth – POS, POS NG				
Q3A, QA0	AmeriHealth (in PA) – ERISA POS				
Q3B, QB0	AmeriHealth (in PA) – ERISA HMO				
Q3C, QC0	AmeriHealth (in PA) – HMO and Self-Funded HMO				
Q3P, QP0	AmeriHealth (in PA) – POS and Self-Funded POS				
	AmeriHealth PPO and Comprehensive Major Medical (CMM)	AmeriHealth			Valid and registered
Q1B, QB1	AmeriHealth – PPO, PPO HSA, EPO, EPO HSA, POS NG, AmeriHealth Advantage (formerly Community Advantage), and Hospital Advantage (formerly Tier 1 Advantage)	54704	60061	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	NPI is required. Electronic (837I) Loop 2010AA NM108 = XX NM109 = NPI # Paper (UB-04) NPI # – Box 56
Q1H, QH1	AmeriHealth – SEH CMM				
Q1E, QE1	AmeriHealth – AmeriHealth Medigap				
Q1L	AmeriHealth Medicare PPO				
Q1S, QS1	AmeriHealth – SEH EPO and AmeriHealth Advantage				
Q1T, QT1	AmeriHealth – CMM				
	AmeriHealth Administrators®	AmeriHealth Administrators			
Not applicable	AmeriHealth Administrators member ID is 10 digits long (8 digits for the subscription number, plus 2 more digits for each subscription member's identifier). (e.g., 123456789012) For additional claims information, visit <u>ahatpa.com/providers</u> .	54704	54763	AmeriHealth Administrators P.O. Box 21545 Eagan, MN 55121	