



CONNECTICUT OFFICE OF HEALTH STRATEGY

OUTPATIENT SURGICAL DATA

WEB PORTAL USER GUIDE

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<https://portal.ct.gov/OHS>

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Document Revision Log

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Document Revision Log:

| Version | Date | Published By | Version Notes |
|------------|---------|--------------|---|
| 1.0 | 05/2015 | DPH OHCA | Initial Release |
| 2.0 | 04/2016 | DPH OHCA | Updated ICD-10 diagnosis codes instructions Updated Appendix 2 with retired/new revenue codes Updated Appendix 3 with new payers |
| 3.0 | 06/2017 | DPH OHCA | Updated Appendix 3 with new payers Updated Appendix 4 with new sources of payment |
| 4.0 | 10/2019 | OHS | Update references of DPH OHCA to OHS. The Office of Health Care Access is now the Health Systems Planning Unit of the Office of Health Strategy (OHS) Update Appendix 1: Connecticut General Statutes Section 19a-654 Added 208 new payer codes & descriptions (in red from 000HPM to 00USV on page 57 Added 6 new payment source codes & descriptions (in red and on pages 58-60 Appendix 5 - eliminated |

Welcome

Welcome to the Office of Health Strategy Outpatient Surgical Data Web Portal User Guide. Connecticut General Statutes Section 19a-654, **Appendix 1**, requires licensed outpatient surgical facilities and hospital outpatient surgical departments to report patient identifiable encounter data beginning July 1, 2015 and thereafter, to the Office of Health Strategy (OHS).

OHS utilizes such data to fulfil its responsibilities such as assessing availability and utilization of health care services; evaluating unmet needs and gaps in services; developing and maintaining a statewide health care facilities and services plan; decision-making in certificate of need; and public health planning. The statute also authorizes OHS to provide access to the data to qualified entities and individuals.

Purpose of the User Guide

The goal of this instruction guide is to assist an authorized user to access the web portal/application, register, log on/off, retrieve a password or username, change a password, add/save/edit encounter records, enter and file data semi-annually. DPH grants access to the web portal/application through the State's virtual private network (VPN) and user login credentials.

Authorized User

An authorized user is a representative(s) of an outpatient surgical facility or hospital outpatient surgical department authorized to provide the facility's or department's patient identifiable data to OHS. The facility must be DPH licensed and the user, knowledgeable in and having access to one of the following internet browsers (Internet Explorer, Firefox or Google Chrome).

| Outpatient Data Web Portal Features | |
|-------------------------------------|--|
| Outpatient surgical data collection | Provides a simple and convenient method for adding, editing and filing outpatient patient data |
| Filing outpatient surgical data | Enables filings by January 2 and July 1 of each year |
| Payer lookup | Provides insurance information and enables adding unlisted payer information |

| Outpatient Data Web Portal Functionality | |
|--|---|
| Ability to upload outpatient information to OHS and complete on-line filings | Streamlined process |
| Access to portal with login credentials | http://dph-outpatient.ct.gov/ |

Upon completion of the guide, the user will be able to:

- Connect to the State's VPN
- Register as a new user on OHS's web portal/application
- Retrieve and change a password
- Navigate through the application
- Add new encounter records
- Save encounter records
- Edit existing encounter records
- Add/Search for payer information
- Export encounter entries to Excel spread sheet
- File/submit encounter data

1. Data Filing Requirements

Section 19a-654 of the Connecticut General Statutes (see Appendix 1) requires that beginning July 1, 2015 certain health care facilities submit patient-identifiable data to OHS. Facilities must provide six (6) months of historical patient demographic, clinical and financial data twice a year, July 1 and January 2 (or the first business day of the year).

The July data must include encounters that occur 10/1/ - 3/31 and January data must consist of encounters for 4/1 – 9/30.

DPH is providing two pathways for transmitting the data:

1. Secure file transfer protocols (SFTP) for file uploads – for large volume facilities or facilities that have the technical staff or a vendor to create a data file extract or export from the facility's patient medical record and billing system. The facility's authorized representative must upload the file extract onto the State's network using SFTP. Details for this process are provided in a separate document, the "Data File Upload User Guide."
2. Secure web portal for direct entry – for small or low volume facilities that lack the technical resources to create an automated data export. The office administrator or designated staff connects to the State's Virtual Private Network (VPN), registers and logs in to the web portal/application to key in and file the required patient data. All related instructions are provided in this guide.

OHS will utilize the contact information on the following page:

- To facilitate user access to the State's network;
- To confirm the user is the authorized and designated contact for the facility at registration;
- To facilitate securing and protecting the confidential data;
- As a medium for communicating with users regarding correcting errors in the data, system or process changes and updates; and
- To mail or prepare for pick up the VPN token assigned to the user.

Note: A State assigned VPN is required for a new user to access the State network. Fill out the form on the following page and fax or email it to the following contact:

| Contact | Phone/Fax | Email |
|---------------|--|--|
| OHS Help Desk | Phone: (860) 418-7001 Press Option 1 then 3 | HSP@ct.gov |

Outpatient Surgical Facility/Department Contact Information

Facility Information

Facility Name: Click here to enter text.

Address: Click here to enter text. Click here to enter text.
 • *Street Address* • *Suite/Unit #*

Click here to enter text. Click here to enter text. Click here to enter text.
 • *City* • *State* • *ZIP Code*

Facility Phone: Click here to enter text. Facility Fax: Click here to enter text.

Facility Email: Click here to enter text.

Office Administrator Contact Information

Office Admin: Click here to enter text. Click here to enter text. Click here to enter text.
 • *Last* • *First* • *M.I.*

Admin Phone: Click here to enter text.

Admin Email: Click here to enter text.

Primary Data Contact Information

(This refers to the technical staff or vendor responsible for configuring the data extract to be sent to DPH)

Data Contact: Click here to enter text.

Address: Click here to enter text. Click here to enter text.
 • *Street Address* • *Suite/Unit #*

Click here to enter text. Click here to enter text. Click here to enter text.
 • *City* • *State* • *ZIP Code*

Data Phone: Click here to enter text.

Data Email: Click here to enter text.

Method of Data Submission (Select One)

- SFTP - This method applies to larger facilities that have the technical staff or a vendor capable of creating a patient data export from the facility's record keeping system which can be directly uploaded to the Office of Health Strategy via Secure File Transport web client.
- VPN/Manual Entry* – This method applies to smaller facilities that lack the technical resources to create an automated data export. The office administrator, or other designated staff, would connect to the State's VPN, log in to the online data filing application and key in the patient data for submission.

2. Access to State's Virtual Private Network

OHS will email a new facility upon receipt of the filled contact form on page 2. The email will contain the facility's VPN credentials and set up instructions.

Approved credentials are required to access the State of Connecticut's Virtual Private Network (VPN) through the CISCO VPN client installation process at:

<https://portal.ct.gov/DAS/BEST/Security-Services/MultiFactor-Authentication/Documents>

Please read below if you have any problems with access:

- If there are questions or issues installing the VPN Client, please call your Desktop Support group according to their procedures or call OHS helpdesk at 860-418-7001 Press Option 1 then 3 or email HSP@ct.gov.

3. Login into OHS Web Portal/Application

A new user must register at <http://dph-outpatient.ct.gov/> in order to gain access to the web portal.

1. To begin registration, click on **Register** and complete all the required fields on the **Create a New Account** questionnaire.

The screenshot shows the 'Log On' page of the 'Outpatient Data Collection Web Portal'. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy'. To the right of the logo is the text 'DEPARTMENT OF PUBLIC HEALTH'. Below this, the page title 'Outpatient Data Collection Web Portal' is displayed. The main heading is 'Log On'. Below the heading, there is a prompt: 'Please enter your user name and password. Register if you do not have an account.' There are two input fields: 'User name' and 'Password'. Below these fields are two buttons: 'Log On' and 'Forgot Password'. At the bottom of the form area, there is a note: 'Please contact DPH Helpdesk or 860 509 7777 for assistance with retrieving username.' The footer of the page contains the copyright notice: '© 2015 - Department of Public Health/Office of Health care Access'.

2. It is very important that the user reviews the questionnaire, memorizes or writes down the user name and password before clicking on **Register**.

The screenshot shows the 'Create a New Account' page of the 'Outpatient Data Collection Web Portal'. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy'. To the right of the logo is the text 'DEPARTMENT OF PUBLIC HEALTH'. Below this, the page title 'Outpatient Data Collection Web Portal' is displayed. The main heading is 'Create a New Account'. Below the heading, there is a note: 'Note: Tab to advance to the next field and Enter to save the record.' The form consists of two columns of input fields. The left column includes: 'User name' (with a note: 'Choose a username that is 6-50 characters long.'), 'Password' (with a note: 'Your password must contain 8-100 characters. There must be at least 1 letter and 1 number.'), 'Confirm password' (with a note: 'Your must enter the same password as the Password field.'), 'First Name', 'Last Name', 'Phone Number' (with a note: 'No spaces or special characters'), 'Fax' (with a note: 'No spaces or special characters'), and 'Email address'. The right column includes: 'CT Facility License Id', 'National Provider Id', 'Medicare Provider Id', 'Facility Name', 'Facility Street Address', 'Facility City', 'Facility State', 'Facility Zipcode', 'Facility Authorizing Agent First Name', and 'Facility Authorizing Agent Last Name'. Below the form is a 'Facility Type' dropdown menu with 'Freestanding Center' selected. At the bottom of the page are two buttons: 'Register' and 'Back to LogOn Page'.

3. A welcome email is sent to the registered user email address.



From: NoReply@ct.gov [<mailto:NoReply@ct.gov>]
Sent: Friday, March 27, 2015 1:40 PM
To: OHCA-DL Data Submissions
Subject: New User Registration for DPH Outpatient data submission web portal

Dear Administrator,

The following user has registered in the DPH outpatient data submission web portal.

User Name :outpatient

Validate and verify the user credentials with appropriate authorized personal from the respective facility and approve the user.

4. OHS will contact the facility authorizing agent using the contact information given when the user registered. The approval is within 24 hours and a confirmation email is sent to the registered user.

Dear User,

Your OHS Outpatient data submission account has been approved

Use <http://dph-outpatient.ct.gov> for your data submission.

Your Username is : outpatient

Contact [OHS Helpdesk](#) or 860 418 7001 Press Option 1 then 3, if you have any questions.

4. Forgot User name/Password for Web Portal

1. If the user forgets the **User Name**, click on [DPH.Helpdesk](#).

Outpatient Data Collection Web Portal

Log On

Please enter your user name and password. [Register](#) if you do not have an account.

User name

Password

[Log On](#) [Forgot Password](#)

Please contact [DPH Helpdesk](#) at 860 509 7777 for assistance with retrieving username.

2. Complete the forgot username questionnaire providing the information used at initial registration. After the email is submitted a work order email is sent to the user confirming DPH has received the request. The username is emailed to the registered user within 24 hours.

Send

To... [HelpDesk, DPH](#)

CC...

Subject: [Forgot username Outpatient webportal](#)

User full name: |

User contact

phone number:

Facility name:

Facility Address:

CT facility license ID:

Facility authorizing agent full name:

Facility authorizing agent contact phone number:

3. If the user forgets his/her password click **Forgot Password**, enter the user name, and click **Submit**.

The screenshot shows the 'Forgot Password' page of the Outpatient Data Collection Web Portal. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy' and the text 'DEPARTMENT OF PUBLIC HEALTH'. The page title is 'Outpatient Data Collection Web Portal'. Below the title, the heading 'Forgot Password' is displayed. A message reads: 'Please enter your user name.' Below this is a text input field labeled 'User name'. At the bottom of the form area are two buttons: 'Submit' and 'Back to LogOn Page'. The footer contains the copyright notice: '© 2015 - Department of Public Health/Office of Health care Access'.

- a. A temporary password will be emailed to the registered user of the user name entered. Click on **Back to LogOn Page** to be redirected to the logon page.

This screenshot shows the 'Forgot Password' page after a user has submitted their information. The heading 'Forgot Password' is present. A message states: 'Your new password has been sent to the email address that you have provided to the OHCA at the time of registration.' Below the message is a single button labeled 'Back to LogOn Page'. The footer includes the copyright notice: '© 2015 - Department of Public Health/Office of Health care Access'.

- b. Enter the user name, the temporary password emailed and click on **Log On**.

The screenshot displays the 'Log On' page of the Outpatient Data Collection Web Portal. The page title is 'Outpatient Data Collection Web Portal'. The heading 'Log On' is at the top. A message reads: 'Please enter your user name and password. Register if you do not have an account.' Below this are two text input fields: 'User name' and 'Password'. At the bottom of the form area are two buttons: 'Log On' and 'Forgot Password'. A footer message says: 'Please contact DPH Helpdesk or 860 509 7777 for assistance with retrieving username.' The footer also contains the copyright notice: '© 2015 - Department of Public Health/Office of Health care Access'.

- c. Enter the **Current password**, **New password**, **re-type the new password** again to confirm and click **change password**.

The screenshot shows the 'Change Password' page. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy'. To the right is the text 'DEPARTMENT OF PUBLIC HEALTH'. Below this is the page title 'Outpatient Data Collection Web Portal'. The main heading is 'Change Password'. There are three input fields: 'Current password' with a green instruction 'Cut and paste the system generated password that you received in the email.', 'New password' with a green instruction 'Your password must contain 8-100 characters. There must be at least 1 letter and 1 number.', and 'Confirm new password' with a green instruction 'You must enter the same password as the Password field.'. A 'Change Password' button is at the bottom. The footer contains '© 2015 - Department of Public Health/Office of Health care Access'.

- d. The user is logged into the OHS outpatient web portal home page and can now add new or edit existing patient encounter information.

The screenshot shows the 'New / Edit Encounter Record' page. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy'. To the right is the text 'DEPARTMENT OF PUBLIC HEALTH'. Below this is the page title 'Outpatient Data Collection Web Portal'. A navigation bar contains 'Encounter' (highlighted), 'Payer Lookup', 'Filings', 'Change Password', and 'Log Off'. The main heading is 'New / Edit Encounter Record'. A green note says 'Note: Tab to advance to the next field and Enter to save the record.'. There are three input fields: 'Medical Record Number', 'Patient Control Number', and 'Date of Service (MM/DD/YYYY)' with a calendar icon. Below these are 'New record' and 'Edit existing record' buttons. A 'Notes:' section contains five numbered instructions: 1. Use this screen to enter a new record or edit an existing record. 2. Data entry may be made and saved on a daily basis. 3. Data submissions or filings are to be made by January 2 and July 1 of each year. 4. The January 2 filings should contain all individual encounters occurring from April 1 through September 30 of the prior year. 5. The July 1 submissions or filing should contain all individual encounters occurring from October 1 of the prior year through March 31 of the current year.

5. Adding a New Encounter

1. A new encounter is determined by the patient **Medical Record Number**, **Patient Control Number**, and **Date of Service**. To input the patient's demographic, clinical and charge information for a new encounter click on **New record** to proceed.

The screenshot shows the 'Outpatient Data Collection Web Portal' with a navigation bar containing 'Encounter', 'Payer Lookup', 'Filings', 'Change Password', and 'Log Off'. The main content area is titled 'New / Edit Encounter Record' and includes a note: 'Note: Tab to advance to the next field and Enter to save the record.' Below this are three input fields: 'Medical Record Number', 'Patient Control Number', and 'Date of Service (MM/DD/YYYY)'. At the bottom of these fields are two buttons: 'New record' and 'Edit existing record'. A 'Notes' section follows, listing five instructions regarding data entry and filing deadlines.

2. Complete the following fields before saving **Patient Encounter Information**. When the required fields are full-filled click on **Save**.

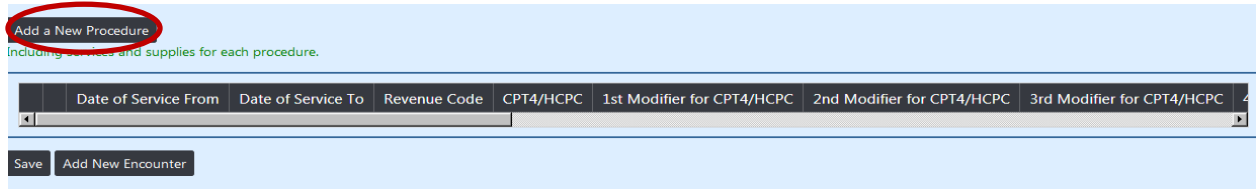
| | | |
|---------------------------|---|-------------------------|
| Last Name | First Name | DOB |
| Sex | Ethnicity | Race |
| Address Line1 | City | State |
| Zip code | Total Charges | Relationship to Insured |
| Point Of Origin For Visit | Marital Status | Employment Status |
| Discharge Status | Diagnosis Code 1 *(at least 1 out of 10 diagnosis codes shall be filled in) | |

The screenshot shows the 'Add New Patient Encounter Information' form. It features a navigation bar with 'Encounter', 'Payer Lookup', 'Filings', 'Change Password', and 'Log Off'. The form title is 'Add New Patient Encounter Information' with a note: 'Note: Tab to advance to the next field and Enter to save the record.' The form contains several fields: 'Medical Record Number' (9999999), 'Patient Control Number' (9999999), and 'Date of Service' (03/31/2015). Below these are fields for 'Last Name', 'First Name', and 'MI'. There are dropdown menus for 'Sex', 'Ethnicity', and 'Race'. Other fields include 'SSN (No spaces or hypens)', 'DOB (MM/DD/YYYY)', 'Address Line1', 'Address Line2', 'City', 'State', 'Zipcode', and 'Ext.'. At the bottom, there are fields for 'Total Charges' (0) and 'BillType' (0831).

6. Adding a New Encounter Procedure

A procedure is a Current Procedural Terminology (CPT) surgical procedure received during an encounter.

1. Click on **Add a New Procedure** to add the procedures performed on the patient during an encounter.

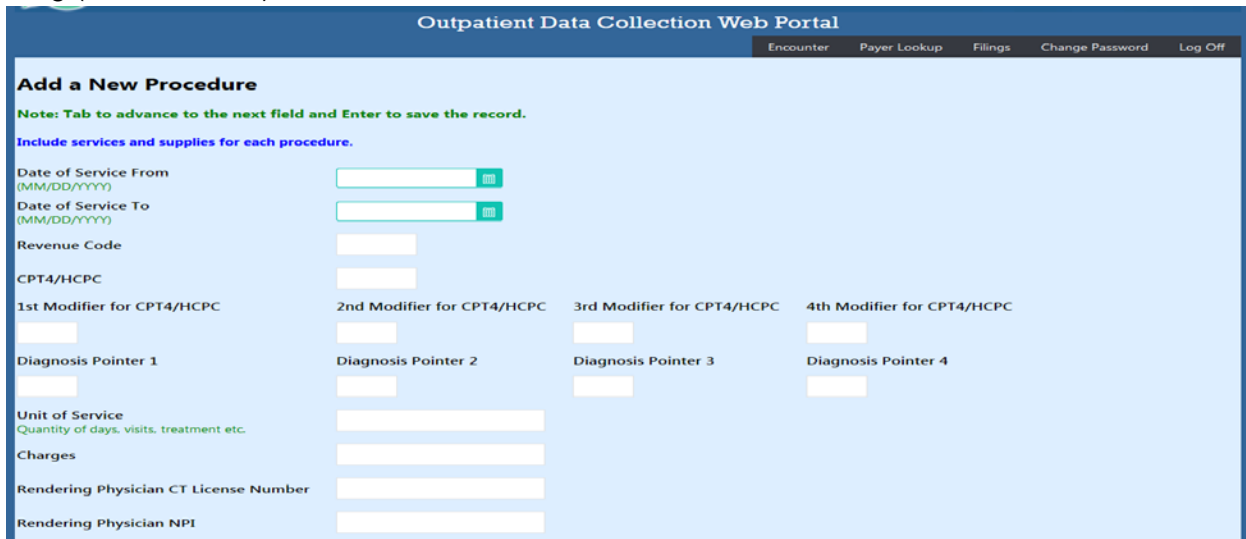


The screenshot shows a button labeled "Add a New Procedure" circled in red. Below the button is a note: "Including services and supplies for each procedure." Below the note is a table with columns: "Date of Service From", "Date of Service To", "Revenue Code", "CPT4/HCPC", "1st Modifier for CPT4/HCPC", "2nd Modifier for CPT4/HCPC", and "3rd Modifier for CPT4/HCPC". At the bottom of the form are two buttons: "Save" and "Add New Encounter".

2. Complete the following fields before saving the New Procedure Information.

| | | |
|-------------------------|----------------------|---------------------------------------|
| Date of Service From | Date of Service From | CPT4/HCPC |
| Unit of Service | Charges | Rendering Physician CT License Number |
| Rendering Physician NPI | | |

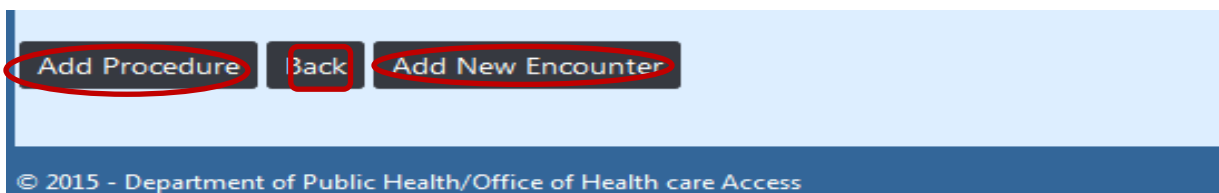
When the required fields are filled, click **Add Procedure** to save the entry. There is no limit on the number of new procedures that may be entered. Each entry is saved to a DPH holding database. DPH cannot access the data until the user clicks on the **Filings** tab and submits a filing (see Section 9).



The screenshot shows the "Outpatient Data Collection Web Portal" with a navigation bar containing "Encounter", "Payer Lookup", "Filings", "Change Password", and "Log Off". The main heading is "Add a New Procedure". Below the heading is a note: "Note: Tab to advance to the next field and Enter to save the record." and a sub-note: "Include services and supplies for each procedure." The form contains the following fields:

- Date of Service From (MM/DD/YYYY)
- Date of Service To (MM/DD/YYYY)
- Revenue Code
- CPT4/HCPC
- 1st Modifier for CPT4/HCPC
- 2nd Modifier for CPT4/HCPC
- 3rd Modifier for CPT4/HCPC
- 4th Modifier for CPT4/HCPC
- Diagnosis Pointer 1
- Diagnosis Pointer 2
- Diagnosis Pointer 3
- Diagnosis Pointer 4
- Unit of Service (Quantity of days, visits, treatment etc.)
- Charges
- Rendering Physician CT License Number
- Rendering Physician NPI

3. To add another procedure click **Add Procedure**. To go back to the procedure information click **Back**. To begin adding information for another patient encounter click **Add New Encounter**.



The screenshot shows three buttons: "Add Procedure", "Back", and "Add New Encounter". The "Add Procedure" and "Add New Encounter" buttons are circled in red. Below the buttons is a copyright notice: "© 2015 - Department of Public Health/Office of Health care Access".

7. Editing or Deleting Encounter Procedures

Edit Procedure

Edit Procedure is located at the bottom of Patient encounter information page and is applicable to the current record. Edit allows the user to update an existing stored encounter.

ICD Version Ind. 10

ICD9 - Diagnosis codes are 5 character alpha-numeric values without decimal points, e.g. 473.0 becomes 47300 or 066.1 becomes 06610.
 ICD10 - Diagnosis codes are 3-7 alpha-numeric characters without decimal places, e.g. S86.001A becomes S86001A

Diagnosis Code 1 Diagnosis Code 2 Diagnosis Code 3 Diagnosis Code 4 Diagnosis Code 5

Diagnosis_Code6 Diagnosis Code 7 Diagnosis Code 8 Diagnosis Code 9 Diagnosis Code 10

ICD9 - External Cause must be between E8000 to E9999. E8490 - E8499 and E9390 - E9499 are Invalid External Cause.
 ICD10 - External cause must be between V00-Y99.

External Cause 1 External Cause 2 External Cause 3

Add a New Procedure
 Including services and supplies for each procedure.

| | | Date of Service From | Date of Service To | Revenue Code | CPT4/HCPC | 1st Modifier for CPT4/HCPC | 2 |
|--|--------|----------------------|--------------------|--------------|-----------|----------------------------|----|
| Edit | Delete | 04/12/2016 | 04/12/2016 | 490 | 45453 | t1 | r3 |

1. Click **Edit** to open the procedure page.

Add a New Procedure
 Including services and supplies for each procedure.

| | | Date of Service From | Date of Service To | Revenue Code | CPT4/HCPC | 1st Modifier for CPT4/HCPC | 2 |
|--|--------|----------------------|--------------------|--------------|-----------|----------------------------|---|
| Edit | Delete | 04/12/2016 | 04/12/2016 | 490 | 45453 | | |

Save Add New Encounter

2. Update the Edit Procedure page and click on **Save**

Edit Procedure

Note: Tab to advance to the next field and Enter to save the record.

Include services and supplies for each procedure.

Medical Record Number: 04082016A Patient Control Number: 04082016A Date of Service: 04/12/2016

Date of Service From (MM/DD/YYYY) OK

Date of Service To (MM/DD/YYYY) OK

Revenue Code

CPT4/HCPC

1st Modifier for CPT4/HCPC 2nd Modifier for CPT4/HCPC 3rd Modifier for CPT4/HCPC 4th Modifier for CPT4/HCPC

Diagnosis Pointer 1 Diagnosis Pointer 2 Diagnosis Pointer 3 Diagnosis Pointer 4

Unit of Service (Quantity of days, visits, treatment etc.)

Charges

Rendering Physician CT License Number

Rendering Physician NPI

Save Back

Edit Procedures for Multiple Encounters

Click on Encounter tab at top of the page and continue with process described in **Section 8: Editing an Existing encounter** for each encounter.

Edit Patient Encounter Information

Note: Tab to advance to the next field and Enter to save the record.

Please add the associated procedures for the encounter at the bottom of the page.

Medical Record Number: 777777 Patient Control Number: 777777 Date of Service (MM/DD/YYYY) 04/01/2014

Last Name: Barbara DPH First Name: Ocho Runn MI: m

Sex: [Redacted] SSN: (No spaces or hyphens)

Delete Procedure

The delete procedure is located at the bottom of Patient encounter information and is applicable to the current record. Delete allows the user to delete an existing stored encounter.

1. Select the procedure from the list and click **Delete**.

Add a New Procedure

Including services and supplies for each procedure.

| | | Date of Service From | Date of Service To | Revenue Code | CPT4/HCPC | 1st Modifier for CPT4/HCPC | 2nd Modifier for CPT4/HCPC | 3rd Modifier for CPT4/HCPC |
|------|--------|----------------------|--------------------|--------------|-----------|----------------------------|----------------------------|----------------------------|
| Edit | Delete | 04/01/2015 | 04/02/2015 | | 12354 | u | u | o |
| Edit | Delete | 02/03/2015 | 02/24/2015 | | 32332 | r | y | |

Save Add New Encounter

2. Click on **Delete** to confirm and remove the procedure off the DPH database. Click **Back** to cancel the delete request.

Edit Procedure

Are you sure you want to delete the following procedure?

Date of Service From: 04/01/2015
Date of Service To: 04/02/2015
Revenue Code:
CPT4/HCPC: 12354
1st Modifier for CPT4/HCPC: u
2nd Modifier for CPT4/HCPC: u
3rd Modifier for CPT4/HCPC: o
4th Modifier for CPT4/HCPC: l
Diagnosis Pointer 1: 9
Diagnosis Pointer 2: 4
Diagnosis Pointer 3: 6
Diagnosis Pointer 4: 7
Unit of Service: 2
Charges: 2000.00
Rendering Physician CT License Number: 101010101
Rendering Physician NPI: 101010101

Delete Back

8. Edit Existing Encounter

Edit allows the user to update an existing stored patient Encounter Information.

1. Click on **Encounter** tab, fill in the required fields (**Medical Record Number** and **Patient Control Number**) and click on **Edit existing record**.

DPH Keeping Connecticut Healthy DEPARTMENT OF PUBLIC HEALTH

Outpatient Data Collection Web Portal

Encounter Payer Lookup Filings Change Password Log Off

New / Edit Encounter Record

Note: Tab to advance to the next field and Enter to save the record.

- The Medical Record Number field is required.
- The Patient Control Number field is required.

Medical Record Number


Patient Control Number

Date of Service
(MM/DD/YYYY)

Notes:

1. Use this screen to enter a new record or edit an existing record.
2. Data entry may be made and saved on a daily basis.
3. Data submissions or filings are to be made by January 2 and July 1 of each year.
4. The January 2 filings should contain all individual encounters occurring from April 1 through September 30 of the prior year.
5. The July 1 submissions or filing should contain all individual encounters occurring from October 1 of the prior year through March 31 of the current year.

- When the updates have been completed, click **Save** and the patient encounter record is updated.


DEPARTMENT OF PUBLIC HEALTH

Outpatient Data Collection Web Portal

[Encounter](#) | [Payer Lookup](#) | [Filings](#) | [Change Password](#) | [Log Off](#)

Edit Patient Encounter Information

Note: Tab to advance to the next field and Enter to save the record.

Please add the associated procedures for the encounter at the bottom of the page.

Encounter updated successfully.

Medical Record Number: 4444NYL Patient Control Number: 4444NYL Date of Service (MM/DD/YYYY)

Last Name: First Name: MI:

Sex: Male SSN (No spaces or hyphens):

Ethnicity: Non-Hispanic/Non-Latino DOB (MM/DD/YYYY):

Race: Black/African American

Address Line1: Address Line2:

City: State: Zipcode: Ext.:

Total Charges (only positive whole dollar amounts): BillType:

ICD Version Ind.

Diagnosis codes are 5 character alpha-numeric values without decimal points, e.g. 473.0 becomes 47300 or 066.1 becomes 06610.

Diagnosis Code 1: Diagnosis Code 2: Diagnosis Code 3: Diagnosis Code 4: Diagnosis Code 5:

Diagnosis Code 6: Diagnosis Code 7: Diagnosis Code 8: Diagnosis Code 9: Diagnosis Code 10:

Add a New Procedure

Including services and supplies for each procedure.

| | | Date of Service From | Date of Service To | Revenue Code | CPT4/HCPC | 1st Modifier for CPT4/HCPC | 2nd Modifier for CPT4/HCPC | 3rd Modifier for CPT4/HCPC |
|------|--------|----------------------|--------------------|--------------|-----------|----------------------------|----------------------------|----------------------------|
| Edit | Delete | 02/03/2015 | 03/10/2015 | | 56235 | | | |

Save Add New Encounter

9. Filing outpatient data

Filings must be submitted by January 2 (or the first business day of the year) and July 1 of each year.

January 2 filings must contain all individual encounters with Date of Service from April 1 through September 30 of the prior year.

July 1 filings must contain all individual encounters with Date of Service from October 1 of the prior year through March 31 of the current year.

Filing example:

January 2, 2015 filing must contain encounters from April 1, 2014 – September 30, 2014.


July 1, 2015 filing must contain encounters from October 1, 2014 – March 31, 2015.

Click on the **Filings** Tab to submit a January or July filing.

The screenshot displays the 'Outpatient Data Collection Web Portal' interface. At the top left is the DPH logo with the tagline 'Keeping Connecticut Healthy'. The header includes 'DEPARTMENT OF PUBLIC HEALTH' and 'Outpatient Data Collection Web Portal'. A navigation bar contains links for 'Encounter', 'Payer Lookup', 'Filings' (circled in red), 'Change Password', and 'Log Off'. The main content area is titled 'Encounter data period being reported' and features radio buttons for 'January Filing' and 'July Filing', along with 'Preview' and 'Submit' buttons. Below this is a 'Notes' section with three numbered instructions regarding submission deadlines and data periods. The 'Preview Data' section includes an 'Export To Excel' button and a table with columns: MRN, Control #, Last Name, First Name, MI, SSN, Date of Birth, Sex, Ethnicity, Race, PatientEncounter Id, Address Line1, Address Line2, City, State, and Zip. The table currently shows 'No items to display'.

Preview Filings

To preview encounters entered for April 1 through September 30 click on **January Filing** and then **Preview**.


DEPARTMENT OF PUBLIC HEALTH

Outpatient Data Collection Web Portal

Encounter
Payer Lookup
Filings
Change Password
Log Off

Encounter data period being reported for fiscal year 2015

| | |
|---|-----------------------------------|
| <input checked="" type="radio"/> January Filing | <input type="radio"/> July Filing |
|---|-----------------------------------|

Preview
Submit

Notes:

1. Data submissions or filings are to be made by January 2 and July 1 of each year.
2. The January 2 filings should contain all individual encounters occurring from April 1 through September 30 of the prior year.
3. The July 1 submissions or filing should contain all individual encounters occurring from October 1 of the prior year through March 31 of the current year.

Preview Data

Export To Excel

| MRN | Control # | Last Name | First Name | MI | SSN | Date of Birth | Sex | Ethnicity | Race | PatientEncounter Id | Address Line1 | Address Line2 | City | Sta |
|---------------|---------------|-------------|-------------|----|-----------|---------------|-----|-----------|------|---------------------|-----------------|---------------|----------|-----|
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 152 | 410 capital ave | | Hartford | c |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 164 | 410 capital ave | | Hartford | c |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 92 | 410 capital ave | | Hartford | c |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 80 | 410 capital ave | | Hartford | c |
| 999999999I | 999999999I | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 68 | 410 capital ave | | Hartford | c |
| 999999999 | 999999999 | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 56 | 410 capital ave | | Hartford | c |
| 88888888HHNYL | 88888888HHNYL | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 139 | 410 capital ave | | Hartford | CT |
| 88888888HHNYL | 88888888HHNYL | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 151 | 410 capital ave | | Hartford | CT |
| 88888888HHNYL | 88888888HHNYL | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 163 | 410 capital ave | | Hartford | CT |
| 88888888HH | 88888888HH | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 79 | 410 capital ave | | Hartford | CT |

To preview encounters entered from October 1 through March 31 click on **July Filing** and then **Preview**.

The screenshot shows the 'Outpatient Data Collection Web Portal' interface. At the top, there are navigation tabs: 'Encounter', 'Payer Lookup', 'Filings', 'Change Password', and 'Log Off'. The 'Filings' tab is active. Below the navigation, a message states 'Encounter data period being reported for fiscal year 2015'. There are two radio buttons for filing periods: 'January Filing' and 'July Filing'. The 'July Filing' radio button is selected and circled in red. Below the radio buttons are 'Preview' and 'Submit' buttons, with the 'Preview' button also circled in red. A 'Notes' section contains three numbered instructions regarding submission deadlines and data periods. Below the notes is a 'Preview Data' section with an 'Export To Excel' button and a table of patient encounters.

| MRN | Control # | Last Name | First Name | MI | SSN | Date of Birth | Sex | Ethnicity | Race | PatientEncounter Id | Address Line1 | Address Line2 | City |
|--------------|--------------|-------------|-------------|----|-----------|---------------|-----|-----------|------|---------------------|-----------------|---------------|----------|
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 236 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 248 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 264 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 324 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 212 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 200 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 185 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 176 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 305 | 410 Capital Ave | | Hartford |
| 888888888NYL | 888888888NYL | Mango | Diane | m | 777777777 | 08/08/2008 | F | 2 | 1 | 235 | 410 capital ave | | Hartford |

The previewed encounters may be exported into an Excel spreadsheet. To export, click on **Export To Excel** and save the file. It is recommended to export the encounters before submitting your filing.

This screenshot shows the same web portal interface as the previous one, but with the 'Export To Excel' button highlighted with a red circle. A file dialog box titled 'Opening GridExcelExport.xls' is open in the foreground. The dialog shows the file name 'GridExcelExport.xls', its size (17.5 KB), and the source URL (http://dph-outpatient.ct.gov). It asks 'What should Firefox do with this file?' and has 'Open with Microsoft Excel (default)' selected. There are 'OK' and 'Cancel' buttons at the bottom of the dialog. The table below the dialog shows a different set of patient encounters.

| MRN | Control # | Last Name | First Name | MI | SSN | Date of Birth | Sex | Ethnicity | Race | PatientEncounter Id | Address Line1 | Address Line2 | City | State | Zipcode |
|--------------|--------------|-------------|------------|----|-----------|---------------|-----|-----------|------|---------------------|------------------|---------------|----------|-------|---------|
| 88077 | Gh67832 | Bunny | Brown | | 674355365 | 03/13/1973 | F | 2 | 2 | 294 | 410 capital aven | | Hartford | CT | 06112 |
| 7777777GGNYL | 7777777GGNYL | Barbara DPH | Ocho Runn | m | 777777777 | 03/01/2015 | F | 1 | 2 | 270 | 410 capital ave | | Hartford | CT | 06112 |
| 666666FFNYL | 666666FFNYL | sti | cha | m | 777777777 | 02/01/2014 | M | 1 | 5 | 257 | 410 capital ave | | Hartford | CT | 06112 |
| 555555ENYL | 555555ENYL | lyn | Luke | m | 777777777 | 03/01/2015 | M | 1 | 2 | 244 | 410 capital ave | | Hartford | CT | 06112 |
| 4444NYL | 4444NYL | lyn | omar | m | 777777777 | 03/01/2015 | M | 2 | 2 | 231 | 410 capital ave | | Hartford | CT | 06115 |
| 333CCCC | 333CCCC | John | Doe | m | 777777777 | 03/02/2015 | M | 1 | 4 | 218 | 410 Capital Ave | | Hartford | ct | 06134 |
| 2288B | 2288B | lyn | omar | m | 777777777 | 01/14/1998 | M | 2 | 2 | 205 | 410 Capital Ave | | Hartford | ct | 06112 |

Submitting January Filing

1. Submit the January filing by selecting **January filing** and clicking **Submit**.

The screenshot shows the 'Outpatient Data Collection Web Portal' interface. At the top, there is a navigation bar with 'Encounter', 'Payer Lookup', 'Filings', 'Change Password', and 'Log Off'. Below this, a message states 'Encounter data period being reported for fiscal year 2015'. A form allows selecting the filing period, with 'January Filing' selected and circled in red. Below the form are 'Preview' and 'Submit' buttons, with 'Submit' also circled in red. A 'Notes' section provides instructions on filing deadlines. A 'Preview Data' section includes an 'Export To Excel' button and a table of patient data.

| MRN | Control # | Last Name | First Name | MI | SSN | Date of Birth | Sex | Ethnicity | Race | PatientEncounter Id | Address Line1 | Address Line2 | City | Sta |
|-----------------|-----------------|-------------|-------------|----|-----------|---------------|-----|-----------|------|---------------------|-----------------|---------------|----------|-----|
| 999999999IIINYL | 999999999IIINYL | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 152 | 410 capital ave | | Hartford | c |
| 999999999IIINYL | 999999999IIINYL | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 184 | 410 capital ave | | Hartford | c |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 92 | 410 capital ave | | Hartford | c |
| 999999999II | 999999999II | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 80 | 410 capital ave | | Hartford | c |
| 999999999I | 999999999I | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 68 | 410 capital ave | | Hartford | c |
| 999999999 | 999999999 | Barbara DPH | Wine coolan | m | 111111111 | 10/10/2014 | F | 2 | 4 | 56 | 410 capital ave | | Hartford | c |
| 88888888HHNYL | 88888888HHNYL | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 139 | 410 capital ave | | Hartford | CT |
| 88888888HHNYL | 88888888HHNYL | Mango | Diane | m | 111111111 | 08/08/2008 | F | 2 | 1 | 151 | 410 capital ave | | Hartford | CT |

2. The January filing has successfully been filed with DPH, which will notify the outpatient facility with the results for any required error corrections, fifteen (15) business days from when filings closed.

The screenshot shows the 'Submit Summary' section of the portal. It displays a confirmation message: 'Outpatient data filing successful. DPH will notify you with data review results within 15 business days. Thank you for the filing.'

3. The following confirmation email will be sent to the registered user confirming the filing.

From: NoReply@ct.gov [mailto:NoReply@ct.gov]
Sent: Monday, April 13, 2015 11:54 AM
To: Lyn, Omar
Subject: Outpatient data filing process

Dear User,

Outpatient filing for the period from 4/1/2014 and 9/30/2014 has been submitted to DPH/OHCA successfully.

Submitting July Filing

1. Submit the July filing by selecting **July filing** and clicking **Submit**.

DPH Keeping Connecticut Healthy DEPARTMENT OF PUBLIC HEALTH
Outpatient Data Collection Web Portal

Encounter Payer Lookup **Filings** Change Password Log Off

Encounter data period being reported for fiscal year 2015

January Filing July Filing

Preview **Submit**

Notes:

1. Data submissions or filings are to be made by January 2 and July 1 of each year.
2. The January 2 filings should contain all individual encounters occurring from April 1 through September 30 of the prior year.
3. The July 1 submissions or filing should contain all individual encounters occurring from October 1 of the prior year through March 31 of the current year.

Preview Data

Export To Excel

| MRN | Control # | Last Name | First Name | MI | SSN | Date of Birth | Sex | Ethnicity | Race | PatientEncounter Id | Address Line1 | Address Line2 | City |
|--------------|--------------|-------------|-------------|----|-----------|---------------|-----|-----------|------|---------------------|-----------------|---------------|----------|
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 236 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 248 | 410 capital ave | | Hartford |
| 999999999NYL | 999999999NYL | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 284 | 410 capital ave | | Hartford |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 224 | 410 capital ave | | Hartford |
| 999999999III | 999999999III | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 212 | 410 capital ave | | Hartford |
| 999999999II | 999999999II | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 200 | 410 capital ave | | Hartford |
| 999999999I | 999999999I | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 188 | 410 capital ave | | Hartford |
| 999999999 | 999999999 | Barbara DPH | Wine coolan | m | 777777777 | 10/10/2014 | F | 2 | 4 | 176 | 410 capital ave | | Hartford |
| liqulyu | 888liuh | Liz | McBeth | | 855467464 | 02/16/1960 | M | 2 | 3 | 305 | 410 Capital Ave | | Hartford |

2. The July filing has successfully been filed with DPH, which will notify the outpatient facility with the results for any required error corrections, fifteen (15) business days from when filings closed.

DPH Keeping Connecticut Healthy DEPARTMENT OF PUBLIC HEALTH
Outpatient Data Collection Web Portal

Encounter Payer Lookup **Filings** Change Password Log Off

Submit Summary

Outpatient data filing successful. DPH will notify you with data review results within 15 business days. Thank you for the filing.

3. A confirmation email is sent to the registered user confirming the filing has been received by OHS.

From: NoReply@ct.gov [mailto:NoReply@ct.gov]
Sent: Monday, April 13, 2015 11:54 AM
To: Lyn, Omar
Subject: Outpatient data filing process

Dear User,

Outpatient filing for the period from 10/1/2014 and 3/31/2015 has been submitted to DPH/OHCA successfully.

10. Adding a New Payer

Payer Lookup

1. The payer lookup provides the identification and description of insurance companies. Click on **Payer Lookup** to display the list.




DPH Keeping Connecticut Healthy DEPARTMENT OF PUBLIC HEALTH
Outpatient Data Collection Web Portal

Payers Lookup

Close the window to go back to the encounter data entry screen.
To search for payer click on the right hand corner of the header column to get the filter popup screen.

| Payer_ID | Payer_Description |
|----------|--------------------------------|
| 00000 | NOT APPLICABLE |
| 00005 | AETNA CASUAL & SURETY OF AMER |
| 00006 | AETNA CASUAL & SURETY OF ILL |
| 00007 | AETNA INSURANCE COMPANY |
| 00008 | AETNA INC. |
| 00009 | AETNA LIFE INSURANCE CO |
| 00012 | AGWAY INSURANCE CO |
| 00013 | AID ASSOC FOR LUTHERANS |
| 00014 | ALEX HAMILTON LIFE INS OF AMER |
| 00016 | ALL AMERICAN LIFE INS CO |
| 00018 | ALLSTATE INSURANCE CO. |
| 00019 | ALLSTATE LIFE INSURANCE CO |
| 00021 | AMALGAMATED LIFE |

1 - 13 of 1486 items

2. Each column has a search filter to search the payer's table. Click on the funnel icon  to display the search options within the columns (e.g. is equal to, is not equal to, start with, contains, does not contains or ends with). Use And/Or if there are multiple conditions and are they inclusive or exclusive.

The results are filtered by clicking on **Filter** to display the results list. The filter is cleared by clicking on **Clear** to reset filter.

Show items with value that:

Is equal to

00007

And

Is equal to

Filter Clear

3. If the payer information is not found in the drop down menu of the **Primary Payer ID & Description** when adding an encounter, the user may add the Primary, Secondary, or Tertiary payer information to the payer table. The entered data is stored for future usage. It is required to provide a valid **identification number**, the **insured name**, and **national health plan number** for an unlisted payer.

| Primary Payer ID & Description | Secondary Payer ID & Description | Tertiary Payer ID & Description |
|--|--|--|
| 00012-AGWAY INSURANCE CO | 00000-NOT APPLICABLE | 00000-NOT APPLICABLE |
| Payer Lookup ; If the payer does not exist in the Lookup table select "00999 - OTHER (UNLISTED INSURANCE)" and provide Payer ID and Payer Description as follows: | Payer Lookup ; If the payer does not exist in the Lookup table select "00999 - OTHER (UNLISTED INSURANCE)" and provide Payer ID and Payer Description as follows: | Payer Lookup ; If the payer does not exist in the Lookup table select "00999 - OTHER (UNLISTED INSURANCE)" and provide Payer ID and Payer Description as follows: |
| ID | ID | ID |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Description | Description | Description |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| National Health Plan ID1 | National Health Plan ID2 | National Health Plan ID3 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

11. Data Edits, Error Notification and Correction

1. Data fields definitions and error checking adopted in the web portal/application conform to current standards and definitions, as from time to time amended, of the following:
 - a. National Uniform Billing Committee (NUBC) UB-04 or CMS 1450 Uniform Billing Manual;
 - b. National Uniform Claim Committee (NUCC) 1500 Claim Form Instruction Manual;
 - c. Accredited Standards Committee X12 (ASC X12) Health Care Claim: Professional (837P);
 - d. Accredited Standards Committee X12 (ASC X12) Health Care Claim: Institutional (837I);
 - e. Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS) International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM);
 - f. Physician's Current Procedural Terminology (CPT®) of the American Medical Association;
 - g. Centers for Medicare and Medicaid (CMS) Common Procedure Coding System (HCPCS)
 - h. NCHS, Centers for Disease Control and Prevention (CDC) Source of Payment Typology Codes;
 - i. ICD-10-CM Official Guidelines for Coding and Reporting;
 - j. CMS Medicare Code Editor (MCE) Guidelines;
 - k. CMS Medicare Outpatient Code Editor (OCE);
 - l. CMS National Correct Coding Initiative Policy Manual for Medicare Services; and
 - m. The Health Insurance Portability and Accountability Act (HIPAA).

2. Rules for diagnosis coding¹

Adhere to the Official Guidelines, a summary of which is as follows:

- a. Record reported diagnosis and complications according to the conventions governing the coding of diagnoses for same day or outpatient surgeries and as contained in the most current version of the International Classification of Diseases, 10th Revision, Clinical Modification ("ICD-10-CM") and general and disease specific guidelines.
- b. Identify diagnoses, symptoms, conditions, problems, complaints and other reason(s) for the encounter/visit with the appropriate code(s) from A00.0 through T88.9, Z00-Z99.
- c. First listed condition or principal diagnosis and complications refer to diagnoses that affect the encounter.
- d. The first listed condition or principal diagnosis refers to the reason the patient presented for surgery even if the surgery was not performed due to a contraindication.

¹ ICD-10-CM Official Guidelines for Coding and Reporting

- e. Complications or secondary diagnoses refer to those conditions, exclusive of the principal diagnosis which exist at the time of the encounter or develop after the patient presents for outpatient surgery and require admission to observation.
- f. For a confirmed diagnosis, if the postoperative diagnosis is different from the preoperative diagnosis, then report the postoperative diagnosis as the principal diagnosis.
- g. Code diagnoses in the most specific category available for that diagnosis at the time of the encounter. Do not assign a less specific diagnosis if a more specific code is available for that diagnosis.
- h. Diagnosis codes must be the unique and valid highest number of characters ICD-10-CM codes. Enter diagnosis codes as a 3-7 character code. The 1st is always alpha and uses all letters except U; the 2nd character is numeric; and the 3rd to 7th characters can be alpha or numeric; alpha characters are not case sensitive and decimal points are to be implied, not explicit.
- i. Record all diagnoses consistent with what is on the patient's bill or medical record for the encounter. For a given encounter if there are more than nine unique secondary diagnoses on either the bill or medical record, then report nine diagnoses on the data record. If there are fewer than nine unique secondary diagnoses on both the patient's bill and encounter abstract, then leave the unused space reserved for the additional diagnoses blank.

3. Rules for procedure coding²

Adhere to the official guidelines, a summary of which is as follows:

- a. Procedure means a significant procedure that is surgical in nature; carries a procedural or anesthetic risk; or requires specialized training or special facilities or equipment.
- b. Principal procedure means that procedure most closely related to the principal diagnosis which is performed for the definitive treatment of the patient.
- c. The principal procedure cannot be a procedure performed for a diagnostic or exploratory purpose only or to resolve a complication, unless these are the only types of procedures performed on the patient for the encounter.
- d. Other procedures are other significant procedures in addition to the principal procedure.
- e. Enter procedure codes as a 5-digit CPT or HCPCs code. Leave other procedure fields blank if not applicable.
- f. If a procedure has been reported to diagnose or treat a complication, then report the complication as a secondary diagnosis.

² American Medical Association Official Coding Guidelines

- g. Report procedures consistently with those contained on the patient's bill and medical record for the encounter or visit.
- h. The first two other procedures must be consistent with those contained on the patient's CMS 1500 bill for the encounter being recorded. The remaining seven procedures must be taken from either the patient bill or the patient encounter abstract.
- i. Record all procedures consistent with what is on the patient's bill or medical record for the encounter. For a given encounter if there are more than nine unique secondary procedures on either the bill or medical record, then report nine procedures on the data record. If there are fewer than nine unique secondary procedures on both the patient's bill and encounter abstract, then leave the unused space reserved for the additional procedure blank.
- j. Report the date on which the procedure was performed for each procedure. Leave a procedure date field blank if there is no corresponding procedure.
- k. The service or procedure may be further described by using the 2-position CPT/HCPCS modifiers.

4. Revenue data elements coding for procedures, services and supplies

- a. For two or more surgical procedures, include an itemized charge for each procedure or roll up surgery charges to one line and indicate zero charges for line items included in the global charge.
- b. For multiple procedures itemized separately, repeat revenue codes with respective CPT codes, unit of service and charges.
- c. If you "roll up" the charges for multiple surgeries to the primary surgical procedure, report zero charges for the other procedures performed in the same surgical setting. Do not report greater than one unit on each surgery procedure.
- d. If grouping services, the place of service, procedure code, charges, and individual provider for each line must be identical for that service line. Group services only if the services were on consecutive days.
- e. Report revenue codes to the fourth digit within the 0200-0999 range of the UB-04 billing manual maintained by the National Uniform Billing Committee (NUBC), **Appendix 2**. Report total units of service and total charges corresponding to individual CPT/HCPCS for an encounter as reported on the CMS 1500 claim form.
- f. Report billing (or revenue) data elements, units of service and accrued charges consistent with CPT/HCPCS codes reporting.
- g. The combination of a revenue code and a CPT code must be unique for each encounter type 4 data records. Aggregate charges and units of services at the revenue/CPT code combination level.

5. Payer and Source of Payment Coding

- a. Report payer name or identification and code using **Appendix 3**. Report HIPAA National Plan Identifier instead when the federal mandate becomes effective.
- b. Report the expected source of payment code using **Appendix 4** and the greatest level of detail, if the information exists. **Appendix 5** is the crosswalk between payer typology and the source of payments codes OHS currently utilizes.

6. OHS Data Review

OHS will review each data set submitted and notify a health care facility whose filed data does not satisfy the following standards for any filing period:

- a. Values or codes for each data element in the filing are consistent with the values or codes provided by OHS;
- b. Data elements related to other data elements within an individual record are consistent in substantive content;
- c. Coding values indicating “not available,” “unknown,” or any other such value or term indicating that the valid code, value or range of values for a particular data element is not available or missing are not used unless permitted by the office; and
- d. The number of individual records in the filing containing errors specified do not exceed one percent of the total number of individual records filed.

7. The notification from OHS will:

- a. Indicate if the data is unusable because it was corrupted or failed to conform to specifications;
 - b. Identify the data elements for any encounter which are in error, suspected of being in error, or otherwise do not satisfy the standards set by the office; and
 - c. Indicate if the facility has to submit a new data file for the period or make corrections to specific records or data fields in error.
8. The notified health care facility must correct the errors according to the standards set by the office using the “Edit an Existing Encounter” feature of the web portal/application (Section 8 of this guide). The health care facility must make the corrections not later than twenty business days after the notification.
9. If OHS finds errors not discovered during the initial review of the filing, the health care facility must file revisions as OHS requests not later than twenty business days after the notification.

12. Glossary

Terms and Abbreviations

| Term | Meaning |
|------------|---|
| CPT | Current Procedural Terminology |
| HSP | Health Systems Planning unit of the Office of Health Strategy |
| OHS | Office of Health Strategy |
| SFT | Secure file transfer for facilities with IT resources to automate data filing |
| VPN | Virtual Private Network |
| VPN key | Facilitates access to the State's VPN |
| Web portal | The secure web application that enables keying in the required data directly |

13. Appendices

Appendix 1: Connecticut General Statutes Section 19a-654

Sec. 19a-654. (Formerly Sec. 19a-167k). Data submission requirements. Memorandum of understanding. Regulations.

(a) As used in this section:

- (1) "Patient-identifiable data" means any information that identifies or may reasonably be used as a basis to identify an individual patient; and
- (2) "De-identified patient data" means any information that meets the requirements for de-identification of protected health information as set forth in 45 CFR 164.514.

(b) Each short-term acute care general or children's hospital shall submit patient-identifiable inpatient discharge data and emergency department data to the Health Systems Planning Unit of the Office of Health Strategy to fulfill the responsibilities of the unit. Such data shall include data taken from patient medical record abstracts and bills. The office shall specify the timing and format of such submissions. Data submitted pursuant to this section may be submitted through a contractual arrangement with an intermediary and such contractual arrangement shall (1) comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 P.L. 104-191 (HIPAA), and (2) ensure that such submission of data is timely and accurate. The office may conduct an audit of the data submitted through such intermediary in order to verify its accuracy.

(c) An outpatient surgical facility, as defined in section 19a-493b, a short-term acute care general or children's hospital, or a facility that provides outpatient surgical services as part of the outpatient surgery department of a short-term acute care hospital shall submit to the office the data identified in subsection (c) of section 19a-634. The office shall convene a working group consisting of representatives of outpatient surgical facilities, hospitals and other individuals necessary to develop recommendations that address current obstacles to, and proposed requirements for, patient-identifiable data reporting in the outpatient setting. On or before February 1, 2012, the working group shall report, in accordance with the provisions of section 11-4a, on its findings and recommendations to the joint standing committees of the General Assembly having cognizance of matters relating to public health and insurance and real estate. Additional reporting of outpatient data as the unit deems necessary shall begin not later than July 1, 2015. On or before July 1, 2018, and annually thereafter, the Connecticut Association of Ambulatory Surgery Centers shall provide a progress report to the Office of Health Strategy, until such time as all ambulatory surgery centers are in full compliance with the implementation of systems that allow for the reporting of outpatient data as required by the commissioner. Until such additional reporting requirements take effect on July 1, 2015, the department may work with the Connecticut Association of Ambulatory Surgery Centers and the Connecticut Hospital Association on specific data reporting initiatives provided that no penalties shall be assessed under this chapter or any other provision of law with respect to the failure to submit such data.

- (d) Except as provided in this subsection, patient-identifiable data received by the office shall be kept confidential and shall not be considered public records or files subject to disclosure under the Freedom of Information Act, as defined in section 1-200. The unit may release de-identified patient data or aggregate patient data to the public in a manner consistent with the provisions of 45 CFR 164.514. Any de-identified patient data released by the office shall exclude provider, physician and payer organization names or codes and shall be kept confidential by the recipient. The unit may release patient-identifiable data (1) as provided for in section 19a-25 and regulations adopted pursuant to section 19a-25, and (2) to (A) a state agency for the purpose of improving health care service delivery, (B) a federal agency or the office of the Attorney General for the purpose of investigating hospital mergers and acquisitions, or (C) another state's health data collection agency with which the office has entered into a reciprocal data-sharing agreement for the purpose of certificate of need review or evaluation of health care services, upon receipt of a request from such agency, provided, prior to the release of such patient-identifiable data, such agency enters into a written agreement with the office pursuant to which such agency agrees to protect the confidentiality of such patient-identifiable data and not to use such patient-identifiable data as a basis for any decision concerning a patient. No individual or entity receiving patient-identifiable data may release such data in any manner that may result in an individual patient, physician, provider or payer being identified. The unit shall impose a reasonable, cost-based fee for any patient data provided to a nongovernmental entity.
- (e) Not later than October 1, 2011, the Health Systems Planning Unit shall enter into a memorandum of understanding with the Comptroller that shall permit the Comptroller to access the data set forth in subsections (b) and (c) of this section, provided the Comptroller agrees, in writing, to keep individual patient and provider data identified by proper name or personal identification code and submitted pursuant to this section confidential.
- (f) The executive director of the Office of Health Strategy shall adopt regulations, in accordance with the provisions of chapter 54, to carry out the provisions of this section.
- (g) The duties assigned to the Office of Health Strategy under the provisions of this section shall be implemented within available appropriations.

Appendix 2: Revenue Codes and Description

| Revenue Code | Description |
|--------------|--|
| 0001 | Total Charge |
| 0091 | Chronic Disease Hospital (General Assistance) |
| 0092 | HealthTrack Screening - Initial or Periodic |
| 0093 | HealthTrack Screening with Referral - Initial or Periodic |
| 0094 | HealthTrack Screening with Treatment - Initial or Periodic |
| 0099 | Inpatient Acute Care Rehabilitation |
| 0100 | All-Inclusive Room and Board Plus Ancillary |
| 0101 | All-Inclusive Room and Board |
| 0110 | Room & Board - Private(Medical or General) - General classification |
| 0111 | Room & Board - Private(Medical or General) - Medical/Surgical/Gyn |
| 0112 | Room & Board - Private(Medical or General) - OB |
| 0113 | Room & Board - Private(Medical or General) - Pediatric |
| 0114 | Room & Board - Private(Medical or General) - Psychiatric |
| 0115 | Room & Board - Private(Medical or General) - Hospice |
| 0116 | Room & Board - Private(Medical or General) - Detoxification |
| 0117 | Room & Board - Private(Medical or General) - Oncology |
| 0118 | Room & Board - Private(Medical or General) - Rehabilitation |
| 0119 | Room & Board - Private(Medical or General) - Other |
| 0120 | Room & Board - Semi-private Two Bed(Medical or General) - General classification |
| 0121 | Room & Board - Semi-private Two Bed(Medical or General) - Medical/Surgical/Gyn |
| 0122 | Room & Board - Semi-private Two Bed(Medical or General) - OB |
| 0123 | Room & Board - Semi-private Two Bed(Medical or General) - Pediatric |
| 0124 | Room & Board - Semi-private Two Bed(Medical or General) - Psychiatric |
| 0125 | Room & Board - Semi-private Two Bed(Medical or General) - Hospice |
| 0126 | Room & Board - Semi-private Two Bed(Medical or General) - Detoxification |
| 0127 | Room & Board - Semi-private Two Bed(Medical or General) - Oncology |
| 0128 | Room & Board - Semi-private Two Bed(Medical or General) - Rehabilitation |
| 0129 | Room & Board - Semi-private Two Bed(Medical or General) - Other |
| 0130 | Semi-Private - Three and Four Beds - General classification |
| 0131 | Semi-Private - Three and Four Beds - Medical/Surgical/Gyn |
| 0132 | Semi-Private - Three and Four Beds - OB |

| | |
|------|---|
| 0133 | Semi-Private - Three and Four Beds - Pediatric |
| 0134 | Semi-Private - Three and Four Beds - Psychiatric |
| 0135 | Semi-Private - Three and Four Beds - Hospice |
| 0136 | Semi-Private - Three and Four Beds - Detoxification |
| 0137 | Semi-Private - Three and Four Beds - Oncology |
| 0138 | Semi-Private - Three and Four Beds - Rehabilitation |
| 0139 | Semi-Private - Three and Four Beds - Other |
| 0140 | Private (Deluxe)- General classification |
| 0141 | Private (Deluxe)- Medical/Surgical/Gyn |
| 0142 | Private (Deluxe)- OB |
| 0143 | Private (Deluxe)- Pediatric |
| 0144 | Private (Deluxe)- Psychiatric |
| 0145 | Private (Deluxe)- Hospice |
| 0146 | Private (Deluxe)- Detoxification |
| 0147 | Private (Deluxe)- Oncology |
| 0148 | Private (Deluxe)- Rehabilitation |
| 0149 | Private (Deluxe)- Other |
| 0150 | Room & Board Ward (Medical or General) - General classification |
| 0151 | Room & Board Ward (Medical or General) - Medical/Surgical/Gyn |
| 0152 | Room & Board Ward (Medical or General) - OB |
| 0153 | Room & Board Ward (Medical or General) - Pediatric |
| 0154 | Room & Board Ward (Medical or General) - Psychiatric |
| 0155 | Room & Board Ward (Medical or General) - Hospice |
| 0156 | Room & Board Ward (Medical or General) - Detoxification |
| 0157 | Room & Board Ward (Medical or General) - Oncology |
| 0158 | Room & Board Ward (Medical or General) - Rehabilitation |
| 0159 | Room & Board Ward (Medical or General) - Other |
| 0160 | Other Room & Board - General Classification |
| 0164 | Other Room & Board - Sterile Environment |
| 0167 | Other Room & Board - Self Care |
| 0169 | Other Room & Board - Other |
| 0170 | Nursery - General Classification |
| 0171 | Newborn - Level I |
| 0172 | Newborn - Level II |
| 0173 | Newborn - Level III |
| 0174 | Newborn - Level IV |
| 0175 | Nursery – Neo Natal ICU |
| 0179 | Nursery - Other |

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|------|--|
| 0180 | Leave of Absence - General Classification |
| 0181 | Leave of Absence - RESERVED |
| 0182 | Leave of Absence - Patient Convenience |
| 0183 | Leave of Absence - Therapeutic Leave |
| 0184 | Leave of Absence - ICF/MR - any reason |
| 0185 | Leave of Absence - Nursing home (for hospitalization) |
| 0189 | Leave of Absence - Other |
| 0190 | Sub Acute - General Classification |
| 0200 | Intensive Care - General Classification |
| 0201 | Intensive Care - Surgical |
| 0202 | Intensive Care - Medical |
| 0203 | Intensive Care - Pediatric |
| 0204 | Intensive Care - Psychiatric |
| 0206 | Intensive Care - Post ICU |
| 0207 | Intensive Care - Burn Care |
| 0208 | Intensive Care - Trauma |
| 0210 | General classification |
| 0211 | Myocardial Infarction |
| 0212 | Pulmonary Care |
| 0213 | Heart Transplant |
| 0214 | Post-CCU |
| 0219 | Other Coronary Care |
| 0220 | Special Charges - General classification |
| 0221 | Special Charges - Admission Charge |
| 0222 | Special Charges - Technical Support Charge |
| 0223 | Special Charges - U.R. Service Charge |
| 0224 | Special Charges - Late Discharge, medically necessary |
| 0229 | Special Charges - Other Special Charges |
| 0230 | Incremental Nursing Charge Rate - General Classification |
| 0231 | Incremental Nursing Charge Rate - Nursery |
| 0232 | Incremental Nursing Charge Rate - OB |
| 0233 | Incremental Nursing Charge Rate - ICU |
| 0234 | Incremental Nursing Charge Rate - CCU |
| 0235 | Incremental Nursing Charge Rate - Hospice |
| 0239 | Incremental Nursing Charge Rate - Other |
| 0240 | All Inclusive Ancillary - General Classification |
| 0249 | All Inclusive Ancillary - Other Inclusive Ancillary |
| 0250 | Pharmacy - General Classification |
| 0251 | Pharmacy - Generic Drugs |
| 0252 | Pharmacy - Non-generic Drugs |
| 0253 | Pharmacy - Take Home Drugs |
| 0254 | Pharmacy - Drugs Incident to other Diagnostic Services |
| 0255 | Pharmacy - Drugs incident to Radiology |
| 0256 | Pharmacy - Experimental Drugs |

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|------|---|
| 0257 | Pharmacy - Non-prescription |
| 0258 | Pharmacy - IV Solutions |
| 0259 | Pharmacy - Other Pharmacy |
| 0260 | IV Therapy - General classification |
| 0261 | IV Therapy - Infusion Pump |
| 0262 | IV Therapy - Pharmacy Svcs |
| 0263 | IV Therapy - Drug/Supply Delivery |
| 0264 | IV Therapy - Supplies |
| 0269 | IV Therapy - Other |
| 0270 | Medical/Surgical Supplies and Devices - General Classification |
| 0271 | Medical/Surgical Supplies and Devices - Non Sterile |
| 0272 | Medical/Surgical Supplies and Devices - Sterile |
| 0273 | Medical/Surgical Supplies and Devices - Take Home |
| 0274 | Medical/Surgical Supplies and Devices - Prosthetic/Orthotic Devices |
| 0275 | Medical/Surgical Supplies and Devices - Pace Maker |
| 0276 | Medical/Surgical Supplies and Devices - Intraocular Lens |
| 0277 | Medical/Surgical Supplies and Devices - Oxygen-Take Home |
| 0278 | Medical/Surgical Supplies and Devices - Other Implants |
| 0279 | Medical/Surgical Supplies and Devices - Other Supplies/Devices |
| 0280 | Oncology - General Classification |
| 0289 | Oncology - Other |
| 0290 | Durable Medical Equipment - General Classification |
| 0291 | Durable Medical Equipment - Rental |
| 0292 | Durable Medical Equipment - Purchase of new DME |
| 0293 | Durable Medical Equipment - Purchase of used DME |
| 0294 | Durable Medical Equipment - Supplies/Drugs for DME Effectiveness |
| 0299 | Durable Medical Equipment - Other Equipment |
| 0300 | Laboratory - General Classification |
| 0301 | Laboratory - Chemistry |
| 0302 | Laboratory - Immunology |
| 0303 | Laboratory - Renal Patient(Home) |
| 0304 | Laboratory - Non-Routine Dialysis |
| 0305 | Laboratory - Hematology |
| 0306 | Laboratory - Bacteriology and Microbiology |
| 0307 | Laboratory - Urology |
| 0309 | Laboratory - Other |
| 0310 | Laboratory Pathological - General Classification |
| 0311 | Laboratory Pathological - Cytology |
| 0312 | Laboratory Pathological - Histology |
| 0314 | Laboratory Pathological - Biopsy |

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|------|--|
| 0319 | Laboratory Pathological - Other |
| 0320 | Radiology - Diagnostic - General Classification |
| 0321 | Radiology - Diagnostic - Angiocardiography |
| 0322 | Radiology - Diagnostic - Arthrography |
| 0323 | Radiology - Diagnostic - Arteriography |
| 0324 | Radiology - Diagnostic - Chest X-Ray |
| 0329 | Radiology - Diagnostic - Other |
| 0330 | Radiology - Therapeutic - General Classification |
| 0331 | Radiology - Therapeutic - Chemotherapy - Injected |
| 0332 | Radiology - Therapeutic - Chemotherapy - Oral |
| 0333 | Radiology - Therapeutic - Radiation Therapy |
| 0335 | Radiology - Therapeutic - Chemotherapy - IV |
| 0339 | Radiology - Therapeutic - Other |
| 0209 | Intensive Care - Other Intensive Care |
| 0340 | Nuclear Medicine - General Classification |
| 0341 | Nuclear Medicine - Diagnostic |
| 0342 | Nuclear Medicine -Therapeutic |
| 0343 | Nuclear Medicine - Diagnostic Radio Pharmaceuticals |
| 0344 | Nuclear Medicine - Therapeutic Radio Pharmaceuticals |
| 0349 | Nuclear Medicine - Other |
| 0350 | CT Scan - General Classification |
| 0351 | CT Scan - Head Scan |
| 0352 | CT Scan - Body Scan |
| 0359 | CT Scan - Other CT Scans |
| 0360 | Operating Room Services - General Classification |
| 0361 | Operating Room Services - Minor Surgery |
| 0362 | Operating Room Services - Organ transplant other than Kidney |
| 0367 | Operating Room Services - Kidney transplant |
| 0369 | Operating Room Services - Other Operating Room Services |
| 0370 | Anesthesia - General Classification |
| 0371 | Anesthesia - Incident to Radiology |
| 0372 | Anesthesia - Incident to other Diagnostic Services |
| 0374 | Anesthesia - Acupuncture |
| 0379 | Anesthesia - Other Anesthesia |
| 0380 | Blood - General classification |
| 0381 | Blood - Packed Red Cells |
| 0382 | Blood - Whole Blood |
| 0383 | Blood - Plasma |
| 0384 | Blood - Platelets |
| 0385 | Blood - Leucocytes |
| 0386 | Blood - Other components |
| 0387 | Blood - Other derivatives (Cryoprecipitates) |
| 0389 | Blood - Other Blood |

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|------|---|
| 0390 | Blood Storage and Processing - General Classification |
| 0391 | Blood Storage and Processing - Blood Administration |
| 0399 | Blood Storage and Processing - Other |
| 0400 | Other Imaging Services - General classification |
| 0401 | Other Imaging Services - Diagnostic Mammography |
| 0402 | Other Imaging Services - Ultrasound |
| 0403 | Other Imaging Services - Screening Mammography |
| 0404 | Other Imaging Services - Positron Emission Tomography |
| 0409 | Other Imaging Services - Other |
| 0410 | Respiratory Services - General Classification |
| 0412 | Respiratory Services - Inhalation Services |
| 0413 | Respiratory Services - Hyperbaric Oxygen Therapy |
| 0419 | Respiratory Services - Other |
| 0420 | Physical Therapy - General classification |
| 0421 | Physical Therapy - Visit charge |
| 0422 | Physical Therapy - Hourly charge |
| 0423 | Physical Therapy - Group rate |
| 0424 | Physical Therapy - Evaluation or Re-evaluation |
| 0429 | Physical Therapy - Other |
| 0430 | Occupational Therapy - General classification |
| 0431 | Occupational Therapy - Visit charge |
| 0432 | Occupational Therapy - Hourly charge |
| 0433 | Occupational Therapy - Group rate |
| 0434 | Occupational Therapy - Evaluation or Re-evaluation |
| 0439 | Occupational Therapy - Other |
| 0440 | Speech-Language Pathology Therapy - General classification |
| 0441 | Speech-Language Pathology Therapy - Visit charge |
| 0442 | Speech-Language Pathology Therapy - Hourly charge |
| 0443 | Speech-Language Pathology Therapy - Group rate |
| 0444 | Speech-Language Pathology Therapy - Evaluation or Re-evaluation |
| 0449 | Speech-Language Pathology Therapy - Other |
| 0450 | Emergency Room - General Classification |
| 0451 | EMTALA Emergency Medical Screening Services |
| 0452 | ER Beyond EMTALA Screening |
| 0456 | Urgent Care |
| 0459 | Emergency Room - Other |
| 0460 | Pulmonary Function - General Classification |
| 0469 | Pulmonary Function - Other |
| 0470 | Audiology - General Classification |
| 0471 | Audiology - Diagnostic |

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|------|---|
| 0472 | Audiology - Treatment |
| 0479 | Audiology - Other |
| 0480 | Cardiology - General Classification |
| 0481 | Cardiology - Cardiac Cath Lab |
| 0482 | Cardiology - Stress Test |
| 0483 | Echocardiology |
| 0489 | Cardiology - Other |
| 0490 | Ambulatory Surgical Care - General Classification |
| 0499 | Ambulatory Surgical Care - Other |
| 0500 | Outpatient Services - General Classification |
| 0509 | Outpatient Services - Other |
| 0510 | Clinic - General Classification |
| 0511 | Clinic - Chronic Pain Center |
| 0512 | Clinic - Dental Clinic |
| 0513 | Clinic - Psychiatric Clinic |
| 0514 | Clinic - OB-GYN Clinic |
| 0515 | Clinic - Pediatric Clinic |
| 0516 | Urgent Care Clinic |
| 0519 | Clinic - Other Clinic |
| 0520 | Free-Standing Clinic - General Classification |
| 0521 | Free-Standing Clinic - Rural Health-Clinic |
| 0522 | Free-Standing Clinic - Rural Health-Home |
| 0523 | Free-Standing Clinic - Family Practice |
| 0529 | Free-Standing Clinic - Other Freestanding Clinic |
| 0530 | Osteopathic Services - General Classification |
| 0531 | Osteopathic Services - Osteopathic Therapy |
| 0539 | Osteopathic Services - Other |
| 0540 | Ambulance - General Classification |
| 0541 | Ambulance - Supplies |
| 0542 | Ambulance - Medical Transport |
| 0543 | Ambulance - Heart Mobile |
| 0544 | Ambulance - Oxygen |
| 0545 | Ambulance - Air |
| 0546 | Ambulance - Neonatal Ambulance Services |
| 0547 | Ambulance - Pharmacy |
| 0548 | Ambulance - Telephone Transmission EKG |
| 0549 | Ambulance - Other |
| 0550 | Skilled Nursing - General Classification |
| 0551 | Skilled Nursing - Visit Charge |
| 0552 | Skilled Nursing - Hourly Charge |
| 0559 | Skilled Nursing - Other |
| 0560 | Medical Social Services - General Classification |
| 0561 | Medical Social Services - Visit Charge |
| 0562 | Medical Social Services - Hourly Charge |
| 0569 | Medical Social Services - Other |
| 0570 | Home Health Aide - General Classification |

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|------|--|
| 0571 | Home Health Aide - Visit Charge |
| 0572 | Home Health Aide - Hourly Charge |
| 0579 | Home Health Aide - Other |
| 0580 | Other Visits (Home Health) - General Classification |
| 0581 | Other Visits (Home Health) - Visit Charge |
| 0582 | Other Visits (Home Health) - Hourly Charge |
| 0589 | Other Visits (Home Health) - Other |
| 0590 | Units of Service (Home Health) - General Classification |
| 0599 | Units of Service (Home Health) - Other Units |
| 0600 | Oxygen (Home Health) - General Classification |
| 0601 | Oxygen (Home Health) - State/Equip/Suppl/or Cont |
| 0602 | Oxygen (Home Health) - State/Equip/Suppl/Under 1 LPM |
| 0603 | Oxygen (Home Health) - State/Equip/Over 4 LPM |
| 0604 | Oxygen (Home Health) - Portable add-on |
| 0610 | MRI - General Classification |
| 0611 | MRI - Brain (including Brainstem) |
| 0612 | MRI - Spinal Cord (including Spine) |
| 0614 | MRI - Other |
| 0615 | MRA - Head and Neck |
| 0616 | MRA - Lower Extremities |
| 0618 | MRA - Other |
| 0619 | MRI - Other |
| 0621 | Medical/Surgical Supplies - Incident to radiology |
| 0622 | Medical/Surgical Supplies - Incident to other diagnostic services |
| 0623 | Itemized charges for surgical dressings |
| 0624 | Medical/Surgical Supplies - Investigational Device |
| 0630 | Drugs Identification - General Classification |
| 0631 | Drugs Identification - Single Source Drug |
| 0632 | Drugs Identification - Multiple Source Drug |
| 0633 | Drugs Identification - Restrictive Prescription |
| 0634 | Drugs Identification - Erythropoietin (EPO) less than 10,000 units |
| 0635 | Drugs Identification - Erythropoietin (EPO) more than 10,000 units |
| 0636 | Drugs Identification - Drugs Requiring Detailed Coding |
| 0637 | Drugs Identification - Self-administrable Drugs |
| 0640 | Home IV Therapy - General Classification |
| 0641 | Home IV Therapy - Nonroutine Nursing, Central Line |
| 0642 | Home IV Therapy - IV Site Care, Central Line |
| 0643 | Home IV Therapy - IV Start/Change, Peripheral Line |
| 0644 | Home IV Therapy - Nonroutine Nursing, Peripheral Line |
| 0645 | Home IV Therapy - Training Patient/Caregiver, Central Line |

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| 0646 | Home IV Therapy - Training Disabled Patient, Central Line |
| 0647 | Home IV Therapy - Training, Patient/ Caregiver, Peripheral Line |
| 0648 | Home IV Therapy - Training Disabled Patient, Peripheral Line |
| 0649 | Home IV Therapy - Other IV Therapy Services |
| 0650 | Hospice Service - General Classification |
| 0651 | Hospice Service - Routine Home Care |
| 0652 | Hospice Service - Continuous Home Care |
| 0653 | Hospice Service - RESERVED |
| 0654 | Hospice Service - RESERVED |
| 0655 | Hospice Service - Impatient Respite Care |
| 0656 | Hospice Service - General Inpatient Care (Non-respite) |
| 0657 | Hospice Service - Physician Services |
| 0659 | Hospice Service - Other |
| 0660 | Respite Care (HHA only) - General Classification |
| 0661 | Respite Care (HHA only) - Hourly Charge/Skilled Nursing |
| 0662 | Respite Care (HHA only) - Hourly Charge/Home Health Aide/Homemaker |
| 0681 | Trauma Response, Level I, TRAUMA LEVEL I, Y |
| 0682 | Trauma Response, Level II |
| 0683 | Trauma Response: Level III |
| 0700 | Cast Room - General Classification |
| 0709 | Cast room - Other |
| 0710 | Recovery room - General Classification |
| 0719 | Recovery room - Other |
| 0720 | Labor Room/Delivery - General Classification |
| 0721 | Labor Room/Delivery - Labor |
| 0722 | Labor Room/Delivery - Delivery |
| 0723 | Labor Room/Delivery - Circumcision |
| 0724 | Labor Room/Delivery - Birthing Centre |
| 0725 | Fetal Monitoring |
| 0729 | Labor Room/Delivery - Other |
| 0730 | EKG/ECG - General Classification |
| 0731 | EKG/ECG - Holter monitor |
| 0732 | EKG/ECG - Telemetry |
| 0739 | EKG/ECG - Other |
| 0740 | EEG - General classification |
| 0749 | EEG - Other |
| 0750 | Gastro Intestinal Services - General Classification |
| 0759 | Gastro Intestinal Services - Other |
| 0760 | Treatment/Observation Room - General Classification |
| 0761 | Treatment/Observation Room - Treatment Room |
| 0762 | Treatment/Observation Room - Observation Room |

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|------|--|
| 0769 | Treatment/Observation Room - Other |
| 0770 | Preventive Care Services - General |
| 0771 | Vaccine Administration |
| 0779 | Other preventive care services |
| 0780 | Telemedicine - General |
| 0789 | Other Telemedicine |
| 0790 | Lithotripsy - General Classification |
| 0799 | Lithotripsy - Other |
| 0800 | Inpatient Renal Dialysis - General Classification |
| 0801 | Inpatient Renal Dialysis - Inpatient Hemodialysis |
| 0802 | Inpatient Renal Dialysis - Inpatient Peritoneal (Non-CAPD) |
| 0803 | Inpatient Renal Dialysis - Inpatient Continuous Ambulatory Peritoneal Dialysis |
| 0804 | Inpatient Renal Dialysis - Inpatient Continuous Cycling Peritoneal Dialysis |
| 0809 | Inpatient Renal Dialysis - Other |
| 0810 | Organ Acquisition - General Classification |
| 0811 | Organ Acquisition - Living Donor-Kidney |
| 0812 | Organ Acquisition - Cadaver Donor-Kidney |
| 0813 | Organ Acquisition - Unknown Donor -Kidney |
| 0814 | Organ Acquisition - Other Kidney Acquisition |
| 0815 | Organ Acquisition - Cadaver Donor-Heart |
| 0817 | Donor - Liver |
| 0819 | Organ Acquisition - Other Organ Acquisition |
| 0820 | Hemodialysis - Outpatient or Home - General Classification |
| 0821 | Hemodialysis - Outpatient or Home - Hemodialysis/Composite or other rate |
| 0825 | Hemodialysis - Outpatient or Home - Support Services |
| 0829 | Hemodialysis - Outpatient or Home - Other |
| 0830 | Peritoneal Dialysis - Outpatient or Home - General Classification |
| 0831 | Peritoneal Dialysis - Outpatient or Home - Peritoneal Composite or other rate |
| 0832 | Peritoneal Dialysis - Outpatient or Home - Home Supplies |
| 0833 | Peritoneal Dialysis - Outpatient or Home - Home Equipment |
| 0834 | Peritoneal Dialysis - Outpatient or Home - Maintenance/100% |
| 0835 | Peritoneal Dialysis - Outpatient or Home - Support Services |
| 0839 | Peritoneal Dialysis - Outpatient or Home - Other |
| 0840 | CAPD - Outpatient or Home - General Classification |
| 0841 | CAPD - Outpatient or Home - CAPD/Composite or other rate |
| 0842 | CAPD - Outpatient or Home - Home Supplies |
| 0843 | CAPD - Outpatient or Home - Home Equipment |
| 0844 | CAPD - Outpatient or Home - Maintenance/100% |
| 0987 | Professional Fees -Hospital Visit |

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|------|--|
| 0988 | Professional Fees - Consultation |
| 0989 | Professional Fees - Private Duty Nurse |
| 0990 | Patient Convenience Items - General Classification |
| 0991 | Patient Convenience Items - Cafeteria/Guest Tray |
| 0992 | Patient Convenience Items - Private Linen Service |
| 0993 | Patient Convenience Items - Telephone/Telegraph |
| 0994 | Patient Convenience Items - TV/Radio |

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|------|---|
| 0995 | Patient Convenience Items – Non patient Room Rentals |
| 0996 | Patient Convenience Items - Late Discharge Charge |
| 0997 | Patient Convenience Items - Admission Kits |
| 0998 | Patient Convenience Items - Beauty Shop/Barber |
| 0999 | Patient Convenience Items - Other Patient convenience Items |
| 9999 | No revenue data |

Appendix 3: Payer identification code, name and description

| Payer Code | Payer Description |
|------------|--------------------------------|
| 01074 | AETNA CASUAL & SURETY OF AMER |
| 00005 | AETNA CASUAL & SURETY OF AMER |
| 00006 | AETNA CASUAL & SURETY OF ILL |
| 00007 | AETNA INSURANCE COMPANY |
| 00008 | AETNA LIFE & CASUALTY CO. |
| 00009 | AETNA LIFE INSURANCE CO |
| 00012 | AGWAY INSURANCE CO |
| 00013 | AID ASSOC FOR LUTHERANS |
| 00014 | ALEX HAMILTON LIFE INS OF AMER |
| 00016 | ALL AMERICAN LIFE INS CO |
| 00018 | ALLSTATE INSURANCE CO. |
| 00019 | ALLSTATE LIFE INSURANCE CO |
| 00021 | AMALGAMATED LIFE |
| 00023 | AMER AMICABLE LIFE INS |
| 00026 | AMERICAN BANKERS INS OF FLA |
| 00027 | AMERICAN CASUALTY OF READING |
| 00035 | AMERICAN GENERAL GR INS |
| 00042 | AMERICAN HARDWARE MUTUAL |
| 00043 | AMER HEALTH AND LIFE INS CO |
| 00044 | AMERICAN HERITAGE LIFE |
| 00045 | AMERICAN HOME ASSURANCE CO |
| 00048 | AMER INS OF TEXAS |
| 00056 | AMERICAN MOTORISTS INS CO |
| 00057 | AMERICAN MUTUAL |
| 00058 | AMERICAN MUTUAL |
| 00059 | AMERICAN NATIONAL INS |
| 00060 | ANTHEM BLUE CROSS |
| 00061 | AMERICAN POLICYHOLDER'S INS |
| 00062 | AMERICAN PROGRESSIVE |
| 00063 | AMERICAN REPUBLIC INS CO |
| 00064 | AMER RESERVE LIFE INS |
| 00066 | BLUE CROSS 65 PLAN |
| 00068 | AMERICAN STATES INSURANCE CO |
| 00069 | AMERICAN UNITED LIFE INS CO |
| 00070 | AMERICAN UNDERWRITERS |
| 00074 | ASSOCIATED INDEMNITY CORP |
| 00075 | ASSOCIATION LIFE INSURANCE CO |
| 00078 | AULTCARE |
| 00082 | BANKERS LIFE & CASUALTY |
| 00083 | PRINCIPAL MUTUAL LIFE |
| 00085 | BANKERS MULTIPLE LIFE INS CO |
| 00086 | BANKERS NATIONAL LIFE INS CO |
| 00087 | BANKERS SECURITY LIFE INS SOC |

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| 00090 | BENEFICIAL STANDARD LIFE INS |
| 00091 | BENEFIT TRUST LIFE INSURANCE |
| 00092 | BERKSHIRE LIFE INS CO |
| 00093 | BIRMINGHAM FIRE INS OF PENN |
| 00096 | BOSTON MUTUAL LIFE INSUR CO |
| 00097 | BOSTON OLD COLONY INSUR CO |
| 000SW | STONE AND WEBSTER, INC (CBA) |
| 00100 | BUSINESS MENS ASSUR CO OF AMER |
| 00105 | CALIFORNIA-WESTERN STATES LIFE |
| 00106 | CANADA LIFE ASSURANCE CO |
| 00107 | CAPITAL LIFE |
| 00108 | CAPP CARE OHIO BRICK LAYERS |
| 00110 | CENTENNIAL LIFE INS CO |
| 00112 | CENTRAL NAT'L INS CO OF OMAHA |
| 00116 | CNTRL STATES HLTH & LIFE OMAHA |
| 00119 | CHARTER NATIONAL LIFE INS CO |
| 00120 | C H C S |
| 00123 | CITIZENS INS CO OF AMERICA |
| 00126 | CNA INSURANCE COS MAILHANDLRS |
| 00130 | COLONIAL LIFE & ACCIDENT INS |
| 00131 | COLONIAL LIFE INS CO OF AMER |
| 00132 | COLONIAL PENN FRANKLIN INS CO |
| 00133 | CONSECO DIRECT (COLONIAL PENN) |
| 00136 | COLUMBIAN MUTUAL LIFE INS CO |
| 00139 | COMBINED INSURANCE CO OF AMER |
| 00142 | COMMERCIAL INSUR CO OF NEWARK |
| 00144 | COMMERCIAL TRAVELERS MUTUAL IN |
| 00146 | COMMERCIAL UNION INSUR CO |
| 00147 | COMMERCIAL UNION LIFE OF AMER |
| 00150 | COMPANION LIFE INS CO |
| 00151 | CONFEDERATION LIFE INSURANCE |
| 00152 | COMPARATIVE INSURANCE |
| 00156 | CONN GENERAL IN |
| 00157 | CIGNA (CT GEN LIFE) |
| 00158 | CONN IDEMNITY CO |
| 00159 | CONN MUTUAL LIFE INSURANCE |
| 00160 | CONSTITUTION LIFE INS CO |
| 00163 | CONTINENTAL ASSURANCE CO |
| 00164 | CONTINENTAL ASSURANCE |
| 00166 | CONTINENTAL CASUALTY CO |
| 00169 | CONTINENTAL INSURANCE |
| 00171 | CONTINENTAL LIFE INS CO |
| 00178 | CROWN LIFE INS CO |
| 00179 | CUNA MUTUAL INS SOCIETY |
| 00180 | DELAWARE AMERICAN LIFE INS CO |

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| 00182 | DOMINION LIFE ASSURANCE |
| 00183 | DURHAM LIFE |
| 00185 | EDUCATORS MUTUAL LIFE INS CO |
| 00187 | EMPIRE STATE MUT LIFE |
| 00190 | EMPLOYERS FIRE INS CO |
| 00191 | EMPLOYERS INS OF WAUSAU |
| 00192 | WAUSAU INSURANCE COMPANY |
| 00193 | EMPLOYERS MUTUAL CASUALTY CO |
| 00194 | EUROPE ASSISTANTS |
| 00197 | EQUITABLE LIFE ASSURANCE |
| 00201 | FAMILY LIFE INS CO |
| 00203 | FARM FAMILY LIFE INS CO |
| 00205 | FARMERS & TRADERS LIFE INS CO |
| 00207 | FEDERAL INS CO |
| 00213 | FIDELITY BANKERS LIFE INS |
| 00214 | FIDELITY AND CASUALTY OF NY |
| 00215 | FIDELITY INTERSTATE LIFE |
| 00216 | FIDELITY MUTUAL LIFE INS CO |
| 00217 | FIDELITY SECURITY LIFE INS CO |
| 00218 | FIRE & CASUALTY INS CO OF CT |
| 00219 | FIREMAN'S FUN AMERICA |
| 0021H | 21ST CENTURY HEALTH |
| 00221 | FIREMAN'S FUND INS CO |
| 00223 | FIREMAN'S INS CO OF NEWARK NJ |
| 00224 | FIRST COLONY LIFE INS CO |
| 00225 | FIRST PROVIDIAN |
| 00231 | FOREMOST LIFE INS CO |
| 00232 | FORTIS BENEFIT |
| 00234 | FRANKLIN LIFE INS CO |
| 00235 | G E MEDICAL BENEFITS |
| 00236 | GENERAL AMERICAN LIFE INS CO |
| 00239 | GEORGIA INTERNATIONAL LIFE |
| 00241 | GERBER LIFE INS CO |
| 00243 | GLEN FALLS INS CO (THE) |
| 00245 | GLOBE LIFE & ACCIDENT INS CO |
| 00246 | GLOBE LIFE INS CO |
| 00247 | GOLDEN RULE INS CO |
| 00250 | GOVERNMENT EMPLOYEES INS CO |
| 00252 | GRAND VALLEY HEALTH PLAN |
| 00253 | GREAT AMERICAN INS CO |
| 00254 | GREAT AMERICAN LIFE INS CO |
| 00258 | GREAT SOUTHERN LIFE |
| 00259 | GREAT-WEST LIFE ASSURANCE CO |
| 00261 | GUARANTEE RESERVE LIFE INS CO |
| 00263 | GUARDIAN LIFE INS OF AMER THE |

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| 00264 | HARDEN AND CO |
| 00265 | HARRINGTON/BROOKFIELD |
| 00268 | HANOVER LIFE |
| 00269 | HARTFORD ACCIDENT & INDEMNITY |
| 00270 | HARTFORD LIFE & ACCIDENT INS |
| 00271 | HARTFORD LIFE INSURANCE CO |
| 00272 | HEALTH PLAN SERVICES |
| 00273 | HEALTH DIRECT |
| 00275 | HOME INS CO |
| 00276 | HOME LIFE INSURANCE CO OF AMER |
| 00277 | ANTHEM HEALTH & LIFE(HOME LIFE |
| 00278 | HOME OWNERS LIFE INS CO |
| 00280 | HORACE MANN LIFE INS CO |
| 00282 | IDS LIFE INS CO |
| 00286 | INA LIFE CO OF CALIF |
| 00287 | INA LIFE INS CO / NEW YORK |
| 00288 | INDEPENDENCE LIFE/ACCIDENT |
| 00292 | INDIANAPOLIS LIFE INS CO |
| 00296 | INSURANCE CO OF NORTH AMERICA |
| 00297 | INS CO OF THE STATE OF PENNSYL |
| 00303 | EMPIRE BLUE CROSS |
| 00308 | EMPIRE BLUE CROSS(MEDICARE) |
| 00309 | ITT LIFE INS CORP |
| 00311 | J.C. PENNEY LIFE INS CO |
| 00312 | JEFFERSON LIFE |
| 00313 | JOHN HANCOCK MUTUAL LIFE INS |
| 00316 | KEMPER MUTUAL |
| 00318 | KENTUCKY CENTRAL LIFE INS CO |
| 00320 | KEY BENEFIT ADMINISTRATORS |
| 00322 | LAMAR LIFE INS CO |
| 00325 | LIBERTY LIFE ASSUR CO OF BOST. |
| 00326 | LIBERTY LIFE INSUR CO |
| 00327 | LIBERTY MUTUAL INS CO |
| 00332 | LIFE INS CO OF GEORGIA |
| 00334 | LIFE INS CO OF NORTH AMERICA |
| 00335 | LIFE INS CO OF THE SOUTHWEST |
| 00336 | LIFE OF THE SOUTH |
| 00339 | LINCOLN BENEFIT LIFE CO |
| 00342 | LINCOLN NATIONAL LIFE INS CO |
| 00343 | LONDON ASSUR OF LONDON, ENG. |
| 00344 | LONDON GUARANTEE & ACCIDENT NY |
| 00348 | LOYAL AMER LIFE INS CO |
| 00349 | LUMBERMENS MUTUAL CASUALTY CO |
| 00350 | M S C H HELATH PLAN |
| 00351 | MACCABEES MUT LIFE INS |
| 00352 | MCC BEHAVIORIAL HEALTH |

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| 00355 | MANUFACTURERS LIFE INS CO |
| 00357 | MARYLAND CASUALTY CO |
| 00358 | MASS CASUALTY INS CO |
| 00359 | MASS GEN LIFE INS CO |
| 00360 | MASS INDEMNITY & LIFE INS CO |
| 00361 | UNICARE LIFE & HEALTH INS CO |
| 00362 | MASTERCARE |
| 00364 | METROPOLITAN LIFE INSURANCE CO |
| 00365 | METRA-HEALTH |
| 00372 | MIDLAND NATIONAL LIFE INS CO |
| 00377 | HEALTH PARTNERS |
| 00378 | MID WEST BENEFIT CORP |
| 00379 | MINISTERS LIFE-MUTUAL LIFE INS |
| 00383 | MONARCH LIFE INS CO |
| 00384 | MONTGOMERY WARD LIFE INS CO |
| 00385 | MONUMENTAL LIFE INS CO |
| 00386 | MUTUAL BENEFIT LIFE INS CO |
| 00387 | MUTUAL LIFE INS CO OF NY |
| 00388 | MUTUAL OF OMAHA INSURANCE CO |
| 00390 | LOCAL 390 |
| 00394 | NATIONAL BENEFIT LIFE |
| 00395 | NATIONAL CASUALTY CO |
| 00397 | NATIONAL FIDELITY LIFE INS CO |
| 00398 | NATIONAL FIRE INS CO OF HTFD |
| 00399 | NATIONAL FOUNDATION |
| 00401 | NATIONAL HOME LIFE ASSUR CO |
| 00412 | NAT'L UNION FIRE INS OF PITTSB |
| 00413 | NATIONWIDE INSURANCE |
| 00414 | NATIONWIDE LIFE INS CO |
| 00415 | NATIONWIDE MUTUAL INS CO |
| 00416 | NEW ENGLAND MUTUAL LIFE INS CO |
| 00417 | NYLCARE(FORM.NEW YORK LIFE) |
| 00418 | NIAGARA FIRE INS CO |
| 00420 | NO AMERICAN ASSURANCE |
| 00421 | NORTH AMER CO FOR FIRE & HLTH |
| 00422 | NORTH AMER LIFE & CASUALTY CO |
| 00423 | NORTH AMER LIFE ASSUR CO |
| 00425 | NORTH CENTRAL LIFE INS CO |
| 00426 | NORTH RIVER INS CO |
| 00427 | NORTHERN ASSUR CO OF AMER |
| 00429 | NORTHWESTERN MUTUAL LIFE INS |
| 00430 | NORTHWESTERN NATIONAL INS CO |
| 00431 | NORTHWESTERN NATIONAL LIFE INS |
| 00433 | PROVIDENT/OCCIDENTAL LIFE |
| 00435 | OHIO CASUALTY INS CO (THE) |

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| 00438 | OHIO NATIONAL LIFE INS CO |
| 00440 | OLD AMERICAN INS CO |
| 00443 | OLD REPUBLIC INS CO |
| 00444 | OLD REPUBLIC LIFE INS CO |
| 00450 | OXFORD |
| 00451 | PPP INTERNATIONAL |
| 00452 | PACIFIC INDEMNITY CO |
| 00454 | PACIFIC MUTUAL LIFE INS. CO. |
| 00456 | PAN AMERICAN LIFE INSURANCE |
| 00458 | PAUL REVERE LIFE INS CO |
| 00459 | PEERLESS INS CO |
| 00460 | PCA HEALTH PLAN OF FLORIDA |
| 00461 | PENN WESTERN |
| 00463 | PENN MUTUAL LIFE INS CO |
| 00470 | PHILADELPHIA LIFE INS CO |
| 00471 | PHOENIX ASSUR CO OF NEW YORK |
| 00472 | PHOENIX MUTUAL LIFE INS CO |
| 00474 | PILGRIM HEALTH |
| 00477 | PILOT LIFE INS |
| 00478 | PIONEER LIFE/ILLNESS |
| 00479 | PIONEER MUTUAL LIFE INS CO |
| 00480 | PIONEER MANAGEMENT SYSTEMS |
| 00482 | PREFERRED RISK MUTUAL INS CO |
| 00485 | PROTECTIVE LIFE INS CO |
| 00488 | PROVIDENT LIFE & ACCIDENT |
| 00489 | PROVIDENT LIFE & CASUALTY INS |
| 00490 | PROVIDENT MUTUAL LIFE OF PHIL |
| 00491 | PRUDENTIAL INS OF AMERICA |
| 00498 | RELIANCE LIFE INS CO |
| 00499 | RELIANCE STANDARD LIFE INS CO |
| 00500 | REPUBLIC INS CO |
| 00501 | REPUBLIC NATIONAL LIFE INS CO |
| 00504 | ROYAL GLOBE LIFE |
| 00505 | SAGAMORE |
| 00506 | SAFECO LIFE INS CO |
| 00507 | ST PAUL FIRE & MARINE |
| 00508 | ST PAUL LIFE |
| 00509 | SECURITY BENEFIT LIFE INS CO |
| 00513 | SECURITY LIFE OF DENVER INS |
| 00516 | SECURITY MUTUAL LIFE OF NY |
| 00518 | SENTRY INS A MUTUAL CO |
| 00519 | SENTRY LIFE INS CO |
| 00520 | SHEET METAL WORKERS PLUS |
| 00524 | SOUTHLAND LIFE INS CO |
| 00527 | SPRINGFIELD LIFE INS CO, INC. |
| 00528 | STANDARD INS CO |

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| 00530 | STANDARD LIFE & ACCIDENT INS |
| 00535 | STATE FARM MUTUAL AUTOMOBILE |
| 00536 | STATE MUTUAL LIFE ASSURANCE |
| 00538 | SUN LIFE ASSUR OF CANADA |
| 00539 | SUN LIFE INS CO OF AMERICA |
| 00543 | SURETY LIFE INS CO |
| 00545 | TEACHERS INS & ANNUITY ASSOC |
| 00548 | TIME INS CO |
| 00551 | TRANSCONTINENTAL INS CO |
| 00554 | TRANSPORT LIFE INS CO |
| 00555 | TRANSPORTATION INS CO |
| 00557 | TRAVELERS INDEMNITY CO OF RI |
| 00558 | UNITED HEALTH CARE - CT |
| 00559 | TRAVELERS INS CO OF ILL (THE) |
| 00564 | UNION CENTRAL LIFE CO |
| 00565 | UNION FIDELITY LIFE INS CO |
| 00566 | UNION LABOR LIFE INS CO |
| 00571 | UNION SECURITY LIFE INS CO |
| 00572 | UNITED AMERICAN INS CO |
| 00574 | UNITED BENEFIT LIFE INS |
| 00575 | UNITED COMMERCIAL TRAVELERS |
| 00577 | UNITED FAMILY LIFE INS CO |
| 00578 | U H C MANAGED CARE |
| 00579 | UNITED FIDELITY |
| 00580 | UNITED HEALTH CARE PLAN OF FLA |
| 00583 | UNITED INS CO OF AMERICA |
| 00584 | UNITED LIFE AND ACCIDENT INS |
| 00585 | UNITED PACIFIC LIFE INS CO |
| 00586 | U S FIDELITY AND GUARANTEE |
| 00587 | UNITED STATES FIRE INSURANCE |
| 00588 | UNITED STATES LIFE INS |
| 00589 | UNITED SECURITIES LIFE INSURAN |
| 00592 | UNIVERSAL UNDERWRITERS INC CO |
| 00594 | USA HEALTH SERVICE |
| 00595 | U S A A |
| 00596 | US LIFE INSURANCE OF CALIF |
| 00597 | VALLEY FORGE INS CO |
| 00598 | VALLEY FORGE LIFE INS CO |
| 00599 | VALUE BEHAVIORIAL HEALTH |
| 00600 | WASHINGTON NATIONAL INS CO |
| 00601 | VALUE HEALTH CARE |
| 00603 | WESTERN UNION |
| 00604 | WESTERN LIFE INS CO |
| 00605 | WEYCO |
| 00609 | WISCONSIN NATIONAL LIFE INS CO |

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| 00613 | WORLD INS CO |
| 00618 | ZURICH AMERICAN LIFE INS CO |
| 00622 | AFFILITATED INSURANCE |
| 00623 | LOCAL 371 - AMAL. WEL/TRUST |
| 00626 | AMER POSTAL WKRS UNION HLTH PL |
| 00630 | BENEFIT PLAN ADM |
| 00631 | EMPIRE BLUE CROSS SENIOR CARE |
| 00632 | BLUE CROSS OF NE NY |
| 00633 | EMPIRE BLUE CROSS |
| 00634 | BLUE CROSS OF WESTERN NY |
| 00637 | BLUE CROSS OF MASS |
| 00638 | BLUE CROSS OF RHODE ISLAND |
| 00639 | BLUE CROSS OF NEW JERSEY |
| 00640 | BLUE SHIELD OF NEW JERSEY |
| 00641 | BLUE CROSS/BLUE SHIELD OF ME |
| 00642 | BLUE CROSS/BLUE SHIELD OF PA |
| 00643 | BLUE CROSS/BLUE SHIELD OF DC |
| 00644 | BLUE CROSS/BLUE SHIELD OF MICH |
| 00645 | BLUE CROSS OF NH & VT |
| 00650 | LOCAL 67 CARP HEALTH/WELF |
| 00652 | CENTURY LIFE OF AMERICA |
| 00654 | Cheesborough Ponds |
| 00656 | CHUBB LIFE INS CO OF AMERICA |
| 00660 | COMBUSTION ENGINEERING |
| 00662 | CONN LABORERS HEALTH/WELFARE |
| 00664 | CONN NATIONAL LIFE INS CO |
| 00665 | CT STATE DENTAL ASSOC |
| 00669 | CORPORATE HEALTH INS |
| 00670 | CROUSE HINDS CO |
| 00673 | HARRINGTON BEN SVC(DIVERSIFIED) |
| 00675 | ELECTRIC BOAT DIVISION |
| 00685 | GOVT EMPLOYEES HEALTH ASSOC |
| 00686 | GROUP HEALTH INC |
| 00688 | HEALTH AND WELFARE FUND |
| 00689 | HEALTH INSURANCE OF VERMONT |
| 00690 | HEALTH REINSURANCE ASSOCIATION |
| 00692 | LOCAL 325 - IBEW |
| 00698 | INT UNION OPER ENGINEERS 478 |
| 00700 | STATE WELFARE |
| 00701 | CHAMPUS |
| 00703 | JOHNSON ADMINISTRATORS |
| 00709 | MAIL HANDLERS BENEFIT PLAN |
| 00710 | MEDICAL CLAIMS |
| 00711 | MED WEST COMMERCIAL HEALTH |
| 00712 | MEDPAC |
| 00713 | MED TAC |

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| 00714 | MOUNT VERNON GROUP |
| 00716 | LOCAL 321 NATL ASSOC LTR CARR |
| 00717 | NATIONAL BENEFIT FUND |
| 00725 | PENN GENERAL |
| 00729 | PILLSBURY HEALTH |
| 00731 | POSTMASTERS BENEFIT FUND |
| 00732 | PROGRAMMED BENEFITS |
| 00740 | RETAIL CLERKS LOCAL 919 |
| 00745 | SELF FUNDING ADMINISTRATION |
| 00751 | STIRLING AND STIRLING |
| 00755 | LOCAL 145 - TEAMSTERS |
| 00756 | LOCAL 191 - TEAMSTERS |
| 00757 | LOCAL 443 - TEAMSTERS |
| 00758 | LOCAL 536 - TEAMSTERS |
| 00759 | LOCAL 559 - TEAMSTERS |
| 00371 | MIDLAND MUTUAL LIFE INS CO THE |
| 00760 | LOCAL 617 - TEAMSTERS |
| 00761 | LOCAL 671 |
| 00762 | LOCAL 677 - TEAMSTERS |
| 00763 | LOCAL 798 - TEAMSTERS |
| 00764 | LOCAL 1035 - TEAMSTERS |
| 00765 | LOCAL 1040 - TEAMSTERS |
| 00766 | LOCAL 1150 - TEAMSTERS |
| 00768 | TR PAUL |
| 00769 | LOCAL 777 PIPEFITTERS |
| 00776 | UNITED ILLUMINATING |
| 00777 | UNIVERSAL MFG CO |
| 00778 | UTICA MUTUAL INS CO |
| 00787 | SOUTHWIRE AFFIL/WYRE WYND |
| 00788 | CONNECTICARE |
| 00789 | YALE HEALTH PLAN |
| 00790 | KAISER FOUNDATION HEALTH PLAN |
| 00809 | COMPREHENSIVE BENEFIT SERVICE |
| 00811 | FIRESTONE INS. |
| 00812 | CHAMPUS |
| 00813 | AARP INSURANCE PROGRAM |
| 00814 | FIRST HEALTH ALTA/STRATEGIES |
| 00815 | ALTA HEALTH STRATEGIES |
| 00816 | BLUE CROSS GENERIC CODE |
| 00818 | EASTERN BENEFIT |
| 00819 | LOCAL 38, 40 - SHEET METAL |
| 00820 | LOCAL 282 / LOCAL 173 |
| 00824 | W.J. JONES ADMINISTRATION |
| 00826 | PHYSICIANS HEALTH SERVICES |
| 00840 | LOCAL 493 - HLTH SER PLAN |

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| 00842 | NEW ENGLAND HEALTH CARE-NJ |
| 00843 | OLIN DIRECT CLAIMS |
| 00844 | PHILADELPHIA AMERICAN LIFE |
| 00845 | ROBERT S WEISS CO. |
| 00846 | ZEBA TRUST |
| 00847 | NCAS - R.I. |
| 00848 | PARTNERS NATIONAL |
| 00851 | NESTLES FOOD/NESTLES USA |
| 00855 | PACIFIC FIDELITY |
| 00861 | UNITED CHAMBERS INS |
| 00862 | LOCAL 90 IBEW |
| 00863 | HEALTH CORP OF AMERICA |
| 00864 | BENEFIT PLAN NEW ENGLAND |
| 00866 | CELTIC LIFE INS |
| 00870 | LOCAL 155 |
| 00872 | BLUE CROSS OF ALABAMA |
| 00877 | UNITED PLANS |
| 00879 | SUBURBAN HEALTH PLAN |
| 00880 | PROFESSIONAL PENSIONS INC. |
| 00881 | BAYSTATE HEALTH PLAN |
| 00883 | WESTERN GENERAL SERVICES |
| 00884 | WILLSE & ASSOCIATES INC |
| 00892 | BX ILLINOIS |
| 00894 | CENTRAL MASS HEALTH CARE |
| 00895 | BX FLORIDA |
| 00897 | JOHN ALDEN INS CO |
| 00898 | COMPLETE CARE CONTROL |
| 00903 | NEW ENGLAND HEALTH CARE |
| 00905 | INTERACTIVE BENEFIT CORP |
| 00908 | SUNRISE HEALTHCARE CORP. |
| 00910 | EMPLOYEE BENEFIT PLAN |
| 00911 | ASSOC PLAN ADMINISTRATORS |
| 00916 | AMERICA'S HEALTH PLAN |
| 00921 | ARBOR ACRES |
| 00926 | JOHN DEERE INS. CO. |
| 00928 | HEALTH NEW ENGLAND |
| 00929 | MCDONOUGH CAPERTON |
| 00936 | TPA ARIZONIA |
| 00940 | HEALTH CHOICE |
| 00941 | FEDERAL EXPRESS |
| 00947 | EQUIFAX(HEALTH ECONOMICS CORP) |
| 00949 | LOCAL 481 - TEAMSTERS |
| 00955 | LOCAL 363 - TEAMSTERS |
| 00956 | LOCAL 106 - TEAMSTERS |
| 00958 | MED SPAN INC |
| 00965 | HEALTH PLAN ADMIN. |

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| 00966 | UNION MUTUAL MEDICAL FUND |
| 00968 | BLUE CROSS/BLUE SHIELD WEST PA |
| 00970 | POMPCO |
| 00973 | BLUE CROSS/BLUE SHIELD OREGON |
| 00974 | LOCAL 15/424 - TEAMSTERS |
| 00975 | OXFORD HEALTH PLAN |
| 00977 | LOCAL 24 - TEAMSTERS |
| 00982 | ABA/PGT EMPLOYEE MED TRUST |
| 00984 | UNITED MEDICAL RESOURCES |
| 00990 | HOSPICE |
| 00991 | PPO - OTHER |
| 00992 | HM0 - OTHER |
| 00993 | NO CHARGE |
| 00994 | TITLE V |
| 00995 | COMMERCIAL |
| 00996 | OTHER FEDERAL |
| 00997 | WORKMAN'S COMPENSATION |
| 00998 | SELF PAY |
| 00999 | OTHER (UNLISTED INSURANCE) |
| 00A-B | BX AMERICAN BOAT BUILDERS |
| 00A-L | BX ALLEGHENY LUD STL HOURLY |
| 00A-T | BX ALGONQUIN GAS TRANSMISS CO |
| 00A-W | BX AUTOMO WHOLESALERS ASSOC NE |
| 00A01 | MEGA LIFE |
| 00A05 | CHESTERFIELD RESOURCES |
| 00A08 | STRATEGIC RESOURCE CO. |
| 00A10 | BX ALLEGHENY LUD RETIREES |
| 00A11 | BX ALLEGHENY LUDLUM |
| 00A24 | FALLON COMM. HEALTH PLAN |
| 00A53 | BAKERS CHOICE PRODUCTS |
| 00A54 | BLAIR MILL ADMINISTRATORS |
| 00A68 | MASHANTUCKET PEQUOT |
| 00A83 | AFTRA HEALTH FUND |
| 00A84 | MOHAWK VALLEY PHYSICIANS |
| 00A89 | COTTER MEMBER INS. |
| 00A97 | MUTUAL HEALTH AGENCY |
| 00AAA | AAA LIFE INS |
| 00AB1 | BX AMERICAN BOAT BUILDERS |
| 00ABH | ADVANCED BEHAVIORAL HEALTH |
| 00ABS | BX AMERICNA BUREAU OF SHIPPING |
| 00ACB | BX CITIBANK N.A. |
| 00ACN | AMERICAN CANCER SOCIETY |
| 00ACP | AMERICAN COLLEGE OF PHYSICIANS |
| 00ACR | ALICARE |
| 00ACS | AMER COLLEGE SURGEONS INS |

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| 00ADI | ADVANCED INSURANCE |
| 00ADM | ADMINISTRATIVE SERVICES |
| 00ADS | ADMINISTAR DEFENSE SERVICES |
| 00ADT | BX AMERICAN DISTRICT TELEGRAPH |
| 00AFC | BX ALLIED FEDERATED CO-OPS INC |
| 00AFF | AFFORDABLE |
| 00AGI | BX NAT AGRIMARK |
| 00AGL | AMER GUARANTY LIFE INS CO |
| 00AGW | BX AGWAY |
| 00AHC | AFFILIATED HEALTHCARE |
| 00AHP | SELECT CHOICE(AETNA HP SNE) |
| 00AIA | AIA BENEFIT TRUST |
| 00AIC | BX AIR COND CONTRACTORS AMER |
| 00AIG | COMP:AIG INTL |
| 00AIL | AMERICAN INTERNATIONAL LIFE |
| 00AIN | AIU NORTH AMERICA |
| 00AIS | BX AMERICAN INST FOR RESEARCH |
| 00AIU | BX ATLANTIC INDEPENDENT UNION |
| 00AJF | ALLEN J FLOOD INS |
| 00AKB | ARKANSAS BEST |
| 00AL1 | BX ALLEGHENY LUD STL HRLY PRE |
| 00AL2 | BX ALLEGHENY LUD STL SALARIED |
| 00AL3 | BX ALLEGHENY LUD STL NON EXEMP |
| 00AL5 | BX ALLEGHENY LUD STL SALESMEN |
| 00AL6 | BX ALLEGHENY LUDLUM STEEL CORP |
| 00AL8 | BX ALLEGHENY LUDLUM STEEL |
| 00AL9 | BX ALLEGHENY LUDLUM |
| 00ALB | BX ST ALBANS MILK COOPERATIVE |
| 00ALC | BX ALLING AND CORY |
| 00ALI | BX AMALGAMATED LIFE INS (REG) |
| 00ALO | BX AMALGAMATED LIFE INS (EXEC) |
| 00ALP | ALLIED PILOTS ASSOCIATION |
| 00ALS | BX ALLIED STORES CORP READS |
| 00AMA | AMA INS CO |
| 00AMC | AMICA MUTUAL INS. CO. |
| 00AMD | AMD |
| 00AMF | AMERICAN FAMILY |
| 00AMG | AMERICAN GROUP |
| 00AMH | AV MED HEALTH |
| 00AMI | AMERICAN INS. |
| 00AMK | BX AMETEK, INCORPORATED |
| 00AMN | AMERIPLAN |
| 00AMP | BX ASSOC MSTR TRSTE OF NJ FUEL |
| 00AMR | AMERICARES |
| 00AMS | AMS HEALTH BENEFITS |
| 00ANA | BX ANIMED INC |

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| 00ANG | ANGELOVIK INSURANCE |
| 00APA | BX PENNWALT - API |
| 00APH | APHA |
| 00APN | AMERICAN PIONEER |
| 00APO | BX ASSOC PRESS (GUILD EMPLOYEE |
| 00APR | BX ASSOCIATED PRESS |
| 00APS | BX ASSOC PRESS (ADMIN STAFF) |
| 00APT | BX ASSOC PRESS (ADMIN STF RET |
| 00ARA | ARA PLAN |
| 00ARD | BX ARGON MEDICAL CORP |
| 00ARO | BX IUE AFL-CIO HEALTH FUND |
| 00ARS | AON RISK SERVICES |
| 00ASO | BX ALLIED-SIGNAL CORP |
| 00ASU | BX ALLIED-SIGNAL CORP |
| 00ASY | AMERICAN MANAGEMENT SYSTEMS |
| 00AT1 | BX AMER TEL & TEL SME GROUPS |
| 00ATA | APTA |
| 00ATG | BX AMER TEL/TEL GENERAL DEPTS |
| 00ATI | BX AMER TEL & TEL INTERNAT'L |
| 00ATT | BX NAT AT&T |
| 00AUD | BX AUDIOVOX |
| 00AUT | BX AUTOMATED CONCEPTS, INC |
| 00AWN | AWANE |
| 00AWT | BX N Y ST AUTOMOTIVE WHL SALES |
| 00B-D | BX BENDIX CORP INSTRUMENT PROD |
| 00B-I | BX BUTCHER & CO INC |
| 00B-S | BX BROCKWAY SMITH |
| 00B08 | DALY AND LEE AGENCY, INC. |
| 00B23 | CHICKERING GROUP |
| 00B32 | CAREMARK |
| 00B38 | First Fortis |
| 00B51 | ACCORDIA |
| 00B65 | CONFED. ADMIN. SERVICES INC. |
| 00B70 | GROUP RESOURCES |
| 00B92 | CHAMPVA CENTER |
| 00BAA | BX BELL ATLANTIC MGMNT SVCS |
| 00BAC | BACKUS EMPLOYEE HEALTH PLAN |
| 00BAP | BX BELL ATLANTIC PENSIONERS |
| 00BBI | BNAI BRITH INS |
| 00BCB | BX CITIBANK N.A. |
| 00BCL | BX BARCLAYS BANK INT'L LTD |
| 00BCN | BX BANK ON NY CO, INC THE |
| 00BDD | BX BROOME TIOGA DEL HLTH CNSRT |
| 00BEA | BEACON BENEFITS SERVICES |
| 00BEE | BEECH STREET CORPORATION |

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| 00BEN | BENECORP |
| 00BFC | BROWN FORMAN CORP |
| 00BHB | BRADLEY HEALTHCARE FOR BUSINES |
| 00BHF | BRIDGEPORT HOSP. FAMILY HEALTH |
| 00BHR | BECKWITH HIGHTOWER & RENB |
| 00BHS | BX BARGIN HAROLD'S USA, INC |
| 00BIB | BETTER BABIES IN BRIDGEPORT |
| 00BLI | BANKERS COMM LIFE INS CO |
| 00BLL | BX PENNWALT - BELLEVILLE |
| 00BMA | BX BELL ATLANTIC MANAGEMENT |
| 00BMO | BX BOOK OF THE MONTH CLUB |
| 00BNF | BENEFIT CONCEPTS |
| 00BNM | BENEFIT MANAGEMENT OF ME |
| 00BNP | BENEFIT PLANNERS |
| 00BNS | BENEFIT SERVICES |
| 00BOD | BUREAU OF DISABILITY |
| 00BOP | BOARD OF PENSIONS |
| 00BRK | BERKLEY ASSOC |
| 00BRS | BROKERAGE SERVICES |
| 00BSC | BX BUILDERS SQUARE, INC |
| 00BSS | BX BUILDERS SQUARE, INC |
| 00BST | BX BEAR STEARNS & CO |
| 00BSY | BENEFIT SYSTEM SER |
| 00BTD | BX BROOME TIOGA DELAWARE HLTH |
| 00BTT | DMR-CT SW REGION(FORM.BIRTH-3) |
| 00BVO | BX BIG Y FOODS |
| 00BXN | BX NATIONAL - GENERIC |
| 00C-E | BX CHUBB LIFE AMERICA |
| 00C-F | BX CUMBERLAND FARMS |
| 00C-H | BX CARTEN/SHERWOOD DIV HARSC |
| 00C-K | BX CUSHMAN & WAKEFIELD |
| 00C-S | BX C.C. COWLES & COMPANY |
| 00C01 | GENERAL ACCIDENT |
| 00C02 | HEALTH RISK MANAGEMENT |
| 00C03 | CONSOLIDATED GROUP TRUST |
| 00C04 | HOME INDEMNITY |
| 00C22 | WESTPORT BENEFITS(GENELCO) |
| 00C26 | PHS - CARE FREE |
| 00C32 | ALLIANCE AFFORDABLE HEALTH |
| 00C74 | CAPITAL DIST. PHYSICIAN HEALTH |
| 00C83 | LOCAL 1430 |
| 00C99 | CITY WELFARE |
| 00CAB | CA BS |
| 00CAC | CRAWFORD & CO |
| 00CAF | CAREFLORIDA |
| 00CAI | CONFERENCE ASSOCIATES INSURANC |

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| 00CAS | CREATE A SCAPE |
| 00CBA | BX PHARMACY - CIBA CEIGY CORP |
| 00CBN | CHARTER BENEFITS |
| 00CBS | BX CBS INCORPORATED |
| 00CCC | BX CHASE/CLARK CREDIT CO |
| 00CCM | BX CNTRL SQUARE SCHL DIS MEDCR |
| 00CCN | COMMUNITY CARE NETWORK |
| 00CCR | CHOICE CARE CORP CTR |
| 00CCS | CC SYSTEMS CORP |
| 00CCW | BX AMALGAMATED CTN & ALL INDS |
| 00CEN | CENTRA BENEFIT SERVICES |
| 00CEX | BX MEMBERS & CLREKS INS PLAN |
| 00CFE | BX I.U.E. HEALTH FUND |
| 00CFG | BX CUMBERLAND FARMS |
| 00CFL | CT FIRST LIFE |
| 00CFV | BX CBS/FOX COMPANY |
| 00CFX | BX AMALGAMATED COTTON GARMENT |
| 00CGA | CATHOLIC GOLDEN AGE |
| 00CHB | CHUBB FIRST |
| 00CHC | COMMUNITY HEALTH CARE PLAN INC |
| 00CHI | CHAMPION INTERNATIONAL |
| 00CHL | CT HOSP LABORATORY NTWRK CHLN |
| 00CHN | CONSTITUTION HEALTH CARE |
| 00CHP | CIGNA HEALTH PLAN |
| 00CHS | BX CHUBB CORPORATION |
| 00CHW | CONN HOSP ASSOC WORKERS COMP |
| 00CIB | CIBA GEIGY |
| 00CIN | BX CIS CORPORATION |
| 00CJC | BX CJ CLARK - AMERICA INC |
| 00CKO | BX CLARKSON IND, INC |
| 00CLF | BX AMALGAMATED INS FUND CLOTH |
| 00CLI | CHESAPEAKE LIFE INS. CO |
| 00CMB | BX BANKERS TRUST COMPANY |
| 00CMG | BX TRSTS CPNTRS & MLWGHTS L 31 |
| 00CMH | CMG HEALTH |
| 00CMS | CLAIMS MANAGEMENT SERVICE |
| 00CNG | CONCORD GROUP |
| 00CNH | CONCENTRA HEALTH PLAN |
| 00CNL | BX COOPERS AND LYBRAND |
| 00CNS | CONSTITUTION HEALTH CARE |
| 00CNT | COMMUNITY HEALTH NETWORK |
| 00COC | COSTCARE |
| 00COK | BX PENNWALT CORPORATION |
| 00COM | COMMUNITY HEALTH PLAN |
| 00COR | CORESOURCE |

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| 00CRE | BX CRESTAR FINANCIAL |
| 00CRG | BX CBS RECORDS INC |
| 00CRS | COMP:RENAISSANCE STONE |
| 00CRV | BX W R GRACE CO CRYOVAC DIV |
| 00CSA | CORPORATE BUSINESS SERV ASSOC. |
| 00CSE | BX CHARMING SHOPPES NON EXECUT |
| 00CSG | BX CBS RECORDS INC |
| 00CSH | CONSUMER HEALTH NETWORK |
| 00CSI | BX COATED SALES |
| 00CSN | BX CHARMING SHOPPES EXECUTIVES |
| 00CSW | CENTRAL AND SOUTHWEST |
| 00CT1 | BX CARPENTER TECH (RETIRES) |
| 00CT2 | BX CARPENTER TECH (RETIRES) |
| 00CTC | CONNECTICOMP |
| 00CTF | BX AMALGAMATED CTN & ALL INDS |
| 00CTH | CONNECTICUT HEALTH PLAN |
| 00CUD | CENTRAL UNITED |
| 00CV1 | BX CONSUMER VALUE (MARK STEVEN |
| 00CV2 | BX CONSUMER VALUE (RETAIL) |
| 00CVL | COVENANT LIFE INS. |
| 00CVS | BX CONSUMER VALUE STORES |
| 00CWI | BX CHILD WORLD INCORPORATED |
| 00CWL | BX COWLES COMMUNICATION |
| 00CYT | CYTEC |
| 00D-A | BX D'ANGELO'S INCORPORATED |
| 00D-F | BX TRW DOT DIV MARLIN ROCKWELL |
| 00D-M | BX MORDECAI CHASE ASSOCIATES |
| 00D18 | PROFESSIONAL BENEFITS INSURANC |
| 00D45 | FHP |
| 00D71 | CONSOLIDATED HEALTH |
| 00DAB | DUNN & BRADSTREET |
| 00DBL | BX DREXEL BURNHAM LAMBERT, INC |
| 00DBP | DENTAL BENEFIT PLAN |
| 00DCB | BX CITIBANK N.A. |
| 00DCC | BX DICTAPHONE CORPORATION |
| 00DCF | BX DCF FOOD INDUSTRIES |
| 00DCH | BX ALAMDEIA MOTORS INC |
| 00DDA | BX DUNKIN DONUTS OF AMERICA |
| 00DDC | BX ILC DATA DEVICE CORP |
| 00DEL | DELTA DENTAL |
| 00DGD | DIRECTORS GUILD |
| 00DIS | DISNEY WORLDWIDE SERVICES |
| 00DLG | BX DAIRYLEA COOPERATIVE |
| 00DMB | D M B A |
| 00DMR | STATE OF CT-DEPT MENTAL RETARD |
| 00DNB | BX DUN & BRADSTREET CORP, THE |

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| 00DOC | CT DEPT OF CORRECTIONS |
| 00DOL | US DEPARTMENT OF LABOR |
| 00DPM | BX DIRECT PRESS/MODERN LITHO |
| 00DRO | BX DRAVO CORP - HOURLY |
| 00DRV | BX DRAVO CORP - SALARIED |
| 00DSY | BX DIOCESE OF SYRACUSE |
| 00DVA | DEPARTMENT OF VETERAN AFFAIRS |
| 00DVT | DARIEN VETERNARIAN |
| 00EAC | EASTERN CASUALTY |
| 00EAF | MEDICAID - EMER. ASSIST. FAMLY |
| 00EBA | EMPLOYEE BENEFIT ADM |
| 00EBC | EBAM CORP |
| 00EBI | EBI |
| 00EBN | EMPLOYEE MEDICAL BENEFITS |
| 00EBP | EMPLOYEE BENEFIT PLAN |
| 00EBS | BX EBASCO SVRCS INC (RETIREEES) |
| 00EBT | EMPLOYERS BENEFIT TRUST |
| 00EEB | EAGLE EMPLOYEE BENEFITS |
| 00EEH | EMPHEYSYS EMPLOYERS HEALTH |
| 00EGB | EMPERION/GALLAGER-BASSETT |
| 00EGY | BX EGYPTN CULTRL & EDU BUR STU |
| 00EHR | BX OPER ENGIN LOCAL 66 RETIREE |
| 00EHW | BX OPER ENGIN LOCAL 66 HJWF |
| 00EKC | BX EASTMAN KODAK |
| 00ELB | ELI LILLY EMP BENEFITS ADM |
| 00ELC | ELDORADO CLAIM |
| 00ELD | ELDERPLAN |
| 00EMB | BX MUTUAL BEN LIFE INS CO |
| 00EMC | BX EASTERN MILK PRODUCERS |
| 00EMH | EMERALD HEALTH |
| 00EMO | BX EDINN MANAGEMENT CORP |
| 00EMS | BX EM INDUSTIRES |
| 00EPM | BX EDAN PARK |
| 00EQU | EQUICOR |
| 00ERS | BX E R SQUIBB & SONS INCORP |
| 00ERV | BX ERVING PAPER MILLS |
| 00ESI | BX EBASCO SRVCS INC (ACTIVE) |
| 00EWC | BX EDWARD WECK AND COMP |
| 00EXB | EXTENDED BENEFITS |
| 00EXX | EXXON ANNUITANT |
| 00FAB | BX FIRST AMER BANKSHARE, INC. |
| 00FAR | BX FARM CREDIT BANKS |
| 00FBM | BX NEW YORK FARM BUREAU |
| 00FBS | FRINGE BENEFIT SERVICES |
| 00FCC | FIRST CHOICE |

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| 00FCL | FIRST CONNECTICUT LIFE |
| 00FCR | BX FARM CREDIT ADMINISTRATION |
| 00FDA | FEDERAL ASSIST |
| 00FDC | BX FED DEPOSIT INSURANCE CORP |
| 00FEP | BS NAT FEDERAL GOV'T |
| 00FHA | FOUNTAINHEAD ADMIN |
| 00FIA | FIRST AMERICAN |
| 00FIS | BX FISCHBACH CORPORATION |
| 00FLF | FEDERATED LIFE |
| 00FLM | BX JOINT BD FUR LEATHER MACHIN |
| 00FNL | FIRST NATIONAL LIFE |
| 00FNY | BX FIRST AMER BANK OF NEW YORK |
| 00FOH | FIRST OPTION HEALTH PLAN |
| 00FRA | FLEET RESERVE ASSOC |
| 00FRB | BX FED RESERVE BANK OF BOSTON |
| 00FRI | AM FRIDAYS, INC. |
| 00FSC | FIRST CHICAGO |
| 00FSH | BX M H FISHMAN CO INC |
| 00FSU | FIRST UNITED |
| 00FXL | BX CBS (OPTION CO-PAY) |
| 00G-M | BX GMAC MORTGAGE CORP |
| 00GAP | MEDIGAP |
| 00GCR | BX CULBRO CORPORATION |
| 00GDU | GRAND UNION |
| 00GEC | BX GENERAL ELECTRIC |
| 00GHC | GROUP HEALTH COOPERATIVE |
| 00GHP | GRIFFIN HEALTH PLAN |
| 00GIB | GOVERNMENT IND. BENEFITS |
| 00GNM | GREATER NY MUTUAL |
| 00GOL | BX GOLDMAN SACHS & COMP |
| 00GRW | BX GOLUB CORP - SPECIAL GROUP |
| 00GSV | GRANITE SERVICES |
| 00GT1 | BX THREADING TOOLS |
| 00GT2 | BX GEOMETRIC TL DIV M RKWL SAL |
| 00GT3 | BX THREADING TLS M ROCKWL 39 W |
| 00GT4 | BX THREADING TOOL <65 SAL RETS |
| 00GT5 | BX THREADING TOOL HRLY SAL <65 |
| 00GT6 | BX THREADING TOOL >65 TRW INC |
| 00GT7 | BX THREADING TOOL >65 TRW INC |
| 00GT8 | BX THREADING TOOL >65 TRW INC |
| 00GTI | BX GREEN THUMB, INC |
| 00GUH | BX SCHENLEY IND EST 87 HRLY |
| 00GUS | BX GUINNESS DISTILLER, INC |
| 00GWI | BX SIMON & SCHUSTER INC |
| 00GWU | GEORGE WASHINGTON UNIVERSITY |
| 00GYT | GOODYEAR TIRE |

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| 00H-H | BX HANDY & HARMAN |
| 00H-I | BX HALSTED INDUSTRIES, INC |
| 00H-L | BX HOWARD JOHNSON MOTOR LODGES |
| 00HAC | HOLDEN AND CO |
| 00HAS | BX DELOITTE HASKINS AND SELLS |
| 00HAV | HEALTHADVANTAGE |
| 00HBA | BX HISCOCK & BARCLAY |
| 00HBL | HOME BENEFICIAL LIFE INS. |
| 00HBN | HEALTH BENEFITS |
| 00HCC | HEALTH CHOICE OF CT |
| 00HCI | HEALTH CARE INC. |
| 00HCO | HUGHES CLAIM OFFICE |
| 00HCS | HEALTH CLAIM SERVICES |
| 00HCV | HEALTH CARE VALUE MANAGEMENT |
| 00HEA | HEALTHNET |
| 00HH1 | BX HANDY & HARMAN |
| 00HH2 | BX HANDY AND HARMAN COBRA |
| 00HHL | HARBOR HEALTH |
| 00HHP | HIP HEALTH PLAN |
| 00HKP | HEALTH KEEPERS |
| 00HLA | BX HOFFMAN LA ROCHE |
| 00HLE | BX HOFFMAN LA ROCHE, INC. |
| 00HLJ | HERBERT L. JAMISON |
| 00HLK | HEALTHLINK |
| 00HMC | HEALTH MANAGEMENT CORP |
| 00HNA | HEALTH NETWORK AMERICA |
| 00HNH | HEALTH SOURCE NH |
| 00HPS | HEALTHPLUS |
| 00HRB | HARRINGTON BENEFIT |
| 00HRE | BX HOFFMAN LA ROCHE RETIREES |
| 00HRI | BX HEALTH RESEARCH, INC |
| 00HRT | HEALTH RIGHT |
| 00HRZ | HERTZ |
| 00HSA | BX HOWLAND STEINBACH/HOCHSCHIL |
| 00HSC | HEALTHSOURCE CONN |
| 00HSI | BX BROOKS DRUGS |
| 00HSL | HOME SECURITY LIFE INS |
| 00HSO | HEALTH SOURCE |
| 00HSS | BX SUPERMARKET GEN RETIREES |
| 00HSU | HOSP OF SPECIAL SURGERY |
| 00HTC | BX HELME TOBACCO COMPANY |
| 00HUM | HUMANA |
| 00HUS | BX HUGIN SWEDA, INC |
| 00HVD | HARVARD COMM HEALTH PLAN |
| 00HYD | BX HYDRO LAWN, INC |

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| 00IBA | INT'L BENEFIT ADMIN |
| 00IBC | BX IRVING BANK CORP IRVING TRS |
| 00IBM | BX IBM |
| 00ICI | ICI HEALTH CLAIMS |
| 00IDC | IHC DIRECT CARE |
| 00IDD | BX ILC DATA DEVICE (EXECUTIVES) |
| 00IDX | INDEX |
| 00IEW | BX I.U.E. HEALTH FUND |
| 00IGA | ISLAND GROUP ADMINISTRATION |
| 00IHC | BX INTER'ST HOTELS CORP (MARRI |
| 00IMG | INTERNATIONAL MEDICAL GROUP |
| 00IMP | BX INST OF MODERN PROCEDURES |
| 00IND | INDECS OF EBASCO |
| 00ING | INTEGRA |
| 00INT | INTERCONTINENTAL CORP |
| 00IRI | BX INTERSTATE RESOURCES |
| 00IRQ | BX CULTURE OFF OF IRAQ STUDENT |
| 00ISV | INSERVCO |
| 00ITA | BX ITAL GOVT HLTH INS NATL PGM |
| 00IWO | BX IRON WRS DIST COUNCIL W NY |
| 00J-F | BX JOSEPH A BANK CLOTHIERS |
| 00JFM | JF MALLOY & ASSOC |
| 00JFP | JEFFERSON PILOT |
| 00JLA | BX JONES & LAUGHLIN STL ACTIVE |
| 00JLR | BX JONES & LAUGHLIN STL RETIRE |
| 00JMC | BX JORDAN MARSH CO |
| 00JMH | JMH EMPLOYEE HEALTH |
| 00JPA | JOHN PEARL ASSOC. |
| 00JWF | BX JOINT WELFARE ADMIN FUND |
| 00K-A | BX KEYES ASSOCIATES |
| 00K-C | BX KEDS CORP DIV OF STRIDE RIT |
| 00K-I | BX KNOLL INTERNATIONAL INC |
| 00KAI | KANAWHA INS |
| 00KAY | BX KAY JEWELERS INC |
| 00KCC | BX EASTMAN KODAK COBRA |
| 00KCI | BX KOOPERS CO INC |
| 00KEY | BX KEY CORP |
| 00KIC | KIMBERLY-CLARK |
| 00KM2 | BX KENNAMETAL INC |
| 00KMC | BX K-MART CORP (STANDARD) |
| 00KNS | KEMPER NATIONAL SERVICES |
| 00KOP | BX KOOPERS CO INC (SALARY) |
| 00KRE | BX S H KRESS |
| 00KS1 | BX KELLY SRVCS INC LICENSEES |
| 00KS2 | BX KELLY SRVCS INC (COBRA ONLY) |
| 00KSM | BX K-MART CORP (COST SHARING) |

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| 00KSO | BX KELLY SRVCS INC ACTIVE EMPL |
| 00KVI | KVI |
| 00KWT | BX CULTURAL DIV OF THE EMBASSY |
| 00KYH | KEYSTONE HEALTH |
| 00L-D | BX NE DEPTS ILGWU DEPENDENTS |
| 00L-F | BX LOCAL 413 WLFARE TRST FUND |
| 00L-W | BX NE DEPTS ILGWU WORKERS |
| 00L00 | LOCAL UNION INS. - MISC |
| 00L02 | LOCAL 2 |
| 00L16 | LOCAL 16 BRICKLAYERS |
| 00L19 | LOCAL 191 |
| 00L20 | LOCAL 958 |
| 00L21 | LOCAL 210 - CARPENTERS |
| 00L23 | LOCAL 230 - CT LABORERS |
| 00L39 | LOCAL 39 |
| 00L43 | LOCAL 43 - CARPENTERS |
| 00L44 | LOCAL 44 - BRICKLAYER'S FUND |
| 00L47 | LOCAL 478 - OPERATING ENGINEER |
| 00L53 | LOCAL 919 |
| 00L99 | LOCAL 1199 - HEALTH CARE EMPL |
| 00LAB | BX BELL TEL LABORATORIES, INC |
| 00LAT | LORD AND TAYLORS |
| 00LFN | BX LINCOLN FIRST BANK |
| 00LHC | LAWRENCE HEALTHCARE |
| 00LMH | LIFE L&M |
| 00LMS | LOOMIS COMPANY |
| 00LRA | BX LTV - STL RETIRED HOURLY |
| 00LRB | BX LTV - STL RET HRLY >071686 |
| 00LRD | BX LTV - STL RET HRLY >071686 |
| 00LRG | BX LTV - STL /RETIRED HOURLY |
| 00LRL | BX LTV STL/UMWA ACT RET/SUR SP |
| 00LTE | BX LTV - STL SALARIED ACTIVE |
| 00LTF | BX LTV - STL HRLY PENSIONERS |
| 00LTG | BX LTV - STL SALAR'D PENSIONER |
| 00LTH | BX LTV - STL REP STL CORP MINI |
| 00LTK | BX LTV - STL SALAR ACT <10 YRS |
| 00LTL | BX LTV - STL SALAR ACT >10 YRS |
| 00LTM | BX LTV - STL SALAR'D RETIREES |
| 00LTS | BX LTV - STL HOURLY/SAL <10 YR |
| 00LTT | BX LTV - STL HRLY/SALAR >10 YR |
| 00LUK | BX PENNWALT - LUCIDOL |
| 00LWD | BX LOCAL 734 WLFARE FND PA EMP |
| 00LXA | BX LOCAL 734 WLFARE FND NJ EMP |
| 00M-A | BX ROBERT A MAIN & SNS |
| 00M-C | BX MAIN HURDMAN & CRANSTOUN |
| 00M-G | BX MAC-GRAY, INC. |

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| 00M-L | BX MILES LABORATORIES (HOURLY) |
| 00M-S | BX E & B MARINE SUPPLY, INC |
| 00MAA | MUTUAL ASSOCIATION ADM |
| 00MAE | BX METCALF AND EDDY |
| 00MAL | BX METROMAIL CORP |
| 00MAN | BX MANTECH INTERNATIONAL CORP |
| 00MBA | BX MUTUAL BEN LIFE INS (AGENTS |
| 00MBB | BX MUTUAL BEN LIFE - HOME OFF |
| 00MBC | MAGELLAN BEHAVIORAL HEALTH |
| 00MBD | BX METROPOLITAN BROADCASTING |
| 00MBE | BX MUTUAL BEN LIFE INS OFF EMP |
| 00MBH | BX MUTUAL BEN LIFE HM OFF CMM |
| 00MBI | BX MUTUAL BUSINESS CENTER INC |
| 00MBN | MANAGED BENEFIT ADMIN |
| 00MBS | BX MONROE SYS FOR BUSINESS |
| 00MCD | MCDOWELL AGENCY |
| 00MCO | BX METAL IMPROVEMENT CO |
| 00MCR | BX METRO NORTH COMMUTER RAILRD |
| 00MCS | BX MC GREGOR SPTSWEAR RAPID AM |
| 00MDA | MEDICA |
| 00MDC | MEDCO (MBC)-PSYCHIATRY |
| 00MDD | MEDICAID MGD CARE - OTHER |
| 00MDH | MD HEALTH PLAN |
| 00MDP | MEDIPLAN |
| 00MDR | MEDICARE MGD CARE |
| 00MDS | MAY DEPARTMENT STORES |
| 00MDV | MEDVIEW |
| 00MED | MEDCO BEHAVIORAL HEALTH |
| 00MEP | MEDI PLUS |
| 00MET | BX METROMEDIA INC |
| 00MGC | MAGNACARE |
| 00MGL | BX GLEN ALDEN |
| 00MHC | BX MANUFACTURES HANOVER CORP |
| 00MIC | BX METAL IMPROVEMENT CO INC |
| 00MIE | BX MID ATLANTIC IND ELEC CNTRC |
| 00MIP | MEMBER INSURANCE PROGRAM |
| 00ML1 | BX MILES LABORATORIES COBRA |
| 00MLB | MAJOR LEAGUE BASEBALL |
| 00MLF | MILFORD EMPLOYEE HEALTH PLAN |
| 00MLP | MULTI PLAN |
| 00MMB | MONTANA MEDICAL BENEFITS |
| 00MMG | BX G MC NEW (RAPID AMERICAN) |
| 00MMO | MEDICAL MUTUAL OHIO |
| 00MMP | MASTERS MATES & PILOTS |
| 00MNB | BX MELLON BANK N. A. |
| 00MNC | BX METRO N CMTR RR COBRA SUBSC |

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| 00MNH | MINNESOTA HEALTH CARE |
| 00MOR | BX MORSE/DIESEL |
| 00MOT | MOTOROLA BENEFITS |
| 00MPC | BX MILLIPORE CORP |
| 00MPH | BX G.C. MURPHY |
| 00MRR | BX MORRISON, INC. |
| 00MS1 | BX E & B MARINE SUPPLY, INC |
| 00MS2 | BX E & B MARINE SUPPLY, INC |
| 00MSC | BX MELLON-STUART CO |
| 00MSH | MASS HEALTH |
| 00MSI | MED SPAN INC. |
| 00MSO | BX E & B MARINE SUPPLY, INC |
| 00MSP | MED SPAN |
| 00MST | MASTERCARE |
| 00MTH | UNITEDHEALTHCARE(METRA-HEALTH) |
| 00MVA | MOTOR VEHICLE ADMINISTRATION |
| 00MVM | GROUP BENEFIT SERVICES (MEDCO) |
| 00MVP | MVP HEALTH PLAN |
| 00MXM | MIDDLESEX MUTUAL |
| 00N-J | BX NORTH & JUDD, INC HOURLY |
| 00N-K | BX ANDAL CORP FRM NAT'L KINNEY |
| 00N-O | BX N ENG COUNCIL OF OPTOMETRIS |
| 00N01 | BX N ENG COUNCIL OF OPTOMETRIS |
| 00NAA | NORTH AMERICAN ADMINISTRATOR |
| 00NAL | NALC(NATL ASSN LTR CARR) |
| 00NAM | NAMIC |
| 00NAS | NATIONAL AUTO SPRINKLER |
| 00NAT | BX ATT - BELL LABS |
| 00NBC | NEW YORK BUS CO |
| 00NBG | NBGH EMPLOYEE PLAN |
| 00NBK | NORTHBROOK |
| 00NCA | NCAS |
| 00NCJ | BX NAT'L CONF OF CHRSTNS & JEW |
| 00NDC | NORTHEAST DIRECT HEALTH |
| 00NEB | BX NEBRASKA |
| 00NEH | NEW ENGLAND HEALTHCARE EFW |
| 00NEP | NEW ENGLAND BENEFIT PLAN |
| 00NEU | NORTHEAST UTILITIES |
| 00NFT | NO FAULT INSURANCE |
| 00NFU | BX NAVY FEDERAL CREDIT UNION |
| 00NGP | NJADA GROUP |
| 00NGS | NGS |
| 00NHE | NATIONAL HEALTH |
| 00NHI | NATIONAL HEALTH INS |
| 00NJ2 | BX NORTH & JUDD, INC |
| 00NJ3 | BX NORTH & JUDD RET COBRA |

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| 00NJ4 | BX NORTH & JUDD RET COBRA |
| 00NJC | BX N J CARPENTERS WELFARE FUND |
| 00NMH | NEW MILFORD EMPLOYEE HLTH PLAN |
| 00NOR | BX NORSTAR-BANCORP INC. |
| 00NPD | NORWALK POLICE DEPARTMENT |
| 00NPL | NIPPON LIFE |
| 00NPN | NPPN |
| 00NRL | NATIONAL RURAL LTR CARRIERS |
| 00NSE | NASE |
| 00NSF | NORTHWESTERN SECURITY LIFE |
| 00NSI | NATIONAL STUDENT INS |
| 00NVF | BX NVF CO (DIV SHARON STEEL) |
| 00NVT | BX BANKING & FIN INSTIT. NY |
| 00NWB | BX NATIONAL WESTMINSTER BANK |
| 00NWK | BX NEWSWEEK INC |
| 00NWR | BX NATIONAL WESTMINSTER BANK |
| 00NYB | BX NEW YORK STATE BAR ASSOC |
| 00NYE | NYEDA HEALTH |
| 00NYL | NYL CARE HEALTH PLANS OF CONN |
| 00NYM | NEW YORK MEDICAID |
| 00NYN | BX NYNEX |
| 00NYR | NYLACOR |
| 00NYW | WELLCARE OF NY |
| 00OCT | BX OFF OF THE COMPT OF THE CUR |
| 00OGA | OHIO GRAPHIC ARTS HLTH |
| 00OGI | BX OSSMONN GROUP |
| 00OGL | BX OGILVY & MATHER INC |
| 00OHO | BX STATE OF OHIO |
| 00OLY | BX OLYMPUS CAMERA |
| 00OMN | BX STUDENTS (SULTANATE OF OMAN |
| 00OPC | OPTIMUM CHOICE |
| 00OPE | BX INT. UN OF OPER ENG PA & DE |
| 00OTU | BX OUTLET COMPANY, THE |
| 00P-C | BX PALL CORPORATION |
| 00P-G | BX PR0CTOR & GAMBLE (COBRA) |
| 00P-S | BX MERITOR CREDIT CORP |
| 00PAS | PREFERRED ASSURANCE |
| 00PBH | PROBEHAVIORAL HEALTH |
| 00PCA | BX GOLUB CORP - MAIN GROUP |
| 00PCB | PACIFIC BENEFIT |
| 00PCC | BX PITTSBURG CORNING CORP |
| 00PCF | PACIFIC HOUSE |
| 00PCH | PACIFIC HERITAGE |
| 00PCI | BX PARK COMMUNICATIONS |
| 00PDG | BX PEOPLES DRUG STORE |
| 00PDI | PLAN DATA INC. |

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| 00PEN | PENSION ASSOCIATES |
| 00PFC | PROFESSIONAL CLAIMS |
| 00PFE | PACIFICARE (SECURE HORIZONS) |
| 00PFI | PREFERRED WORKS |
| 00PFL | PFL LIFE |
| 00PFR | PREFERRED INS |
| 00PG1 | BX PROCTOR & GAMBLE (RETIRES) |
| 00PGI | PATRIOT GENERAL INSR |
| 00PGS | PROGRESSIVE INS. |
| 00PHC | PRUDENTIAL HEALTH CARE OF CT |
| 00PHH | PREFERRED HEALTH |
| 00PHM | PATHMARK |
| 00PHS | PRIVATE HEALTH CARE SYSTEMS |
| 00PIK | BX PICKWICK INTERNATIONAL |
| 00PKF | BX PANNELL KERR FORSTER |
| 00PMA | PIEDMONT ADMINISTRATORS |
| 00PMI | PHYSICIANS MUTUAL INS CO |
| 00PNA | BX PNC FINANCIAL CORP |
| 00PNC | BX PNC FINANCIAL CORPORATION |
| 00PND | BX IUE AFL-CIO HEALTH FUND PRO |
| 00PNR | PIONEER ADJUSTMENT |
| 00PNT | PAINTERS DISTR. |
| 00POL | BX POLYMER CORPORATION |
| 00PPI | PRO PSYCH, INC. |
| 00PRA | PREMIER ASSIST |
| 00PRC | BX COMMONWEALTH OF PUERTO RICO |
| 00PRE | BX PREMIER INDUSTRIAL CORP |
| 00PRF | BX PREMIER INDUSTRIAL CORP |
| 00PRG | BX PREMIER INDUSTRIAL CORP |
| 00PRH | BX PREMIER INDUSTRIAL CORP |
| 00PRI | BX PARISIAN, INCORPORATED |
| 00PRJ | BX PREMIER INDUSTRIAL CORP |
| 00PRL | PROVIDIAN LIFE |
| 00PRO | PROAMERICA |
| 00PRU | PRUCARE |
| 00PRV | PROVIDENCE-MCR |
| 00PSG | BX PURITY SUPREME SUPERMARKETS |
| 00PSI | PLAN SERVICES INC. |
| 00PSK | BX PENSKE CORP |
| 00PSL | PACIFIC STANDARD LIFE INS |
| 00PSY | PSYCHOLOGICAL RESOURCES |
| 00PTH | PATHWISE BEHAVIORAL HEALTH |
| 00PYR | PYRAMID LIFE |
| 00R-H | BX ROHM & HAAS CO |
| 00R-L | BX ROHM & HAAS CO |
| 00R-W | BX RAND-WHITNEY ROBERTSON |

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| 00RAA | BX WORLD WIDE COMP & COMMUNICA |
| 00RAD | BX ADAP (DIV OF RITE AID) |
| 00RAI | BX RAPID AMER INDUSTRIES |
| 00RAL | RALSTON PURINA |
| 00RAX | BX RAXTON CORP DIV STOP & SHOP |
| 00RCB | RURAL CARRIER BENEFITS |
| 00RCN | BX REGIONAL DATA CENTER INC |
| 00RCU | BX UNITED FOOD COM WKRS LOC 23 |
| 00REB | BX ENCORE BOOKS DIV RITE AID |
| 00RES | BX N Y STATE RESTURANT ASSOC |
| 00RET | BX ALLIED-SIGNAL, INC |
| 00RFF | BX RESEARCH FUND OF SUNY |
| 00RFR | BX RESEARCH FUND OF SUNY |
| 00RGI | BX ROYAL INSURANCE |
| 00RHD | BX REUBEN H DONNELLEY CORP |
| 00RHS | BX ROHM & HAAS CO (SALES GROUP |
| 00RHX | BX RANDOM HOUSE |
| 00RIF | BX AMALGAMATED RETAIL INS FUND |
| 00RIP | BX AMALGAMATED RETAIL INS PTM |
| 00RIR | BX RITE AID (ROME DIV) |
| 00RIT | BX RITE AID CORPORATION |
| 00RJR | BX R. J. REYNOLDS |
| 00RKL | BX RICKEL HOME CENTERS |
| 00RMC | BX RIVERSIDE MEM CHAPELS & AFF |
| 00ROY | ROYAL INSURANCE |
| 00RPD | BX RAPID AMER CORP ETAL |
| 00RPE | BX RAPID AMER CORP COM EXEC ME |
| 00RPI | BX RHONE-POULEC INC |
| 00RRS | ROTO ROOTER SERVICES |
| 00RSC | BX RITE AID |
| 00RSD | BX REPUB STL HRLY & N/EXM <10Y |
| 00RSE | BX REPUB STL HRLY & N/EXM SALA |
| 00RSF | BX REPUB STL HRLY & N/EXM SAL |
| 00RSG | BX REP STL EXEMPT SALARIED |
| 00RSH | BX REPUB STL SPEC MED PLAN |
| 00RSL | BX REPUB STL (REDUCED BENEFITS |
| 00RSP | BX REPUB STL SALARY PENSION |
| 00RST | BX SERA - TEC DIV OF RITE AID |
| 00RTZ | BX RITZ CAMERA CENTERS, INC |
| 00RW1 | BX RAND-WHITNEY ROBERTSON PW |
| 00RW2 | BX RAND-WHITNEY ROBERTSON |
| 00RW3 | BX RAND-WHITNEY ROBERTSON |
| 00RW4 | BX RAND-WHITNEY ROBERTSON |
| 00RW5 | BX RAND-WHITNEY ROBERTSON |
| 00RW6 | BX RAND-WHITNEY ROBERTSON |
| 00RW7 | BX RAND-WHITNEY ROBERTSON |

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| 00RW8 | BX RAND-WHITNEY ROBERTSON |
| 00S-A | BX SEALED AIR CORP |
| 00S-E | BX STV ENGINEERS INC |
| 00S-I | BX STOWE WOODWARD INDUSTRIES |
| 00S-J | BX ST JOE MINERALS CORP |
| 00S-L | BX SMITHKLINE BECKMAN CORP |
| 00S-S | BX SERVICE STATION DEALERS AME |
| 00S00 | OTHER STATE AGENCIES |
| 00S01 | STATE SERVICES FOR THE BLIND |
| 00SA1 | BX SERVICE STATION DEALERS AME |
| 00SA2 | BX SERVICE STATION DEALERS |
| 00SA3 | SAS |
| 00SAG | SAG PRODUCERS HEALTH FUND |
| 00SAM | SAMBA |
| 00SAO | BX SERVICE STATION DEALERS |
| 00SAS | BX STOP AND SHOP |
| 00SBA | BX SABENA BELGIAN WORLD AIRLIN |
| 00SBD | SUNDANCE BENEFITS DEPT |
| 00SCE | SMITH CORONA EMPLOYEE |
| 00SCI | STATE COMP INS FUND |
| 00SCS | BX CNTRL SQUARE SCHL NON MEDCR |
| 00SEL | SELECTPRO |
| 00SEN | BX S E NICHOLS, INC |
| 00SFU | STATE INS. FUND |
| 00SGL | BX SUPERMARKET GEN PATHMARK EM |
| 00SGO | BX SWIFT GLASS CO |
| 00SHA | BX SHARON STL CORP ACTIVE SALA |
| 00SHH | BX SCHENLEY INDS INC HOURLY |
| 00SHP | SUBURBAN HEALTH PLAN |
| 00SHR | BX SHARETECH |
| 00SHS | STRATEGIC HEALTH SVC |
| 00SID | BX SID HARVEY INDUSTIRES |
| 00SIF | SECONDARY INQUIRY FUND |
| 00SIG | SHELBY INSURANCE GROUP |
| 00SIL | SILVER HILL HOSPITAL |
| 00SKD | BX S KLEIN DEPT STRS RAPID AME |
| 00SLS | BX ST LAWRENCE SEAWAY DEV CORP |
| 00SMA | BX SECURITY MUTUAL LIFE INS CO |
| 00SMB | BX MUTUAL BEN LIFE INS CO |
| 00SND | S.S. OF NOTRE DAME |
| 00SNE | SNET |
| 00SNL | SNL ADMINISTRATORS |
| 00SNT | BX SONAT INC |
| 00SOM | SHEFFIELD OLSON & MCQUEEN |
| 00SQC | BX SQUIBB CORP |
| 00SQH | BX E R SQUIBB & SONS HOURLY |

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| 00SRW | BX SHERWOOD MEDCL PRODUCTD DIV |
| 00SSA | BX SECRET SRVC EMP HLTH ASSOC |
| 00SSC | SHAWMUT SELECT CARE |
| 00STH | SNAP ON TOOLS HEALTH |
| 00STI | STUDENT INSURANCE |
| 00STM | BX AMER TEL & TEL INFO SYSTEM |
| 00STR | STAR ADMINISTRATION |
| 00STU | STUDENT HEALTH |
| 00STW | BX STANWICK CORP |
| 00SWA | BX SWANK INC |
| 00SWJ | SEDGWICK JAMES |
| 00SWO | BX STONE & WEBSTER |
| 00SWS | SWSCHP |
| 00T-I | BX TELEDYNE INC |
| 00TAG | BX ANDERSEN |
| 00TBC | CONNECTICUT TB CONTROL PGM |
| 00TBE | TRAILBLAZER HEALTH ENTERPRISES |
| 00TDR | TOWN OF DARIEN |
| 00TDS | BX TDS VENTURA, INC |
| 00TEA | BX EASTERN RAILROAD |
| 00TEB | BX TRKNG WLFARE FND NJ LOC 560 |
| 00TEC | TOTAL EMPLOYEE CARE |
| 00TEE | BX TMSTERS WLFARE FUND LOC 614 |
| 00TEG | BX TRKNG WLFARE FND NJ LOC 560 |
| 00TEL | BX NEW YORK TELEPHONE |
| 00TER | BX TERADYNE INC |
| 00TEW | BX TMSTRS LOC 617 HLTH & WEL F |
| 00TFS | TUFTS HEALTH PLAN |
| 00THC | TOTAL HEALTH CHOICE |
| 00TIS | TRAVEL INSURANCE SERVICES |
| 00TJM | TJ MAXX |
| 00TKC | TAKE CARE |
| 00TKH | BX TEK HUGHES DIV OF INT PLTEX |
| 00TKP | TAKECARE PREFERRED |
| 00TLA | BX N Y ST TRIAL LAWYER ASSOC |
| 00TLC | BX JAMES TALCOTT FACTORS, INC |
| 00TLE | BX TIME INCORPORATED |
| 00TLP | TED L PARKER & ASSOC |
| 00TLW | BX TMSTERS WLFARE FUND LOC 84 |
| 00TMB | BX MUTUAL BEN LIFE INS CO |
| 00TME | BX TIME INCORPORATED |
| 00TMK | TRUSTMARK |
| 00TMP | TOWN OF MILFORD POLICE COMP |
| 00TNE | THE NEW ENGLAND |
| 00TNW | BX TILLINGHAST NELSON & WARREN |
| 00TOW | TOWER LIFE/ACCIDENT INS |

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| 00TPA | TPA OF PA |
| 00TPC | UNITED HEALTHCARE ADM(TPA-CT) |
| 00TPH | BX TUSCARORA PLASTICS |
| 00TPL | TOTAL PLAN ADMIN |
| 00TPP | TPCM THREE PARTY PLAN |
| 00TPS | BX TUSCARORA PLASTICS SALARIED |
| 00TRI | TRIAD |
| 00TRP | TRAVELER'S PREFERRED |
| 00TRS | TRI-STATE |
| 00TSB | BX SERVICE BUREAU CORP |
| 00TVA | TRAVELERS PROTECTIVE ASSO |
| 00TWU | BX ACTWU TEXTILE WKRS HLTH PLN |
| 00TWW | BX ACTWU TEXTILE WKRS HLTH PLN |
| 00TWX | BX ACTWU TEXTILE WRKS HLTH PLN |
| 00TWY | BX ACTWU TEXTILE WRKS HLTH PLN |
| 00TYC | THIRD PARTY CLAIMS |
| 00U-D | BX UDDEHOML STEEL CORP |
| 00U-P | BX UNITED PARCEL SERVICE |
| 00U-S | BX UNITED STATES STEEL |
| 00U10 | BX U S STEEL RETIREES |
| 00U11 | BX U S STEEL RETIREES |
| 00U12 | BX U S STEEL RETIREES |
| 00U13 | BX UNITED STATES STEEL |
| 00U14 | BX US STL USX N/EXM SAL RETIRE |
| 00U99 | BX U S STEEL ACT NON EXM SAL |
| 00UAI | US ASSIST-APRI INS. |
| 00UAW | BX UNITED AUTO WORKERS |
| 00UBH | UNITED BEHAVIORIAL HEALTH |
| 00UBT | BX TMSTERS LOC 641 W F |
| 00UCC | UCC CLAIMS |
| 00UFW | BX UNITED FOOD & COMM WORKERS |
| 00UHN | UTC HEALTHCARE NETWORK |
| 00UMC | BX WEST OHIO UNITED METHODIST |
| 00UMW | UNITED MINE WORKER |
| 00UNB | UNISYS BENEFIT |
| 00UNC | USA HEALTH NETWORK CO., INC. |
| 00UNE | UNITED HEALTH PLANS OF NE |
| 00UNL | UNUM LIFE |
| 00UNW | LOCAL 208-UNITED WIRE |
| 00UPP | UNITED PAYORS & PROVIDERS |
| 00UPS | BX UNITED PARCEL SERVICE |
| 00US2 | BX UNITED STATES STEEL |
| 00US3 | BX UNITED STATES STEEL |
| 00US4 | BX UNITED STATES STEEL |
| 00USA | USSA |
| 00USC | BX UNITED STATE STL MINE WRKS |

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| 00USH | US HEALTHCARE, INC. (AETNA) |
| 00USO | BX UNITED STATES STEEL |
| 00USP | BX U.S. STEEL CORP SAL RETIREE |
| 00USS | BX USS CORP SAL N/REPRSNTD EMP |
| 00USW | BX UNITED STEELWRKS OF AMERICA |
| 00UTI | UNITED TRANSPORTATION INS |
| 00UTV | BX ASSOC PRESS (UTW RETIREES) |
| 00UTW | BX ASSOC PRESS (UTW) |
| 00V-A | BX GTE VALERON CORP (ACTIVE) |
| 00V-R | BX GTE VALERON CORP (RETIREES) |
| 00V10 | BX VALASSIS INSERTS |
| 00VAS | VA SURETY |
| 00VEB | VEBA TRUST FUND |
| 00VET | VETERANS ADMINISTRATION |
| 00VIS | BX ACTION VISTA VOLUNTEERS |
| 00VYT | VYTRA HEALTHCARE |
| 00W99 | STATE WELFARE - MISC |
| 00WAB | STATE WELFARE - ALABAMA |
| 00WAL | WALMART BENEFIT |
| 00WBH | WHEELER/BRISTOL HOSPITAL |
| 00WCM | WELLCARE OF CONNECTICUT, INC. |
| 00WCN | WILLIS CORROON |
| 00WCP | WORLD COLOR PRESS INS |
| 00WDB | BX WALDEN BOOKS |
| 00WDC | WALGREEN DRUG CO |
| 00WEF | BX TMSTERS LOC 641 WLFARE FUND |
| 00WER | BX WESTERN ELECTRIC |
| 00WEW | BX WILLIAM E WRIGHT CO |
| 00WFS | WOODFIELD FAMILY SERVICES |
| 00WLT | BX PENNWALT CORPORATION |
| 00WMA | STATE WELFARE - MASSACHUSETTS |
| 00WMB | WHATCOM MEDICAL BUREAU |
| 00WME | STATE WELFARE - MAINE |
| 00WMS | STATE WELFARE - MISSISSIPPI |
| 00WNH | STATE WELFARE - NEW HAMPSHIRE |
| 00WNJ | STATE WELFARE - NEW JERSEY |
| 00WNY | STATE WELFARE - NY |
| 00WOL | BX AMALGAMATED INS FUND (WOOL) |
| 00WPA | STATE WELFARE - PA |
| 00WPR | BX W PA TMSTRS & MOTOR CAR E R |
| 00WPT | BX W PA TMSTRS & MOTOR CAR WLF |
| 00WRG | WRITERS GUILD |
| 00WRI | STATE WELFARE - RHODE ISLAND |
| 00WRS | BX WESTINGHOUSE RADIOL SVC DIV |
| 00WSC | STATE WELFARE - SOUTH CAROLINA |
| 00WSH | BX AMALGAMATED WASHABLE CLOTHI |

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| 00WSU | BX WOLTERS, SAMSOM, US CORP |
| 00WTX | STATE WELFARE - TEXAS |
| 00WVT | STATE WELFARE - VERMONT |
| 00WXB | BX WESTINGHOUSE ELECTRIC |
| 00XPS | EXPRESS SCRIPTS |
| 00YPH | YALE PREFERRED HEALTH PLAN |
| 00YSM | CSHCN-YALE SCHOOL OF MEDICINE |
| 01000 | PLAN ADMINISTRATORS |
| 01001 | MARRIOTT NE REGIONAL |
| 01002 | UTICA FIRST |
| 01003 | CLIENT SERVICES GROUP |
| 01004 | PREFERRED HEALTH NET(PHN/MD) |
| 01005 | GROUP & PENSION ADMIN |
| 01006 | NAT'L ORG OF INDUS TRADES |
| 01008 | PURINA BENEFIT ASSO |
| 01009 | BOISE CASCADE CORP |
| 01010 | FOX-EVERETT |
| 01011 | BORDEN MEDICAL PLAN |
| 01012 | NAT'L ASSO UNIFORMED SVCS |
| 01013 | CRUM & FORSTER |
| 01014 | ELITE BENEFIT SYSTEMS |
| 01015 | MUTUAL PROTECTIVE |
| 01016 | GROUP INS SERVICE CENTER |
| 01017 | TUCKER & CLARK |
| 01018 | AFSPA-AMER FOREIGN SVCS |
| 01019 | STATE OF CT-SMHA |
| 01020 | HEALTHSOURCE PPO PRODUCT |
| 01021 | THOMAS E. FAY INS. ADJ |
| 01022 | NEIGHBORHOOD HEALTH PART |
| 01023 | ALLIED NATIONAL |
| 01024 | BORDEL CORP. |
| 01025 | LOWER HUDSON VALLEY EAP |
| 01026 | DUNLAP CLAIMS MGMT |
| 01027 | AMERIHEALTH-MEDICARE |
| 01028 | GROUP ADMINISTRATORS LTD |
| 01029 | UNITED HEALTHCARE |
| 01030 | FARMERS INS GROUP |
| 01031 | MAXON COMPANY |
| 01032 | RAND INS. |
| 01033 | SAFECO |
| 01034 | SOUTHCARE |
| 01035 | PREFERRED ONE |
| 01037 | MOUNTAIN STATE ADM |
| 01039 | CIRMA |
| 01040 | HEALTH AMERICA RE |
| 01041 | MANAGED HEALTH NETWORK |

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| 01042 | SAGA BEHAVIORAL HEALTH |
| 01043 | ACCESS BEHAVIORAL HEALTH |
| 01044 | MOHEGAN SUN TRIBAL |
| 01045 | MAGELLAN BEHAVIORAL HEALTH |
| 01046 | TPA OF CT |
| 01047 | SAGA-GENERAL |
| 01048 | INSURANCE PROGRAMMERS |
| 01049 | WOMAN & HEALTH |
| 01050 | EVOLUTIONS HEALTHCARE SYSTEMS |
| 01051 | ONE HEALTH PLAN |
| 01052 | ASSOC HOSP SERVICE OF MAINE |
| 01053 | NATIONAL HERITAGE INSURANCE CO |
| 01054 | PSYCH MANAGEMENT INC. |
| 01055 | BLUE CROSS TEAMSTERS |
| 01056 | USI ADMINISTRATORS |
| 01057 | VALUE OPTIONS |
| 01058 | NORWALK, CITY OF BENEFIT PLAN |
| 01059 | WOMAN & HEALTH/BC OF CT |
| 01060 | PSYCH MANAGEMENT INC (PMI) |
| 01061 | HMC PPO,INC(S&S HC STRATEGIES) |
| 01062 | DIVERSIFIED INSURANCE |
| 01063 | YNHH Senior Assurance |
| 01064 | EMPLOYEE ASSISTANCE PROGRAM |
| 01065 | PERFORMAX |
| 01067 | CORESTAR |
| 01068 | MIDWEST NATIONAL LIFE |
| 01069 | BENESIGHT |
| 01070 | HEALTH CONNECTICUT PPO |
| 01071 | BEHAVIORAL HEALTH CT |
| 01073 | Northeast Healthcare Alliance |
| 01074 | MHN INC. |
| 01076 | EVERCARE CHOICE |
| 01077 | BEHAVIORAL HEALTH PARTNERSHIP |
| 01078 | AETNA GOLDEN MEDICARE |
| 01079 | EVERCARE PLAN |
| 01080 | COVENTRY HEALTHCARE INC. |
| 01081 | HUMANA INSURANCE COMPANY |
| 01082 | WELLCARE OF CONNECTICUT, INC |
| 01089 | SENIOR WHOLE HEALTH LLC |
| 01090 | LOCAL 155 BAKERY & CONFECTION |
| 0HUSA | HUSKY A PROGRAM |
| 0HUSB | HUSKY B PROGRAM |
| 0MCSI | MANAGED CARE STRATEGIES, INC. |
| 0TRCR | TRICARE |
| 13101 | NATIONAL GOVT. SERVS. MEDICARE |
| 14163 | PREFERRED ONE WELLCARE |

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| 23225 | AETNA BETTER HEALTH |
| 39064 | CIGNA BEHAVIORAL HEALTH |
| 39075 | ANTHEM BEHAVIORAL HEALTH |
| 39085 | AETNA BEHAVIORAL HEALTH |
| 60054 | AETNA BETTER HEALTH |
| 87726 | AMERCHOICE OF CONNECTICUT |
| OOLGW | BX ILGWU CHICAGO REGION |
| SH999 | VNA NORTHWEST INC. |
| 00HPM | Harvard Pilgrim |
| 00CTE | Connecticare Employee |
| 00ABM | Anthem BCBS Medicare |
| 00USL | USAA Life |
| 00ATS | Aetna Secondary |
| 00UHI | United Healthcare Integrated |
| 00CGS | Cigna Secondary |
| 00DGP | Diversified Group |
| 00RMI | Retiree Medical Insurance Plan |
| 00LHS | Liberty Healthshare |
| 00TWH | Town of West Hartford |
| 00CBT | Comprehensive Benefits |
| 00WHC | Wellnet Healthcare |
| 00GTL | Guarantee Trust Life Insurance Co |
| 00ABS | Allied Benefit Systems Inc |
| 00ASI | Association & Society Insurance Co |
| 0GEHA | GEHA |
| 0RRMC | Railroad Medicare |
| 00DAC | Diversified Administrative Corp |
| 0CCHF | Connecticare Carpenters Health Fund |
| 00AME | Ameriben |
| 0GEAS | GEHA-ASA |
| 0CADM | Claims Administration |
| 00388 | Mutual of Omaha Companies |
| 0PHCS | PHCS Network |
| 00POM | POMCO Group |
| 00BGR | Bristol GI Research |
| 00HPS | Healthplus Insurance Company |
| 00NEE | New England Electrical Workers |
| 00AMA | AMA Insurance |
| 00RCB | Rural Carrier Benefit |
| 00CPT | CT Pipe Trades Benefit Funds |
| 00IHB | Innovative Health Plan |
| 00CRX | Collect RX |
| 00EGB | Gallagher Bassett Services Inc. |
| 0HPHC | HPHC |
| 0HTFD | The Hartford |

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| 00MSA | The Main Street America |
| 00AET | AETNA |
| 00SWI | Sedgwick Insurance |
| 00NLC | National Association of Letter Carriers |
| 00IUL | IUBAC Local 1 |
| 00CGS | Coresource NGS |
| 00IBL | IBEW Local 35 |
| 00HBI | Health Plans Inc. |
| 00HMI | HCC Medical Insurance Services |
| 00TSS | Triple-S Salud |
| 00NLB | Nippon Life Benefits |
| 00UHS | United Healthcare Student Resources |
| 00NAS | National Automatic Sprinkler Industry |
| 00PAT | Patient Advocates |
| 00UNI | Unity Health Insurance |
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Appendix 4: Source of Payment Codes and Descriptions

| Code | Description |
|----------|---|
| 1 | MEDICARE |
| 11 | Medicare (Managed Care) |
| 111 | Medicare HMO |
| 112 | Medicare PPO |
| 113 | Medicare POS |
| 119 | Medicare Managed Care Other |
| 12 | Medicare (Non-managed Care) |
| 121 | Medicare FFS |
| 122 | Medicare Drug Benefit |
| 123 | Medicare Medical Savings Account (MSA) |
| 129 | Medicare Non-managed Care Other |
| 13 | Medicare Hospice |
| 19 | Medicare Other |
| 2 | MEDICAID |
| 21 | Medicaid (Managed Care) |
| 211 | Medicaid HMO |
| 212 | Medicaid PPO |
| 213 | Medicaid PCCM (Primary Care Case Management) |
| 219 | Medicaid Managed Care Other |
| 22 | Medicaid (Non-managed Care Plan) |
| 23 | Medicaid/SCHIP |
| 24 | Medicaid Applicant |
| 25 | Medicaid - Out of State |
| 29 | Medicaid Other |
| 291 | Medicaid Pharmacy Benefit Manager |
| 3 | OTHER GOVERNMENT (Federal/State/Local excluding Department of Corrections) |
| 31 | Department of Defense |
| 3223 | Children of Women Vietnam Veterans (CWVV) |

| Code | Description |
|-------|--|
| 311 | TRICARE (CHAMPUS) |
| 3111 | TRICARE Prime--HMO |
| 3112 | TRICARE Extra--PPO |
| 3113 | TRICARE Standard - Fee For Service |
| 3114 | TRICARE For Life--Medicare Supplement |
| 3115 | TRICARE Reserve Select |
| 3116 | Uniformed Services Family Health Plan (USFHP) -- HMO |
| 3119 | Department of Defense - (other) |
| 312 | Military Treatment Facility |
| 3121 | Enrolled Prime--HMO |
| 3122 | Non-enrolled Space Available |
| 3123 | TRICARE For Life (TFL) |
| 313 | Dental --Stand Alone |
| 32 | Department of Veterans Affairs |
| 321 | Veteran care--Care provided to Veterans |
| 3211 | Direct Care--Care provided in VA facilities |
| 3212 | Indirect Care--Care provided outside VA facilities |
| 32121 | Fee Basis |
| 32122 | Foreign Fee/Foreign Medical Program(FMP) |
| 32123 | Contract Nursing Home/Community Nursing Home |
| 32124 | State Veterans Home |
| 32125 | Sharing Agreements |
| 32126 | Other Federal Agency |
| 322 | Non-veteran care |
| 3221 | Civilian Health and Medical Program for the VA (CHAMPVA) |
| 3221 | Civilian Health and Medical Program for the VA (CHAMPVA) |
| 3222 | Spina Bifida Health Care Program (SB) |
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| 3229 | Other non-veteran care |
| 33 | Indian Health Service or Tribe |
| 331 | Indian Health Service - Regular |
| 332 | Indian Health Service - Contract |
| 333 | Indian Health Service - Managed Care |
| 334 | Indian Tribe - Sponsored Coverage |
| 34 | HRSA Program |
| 341 | Title V (MCH Block Grant) |
| 342 | Migrant Health Program |
| 343 | Ryan White Act |
| 349 | Other |
| 35 | Black Lung |
| 36 | State Government |
| 361 | State SCHIP program (codes for individual states) |
| 362 | Specific state programs (list/ local code) |
| 369 | State, not otherwise specified (other state) |
| 37 | Local Government |
| 371 | Local - Managed care |
| 3711 | HMO |
| 3712 | PPO |
| 3713 | POS |
| 372 | FFS/Indemnity |
| 379 | Local, not otherwise specified (other local, county) |
| 521 | Commercial Indemnity |
| 522 | Self-insured (ERISA) Administrative Services Only (ASO) plan |
| 523 | Medicare supplemental policy (as second payer) |
| 529 | Private health insurance—other commercial Indemnity |
| 53 | Managed Care (private) or private health insurance (indemnity), not otherwise specified |

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| 38 | Other Government (Federal, State, Local not specified) |
| 381 | Federal, State, Local not specified managed care |
| 3811 | Federal, State, Local not specified - HMO |
| 3812 | Federal, State, Local not specified - PPO |
| 3813 | Federal, State, Local not specified - POS |
| 3819 | Federal, State, Local not specified - not specified managed care |
| 382 | Federal, State, Local not specified - FFS |
| 389 | Federal, State, Local not specified - Other |
| 39 | Other Federal |
| 4 | DEPARTMENTS OF CORRECTIONS |
| 41 | Corrections Federal |
| 42 | Corrections State |
| 43 | Corrections Local |
| 44 | Corrections Unknown Level |
| 5 | PRIVATE HEALTH INSURANCE |
| 51 | Managed Care (Private) |
| 511 | Commercial Managed Care - HMO |
| 512 | Commercial Managed Care - PPO |
| 513 | Commercial Managed Care - POS |
| 514 | Exclusive Provider Organization |
| 515 | Gatekeeper PPO (GPPO) |
| 519 | Managed Care, Other (non HMO) |
| 52 | Private Health Insurance - Indemnity |
| 81 | Self-pay |
| 82 | No Charge |
| 821 | Charity |
| 822 | Professional Courtesy |
| 823 | Research/Clinical Trial |

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| 54 | Organized Delivery System |
| 55 | Small Employer Purchasing Group |
| 56 | Specialized Stand Alone Plan |
| 561 | Dental |
| 562 | Vision |
| 59 | Other Private Insurance |
| 6 | BLUE CROSS/BLUE SHIELD |
| 61 | BC Managed Care |
| 611 | BC Managed Care - HMO |
| 612 | BC Managed Care - PPO |
| 613 | BC Managed Care - POS |
| 619 | BC Managed Care - Other |
| 62 | BC Indemnity |
| 63 | BC (Indemnity or Managed Care) - Out of State |
| 64 | BC (Indemnity or Managed Care) - Unspecified |
| 69 | BC (Indemnity or Managed Care) - Other |
| 7 | MANAGED CARE, UNSPECIFIED(to be used only if one can't distinguish public from private) |
| 71 | HMO |
| 72 | PPO |
| 73 | POS |
| 79 | Other Managed Care |
| 8 | NO PAYMENT from an Organization/Agency/Program/Private Payer Listed |

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| 83 | Refusal to Pay/Bad Debt |
| 84 | Hill Burton Free Care |
| 85 | Research/Donor |
| 89 | No Payment, Other |
| 9 | MISCELLANEOUS/OTHER |
| 91 | Foreign National |
| 92 | Other (Non-government) |
| 93 | Disability Insurance |
| 94 | Long-term Care Insurance |
| 95 | Worker's Compensation |
| 951 | Worker's Comp HMO |
| 953 | Worker's Comp Fee-for-Service |
| 954 | Worker's Comp Other Managed Care |
| 959 | Worker's Comp, Other unspecified |
| 96 | Auto Insurance (no fault) |
| 98 | Other specified (includes Hospice - Unspecified plan) |
| 99 | No Typology Code available for payment source |
| ZZZ | Unavailable / Unknown |
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Source: Public Health Data Standards Consortium, Source of Payment Typology (V6.0)

<http://www.phdsc.org/standards/pdfs/SourceofPaymentTypologyVersion6FINALSeptember2015.pdf>