Division of Health Care Finance and Policy
Case Mix Submissions – Effective October 1, 2006
Frequently Asked Questions

1. Are there or will there be updates on the error edits?

Providers received a submission update on September 14, 2006 which can also be found on the Division's web page. All edits are specified in the three specification manuals for Inpatient, Outpatient Observation, and Outpatient ED located on the Division's website at www.state.ma.us/dhcfp, under the regulation section (situated in the upper left corner) under 114.1 CMR 17.00: Requirement for the Submission of Hospital Case Mix and Charge Data. When there are updates to edits, hospitals will be notified and changes will be reflected in the revised specification manuals.

2. Should/must providers continue to follow the information in the memorandum issued July 20, 2006, re: data edit warnings for Quarter 1 2007 and data edit errors for Quarter 2 2007?

Providers should follow the information in the September 2006 update and September specification manuals posted on the Division's web page. The July summary of changes and the summaries for the specification manuals provide background information that is useful, but the current September 2006 specification manuals provide the complete and current requirements for submission. Providers should frequently review the Division's web page to remain abreast of new developments, changes, etc.

3. As some patients admitted and discharged after October 1, 2006, will be missing these new fields, will these discharges fail or pass edits with warnings when providers submit Quarter 1 in January, 2007?

Quarter 1 submissions will not receive errors for the new data fields that have incorrect data values or that are not populated with data. Hospitals will receive information edits providing detail on the submission problems. These are informational edits only and will not count toward failing of the submission. Hospitals that are able to send data values in the new fields for Q1 will be able to use this feedback to ease into Q2 and later when the required edits take effect. However, for Q1, the submission for each discharge must contain the new layout containing the required fields in order to be processed. Also, edits remain in effect for the other existing fields and any errors will be counted toward the submission pass, fail, or drop status.

4 . As stated within the new October 1, 2006, regulation and specifications, a flag is required to be present on all diagnoses that were Present on Admission (POA). What database is POA applicable to - inpatient, observation, or emergency department?

Present on Admission, Visit or Observation is applicable to all discharge data sent to the Division - Inpatient, Observation and Emergency Department. The new data specifications for Condition Present on Admission, Visit or Observation are identified in the summary specifications posted on the Division's web page.

5. Will the POA also be delayed until January 1, 2007? If so, does the POA need to be submitted as of October 1, 2006?

Present on Admission, Visit or Observation will need to be submitted in the new fields beginning January 1, 2007, when the error edits for POA fields begin. POA can be submitted prior to that date, but it is not required until the quarter beginning January 1, 2007. However, providers still must include this new field as of October 1, 2006, even if there is no data provided.

6. Why are fields for 'Other Race & Other Ethnicity' free text fields?
Will these fields be used to capture three races/ethnicities if applicable?

The free text Race and Ethnicity are fields to allow for reporting of additional races and ethnicities for patients that have more than 2 races or ethnicities already reported in Race 1 and Race 2 and Ethnicity 1 and Ethnicity 2**.**

Race 1 and Race 2 and Ethnicity 1 and Ethnicity 2 fields will be used to capture two races and ethnicities if applicable. Also, the "Other" field should be used to capture any additional non-listed standard/value for race and ethnicity.

7. Can providers use any of their organization IDs as applicable regardless of type of submission?

Providers will be able to submit any of their OrgIDs listed in the OrgID tables, regardless of type of submission. The Org ID table listed in each specification manual may appear slightly different for each data base as these tables list the submitter IDs known for each. For instance, the Division's OrgID list for Emergency Department data does not contain an entry for New England Baptist as the hospital does not submit Emergency Department data (it does not have an ED.) However, for Transfer OrgID, all OrgIDs from the three lists are acceptable for any of the three data bases. Providers should check with their liaisons on their filing Org ID as some organizations submit part or all of their case mix data under a different Org ID than their own.

8. Will the Division provide a list which includes all of the organization IDs?

A list of current org ID's is noted below.

Org ID	DPH/VPN/ MHPN/DMR No	Organization Name
1	2006	Anna Jaques Hospital
2	2226	Athol Memorial Hospital
6	2148	Baystate Mary Lane Hospital
4	2339	Baystate Medical Center
6309	2313	Berkshire Medical Center
7	2313	Berkshire Medical Center - Berkshire Campus
9	2231	Berkshire Medical Center - Hillcrest Campus
53	2054	Beth Israel Deaconess Hospital - Needham
8702	2069	Beth Israel Deaconess Medical Center
10	2069	Beth Israel Deaconess Medical Center - East Campus
140	2092	Beth Israel Deaconess Medical Center - West Campus
3107	2307	Boston Medical Center
144	2084	Boston Medical Center - East Newton Campus
16	2307	Boston Medical Center - Harrison Avenue Campus
22	2921	Brigham and Women's Hospital
25	2118	Brockton Hospital
3108	2108	Cambridge Health Alliance
27	2108	Cambridge Health Alliance - Cambridge Campus
143	2001	Cambridge Health Alliance - Somerville Campus
142	2046	Cambridge Health Alliance - Whidden Memorial Campus
39	2135	Cape Cod Hospital
42	2003	Caritas Carney Hospital
8701	2101	Caritas Good Samaritan Medical Center

62	2101	Caritas Good Samaritan Medical Center - Brockton Campus
4460	2KGH	Caritas Good Samaritan Medical Center - Norcap Lodge Campus
75	2225	Caritas Holy Family Hospital and Medical Center
41	2114	Caritas Norwood Hospital
126	2085	Caritas St. Elizabeth's Medical Center
46	2139	Children's Hospital Boston
132	2126	Clinton Hospital
50	2155	Cooley Dickinson Hospital
51	2335	Dana-Farber Cancer Institute
57	2018	Emerson Hospital
8	2052	Fairview Hospital
40	2289	Falmouth Hospital
59	2048	Faulkner Hospital
5	2120	Franklin Medical Center
66	2038	Hallmark Health System - Lawrence Memorial Hospital Campus
141	2058	Hallmark Health System - Melrose-Wakefield Hospital Campus
3111	2038	Hallmark Health System, Inc.
68	2143	Harrington Memorial Hospital
8548	2034	Health Alliance Hospital -- Burbank Campus
8509	2127	Health Alliance Hospital -- Leominster Campus
71	2034	Health Alliance Hospitals, Inc.
73	2036	Heywood Hospital
77	2145	Holyoke Medical Center
78	2157	Hubbard Regional Hospital
79	2082	Jordan Hospital
136	2091	Kindred Hospital Boston
135	2171	Kindred Hospital Boston North Shore
6546	2033	Lahey Clinic
81	2033	Lahey Clinic -- Burlington Campus
4448	2033	Lahey Clinic Northshore
83	2099	Lawrence General Hospital
85	2040	Lowell General Hospital
133	2103	Marlborough Hospital
88	2042	Martha's Vineyard Hospital
89	2167	Massachusetts Eye and Ear Infirmary
91	2168	Massachusetts General Hospital
6547	2149	Mercy Medical Center
118	2150	Mercy Medical Center - Providence Behavioral Health Hospital Campus
119	2149	Mercy Medical Center - Springfield Campus
70	2131	Merrimack Valley Hospital
3110	2020	MetroWest Medical Center
49	2020	MetroWest Medical Center - Framingham Campus
457	2039	MetroWest Medical Center - Leonard Morse Campus
97	2105	Milford Regional Medical Center
98	2227	Milton Hospital
99	2022	Morton Hospital and Medical Center

100	2071	Mount Auburn Hospital
101	2044	Nantucket Cottage Hospital
52	2298	Nashoba Valley Medical Center
103	2059	New England Baptist Hospital
105	2075	Newton-Wellesley Hospital
106	2076	Noble Hospital
107	2061	North Adams Regional Hospital
345	2073	North Shore Medical Center, Inc.
116	2014	North Shore Medical Center, Inc. - Salem Campus
3	2073	North Shore Medical Center, Inc. - Union Campus
3112	2007	Northeast Hospital
109	2016	Northeast Hospital Corporation - Addison Gilbert Campus
110	2007	Northeast Hospital Corporation - Beverly Campus
112	2151	Quincy Medical Center
114	2011	Saint Anne's Hospital
127	2128	Saint Vincent Hospital
115	2063	Saints Memorial Medical Center
122	2107	South Shore Hospital
3113	2010	Southcoast Hospitals Group
123	2337	Southcoast Hospitals Group - Charlton Memorial Campus
124	2010	Southcoast Hospitals Group - St. Luke's Campus
145	2106	Southcoast Hospitals Group - Tobey Hospital Campus
129	2100	Sturdy Memorial Hospital
104	2299	Tufts-New England Medical Center
3115	2841	UMass Memorial Medical Center
130	2124	UMass Memorial Medical Center - Memorial Campus
131	2841	UMass Memorial Medical Center - University Campus
138	2094	Winchester Hospital
139	2181	Wing Memorial Hospital and Medical Centers

9. **For foreign addresses, the complete foreign address (including postal code) in the permanent address fields are required to be captured and the permanent address is utilized for claims and statement billing. The Division's specifications require the temporary address information be captured if the country is not in the United States. Providers normally capture the temporary address for foreign patients to ensure that patients can be contacted regarding test results.**

    In the temporary fields for foreign patients, which data are required - permanent or temporary addresses? Will the Division accept the data, specifically zip code, in the permanent address fields as well?

If the patient is foreign, providers must enter the correct country code. Once providers have a foreign country code (not in the United States), providers will be required to enter the temporary address which would be in the United States. The temporary address is the location the patient is temporarily staying in the United States. Students may have

campus dormitory addresses or apartments, or patients for cancer treatments may have rental lodging nearby during their treatment period. If providers have the addresses for the patient's home in the other country, this should be reported in the permanent address fields. This information replaces the foreign zip code of '77777.' If providers have the permanent address, street, town, and state outside of the country, providers can enter this information but it is not required. However, the zip code must be '00000' if the country is not in the United States.

10. Even though street addresses are not required for homeless patients, city, state & zip code are required. For patients who are homeless in a city with multiple zip codes, do providers select a valid zip code for that city or use the hospital's city, state & zip code?

For homeless patients, providers should attempt to obtain the best information for city, state and zip code. If the patient is unable to provide any, providers should use the location of the hospital. If the hospital city has multiple zip codes, providers will have to select one.

11. It is not possible to interview patients in some situations as patients may be comatose or are trauma patients. As the acceptable values listed for the Hispanic Indicator does not include an "unknown" option, should the field Hispanic Indicator be left blank?

The federal guidelines for the Hispanic Indicator are 'Yes' or 'No'. If a patient is comatose, providers should inquire of the patient's family members or friends or person(s) that accompanied the patient to the hospital to assist in answering questions. Providers should determine if this is a field that can be updated during the patient's stay when their condition improves.

If the patient remains comatose and/or dies, providers may need to answer 'No'. The field cannot be left blank. Providers may need to use the Race or Ethnicity comments field to add information such as 'unable to speak due to comatose condition'. The comments field is provided for additional race/ethnicity information and is usually used for multi-racial patients but could be used to provide additional information in these situations.

12. (a) How can providers determine a patient's ethnicity for accurate information to be placed in Ethnicity 1 or Ethnicity 2?

(a) Providers can implement various ethnicity collection methods for gathering accurate information. Some providers that already collect this type of information use questionnaires, check lists, or ask directly. Also, DHCFP is working with MHA, DPH and the Boston Public Health Commission to make available to hospitals training

sessions and materials that have been successful, with many of the Boston hospitals already collecting ethnicity data.

(b) Does the option American refer to Native Americans or Second Generation Americans? Would a patient of American Italian & Irish ancestry be categorized in Ethnicity 1 as Italian and in Ethnicity 2 as Irish?

(b) The option of American is listed for patients who state that they are Americans and who do not respond with one of the standard categories listed. American is not listed on the Center for Disease Control Race and Ethnicity Code set but is useful for reporting patients who identify their ethnicity as "American." If a patient responded they were of American Italian and Irish ancestry, Ethnicity 1 would be reported as European. Currently, these are included in the European category and not separated out.

(c) Does the patient select the primary ethnicity and any other additional ethnicity defaults to secondary?

(c) The ethnicity fields are not labeled as primary or secondary ethnicities. Ethnicity 1 is the first field and Ethnicity 2 is the second field. The fields are designed to allow for multi-ethnic reporting and not assigning a primary or secondary ethnicity.

13. Is there an alphabetical listing of payment sources?

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
137	AARP/Medigap supplement **	7	COM
71	ADMAR	E	PPO
51	Aetna Life Insurance	7	COM
161	Aetna Managed Choice POS	D	COM-MC
22	Aetna Open Choice PPO	D	COM-MC
272	Auto Insurance	T	AI
138	Banker's Life and Casualty Insurance **	7	COM
139	Banker's Multiple Line **	7	COM
2	Bay State – a product of HMO Blue	C	BCBS-MC
136	BCBS Medex **	6	BCBS
11	Blue Care Elect	C	BCBS-MC
46	Blue CHiP (BCBS Rhode Island)	8	HMO
160	Blue Choice (incl. Healthflex Blue) – POS	C	BCBS-MC
142	Blue Cross Indemnity	6	BCBS
50	Blue Health Plan for Kids	6	BCBS
52	Boston Mutual Insurance	7	COM
154	BCBS Other (not listed elsewhere) ***	6	BCBS
155	Blue Cross Managed Care Other (not listed elsewhere) ***	C	BCBS-MC
151	CHAMPUS	5	GOV
204	Christian Brothers Employee	7	COM
30	CIGNA (Indemnity)	7	COM
250	CIGNA HMO	D	COM-MC
171	CIGNA POS	D	COM-MC
87	CIGNA PPO	D	COM-MC
140	Combined Insurance Company of America**	7	COM
21	Commonwealth PPO	C	BCBS-MC
44	Community Health Plan	8	HMO
13	Community Health Plan Options (New York)	J	POS
42	ConnectiCare of Massachusetts	8	HMO
54	Continental Assurance Insurance	7	COM
69	Corporate Health Insurance Liberty Plan	7	COM
4	Fallon Community Health Plan (includes Fallon Plus, Fallon	8	HMO

	Affiliates, Fallon UMass.)		

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
167	Fallon POS	J	POS
67	First Allmerica Financial Life Insurance	7	COM
181	First Allmerica Financial Life Insurance EPO	D	COM-MC
27	First Allmerica Financial Life Insurance PPO	D	COM-MC
152	Foundation	0	OTH
143	Free Care	9	FC
990	Free Care – co-pay, deductible, or co-insurance (when billing for free care services use #143)	9	FC
88	Freedom Care	E	PPO
153	Grant	0	OTH
162	Great West Life POS	D	COM-MC
28	Great West Life PPO	D	COM-MC
89	Great West/NE Care	7	COM
55	Guardian Life Insurance	7	COM
23	Guardian Life Insurance Company PPO	D	COM-MC
56	Hartford L&A Insurance	7	COM
200	Hartford Life Insurance Co **	7	COM
1	Harvard Community Health Plan	8	HMO
20	HCHP of New England (formerly RIGHA)	8	HMO
37	HCHP-Pilgrim HMO (integrated product)	8	HMO
208	HealthNet (Boston Medical Center MCD Program)	B	MCD-MC
14	Health new England Advantage POS	J	POS
38	Health New England Select (self-funded)	8	HMO
24	Health New England, Inc.	8	HMO
45	Health Source New Hampshire	8	HMO
98	Healthy Start	9	FC
251	Healthsource CMHC HMO	8	HMO
164	Healthsource CMHC Plus POS	J	POS
49	Healthsource CMHC Plus PPO	E	PPO
72	Healthsource New Hampshire	7	COM
165	Healthsource New Hampshire POS (Self-funded)	J	POS
90	Healthsource Preferred (self-funded)	E	PPO
271	Hillcrest HMO	8	HMO
81	HMO Blue	C	BCBS-MC

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
53	Invalid (no replacement)		
117	Invalid (no replacement)		
123	Invalid (no replacement)		
92	Invalid (replaced by # 84, 166, 184)		
105	Invalid (replaced by #111)		
32	Invalid (replaced by #157 and 158)		
41	Invalid (replaced by #157)		
15	Invalid (replaced by #158)		
29	Invalid (replaced by #171 and 250)		
16	Invalid (replaced by #172)		
124	Invalid (replaced by #222)		
126	Invalid (replaced by #230)		
122	Invalid (replaced by #234)		
6	Invalid (replaced by #251)		
76	Invalid (replaced by #270)		
26	Invalid (replaced by #75)		
5	Invalid (replaced by #9)		
61	Invalid (replaced by #96)		
68	Invalid (replaced by #96)		
60	Invalid (replaced by #97)		
57	John Hancock Life Insurance	7	COM
82	John Hancock Preferred	D	COM-MC
169	Kaiser Added Choice	J	POS
40	Kaiser Foundation	8	HMO
58	Liberty Life Insurance	7	COM
85	Liberty Mutual	7	COM
59	Lincoln National Insurance	7	COM
19	Matthew Thornton	8	HMO
103	Medicaid (includes MassHealth)	4	MCD
107	Medicaid Managed Care – Community Health Plan	B	MCD-MC
108	Medicaid Managed Care – Fallon Community Health Plan	B	MCD-MC
109	Medicaid Managed Care – Harvard Community Health Plan	B	MCD-MC
110	Medicaid Managed Care – Health New England	B	MCD-MC
111	Medicaid Managed Care – HMO Blue	B	MCD-MC

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
112	Medicaid Managed Care – Kaiser Foundation Plan	B	MCD-MC
113	Medicaid Managed Care – Neighborhood Health Plan	B	MCD-MC
115	Medicaid Managed Care – Pilgrim Health Care	B	MCD-MC
114	Medicaid Managed Care – United Health Plans of NE (Ocean State Physician's Plan)	B	MCD-MC
119	Medicaid Managed Care Other (not listed elsewhere) ***	B	MCD-MC
106	Medicaid Managed Care-Central Mass. Health Care	B	MCD-MC
104	Medicaid Managed Care-Primary Care Clinician (PCC)	B	MCD-MC
116	Medicaid Managed Care – Tufts Associated Health Plan	B	MCD-MC
118	Medicaid Mental Health & Substance Abuse Plan – Mass Behavioral Health Partnership	B	MCD-MC
121	Medicare	3	MCR
220	Medicare HMO – Blue Care 65	F	MCR-MC
125	Medicare HMO – Fallon Senior Plan	F	MCR-MC
221	Medicare HMO – Harvard Community Health Plan 65	F	MCR-MC
223	Medicare HMO – Harvard Pilgrim Health Care of New England Care Plus	F	MCR-MC
230	Medicare HMO – HCHP First Seniority	F	MCR-MC
127	Medicare HMO – Health New England Medicare Wrap **	F	MCR-MC
222	Medicare HMO – Healthsource CMHC	F	MCR-MC
212	Medicare HMO – Healthsource CMHC Central Care Supplement **	F	MCR-MC
128	Medicare HMO – HMO Blue for Seniors **	F	MCR-MC
129	Medicare HMO – Kaiser Medicare Plus Plan **	F	MCR-MC
234	Medicare HMO – Managed Blue for Seniors	F	MCR-MC
132	Medicare HMO – Matthew Thornton Senior Plan	F	MCR-MC
211	Medicare HMO – Neighborhood Health Plan Senior Health Plus **	F	MCR-MC
134	Medicare HMO – Other (not listed elsewhere) ***	F	MCR-MC
131	Medicare HMO – Pilgrim Enhance 65 **	F	MCR-MC
210	Medicare HMO – Pilgrim Preferred 65 **	F	MCR-MC

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SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
231	Medicare HMO – Pilgrim Prime	F	MCR-MC
232	Medicare HMO – Seniorcare Direct	F	MCR-MC
233	Medicare HMO – Seniorcare Plus	F	MCR-MC
224	Medicare HMO – Tufts Secure Horizons	F	MCR-MC
225	Medicare HMO – US Healthcare	F	MCR-MC
133	Medicare HMO – Tufts Medicare Supplement (TMS)	F	MCR-MC
43	MEDTAC	8	HMO
96	Metrahealth (United Care of NE)	7	COM
158	Metrahealth – HMO (United Care of NE)	D	COM-MC
172	Metrahealth – POS (United Care of NE)	D	COM-MC
157	Metrahealth – PPO (United Care of NE)	D	COM-MC
201	Mutual of Omaha **	7	COM
62	Mutual of Omaha Insurance	7	COM
33	Mutual of Omaha PPO	D	COM-MC
47	Neighborhood Health Plan	8	HMO
3	Network Blue (PPO)	C	BCBS-MC
207	Network Health (Cambridge Health Alliance MCD Program)	B	MCD-MC
91	New England Benefits	7	COM
63	Mutual of Omaha Insurance	7	COM
64	New York Life Care Indemnity (New York Life Insurance)	7	COM
34	New York Life Care PPO	D	COM-MC
202	New York Life Insurance **	7	COM
159	None (Valid only for secondary source of payment)	N	NONE
31	One Health Plan HMO (Great West Life)	D	COM-MC
77	Options for Healthcare PPO	E	PPO
147	Other Commercial Insurance (not listed elsewhere) ***	7	COM
199	Other EPO (not listed elsewhere) ***	K	EPO
144	Other Government	5	GOV
148	Other HMO (not listed elsewhere) ***	8	HMO
141	Other Medigap (not listed elsewhere)	7	COM
150	Other Non-Managed Care (not listed elsewhere) ***	0	OTH
99	Other POS (not listed elsewhere) ***	J	POS
156	Out of State BCBS	6	BCBS
120	Out-of-State Medicaid	5	GOV

135	Out-of-State Medicare	3	MCR

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
65	Paul Revere Life Insurance	7	COM
78	Phoenix Preferred PPO	D	COM-MC
10	Pilgrim Advantage – PPO	E	PPO
39	Pilgrim Direct	8	HMO
8	Pilgrim Health Care	8	HMO
95	Pilgrim Select - PPO	E	PPO
183	Pioneer Health Care EPO	K	EPO
79	Pioneer Health Care PPO	E	PPO
25	Pioneer Plan	8	HMO
149	PPO and Other Managed Care (not listed elsewhere) ***	E	PPO
203	Principal Financial Group (Principal Mutual Life)	7	COM
184	Private Healthcare Systems EPO	K	EPO
166	Private Healthcare Systems POS	J	POS
84	Private Healthcare Systems PPO	E	PPO
75	Prudential Healthcare HMO	D	COM-MC
17	Prudential Healthcare POS	D	COM-MC
18	Prudential Healthcare PPO	D	COM-MC
66	Prudential Insurance	7	COM
93	Psychological Health Plan	E	PPO
101	Quarto Claims	7	COM
168	Reserved		
173-180	Reserved		
185-198	Reserved		
205-209	Reserved		
213-219	Reserved		
226-229	Reserved		
235-249	Reserved		
252-269	Reserved		
145	Self-Pay	1	SP
94	Time Insurance Co	7	COM
100	Transport Life Insurance	7	COM
7	Tufts Associated Health Plan	8	HMO
80	Tufts Total Health Plan PPO	E	PPO
97	Unicare	7	COM
182	Unicare Preferred Plus Managed Access EPO	D	COM-MC
270	Unicare Preferred Plus PPO	D	COM-MC

| 70 | Union Labor Life Insurance | 7 | COM |

ALPHABETICAL SOURCE OF PAYMENT LIST

SOURCE PAY CODE	SOURCE OF PAYMENT DEFINITIONS	MATCHING PAYER TYPE CODE	PAYER TYPE ABBREVIATION
86	United Health & Life PPO (Subsidiary of United Health Plans of NE)	E	PPO
73	United Health and Life (subsidiary of United Health Plans of NE)	7	COM
9	United Health Plan of New England (Ocean State)	8	HMO
74	United Healthcare Insurance Company	7	COM
35	United Healthcare Insurance Company – HMO (new for 1997)	D	COM-MC
163	United Healthcare Insurance Company – POS (new for 1997)	D	COM-MC
36	United Healthcare Insurance Company – PPO (new for 1997)	D	COM-MC
48	US Healthcare	8	HMO
83	US Healthcare Quality Network Choice-PPO	E	PPO
170	US Healthcare Quality POS	J	POS
102	Wausau Insurance Company	7	COM
146	Worker's Compensation	2	WOR

** Supplemental Payer Source
***Please list under the specific carrier when possible