

Payer ID provider number reference — Facility

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

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