

Use this guide as a reference tool when submitting facility claims for Independence Blue Cross (IBX) and Independence Administrators plans. The information was current at the time of publication. We will announce changes on the [Provider News Center](#).

Prefix	Product name	Payer information for electronic claims		Paper claim mailing address	Billing provider
		ISA-08	GS-03		
	Keystone Health Plan East	IBX			
QCG, YQG, XBU, QCJ, YPE, QWN	Keystone Health Plan East POS	54704	95056	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
QCH, YQJ, XCA	Keystone Health Plan East HMO				
QCI, QCM, QWM	Keystone 65 HMO				
	Keystone 65 Preferred HMO				
	Keystone 65 Select HMO				
	Keystone 65 Basic Rx HMO				
	Keystone 65 Liberty HMO				
QAM	Keystone 65 Focus Rx HMO-POS				
	Keystone 65 Essential Rx HMO-POS				
QCK, QAM	Keystone 65 HMO-POS				
QCL, YPG, QWE, YGT	Keystone Health Plan East ERISA HMO				
QHX, QAC	Keystone HMO Proactive Individual – Off Exchange				
QSP, XRF	Keystone HMO Proactive Small Group				
QXJ, QND	Keystone HMO Proactive Individual – On Exchange				
YXQ, QEB	Keystone HMO Gold – On Exchange				
	Keystone HMO Silver Classic – On Exchange				
	Keystone HMO Silver Basic – On Exchange				
	Keystone HMO Bronze – On Exchange				
	Keystone HMO Gold Classic – On Exchange				
YXW, QBW	Keystone HMO Gold – Off Exchange				
	Keystone HMO Silver Classic – Off Exchange*				
	Keystone HMO Bronze – Off Exchange				

Payer ID provider number reference — Facility

Revised April 2025

Prefix	Product name	Payer information for electronic claims		Paper claim mailing address	Billing provider
		ISA-08	GS-03		
	Personal Choice®	IBX			Valid and registered NPI is required . Electronic (837I) Loop 2010AA NM108 = XX NM109 = NPI # Paper (UB-04) NPI # – Box 56
WYX, QAA, QAZ	Personal Choice EPO – HSA	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
YXF, XZJ, YQB	Personal Choice PPO				
YXK, XZK, XNY	Personal Choice 65 SM PPO				
	Personal Choice 65 Prime Rx PPO				
	Personal Choice 65 Saver Rx PPO				
	Personal Choice 65 Elite Rx PPO				
	Personal Choice 65 Plus Rx PPO				
YXO, QBJ	Personal Choice PPO Gold – Off Exchange				
	Personal Choice PPO Gold Preferred – Off Exchange				
	Personal Choice PPO Silver – Off Exchange*				
	Personal Choice PPO Silver Basic				
	Personal Choice PPO Bronze – Off Exchange				
YXP, QBU	Personal Choice PPO Gold – On Exchange				
	Personal Choice PPO Gold Preferred – On Exchange				
	Personal Choice PPO Gold Classic – On Exchange				
	Personal Choice PPO Silver Classic – On Exchange				
	Personal Choice PPO Bronze – On Exchange				
YXX, QBY	Personal Choice EPO Catastrophic, Bronze Basic, Bronze Classic, and Bronze Reserve – On Exchange				
YXY, QBZ	Personal Choice EPO Catastrophic, Bronze Basic, Bronze Classic, and Bronze Reserve – Off Exchange				
	BlueCard®	IBX			
All National PPO Prefixes	PPO Blue Cross or Blue Shield member ID card with “PPO” in a suitcase and a prefix not defined previously†‡ Medicare Advantage PPO Blue Cross or Blue Shield member ID card with “MA PPO” in a suitcase and a prefix not defined previously†	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
	BlueHPN®	IBX			
All BlueHPN Prefixes	ID Card Front: BlueHPN members will be identified by the Blue High Performance Network name and the “BlueHPN in a suitcase” logo ID Card Back: A disclaimer indicates that the member has limited benefits outside of BlueHPN product areas Prefixes will be added to this grid, as assigned.	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	

Valid and registered NPI is **required**.
Electronic (837I)
Loop 2010AA
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Payer ID provider number reference — Facility

Revised April 2025

Prefix	Product name	Payer information for electronic claims		Paper claim mailing address	Billing provider
		ISA-08	GS-03		
	Blue Cross® / Blue Shield®	IBX			Valid and registered NPI is required . Electronic (837I) Loop 2010AA NM108 = XX NM109 = NPI # Paper (UB-04) NPI # – Box 56
QCA, QCC	Traditional Blue Cross®, Blue Shield®, Major Medical*	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
QCE, QHY, QHV, QVH	Security 65®, 65 Special, MedigapSecurity, and Retiree 65 Plus				
QCR	Medigap, Blue Cross only				
QMO, XCE	MedigapFreedom				
	Federal Blue Cross	IBX			
R followed by 8 numeric characters	Federal Employee Program (FEP) member ID starts with an “R”	54704	54704	Claims Receipt Center P.O. Box 211184 Eagan, MN 55121	
	Third-party administrators	Independence Administrators			
Independence Administrators National PPO prefixes	Independence Administrators logo on the ID card with “PPO” in a suitcase and a prefix not defined previously Independence Administrators For additional claims information, visit ibxtpa.com/providers	54704	TA720 or 54763	Independence Administrators c/o Processing Center P.O. Box 21974 Eagan, MN 55121	
Independence Administrators BlueHPN prefixes	ID Card Front: BlueHPN members will be identified by the Blue High Performance Network name and the “BlueHPN in a suitcase” logo ID Card Back: A disclaimer indicates that the member has limited benefits outside of BlueHPN product areas Prefixes will be added to this grid, as assigned. Independence Administrators For additional claims information, visit ibxtpa.com/providers	54704	TA720 or 54763	Independence Administrators c/o Processing Center P.O. Box 21974 Eagan, MN 55121	

*This product is no longer available as of June 30, 2025.

† When treating Highmark members, facility claims must be submitted directly to Highmark.

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

Highmark, Capital Blue Cross, Horizon Blue Cross Blue Shield of New Jersey, and Independence Administrators are independent licensees of the Blue Cross and Blue Shield Association.