



X = may require some form of registration - contact RSS for more details

PAYOR ID	PAYOR NAME	ENROLLMENT
93524	Advantage Dental Plan, Inc.	
EXC01	BCBS - New York (Finger Lakes Region)	
EXC01	BCBS - New York (Rochester)	
CB865	Blue Shield of Pennsylvania (Camp Hill)	
CBPA2	Blue Shield of Pennsylvania - Dental Plus (UCCI)	
CDCA1	Delta Dental of California	
51022	Delta Dental of Delaware (IN-STATE PROVIDER SUBMISSIONS)	X
DEHI1	Delta Dental of Hawaii / Hawaii Dental Services (HDS)	
DELT1	Delta Dental of Indiana	
23166	Delta Dental of Maryland (IN-STATE PROVIDER SUBMISSIONS)	X
DELTA	Delta Dental of Michigan	
43090	Delta Dental of Missouri	
DELTM	Delta Dental of New Mexico	
11198	Delta Dental of New York	X
DELTO	Delta Dental of Ohio	
23166	Delta Dental of Pennsylvania	X
43091	Delta Dental of South Carolina	
52147	Delta Dental of Washington DC (IN-STATE PROVIDER SUBMISSIONS)	X
31096	Delta Dental of West Virginia (IN-STATE PROVIDER SUBMISSIONS)	X
A1004	Detroit Laborers (Metropolitan)	
TEMU1	ExclusiCare (MUST HAVE UCCI ON BACK OF MEMBER CARD)	X
EXC01	Excellus, Inc.	
CX002	Family Members Dental Plan	X
DEHI1	Hawaii Dental Services	
TLZ16	IBEW Local Union 270	
DELOK	Indian Health Services	
ICW01	Indiana Carpenters Welfare & Pension Fund	
65978	MetLife	
DELTA	Michigan Conference of Teamsters	
A1432	Michigan Laborers Health Care Fund	
TEMU1	Mutual of Omaha (MUST HAVE UCCI LISTED ON BACK OF ID CARD)	X
TEMU1	Mutually Preferred (MUST HAVE UCCI LISTED ON BACK OF ID CARD)	X
TEMU1	National Rural Letter Carrier Association (MUST HAVE UCCI LISTED ON BACK OF ID CARD)	X
TLX64	NCAS (Harrisburg, PA claims ONLY)	X
93525	Northwest Dental Services	
TLX74	Personal Choice (PA)	X
93525	Oregon Health Plan (OHP)	
93525	Oregon Medical Assistance Program (OMAP)	
RLHA1	Renaissance Life and Health	
DELTA	Teamsters Welfare Fund (MI)	
65978	Travelers (now MetLife)	
CX002	Tricare Dental Plan (UCCI)	X
CX002	United Concordia (TRICARE FMDP) (UCCI Federal Claims must be submitted using CB865)	X
CBPA2	United Concordia- CBPA2 (Dental Encounters)	X
CX013	United Concordia Dental Plus (UCCI Federal Claims must be submitted using CB865)	X
CB865	United Concordia- FEDERAL CLAIMS (CB865)	X
Z9901	United Concordia- NON-PAR	X
CX007	United Concordia	X
TEMU1	United of Omaha (MUST HAVE UCCI LISTED ON BACK OF ID CARD)	X