

Department of Central Management Services
Bureau of Benefits
Group Insurance Division

FY 2014 Reimbursement Cross Reference Directory of Carrier/Plan Codes

Insurance Plan	Health Only		Health & Life Combined		Carrier Code	Deduct Code
	S/M Rate	Mo. Rate	S/M Rate	Mo. Rate		
Health Insurance						
Quality Care - Member	\$700.23	\$1,400.46	\$711.59	\$1,423.18	D3	(1-5, 7)K
Quality Care - Member & 1 Dependent	\$1,019.12	\$2,038.24	\$1,030.48	\$2,060.96	D3	(1-5, 7)L; (1-5, 7)N
Quality Care - Member & 2 or more Dependents	\$1,143.81	\$2,287.62	\$1,155.17	\$2,310.34	D3	(1-5, 7)M; (1-5, 7)O
Quality Care w/o HMO Access - Member	\$643.06	\$1,286.12	\$654.42	\$1,308.84	D1	(1-5, 7)K
Quality Care w/o HMO Access - Member & 1 Dependent	\$862.77	\$1,725.54	\$874.13	\$1,748.26	D1	(1-5, 7)L; (1-5, 7)N
Quality Care w/o HMO Access - Member & 2 or more Dependents	\$1,041.91	\$2,083.82	\$1,053.27	\$2,106.54	D1	(1-5, 7)M; (1-5, 7)O
HMO - Member	\$643.06	\$1,286.12	\$654.42	\$1,308.84	AH, AS, BY, CF, CH, CI	(1-5, 7)K
HMO - Member & 1 Dependent	\$862.77	\$1,725.54	\$874.13	\$1,748.26	AH, AS, BY, CF, CH, CI	(1-5, 7)L; (1-5, 7)N
HMO - Member & 2 or more Dependents	\$1,041.91	\$2,083.82	\$1,053.27	\$2,106.54	AH, AS, BY, CF, CH, CI	(1-5, 7)M; (1-5, 7)O
Dental Insurance						
Quality Care Dental - Member	\$11.31	\$22.62	\$11.31	\$22.62	D6	W1; S1
Quality Care Dental - Member & 1 Dependent	\$25.05	\$50.10	\$25.05	\$50.10	D6	X1; T1
Quality Care Dental - Member & 2 or more Dependents	\$39.47	\$78.94	\$39.47	\$78.94	D6	X2; T2
Life Insurance	\$11.36	\$22.72			C9	

Effective 07/01/2013