

Primary Insurance	ECW Insurance	PORTAL	insurances that does not need group #	Insurance in GSheet	ECW
UFCW L1546 H&W Fund	UFCW LOCAL 1546		Medicare Part B Illinois	Medicare Part B Illinois	Medicare
BCBSIL:(PPO)	BLUE CROSS BLUE SHIELD		MERIDIAN 13189	Blue Cross CA	
Blue cross Blue Shield	BLUE CROSS BLUE SHIELD		Wellcare	Meridian Health Plan of Illinois	
Blue cross Blue Shield PPO	BLUE CROSS BLUE SHIELD		Medicaid	VALENCE HEALTH COUNTYCARE IL	
WellCare NoPrmExclusrve (HMO)	Wellcare HMO		county care	BCBS IL : PPO	
WellcareG4596	Wellcare HMO		aetna better health	BCBS ILMMA Community Option DUAL ELIGIBLE-MMAI	group #HMM00002
BLUE CROSS BLUE SHIELD OF IL00621	BLUE CROSS BLUE SHIELD		SEIU	MERIDIAN 13189	
HUMANA	HUMANA GOLD PLUS MC		union(ufcw)	Illinois Blue Cross and Blue Shield	
United Healthcare (UHCJ) G2315	UHC Chronic Complete Assure		Cigna health spring	Meridian Complete IL 2021 and future MHPIL G8869	
BLUE CROSS BLUE SHIELD OF IL00621	BLUE CROSS BLUE SHIELD		Ascension Complete	Wellcare No Premium (HMOPOS)	
United Healthcare (UHC) G2315	UHC Chronic Complete Assure		Meridian Complete	Wellcare	
CIGNA HEALTHSOURCE	HealthPartners Claims			AETNA	
UHC Chronic CompleteAssure PPO	UHC Chronic Complete Assure			Amalgamated National Health	
BCBSIL: BCBS OF IL	BLUE CROSS BLUE SHIELD			UFCW L1546 H & W Fund	
UFCW L1546 H&W Fund	UFCW LOCAL 1546			HUMANA	
UNITED HEALTHCARE	UnitedHealthcare Core			Anthem	
CountyCare Health Plan	COUNTY CARE HEALTH PLAN	HSF		BCBS ILMMA Community- Blue Cross Community FHP/IC	group # HMM00004
UNITED HEAL THCARE87726	UNITED HEALTH CARE Choice Plus				
CountyCare (Medicaid Replacement HMO)	COUNTY CARE HEALTH PLAN	HSF			
BCBSIL BLUE CROSS COMMUNITY (MEDICAID REPLACEMENT HMO)	Blue Cross Community				
Humana Institutional (Medicare Replacement/Advantage HMO)	HUMANA MEDICARE HMO	AVAILITY			
Humana- Dual Eligible- Gold Plus Integrated (Medicare Replacement/Advantage- HMO)	HUMANA GOLD PLUS MC	AVAILITY			
VALENCE HEALTH COUNTY CARE IL (MEDICAID HMO)	COUNTY CARE HEALTH PLAN	HSF			
VALENCE HEALTH COUNTYCARE IL (MEDICAID HMO)	COUNTY CARE HEALTH PLAN	HSF			
MedicareIL (Medicare)	Medicare	HSF			
MedicaidIL(Medicaid)	IL Medicaid	HSF			
SEIU					
Anthem Blue Cross	Anthem Blue Cross				
Aetna Choice® POS II Plan	Aetna Choice POS 2				
AETNA CHOICE (POS II)	Aetna Choice POS 2				
UnitedHealthCare Choice Plus	Unitedhealthcare Choice Plus				
Cigna	Cigna HealthSpring	HS CONNECT			
MEDICAIDIL: ILLINOIS DEPARTMENT OF PUBLIC AID	IL Medicaid	HSF			
UNITED HEAL THCARE87726 / PPO PAYOR 87726	UHC Choice Plus				
BCBS IL PPO	BLUE CROSS BLUE SHIELD				
BLUE CROSS BLUE SHIELD OF IL00621 /PPO PAYOR 00621	BLUE CROSS BLUE SHIELD				
Humana GoldPlus Integrated MMP	HUMANA GOLD PLUS MC				
MedicaidIL(Medicaid)	IL Medicaid	HSF			
Meridian Health Plan of Illinois	HSF	HSF			
Ascension Complete	Ascension Complete				
Medicare Part B - Illinois	MEDICARE				
UFCW L1546 H&W Fund	UFCW LOCAL 1546				
UFCW L1546 H&W Fund					
Meridian Health Plan of Illinois	MERIDIAN HEALTH PLAN FHP ICP	HSF			
COUNTYCARE IL MEDICAID	COUNTY CARE HEALTH PLAN	HSF			
MEDICARE BIL	MEDICARE				
MEDICAIDIL	IL Medicaid	HSF			
AETNA BETTER HEALTH MCD REPLACEMENT	AETNA BETTER HEALTH OF ILLINOIS	HSF			
BLUE CROSS MANAGED CARE [1030006]/BC AMITA HMO [103000607]	BCBS AMITA CIN				
BLUE CROSS COMMUNITY MCD REPLACEMENT [1040002]/BLUE CROSS COMMUNITY MCD [104000201]	IL Medicaid				
BLUE CROSS [1010001]/BLUE CHOICE UNITE HERE SELECT [101000111]	Blue Choice PPO				
BLUE CROSS [1010001]/BLUE CROSS PPO [101000108]	BLUE CROSS MEDICARE ADV PPO				
NCNS HMO ADV	AMITA ST. MARYS & ELIZABETH HMO				
UNITED HEALTHCARE [1030046]/UHC CHOICE [103004602]	UNITED HEALTH CARE				

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