

**SPARCS CROSSWALK**

**Source of Payment Typology to Claim Filing Indicator**

SoP Code	Typology Description	SPARCS Code	SPARCS Description
1	<b>MEDICARE</b>	MA/MB	<b>Medicare Part A/B</b>
11	<b>Medicare (Managed Care)</b>	MA/MB	
111	Medicare HMO	16	<b>Health Maintenance Organization (Medicare Part A/B)</b>
112	Medicare PPO	12	<b>Medicare Part A/B</b>
113	Medicare POS	13	
119	Medicare Managed Care Other	MA/MB	
12	<b>Medicare (Non-managed Care)</b>	MA/MB	
121	Medicare FFS		
122	Medicare Drug Benefit		
123	Medicare Medical Savings Account (MSA)		
129	Medicare Non-managed Care Other		
19	<b>Medicare Other</b>	MA/MB	
2	<b>MEDICAID</b>	MC	
21	<b>Medicaid (Managed Care)</b>	MC	
211	Medicaid HMO	MC	
2111	<i>Family Health Plus (NYS ADDITION)</i>	MC	
2112	<i>Healthy New York (NYS ADDITION)</i>	MC	
212	Medicaid PPO	MC	
213	Medicaid PCCM (Primary Care Case Management)	MC	
219	Medicaid Managed Care Other	MC	
22	<b>Medicaid (Non-managed Care Plan)</b> <i>(Fee-For-Service -- NYS ADDITION)</i>	MC	
23	<b>Medicaid/SCHIP</b> <i>(Child Health Plus -- NYS ADDITION)</i>	MC	
24	<b>Medicaid Application</b>	MC	
25	<b>Medicaid - Out of State</b>	MC	
29	<b>Medicaid Other</b>	MC	
3	<b>OTHER GOVERNMENT (Federal/State/Local) - Excluding Department of Corrections</b>	OF	<b>Other Federal Government</b>
31	<b>Department of Defense</b>	OF	<b>Champus (Other Federal Government)</b>
311	TRICARE (CHAMPUS)	CH	
3111	TRICARE Prime -- HMO	12	<b>Other Federal Government</b>
3112	TRICARE Extra -- PPO	12	
3113	TRICARE Standard - Fee For Service	OF	
3114	TRICARE For Life -- Medicare Supplement	OF	
3115	TRICARE Reserve Select	OF	
3116	Uniformed Services Family Health Plan (USFHP) -- HMO	OF	
3119	Department of Defense - (other)	OF	
312	Military Treatment Facility	OF	
3121	Enrolled Prime-HMO	OF	
3122	Non-enrolled Space Available	OF	
3123	TRICARE For Life (TFL)	OF	
313	Dental--Stand Alone	OF	
32	<b>Department of Veterans Affairs</b>	VA	
321	Veteran care--Care provided to Veterans	OF	<b>Other Federal Government</b>
3211	Direct Care--Care provided in VA facilities	OF	
3212	Indirect Care--Care provided outside VA facilities	OF	
32121	Fee Basis	OF	
32122	Foreign Fee/Foreign Medical Program (FMP)	OF	
32123	Contract Nursing Home/Community Nursing Home	OF	
32124	State Veterans Home	OF	

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32125	Sharing Agreements	OF	Other Federal Government
32126	Other Federal Agency	OF	
322	Non-veteran care	OF	
3221	Civilian Health and Medical Program for the VA (CHAMPVA)	OF	
3222	Spina Bifida Health Care Program (SB)	OF	
3223	Children of Women Vietnam Veterans (CWVV)	OF	
3229	Other non-veteran care	OF	
<b>33</b>	<b>Indian Health Service or Tribe</b>	OF	
331	Indian Health Service - Regular	OF	
332	Indian Health Service - Contract	OF	Other Federal Government
333	Indian Health Service - Managed Care	OF	
334	Indian Tribe - Sponsored Coverage	OF	
<b>34</b>	<b>HRSA Program</b>	OF	
341	Title V (MCH Block Grant)	TV	
342	Migrant Health Program	OF	Other Federal Government
343	Ryan White Act	OF	
349	Other	OF	
<b>35</b>	<b>Black Lung</b>	OF	
<b>36</b>	<b>State Government</b>	OF	
361	State SCHIP program (codes for individual states)	OF	
362	Specific state programs (list/local code)	OF	
369	State, not otherwise specified (other state)	OF	
<b>37</b>	<b>Local Government</b>	OF	
371	Local - Managed care	OF	
3711	HMO	OF	
3712	PPO	OF	
3713	POS	OF	
<b>372</b>	<b>FFS/Indemnity</b>	OF	
<b>379</b>	<b>Local, not otherwise specified (other local, county)</b>	OF	
<b>38</b>	<b>Other Government (Federal, State, Local not specified)</b>	OF	
381	Federal, State, Local not specified managed care	OF	
3811	Federal, State, Local not specified - HMO	OF	
3812	Federal, State, Local not specified - PPO	OF	
3813	Federal, State, Local not specified - POS	OF	
3819	Federal, State, Local not specified - not specified managed care	OF	
382	Federal, State, Local not specified managed - FFS	OF	
389	Federal, State, Local not specified managed - Other	OF	
<b>39</b>	<b>Other Federal</b>	OF	
<b>4</b>	<b>DEPARTMENT OF CORRECTIONS</b>	Use a code below	
<b>41</b>	<b>Corrections Federal</b>	OF	Other Federal Government
<b>42</b>	<b>Corrections State</b>	11	Other Non-Federal Program
<b>43</b>	<b>Corrections Local</b>	11	
<b>44</b>	<b>Corrections Unknown Level</b>	11	
<b>5</b>	<b>PRIVATE HEALTH INSURANCE</b>	15	Indemnity Insurance
<b>51</b>	<b>Managed Care (Private)</b>	15	
511	Commercial Managed Care - HMO	HM	Health Maintenance Organization
512	Commercial Managed Care - PPO	15	Indemnity Insurance
513	Commercial Managed Care - POS	13	Point of Service (POS)
514	Exclusive Provider Organization	14	Exclusive Provider Organization (EPO)
515	Gatekeeper PPO (GPPO)	15	Indemnity Insurance
519	Managed Care, Other (non HMO)	15	
<b>52</b>	<b>Private Health Insurance - Indemnity</b>	15	
521	Commercial Indemnity	15	

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SoP Code	Typology Description	SPARCS Code	SPARCS Description
522	Self-insured (ERISA) Administrative Services Only (ASO) plan	15	Indemnity Insurance
523	Medicare supplemental policy (as second payer)	15	
529	Private health insurance -- other commercial Indemnity	15	
<b>53</b>	<b>Managed Care (private) or private health insurance (indemnity), not otherwise specified</b>	<b>CI</b>	<b>Commercial Insurance Co. (Indemnity Insurance)</b>
<b>54</b>	<b>Organized Delivery System</b>	15	Indemnity Insurance
<b>55</b>	<b>Small Employer Purchasing Group</b>	15	
<b>59</b>	<b>Other Private Insurance</b>	15	
<b>6</b>	<b>BLUE CROSS/BLUE SHIELD</b>	BL	
<b>61</b>	<b>BC Managed Care</b>	BL	Blue Cross/Blue Shield
611	BC Managed Care - HMO	BL	
612	BC Managed Care - PPO	BL	
613	BC Managed Care - POS	BL	
619	BC Managed Care - Other	BL	
<b>62</b>	<b>BC Indemnity</b>	BL	
<b>63</b>	<b>BC (Indemnity or Managed Care) - Out of State</b>	BL	
<b>64</b>	<b>BC (Indemnity or Managed Care) - Unspecified</b>	BL	
<b>69</b>	<b>BC (Indemnity or Managed Care) - Other</b>	BL	
<b>7</b>	<b>MANAGED CARE, UNSPECIFIED</b> (to be used only if one can't distinguish public from private)		
<b>71</b>	<b>HMO</b>	HM	
<b>72</b>	<b>PPO</b>	12	
<b>73</b>	<b>POS</b>	13	
<b>79</b>	<b>Other Managed Care (Unknown) - Public or private</b>		
<b>8</b>	<b>NO PAYMENT FROM AN ORGANIZATION/AGENCY/PROGRAM/PRIVATE PAYER LISTED</b>	09	Self-pay
<b>81</b>	<b>Self-pay</b>	09	
<b>82</b>	<b>No Charge</b>	09	
821	Charity	09	
822	Professional Courtesy	09	
823	Research/Clinical Trial	09	
<b>83</b>	<b>Refusal to Pay/Bad Debt</b>	09	
<b>84</b>	<b>Hill Burton Free Care</b>	09	
<b>85</b>	<b>Research/Donor</b>	09	
<b>89</b>	<b>No Payment, Other</b>	09	
<b>9</b>	<b>MISCELLANEOUS/OTHER</b>	ZZ	
<b>91</b>	<b>Foreign National</b>	ZZ	
<b>92</b>	<b>Other (Non-government)</b>	ZZ	
<b>93</b>	<b>Disability Insurance</b>	DS	<b>Disability</b>
<b>94</b>	<b>Long-term Care Insurance</b>	ZZ	
<b>95</b>	<b>Worker's Compensation</b>	<b>WC</b>	<b>Worker's Compensation</b>
951	Worker's Comp HMO	WC	
953	Worker's Comp Fee-for-Service	WC	
954	Worker's Comp Other Managed Care	WC	
959	Worker's Comp, Other unspecified	WC	
<b>96</b>	<b>Auto Insurance (no fault)</b>	AM	<b>Automobile Medical</b>
<b>98</b>	<b>Other specified (includes Hospice - Unspecified plan)</b>	ZZ	
<b>99</b>	<b>No Typology Code available for payment source</b>	ZZ	
<b>ZZZ</b>	<b>UNAVAILABLE / UNKNOWN</b>	ZZ	<b>Mutually Defined/Unknown</b>

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\*Some ANSI ASC X12 codes lack sufficient definition to be mapped to the Payer Typology.