



Attachment 8 – Third Party Insurance Participation Status

(Only 1 required per agency)

Name of Agency / Provider:

Agency Tax ID:

Agency NPI:

Medicaid MMA Plan	Coverage under HPC contract	Choose coverage under HPC contract	Independent Contract
Actna	Joinder available		
Vivida	Joinder available		
Wellcare (CMS)	Joinder available		
Staywell	Joinder available		
Simply	Automatically covered under LOA		
Molina	Joinder available		
Sunshine	Automatic Coverage Under HPC		
United	No contract available	NA	
Humana	Independent contract required	NA	

Please list below any other third party insurance plans you are enrolled in, or you have attempted to enroll in.

Insurance Plan Name	Participating	Attempted to join (Date)	Comments
Blue Cross Blue Shield (Independent ITDS excluded).			