

P. O. BOX 778974, HARRISBURG, PA 17177-8974, (717) 541-3800

PLEASE PRESENT TO YOUR PROVIDER(S)

Dear Billing Coordinator:

The purpose of this letter is to inform you of the change in health care administration for this participant of the Shamokin Area School District Health Plan. NCAS Pennsylvania, a third party administrator located in Lemoyne, Pennsylvania, will be providing administrative services for the employees of the school district effective April 1, 2007.

This employee or his/her dependent(s) posses an identification card that contains Capital BlueCross and Capital Advantage Insurance Company "Capital" Network billing information. This identification card also includes the NCAS logo at the lower left hand corner of the card. If you are a "Capital" participating provider, you may contact the Provider Service Telephone Unit at Capital BlueCross to obtain information on eligibility and group plan benefits. Participating Facility and Professional Providers are asked to submit claims for services rendered according to the claims submission guidelines given to them through their local plan. If you are a participating provider, payment for services will be reimbursed through the local plan.

Please be aware that the identification card for this employee or dependent (s) contains an alpha prefix code prior to the identification number. The prefix is YWT or YWU, depending on whether the employee has elected Traditional or PPO coverage. It is very important that this alpha prefix code is used for all billings and when making inquiries.

Thank you for your cooperation. If you have any questions regarding this process, please contact NCAS Pennsylvania at 1-866-787-9872.

Sincerely,

NCAS Pennsylvania