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**CORESOURCE MD PA IL
 DENTAL ELECTRONIC REMITTANCE ADVICE (ERA) ENROLLMENT REGISTRATION**

PAYER ID NUMBER	35182				
ELECTRONIC REGISTRATIONS Agreements Required	Participation in Dental Electronic Remittance Advice (ERA) is limited to those provider's whose practice management software vendor is participating in ERA with Emdeon or to those provider's who have a Dental Provider Services (DPS) account. Please contact your software vendor to verify participation or register for a DPS account at www.emdeondental.com				
ENROLLMENT CONFIRMATION	ERA enrollments take approximately 5-7 days for completion. Once complete, Emdeon Dental will notify the provider or their software vendor to expect to begin receiving ERAs from CoreSource MD PA IL.				
CHANGING ELECTRONIC BILLING AGENTS	If the Provider currently receives ERAs through another Billing Agent other than Emdeon Business Services each Provider must re-enroll following the procedures listed above.				
DISCONTINUING ERA	If a provider wishes to discontinue receiving ERAs from CoreSource MD, PA IL he needs to email his request to payorid35182@coresource.com .				
CONTACT PHONE NUMBERS	<table border="0"> <tr> <td>CoreSource MD PA IL</td> <td align="right">800-689-0106</td> </tr> <tr> <td>Emdeon Business Services Provider Enrollment</td> <td align="right">888-255-7293</td> </tr> </table>	CoreSource MD PA IL	800-689-0106	Emdeon Business Services Provider Enrollment	888-255-7293
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