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**MISSOURI MEDICAID
 DENTAL ELECTRONIC REMITTANCE ADVICE (ERA) ENROLLMENT REGISTRATION**

PAYER ID NUMBER	CKMO1				
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 7-10 business days for completion. Once complete, Emdeon Dental will notify the provider or their software vendor to expect to begin receiving ERAs from Missouri Medicaid.				
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 Missouri Medicaid he needs to call the Infocrossing Healthcare Services Help Desk at 573-635-3559.				
CONTACT PHONE NUMBERS	<table border="0"> <tr> <td>Infocrossing Healthcare Services Help Desk</td> <td align="right">573-635-3559</td> </tr> <tr> <td>Emdeon Business Services Provider Enrollment</td> <td align="right">888-255-7293</td> </tr> </table>	Infocrossing Healthcare Services Help Desk	573-635-3559	Emdeon Business Services Provider Enrollment	888-255-7293
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