

**CAPITAL BLUE CROSS MEDICAL ERA****For Initial Enrollment with this payer:**

- Providers must contact Capital Blue Cross to enroll at (800) 874-8433 or by email at [provider.automation@capbluecross.com](mailto:provider.automation@capbluecross.com)

**For Re-Enrollment (COS Change of Service) with this payer:**

- Providers must contact Capital Blue Cross to enroll at (800) 874-8433 or by email at [provider.automation@capbluecross.com](mailto:provider.automation@capbluecross.com)

**If you are already APPROVED by this payer to submit through Emdeon:**

- If you have already received an approval from this payer to submit claims electronically through Emdeon, you must notify Emdeon so that we may process your approval in our enrollment systems. Please submit a **Client Provided Approval Form** to Enrollment for processing.
  - You may obtain the form from our enrollment web site <http://www.Emdeon.com> or by calling our Fax on Demand service at 1-800-760-2804 (doc# 1450).
  - The Client Provided Approval form must be submitted to: [payerregistration@Emdeon.com](mailto:payerregistration@Emdeon.com) , or faxed to 615-885-3713.

**Payer Registration Reminders:**

- Please keep a copy of all forms for your records.
- Please verify that all pages in the agreement are included when mailing.
- Please ensure that all required fields are completed and legible.
- Please provide a physical address below in case we need to Fed-Ex your agreement back to you.
- Please remember to sign and date all documents. Your software vendor must be certified to send All-Payer claims to Emdeon. Please contact your vendor if you have questions regarding certification.
- To obtain forms or additional payer information, visit our website: <http://www.Emdeon.com>.