

PAYER ID:

SUBMITTER ID:



Emdeon ERA Provider Information Form

*This form is to ensure accuracy in updating the appropriate account

1 Provider Organization					
Practice/ Facility Name		Provider Name			
Tax ID		Client ID		Site ID	
Address		City/State		Zip Code	
Contact Name					
E-mail Address		Telephone		Fax	
2 Vendor <i>(Emdeon certified vendor used to submit files to Emdeon)</i>					
Vendor Name		Vendor Submitter ID		Division ID	
Contact Name					
E-mail Address					
3 Payer					
Payer ID					
Group ID	Individual Provider ID		NPI ID		
4 Confirmations					
Send Emdeon Claim Confirmations To:					
Special Instructions:					
<ul style="list-style-type: none"> All Payer Registration forms must contain signatures when applicable, stamped signatures or photocopies are accepted. SUBMIT COMPLETED FORM TO: Fax: (615) 231-4843 Email: batchenrollment@Emdeon.com 					
EMDEON REVISION FORM DATE:					

EDI TRADING PARTNER REGISTRATION FORM – Payment Advice/Remit

Please print legibly to avoid form being returned

Type of Request *Check one*

Sender ID = Gateway mailbox from where the inbound 837 claim is being submitted
Receiver ID = Gateway mailbox to where the outbound 835 payment is being routed

<input type="checkbox"/> INITIAL 835 SETUP – Receiver ID to be <i>same</i> as 837 Sender ID	<input type="checkbox"/> INITIAL 835 SETUP – Receiver ID to be <i>different</i> from 837 Sender ID	<input type="checkbox"/> MAINTENANCE – add/delete/change 835 profile for Receiver ID
<u> MW00211C </u> <i>Important - fill in sender ID</i>	<u> MW00211C </u> <i>Important - fill in sender ID</i>	<u> MW00211C </u> <i>Important - fill in receiver ID</i>

The following is required to receive an 835 Payment / Remittance Advice:

- Name of Provider or Organization
- Anthem assigned Payee ID Number
- Provider Tax ID Number associated with Provider ID Number
- National Provider Identifier (NPI) associated with Provider ID Number (*does not apply to exempt providers)

NOTE: Depending on the payment arrangement between the provider(s) and Anthem, claim payments are made based on the Payee ID assigned to the individual provider and/or group. In cases where multiple providers are paid under the same Payee ID or group pay-to number, activation of the number will generate 835s for all providers linked under this hierarchy.

Since the payee ID/Tax ID can only be associated with one Anthem Sender/Receiver ID, changes to your provider ID number or tax ID number may affect the distribution of your 835s. ***If you have any changes in provider status, or need to activate or deactivate additional providers for receiving the 835, notify the EDI Help Desk by completing this form as a maintenance request.***

For further detail and latest news about the 835, refer to the EDI website: <http://www.anthem.com/edi>

Contact Information

Provider Information

Provider Name _____

Address _____

City _____ State _____ Zip Code _____

Contact Name _____ Phone _____

E-Mail Address _____ Fax _____

Technical Information

Vendor Name _____

Address _____

City _____ State _____ Zip Code _____

Contact Name _____ Phone _____

E-Mail Address _____ Fax _____

