

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 					
IF ENROLLING FOR EFT YOU MUST ALSO SUBMIT A VOIDED CHECK ALONG WITH THE ENROLLMENT FORM					
EMDEON REVISION FORM DATE:					



Attachment III

Provider Authorization Form

Release of Electronic Remittance Advice (ERA) to a Third Party and/or Electronic Funds Transfer (EFT) Information

Provider Information for ERA			
Provider name:			
Tax ID Number(s):			
NPI(s) (National Provider Identification):			
Physical address:			
City:		State:	Zip:
Telephone:		Fax:	
Primary contact name:			
Email Address:			
Third Party authorized to receive 835: EMDEON			
Address: 3055 LEBANON ROAD BLDG#3 SUITE 2000			
City: NASHVILLE		State: TN	Zip: 37214
Telephone: 866-924-4634	Fax: 615-231-4843	payerregistration@emdeon.com Email:	
Billing service technical contact name: ENROLLMENT HELP DESK			
Bank name:		Branch phone:	
Branch address:			
Administrative contact:		Contact phone:	
American bankers association (ABA) number		Account number	
Please attach a copy of a voided check for bank routing numbers and account information. Deposits slips may not contain bank routing numbers.			
Signature:		Print name:	
Title:		Date:	

This form will certify that the Third Party named above is authorized to receive the provider electronic remittance advice (also known as the 835) for the provider listed.

Unless Blue Shield authorizes an extension, Blue Shield will discontinue hard-copy remittance advice forty-five (45) days from the date of the first ERA file transfer.

Electronic Fund Transfer (EFT) requestors must be established Electronic Remittance Advice (ERA) recipients with Blue Shield or agree to use online Explanation of Benefit (EOB) retrieval to qualify for EFT.

The provider is responsible to notify Blue Shield of California if there are any changes authorizing this Third Party to receive the electronic remittance advice or change in the account information for electronic funds transfer.

Fax to: Attention: eBusiness Data Exchange at (530) 351-6150

Mail to: eBusiness Data Exchange
4700 Bechelli Lane
Redding, CA 96002



Electronic Funds Transfer Attachment 1

The terms and conditions of this Electronic Funds Transfer Attachment (“EFT Attachment”) supplement and incorporate the terms and conditions in the Agreement.

A. **Definitions.**

1. **“Blue Shield’s Account”** means the deposit account at Blue Shield’s bank, which will be debited when payment is made from Blue Shield to Trading Partner’s Bank. Blue Shield’s Account shall be credited for Reversing Entries (as defined herein) in accordance with Section C.5 of this EFT Attachment.
2. **“NACHA”** means the acronym for the National Automated Clearinghouse Association.
3. **“Payment Obligation”** means the obligation of Blue Shield to pay money to Trading Partner under the Parties’ business agreement.
4. **“Remittance Information”** means the data that relates to a specific transfer of funds in the format designated in Section 2.2 (Remittance Information) of the Appendix to this EFT Attachment.
5. **“Reversing Entry”** is a debit or credit to Blue Shield’s Account initiated by Blue Shield or its bank in accordance with NACHA rules to correct an erroneous entry in Trading Partner’s account.
6. **“Third Party Service Provider”** means an entity listed in Section 1.1 of the Appendix to this EFT Attachment who will assist Trading Partner in the communication of Transactions Sets (as defined herein) and notices between the Parties.
7. **“Trading Partner’s Bank”** means the bank listed by Trading Partner in Section 1.1 of the Appendix to this EFT Attachment for receiving Blue Shield payments from Blue Shield’s bank and the bank to be used to make Reversing Entries for payments to Blue Shield’s bank.
8. **“Transaction Set”** means data listed in Section 1.1 and Section 2.1 of the Appendix to this EFT Attachment, or as otherwise agreed upon, that are communicated electronically between the Parties

B. **Agreement and Authorization.**

1. **Credits.** Trading Partner authorizes Blue Shield to satisfy its Payment Obligations by initiating fund transfers to Trading Partner’s account and to communicate Remittance Information for these transfers to Trading Partner in an agreed upon format.
2. **Debits.** The only debit authorized by this EFT Attachment is for Blue Shield to reverse entries of fund transfers according to the terms of Section C.5 of this EFT Attachment.

3. **Changes in Trading Partner's Bank.** Trading Partner shall provide fifteen (15) business days prior written notice to Blue Shield of any changes in Trading Partner's banking or Third Party Service Provider relationships.
4. **Indemnification.** Trading Partner agrees to indemnify and hold Blue Shield and Blue Shield's bank harmless from all claims and causes of action arising from reliance by Blue Shield and Blue Shield's bank on information provided by Trading Partner in various Sections of the Appendix to this EFT Attachment. Trading Partner agrees to reimburse Blue Shield for reasonable attorneys' fees and costs incurred by Blue Shield and Blue Shield's bank in defending such claims and causes of action.
5. **Payment.** Blue Shield shall instruct its bank to transfer funds using the method specified in Section 2.1 of the Appendix to this EFT Attachment.
6. **Remittance Information.** Blue Shield shall electronically communicate the associated Remittance Information to the Trading Partner as stated in Section 2 of the Appendix to this EFT Attachment for each fund transfer initiated under this EFT Attachment.
7. **Rules.** The Parties agree that all fund transfer and related transactions between the Parties will be executed or transmitted within the operating rules of NACHA. Trading Partner agrees that Blue Shield has no obligation to reverse, adjust or stop payment or posting of fund transfers not allowed under NACHA rules.
8. **Notices.** Notices required or permitted under this EFT Attachment shall be communicated as specified in Section 4 of the Appendix to this EFT Attachment and sent to the recipient's address listed in that Section. The Parties can change notice addresses in Section 4 by notifying the other party in writing. If the sender of an electronic notice does not receive an acknowledgment as detailed in Section D of this EFT Attachment within five (5) business days, the sender shall then communicate by paper.

C. **Payments and Payment Obligations.**

1. **Timeliness.** Blue Shield's payment to Trading Partner will be considered timely if the fund transfer is completed no later than three (3) days after due date. In the event the due date falls on a holiday or weekend, Blue Shield's payment is timely if the fund transfer is completed on the next business day.
2. **Effect of Delays.** Blue Shield shall not be in breach of this EFT Attachment or the Contract for a fund transfer that was initiated properly but was delayed because of failure, delay or rejection by the fund transfer system or other mechanism listed in the Appendix to this EFT Attachment. Nonetheless, Blue Shield will pay the Trading Partner as soon as possible after the failure, delay, or rejection is discovered.
3. **Discharge: Credit to Blue Shield.** Trading Partner acknowledges and agrees that Blue Shield's Payment Obligation will be satisfied upon completion of a fund transfer in accordance with the specifications found in Section 2.1 of the Appendix to this EFT Attachment. The Trading Partner shall credit Blue Shield for the entire payment when the transfer is complete even if Trading Partner's bank charges a fee for fund transfers.
4. **Disallowance of Credit Taken.** The Trading Partner shall notify Blue Shield promptly of deductions in the Payment Obligation to which Trading Partner does not agree and will include the amount in question and reason for Blue Shield's credit disallowance in accordance with Section 2.1 in the Appendix to this EFT Attachment.

5. **Reversing Entries.** Blue Shield must send Reversing Entries to Trading Partner's Bank by midnight of the fifth day following the effective date of the erroneous entry. An erroneous entry for the purposes of this Section is defined as one that is a duplicate, an order payment where Blue Shield is not financially responsible or an order payment where the dollar amount is incorrect.

D. Receipt, Acknowledgement, and Verification.

1. **Receipt.** A Transaction Set or other EFT Attachment notice sent shall be considered received when it is accessible to the Trading Partner as specified in Section 2.3 (Receipt of Transactions Sets) of the Appendix to this EFT Attachment.
2. **Acknowledgment.** The Party that receives a Transaction Set or other notice from the sender shall acknowledge receipt of a syntactically correct transmission to the sender within three (3) business days of such transmission. This is discussed in greater detail in Section 2.1 of the Appendix to this EFT Attachment. Such acknowledgment shall constitute conclusive evidence that the transmission was accurately exchanged.
3. **Verification.** The receiver of a Transaction Set or other notice shall take reasonable steps to authenticate the sender's identity and the integrity of the transmission. See Section 3 in the Appendix to this EFT Attachment for more details. If a transmission is garbled or cannot be verified as authentic, the receiver shall notify sender within three (3) business days.

E. Security Procedures.

1. **Procedures.** Each Party shall employ security procedures and notify the other Party of them to ensure that funds, Transaction Sets and other transmissions are authentic, accurate and confidential. Security procedures are discussed further in Section 3 of the Appendix to this EFT Attachment and include the use of passwords, authentication procedures and encryption devices. Blue Shield can change these procedures at any time and will inform Trading Partner of these changes in writing.
2. **Limitation of Liability.** Blue Shield disclaims any liability and Trading Partner indemnifies Blue Shield for costs and expenses related to claims or causes of action which arise from the failure of Trading Partner, Trading Partner's Bank or Third Party Service Provider to implement and maintain adequate security procedures as required by Section 7.1 above.

F. Changes, Suspension, and Termination.

1. **Change of Designations.** Either Party may change its banking account, bank affiliation or Third Party Service Provider by notifying the other in writing. Such notice shall be made at least fifteen (15) business days in advance of the change.
2. **Suspension of Operations.** Either Party may suspend operations under this EFT Attachment as follows: (a) If the notifying Party has a good faith belief that a breach of security procedures or confidentiality requirements under this Agreement exists or may exist; or (b) If the performance of a Party is delayed or prevented by force majeure, e.g., an act of God, natural disaster, computer failure or other cause beyond the affected Party's control. Suspension of operations shall not relieve either Party of its EFT Attachment obligations to the other Party or extend the time for paying the Trading Partner. When the force majeure no longer exists, the previously affected Party shall promptly notify the other Party so that normal operations can resume.

3. **Termination of Attachment.** Either Party may terminate this EFT Attachment with thirty (30) day's written notice to the other. Fund transfer and Transaction Sets that have been initiated by Blue Shield prior to termination date will be processed.

APPENDIX

SECTION 1: BLUE SHIELD EFT INFORMATION

Trading Partner's Bank New Revised

Provider Name: _____

Provider Tax No.: _____

Bank Information:

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

(Area Code and Number)

Type of Account: Demand Deposit Checking Account

Administrative Contact: _____

Remittance Information: ERA & EFT ERA only EFT only

Name of Third Party Service Provider for ERA (if applicable):
EMDEON

Provider/Clearinghouse email address:
PAYERREGISTRATION

American Bankers Association (ABA) No.:

--	--	--	--	--	--	--	--	--	--

Account No.: _____

LIST ALL APPLICABLE BLUE SHIELD PROVIDER IDENTIFICATION NUMBERS (Required - Use additional page if necessary)

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Authorized Signature: _____

Date Completed: _____

THIS SECTION COMPLETED BY BLUE SHIELD

Receiver ID
(Assigned by Blue Shield) _____

EDI Contact: _____

Telephone: _____

- PLEASE NOTE:
1. THIS APPENDIX MUST BE FULLY COMPLETED AND RETURNED WITH THE SIGNED EFT ATTACHMENT.
 2. AN ORIGINAL VOIDED CHECK OR A LETTER FROM THE FINANCIAL INSTITUTION FROM THE TRADING PARTNER'S ACCOUNT MUST ALSO BE RETURNED WITH THE SIGNED EFT ATTACHEMENT.

APPENDIX

SECTION 2: REMITTANCE PROCEDURES

- 2.1 **Method of Transfer/Communication.** Electronic transfers of funds will be done through NACHA bank-to-bank transfer systems. Required Remittance Information associated with funds transfers can be communicated in a number of ways. Trading Partner shall indicate in Section 1 of the Appendix whether it shall require Remittance Information with or separate of the transfer of funds.
- 2.2 **Remittance Information.** The Remittance Information Transaction Set for each payment must contain the data required by Blue Shield and NACHA rules.
- 2.3 **Receipt of Transaction Sets.** A Transaction Set is considered accessible by Trading Partner when it is deposited in Trading Partner's electronic mailbox or when received directly by Trading Partner's computer. The same access rules for Transaction Sets apply to a Third Party Service Provider if Trading Partner is using one that is designated in Section 1 of the Appendix.

SECTION 3: VERIFICATION AND SECURITY PROCEDURES

[Reserved for language upon which both Parties will agree.]