



ARIZONA MEDICAID HOSPITAL

For Initial Enrollment with this payer:

- There are no enrollment forms required for this payer for initial or re-enrollment for electronic claims submission through Emdeon.
- To complete payer enrollment with Emdeon please submit a Provider Setup Form
- To obtain a Provider Setup Form please visit our website: [Emdeon SetUp Form.pdf](#)
- You must register you NPI ID with this payer.
- Provider must submit an email to Rita Larios at ralarios@ahcccs.state.az.us. Please make the subject line “**New Provider(s) for Emdeon.**” Include in your email the providers name and six-digit ID. If provider is a member of a group please indicate provider name, group name and the group ID that the provider will be submitting under.
- Please keep a copy of all forms for your records.
- Your software vendor must be certified to send All-Payer claims to Emdeon. Please contact your vendor if you have questions regarding certification.