

**COLORADO MEDICAID HOSPITAL****For Initial Enrollment with this payer:**

- If you have NOT submitted claims electronically to this payer, the Payer requires Payer Registration forms.
- Below are the sections for enrollment from CO web site;
- [http://www.chcpf.state.co.us/ACS/EDI\\_Support/edi\\_support.asp](http://www.chcpf.state.co.us/ACS/EDI_Support/edi_support.asp)
- **EDI X12N Transaction Forms:**
- **EDI Enrollment**
- Download the applicable enrollment application from [Providers not yet enrolled in the Colorado Medical Assistance Program](#) in the Provider Services Enrollment section of the Department's website. Complete and submit pages 1-20 and the W9. *Providers should follow the instructions carefully to avoid EDI processing delays.*
- After processing, EDI Services will fax or mail your trading partner information to you. The State will follow-up on the enrollment process and send you the necessary user names and passwords for accessing the Web Portal.
- [EDI Submitter Enrollment Form \(10/06\)](#)
- **Providers already enrolled for EDI**
- [Provider EDI Update Form \(10/06\)](#) – Please use this form to update previously submitted EDI enrollment information.
- Emdeon submitter id for CO Mcaid is 103626