

## PAYER ENROLLMENT INSTRUCTIONS FOR

Before enrolling please be sure your Capario contract includes the transactions you will be using. Complete the payer enrollment process BEFORE submitting claims to Capario for this payer. If you are unsure about your contract status please contact Capario Support team at: [edi@capario.com](mailto:edi@capario.com) or 800-792-5256.

We recommend enrolling using our Portal enrollment tool. This free Portal tool allows you to enter Providers and select the payers and transactions for your enrollment as it prefills the agreement forms for you. Another advantage of the enrollment tool is the ability to follow the progress of enrollments from initial generation through to payer approval. Our team will set you up and provide a quick tutorial. Contact us at [edi@capario.com](mailto:edi@capario.com)

If you are not enrolling with the free portal Enrollment tool, please following these instructions:

**If this payer does not require an agreement, go to Step 2.**

### **STEP 1: COMPLETE AGREEMENT**

- Complete all required fields on agreement and verify that information entered is correct.
- If an agreement requires signatures, we recommend signing in **blue ink**. Do not use signature stamps.

### **STEP 2: PROCESS**

### STEP 3: COMPLETE CAPARIO ENROLLMENT SPREADSHEETS

- **Capario Provider Spreadsheet** – This is completed for each new provider.  
[http://www.capario.com/downloads/xls/provider\\_bulk\\_spreadsheet.xlsx](http://www.capario.com/downloads/xls/provider_bulk_spreadsheet.xlsx)
- **Capario Payer Enrollment Spreadsheet** – This is completed when requesting enrollment with a payer for providers previously added to the Capario system. Please refer to the instruction tab on each spreadsheet form for details about the information to enter in each column.  
\*\*PLEASE NOTE\*\* The fields for tracking information are key for both your record keeping of enrollments and for Capario following up with payers for approvals. Be sure to enter all tracking for each enrollment.  
[http://www.capario.com/downloads/xls/enrollment\\_bulk\\_spreadsheet.xlsx](http://www.capario.com/downloads/xls/enrollment_bulk_spreadsheet.xlsx)

Email the completed spreadsheet(s) to: [provider.enrollment@capario.com](mailto:provider.enrollment@capario.com)

#### Questions? Contact us:

Phone: (800) 792-5256 Option 1 Fax: (404) 877- 3324 Email: [provider.enrollment@Capario.com](mailto:provider.enrollment@Capario.com)



# Emdeon ERA Provider Setup Form

Email: [batchenrollment@emdeon.com](mailto:batchenrollment@emdeon.com) Fax: (615) 885-3713

## 1 Provider Organization

Practice/Facility Name							
Tax ID				Billing NPI ID			
Practice/Facility Address							
	City			State			Zip Code
Contact Name				Contact Phone Number			
Provider Email							

## 2 Vendor (Emdeon contracted & certified customer used to retrieve ERA files)

Vendor Name				Submitter ID			
Contact Name				Contact Phone Number			

## 3 ERA Receiver

Receiver ID							
Distribution Method <small>(Must list one method)</small>	<input type="text"/>			Distribution			

## 4 Payer (If additional rows are required for payer ID selection, complete additional ERA Provider Setup Forms.) **Following Payers MUST have Legacy ID's listed to complete Payer Enrollment: SB580-SB690-SKAR0-SKMD0**

Payer ID	Group ID	Individual ID	NPI ID	Payer ID	Group ID	Individual ID	NPI ID

## 5 Confirmations (Enter E-mail address)

Confirmations <small>(Enter E-mail address)</small>							
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**\*\*Section 1\*\*** Provider Organization section must be fully completed with Facility/Provider information, failure to complete all fields may result in form rejections. **Do not** list Vendor or Billing Service information. ERA payer enrollment requires that this information be that of the Facility/Provider as multiple payers will contact the Facility/Provider contact to confirm enrollment. These payers will not accept the confirmation of enrollment from Vendors or Billing Services. Billing NPI is **required** to complete enrollment.