

<b>Medicaid Payer</b>	<b>Enrollment Instructions – ERA</b>						
<b>Payer Info</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">This payer allows the provider to be linked to more than one clearinghouse for submission of electronic claims</td> <td style="width: 10%; text-align: center;">Yes</td> <td style="width: 10%; text-align: center;">No</td> </tr> <tr> <td>This payer sends confirmation when enrollment is approved.</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> </table>	This payer allows the provider to be linked to more than one clearinghouse for submission of electronic claims	Yes	No	This payer sends confirmation when enrollment is approved.	Yes	No
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This payer sends confirmation when enrollment is approved.	Yes	No					
<b>Checklist of Requirements</b>							
<b>How and Where to Submit this Request</b>	<b>PROVIDER COMPLETES AND SUBMITS ONLINE WITH THE PAYER.</b>						
<b>Steps / Instructions for completing request</b>	<div style="text-align: right; margin-top: 20px;"> <b>More ...</b> </div>						

<b>Medicaid Payer</b>	<b>Enrollment Instructions – Claims and ERAs</b>
<b>Steps / Instructions for completing request Continued.</b>	
<b>Estimated Time of Completion</b>	
<b>Contact Info to Follow Up or Make Inquiries</b>	