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## JVHL Multi Payer

### 837-Claims and 835-ERAs

#### EDI Enrollment Instructions:

- The billing provider must have an EDIinsight customer account.
- SAVE this document to your computer.
- OPEN the file in the Adobe Reader program and type directly onto the form.
- COMPLETE the form using the provider's billing/group information as credentialed with payer.
- PRINT, SIGN and SCAN or SAVE the signed form to your PC so that you may submit the form to the EDIinsight Enrollment Team using EDIinsight Enrollment Manager.
- ERA enrollment processing timeframe is approximately 10 days.
- This payer requires a 2-digit alphanumeric lab location code. The enrollment cannot be processed without this code. Call 1-800-445-4979 to verify your lab location code.
- Support Vendors may contact the EDIinsight Enrollment Team to follow up on the ERA setup request. Or, the provider may contact JVHL at support@jvhl.org.

#### 837-Claims EDI Enrollment and 835-ERA Electronic Remittance Advice Enrollment:

Complete and submit these forms using the billing provider's group information.

1. **JVHL Authorization Request for Electronic Media Data Submission / File Retrieval (1 page)**

Enter your 2-digit lab code where indicated.

Provider or Authorized Individual must print name, title, phone, email, date, and sign where indicated under the 'Laboratory Representative Authorizing EDI Account Set Up' section.

#### Submit to EDIinsight Enrollment Team:

Within EDIinsight Enrollment Manager...

GO TO or **[ADD Payer Enrollment]** record for this payer.

SELECT record, CLICK **[ATTACH File]** to attach all pages of the completed payer form.

IF prompted, asking if you want to Submit the request, CLICK **[Yes]** -Or- CLICK **[SUBMIT Enrollment]**

ENTER any notes (optional)

CLICK to **"Save and Exit"** notes' window.

## JVHL Multi Payer List (07/14/2021)

JJVVH	JVHL Blue Care Network (BCN Comm'l Labs)
JQJVH	JVHL Blue Care Network (BCN Reimb Labs)
J9JVH	JVHL Blue Care Network (JVHL Network)
K7JVH	JVHL McLaren Health Plan
JZJVH	JVHL Priority Health



**JVHL**  
JOINT VENTURE HOSPITAL LABORATORIES

**Administrative Office**  
999 Republic Dr., Ste. 300  
Allen Park, MI 48101  
313.271.3692  
800.445.4979

**Return Completed Form to:** support@jvhl.org

**AUTHORIZATION REQUEST FOR ELECTRONIC MEDIA  
DATA SUBMISSION / FILE RETRIEVAL**

I agree to submit electronic media data and/or to retrieve files from Joint Venture Hospital Laboratories either directly or through the following billing agent.

Billing Agent Waystar  
Contact Name, Telephone \_\_\_\_\_  
Contact e-mail \_\_\_\_\_

I (or my billing agent) agree to retain all original source documents for a period of two years from the date the electronic media data was submitted to JVHL. Data will be submitted for the following laboratory location (if multiple locations, complete one form for each location).

NPI Number \_\_\_\_\_  
Lab Location Code \_\_\_\_\_  
Laboratory Name \_\_\_\_\_  
Laboratory Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_

Laboratory Representative Authorizing EDI Account Set Up

Printed Name, Title \_\_\_\_\_  
Phone, e-mail \_\_\_\_\_  
Signature \_\_\_\_\_  
Date of Request \_\_\_\_\_

I wish to submit and/or retrieve the following files (check all that apply)

**CLAIMS**

- Submit claims data (JVHL Billing Specifications format)
- Claims reports (Accepted, Failed Claim Lines) *Select One*
  - Retrieve from server via Billing Agent account *OR*
  - Retrieve from server via Laboratory account
- Retrieve payor remittance reports *Select One*
  - Retrieve from server via Billing Agent account *OR*
  - Retrieve from server via Laboratory account

**HEDIS**

- Submit HEDIS result data
- Retrieve HEDIS requests

Joint Venture Hospital Laboratories will assign a specific user name and password for your account. Following assignment of the user name and password, a Registration Form and Users Guide will be sent via e-mail. After receipt of the Registration Form and Users Guide, you may begin utilizing the JVHL file transfer system. A test transmission is required for a first time pass. Please contact Rob Ramey (support@jvhl.org) to schedule a time for the test.