



Questions? Please contact your EDI Support Vendor for help with EDI enrollment forms
05/22/2017 (FE)
<http://www.ask-edi.com/forms.htm>

**BCBS - Northeastern New York (BS800),
Western New York (BS801), HealthNow NY (55204)
ASK, Inc.**

Enrollment Instructions - ERA ONLY

- ✓ BEFORE enrolling, you MUST have a Practice Insight EDI customer account # with billing provider record(s) added. Please contact your EDI Support Vendor to confirm your EDI setup.

SUBMIT ONLINE ERA Enrollment Form. See instructions below.
For assistance in completing online form, call ASK EDI at 1-800-472-6481.

ERAs (835) NEW or CHANGE OF SERVICE

EDI Enrollment Form Application for HealthNow New York Electronic Remits (Online Form)

- GO TO <http://www.ask-edi.com/forms.htm> (to access online forms).
- CLICK "Electronic Remittance (ERA) Form"
- CLICK "[HealthNow New York \(HNNY\)](#), [Blue Cross and Blue Shield of Western New York \(BCBSWNY\)](#), and [Blue Shield Northeastern New York \(BSNENY\)](#)"
- SEE [**Provider Information**] ENTER **Billing Provider Group Name**
- SEE [**Provider Address**] ENTER **Billing Provider Group Address**
- SEE [**Provider Identifiers Information**]
 - ENTER **Billing Provider Group TIN or Employer EIN #**
 - ENTER **Billing Provider Group NPI #**
- SEE [**Other Identifiers**] KEEP "ASK" as Assigning Authority
- SEE [**Trading Partner ID**] ENTER **6001727** (Practice Insight's Trading Partner ID)
- SEE [**Provider Contact Information**] ENTER **Contact information at the Provider's Office.**
- SEE [**Electronic Remittance Advice Information**] Preference for Aggregation of Remittance Data
- OK TO SKIP [**Electronic Remittance Advice Vendor Information**]
- SEE [**Submission Information**] SELECT **New Enrollment -Or- Change Enrollment**
- SEE [**Authorized Signature**] ENTER **Name and Title for Person Submitting Enrollment.**
- CLICK [SUBMIT]

ALLOW 1-2 WEEKS FOR PROCESSING

If you do not receive confirmation of EDI setup within 10 business days, contact your Practice Insight Support Vendor for assistance. You may also contact the payer directly, by phoning the ASK EDI Help Desk at 1-800-472-6481 or by sending an email inquiry to askedi@ask-edi.com.