

APS Healthcare of Puerto Rico 837

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.
- EDI enrollment processing timeframe is approximately 15 days.
- Support Vendors may contact the EDIinsight Enrollment Team to follow up on the EDI setup request.

837 Claims Transactions:

Complete and submit this enrollment using the billing provider's group information.

1. Change Healthcare Payer Agreement (4 pages)

Check corresponding box for the type of claims you'll be submitting (Professional/Institutional) on Page 1.

Complete online enrollment, as advised from screenshots on Pages 2-4.

Check the box to indicate enrollment has been completed and insert the date below on Page 4.

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.

Provider ID:

DBQ

NPI:

Tax ID:



Payer Agreement Cover Sheet

Return completed agreements to:
Change Healthcare
Attn: Shelia Steven; Enrollment
100 Airpark Center East
Nashville, TN 37217

Agreement Type: Claims

Estimated Approval Time: 14

Multiple Clearinghouses: No

<input type="checkbox"/> CPID 5692	Preferred Medicare Choice (PMC) - Institutional	<input type="checkbox"/> CPID 6774	Panamerican (Palic) - Professional
<input type="checkbox"/> CPID 6670	Panamerican (Palic) - Institutional	<input checked="" type="checkbox"/> CPID 6857	APS Healthcare - Professional
<input type="checkbox"/> CPID 6713	Preferred Medicare Choice (PMC) - Professional	<input type="checkbox"/> CPID 7638	APS Healthcare - Institutional

Special Instructions: Providers must complete enrollments on the Payer's website.

CID _____

Submitter ID 923001

Customer ID 1006599

Billing ID 9230

Submitter Name ZIRMED INC

Reference ID _____

NPI _____

TaxID _____



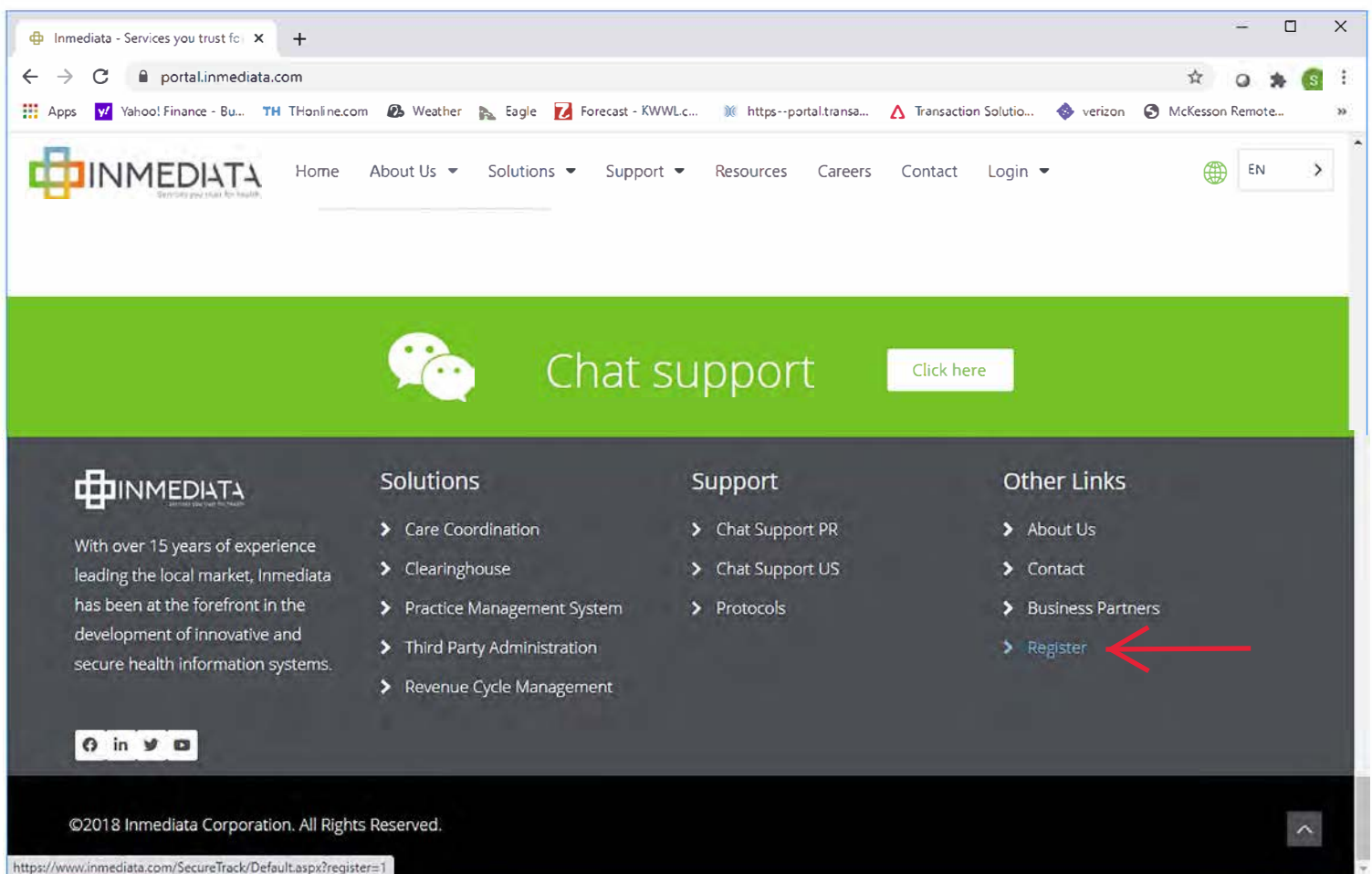
Claims

Inmediata registration instructions:

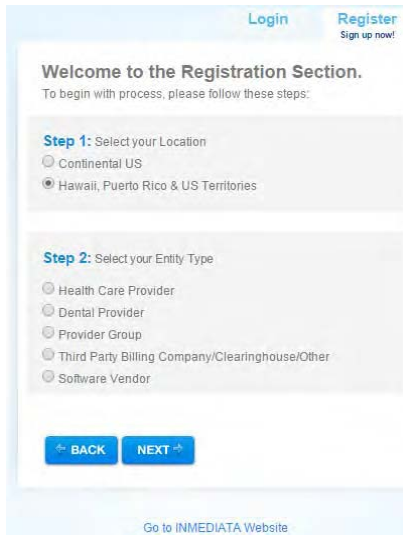
Please go to www.inmediata.com

Scroll to the bottom of the page and click 'Register' near the lower right corner.

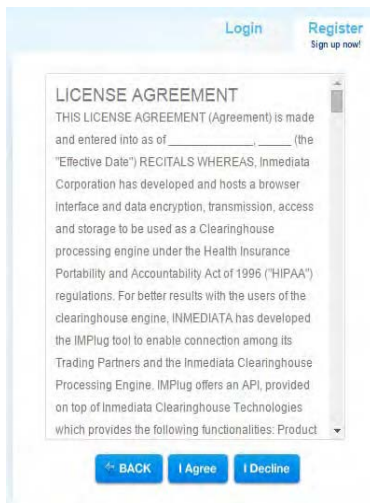
On the next screen, click 'Register' again.



Complete this information (choose location as “Hawaii, Puerto Rico & US Territories”).



The screenshot shows a registration form with two steps. Step 1 is titled "Step 1: Select your Location" and has two radio button options: "Continental US" and "Hawaii, Puerto Rico & US Territories", with the latter selected. Step 2 is titled "Step 2: Select your Entity Type" and has five radio button options: "Health Care Provider", "Dental Provider", "Provider Group", "Third Party Billing Company/Clearinghouse/Other", and "Software Vendor". At the bottom of the form are two buttons: "← BACK" and "NEXT →". Below the form is a link that says "Go to INMEDIATA Website".



The screenshot shows a "LICENSE AGREEMENT" section. The text reads: "THIS LICENSE AGREEMENT (Agreement) is made and entered into as of _____, _____ (the 'Effective Date') RECITALS WHEREAS, Inmediata Corporation has developed and hosts a browser interface and data encryption, transmission, access and storage to be used as a Clearinghouse processing engine under the Health Insurance Portability and Accountability Act of 1996 ('HIPAA') regulations. For better results with the users of the clearinghouse engine, INMEDIATA has developed the IMPlug tool to enable connection among its Trading Partners and the Inmediata Clearinghouse Processing Engine. IMPlug offers an API, provided on top of Inmediata Clearinghouse Technologies which provides the following functionalities: Product". At the bottom of the agreement are three buttons: "← BACK", "I Agree", and "I Decline".

Please complete entire Step 3 section (only partial section shown in screen shot below).

Welcome to the Registration Section.

Fill out the form below to complete registration:

Step 3: Healthcare Provider

● Required Fields

Account Information

Organization Name ●

Administrative / Billing Contact

Contact Name ●

Phone ●

no spaces or characters "(,-"

Extension

Fax

no spaces or characters "(,-"

Email ●

Technical Contact

Contact Name

Phone

no spaces or characters "(,-"

Extension

Fax

no spaces or characters "(,-"

Email

I use a third party Billing Company

Quick Links

[+ Back to Login](#)

[+ Services](#)

[+ Support Center](#)

Once this is done, the provider can transmit through Inmediata.

Provider Name:

TaxID

NPI

Provider Number:

By completing and submitting this form I am confirming the completion of the enrollment process on the Payor's website.

Date Completed