
SummaCare and Apex Benefit Services 835

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 14 days.
- Support Vendors may contact the EDIinsight Enrollment Team to follow up on the ERA setup request.

835 Electronic Remittance Advice:

Complete these forms using the BILLING PROVIDER GROUP information as credentialed with the payer.

1. Summacare 835 Registration Form (1 page)

2. Summacare Trading Partner Change Form (1 page)

--If the provider is **REQUESTING CHANGE TO ERA ROUTING**, you will need to complete and submit both SummaCare forms, 835 Registration and Trading Partner Change Form.

--If this is a **FIRST-TIME ERA SETUP** with this payer, complete and submit **ONLY** the Summacare 835 Registration Form.

Submit to EDIinsight Enrollment Team:

Within EDIinsight - Enrollment Manager:

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

SELECT record, CLIC **[ATTACH File]** to attach all pages of the completed payer form(s).

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

ENTER any notes (optional)

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



835 Registration Form



Please list all SummaCare Providers, along with their associated NPI's, that will be receiving the electronic 835 Payment Advice/Remit Transaction.

SummaCare Inc. makes claims payments based on the Tax id and NPI for the provider. Depending upon the payment arrangements between the provider(s) and SummaCare Inc., multiple providers may be paid under the same Pay-To Number.

An example of this is multiple providers within the same group practice. When a provider in a group practice requests an 835 electronic transaction, all other providers under the same Pay-To Number will also receive an 835 electronic transaction. In the event that the contract is paying to a group practice please list the pay-to NPI.

Trading Partner EDI Information:

Name of Vendor/ISA08 Interchange Receiver ID of the Trading Partner:	
---	--

Provider Name	Provider/Group TAX ID Number	Provider NPI	PAYTO Group Name	PAYTO Group NPI

Please email the completed form to edisupport@summacare.com
NOTE: Once the 835/ERA has been completed, the paper remittance will be turned off.



Trading Partner Change Form



This signed document authorizes SummaCare to update or change who is currently receiving your electronic 835 on your behalf.

Note: SummaCare makes claims payments based on the National Provider Identifier assigned to the provider. When a provider is paid to a group or practice, all other providers under that same group or practice will also receive an 835 electronic transaction.

Who is currently your Trading Partner: _____

Who would you like to change your Trading Partner to: _____

Name of person authorizing this change: _____

Providers Address: _____

City, State, Zip Code: _____

Email Address: _____

Signature of person authorizing change: _____ **Date of Change:** _____

Provider Name	Provider/Group TAX ID Number	Provider NPI	PAYTO Group Name	PAYTO Group NPI

Would you like to continue receiving your Paper 835 Remits for an additional 30 days? **(After 30 days, your Paper Remits will be discontinued)** Yes

Please email the completed form to edisupport@summacare.com