ClaimsConnect: ERA Enrollment Information

The information below is helpful for new ClaimsConnect ERA users and is intended to assist providers and/or their staff through the ERA enrollment process.

Commitment Required from Providers/Practices to Complete Enrollment Activities Expeditiously

<u>Utilizing ERAs is a high-value service and will directly benefit your operations.</u> Clients who utilize ERAs save several hours on a daily/weekly basis, in addition to eliminating data entry errors. The advantage of automated payment posting is well worth the time investment required to begin the process.

We strongly suggest that you aim to complete enrollment activities, including follow up tasks assigned by the Helper Enrollment team, within two weeks of your initial sign up. It is highly recommended to plan time in your schedule to complete the required tasks. Your time is important, as is ours, and while we understand that many of our clients do not have dedicated staff to handle all enrollment activities, it is imperative that you prioritize completing the enrollment steps. *Starting the enrollment process, and not completing it, could result in having to start over as some enrollments will expire at the payer level after a time of inactivity.*

<u>There are steps required that we cannot complete on your behalf</u>. Assistance with enrollment steps is available from the Helper team and our Enrollment team, however, **it is critical for providers and/or their staff to take required action in a timely manner on enrollment instructions provided.**

We look forward to partnering with you to advance your practice's efficiency and operational processes.

What is the difference between an ERA and EFT?

Electronic Remittance Advice (ERA) is an electronic version of a paper explanation of benefit (EOB). ERA files are sent from an insurance company (payer) to a provider and are downloaded via ClaimsConnect, where you can apply them automatically in Helper and eliminate manual payment posting.

Electronic Funds Transfer (EFT) allows insurance companies to submit payments directly to your practice's bank account. EFT enrollment is an agreement directly between you the provider, and the payer.

Some payers require that a provider enroll in EFT in order to receive ERA files. In such cases, the paperwork for enrolling in EFT will be included with the ERA instructions provided by the Helper EDI Enrollment team.

Enrollment Process Overview & Tips

- Contact the Helper team to get the process started. We will provide you with the correct forms to begin the process. Once we receive your completed form, our Enrollment team will provide you with step-by-step instructions for each payer from which you wish to receive ERA files. Our turnaround time is within 5 business days.

- ERA enrollment may take approximately 3-4 weeks, depending on payer selection for ERA files. Remember, after we have initiated enrollment on our side, the payers need time to process on their side.

- Prior to completing enrollment forms, ensure that the information you enter on the forms exactly matches the information your payers have on file for you.

- Once you have completed the necessary enrollments, your paperwork will be processed by the payer. During this process, the payer does not provide any additional feedback to us. If you wish to inquire about the status of your application, please contact the payer directly.

- The payer enrollment forms are not created by us, they are made by the payers.

- Occasionally, payers must be contacted directly to enroll for ERA. Contact the payer using the information provided by Helper Enrollment team and the payer will provide you with specific instructions to set up ERA.

- When submitting the paperwork, include every page (instructions and form). Every page is required by the payer for processing. If every page is not included, the payer will reject the enrollment.

- When submitting multiple enrollments, separate each application into its own PDF file (or separate fax). If you send as one bundle, Change Healthcare will not separate out, they will just reject the whole lot.

- Once your application is approved, you will begin to receive ERA files in your ClaimsConnect account for any new claims that are submitted to the payer after the ERA approval date.

Additional Information

- Each provider signing up for ERAs must be enrolled in ClaimsConnect.

- You may choose to enroll in ERAs for any payer you are currently billing. Set up will be completed using group NPI and tax ID unless otherwise specified.

  Individual and Group NPIs:

  o Providers who are individuals/sole proprietors use Type 1 (individual) NPI

  o Organizations/group practices have Type 2 (Group) NPI, sometimes called Business or Non-Person

  Rendering provider vs. Billing Provider

  o Rendering Provider is the provider rendering care, Individual NPI

  o Billing Provider (Pay-to Provider) is the entity or provider that the payer (insurance company) issues payment to – can be either Individual NPI or Group NPI

  Billing NPI – which to use?

  o If sole provider with Type 1 (individual) NPI only, the rendering and billing NPI will match the Individual NPI

  o If group practice; the billing NPI will be Type 2 Group NPI