

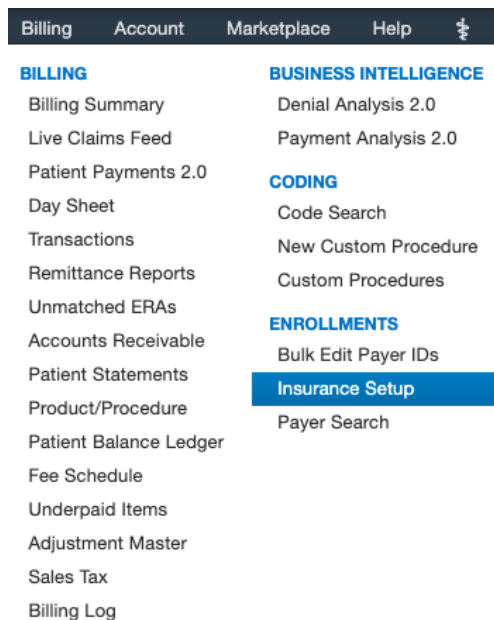
# What if a payer requests a certain field/provider number to show in a specific field?

07/24/2024 10:47 pm EDT

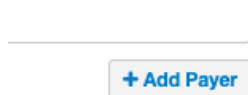
The Insurance Setup screen has multiple functionalities. Depending on how your provider/organization is credentialed, some claims may need to be billed with an individual NPI or SSN while another is billed with the group NPI and TIN. This screen will allow you to set up the provider to bill claims for an individual payer/payers using the information they were credentialed with.

Let's take a look at all of the options the feature offers:


1. Hover over the **Billing** tab and select **Insurance Setup**



2. This screen will allow you to enter information specific to the billing of an individual payer (NPI, Tax ID, Organization Name, etc..) or initiate a new EDI Enrollment by clicking **+ Add Payer**



3. To edit or update any information, click the pencil icon corresponding to the payer.

60054	Aetna	30	No	Yes	12345	Group NPI Number (1234578900)	Group NPI Number (1234578900)	Practice Name	Tax ID Number (12-3456789)	
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4. The "Add/Edit Payer" page has a lot of options, please find descriptions for each below:

**Billing NPI** - If you have two NPIs (Group and Individual), you can switch between the two depending on how you are credentialed with the payer. This will be reflected in HCFA box 33a.

**Eligibility NPI** - If you get an eligibility error message regarding enrollment, you can switch the NPI depending on how you are credentialed with the payer for eligibility. This will be the NPI that the system

uses to check a patient's eligibility and benefits.

**Provider name** - Select the provider/practice name and this information is reflected in Box 33.

- Example: Select "Provider Name" if the billing NPI is individual.

**Tax ID number / TIN** - Depending on how the provider is credentialed with the payer, you can switch between the billing and the TIN or SSN.

**Group Provider #** - If the insurance is requesting the group provider number in box 33b (*Shaded column*), please enter the group provider number in this field and choose the "Group provider number qualifier".

- Example: Indicate whether it is Taxonomy, State License, etc.

**Individual Provider #** - If the insurance is requesting the individual provider number in box 24j (*Shaded column*), please enter the individual provider number in this field and choose the "Individual provider number qualifier".

- Example: Indicate whether it is Taxonomy, State License, etc.

**Balance billing** - If you are out of network with the payer and would like to bill the patient for any adjustment (sometimes listed as R & C amount), choose "YES". This will transfer the adjustment amount toward the patient column.

**Filing limit days** - If you know the Timely filing limit for the payers, update in this field. You can retrieve a claim report in the Billing > Live Claims Feed by placing a checkmark on the box **TFL Warning**. This will help ensure that you don't miss out on reimbursement because the claim was not submitted in time.

**Accept assignment** - If you uncheck this option, the insurance will send the payments directly to the patient and not to the doctor. To send claims with the **accept assignment** designation, please leave the box checked. Please note, that some payers will not send payment directly to the provider, regardless of what is notated on the HCFA, if the provider is out of network.

**Send facility provider number** - This number populates from the Account > Offices > Edit > Billing > Facility Provider Number field. It will reflect in HCFA box 32b (*Shaded field*).

**Referring doctor/Ordering doctor** - If you want a specific Referring/Ordering provider to reflect all the patients with this particular payer, enter the doctor's name which will populate in this field. You would first add the doctor's information to the Message center as a contact.

**Print license numbers in HCFA** - This number populates from Account > Provider Settings > eRx Info > State License Number field. This will be reflected in HCFA boxes 24j (*shaded area*) and 31.

dr chrono
Sophia Samuel (sophias)

tax ID:

Billing NPI:

Rendering Provider NPI:

DEA #: (optional)

Legacy Blue Shield ID: (optional)

Legacy Blue Cross ID: (optional)

Legacy Medicaid ID: (optional)

Emdeon Go-Live Date:

Enrollments for Sophia Sa

Payer id	Payer Name
11303	Magnacare (emdeon)
39026	UMR (formerly UMR Wausau) (emdeon)
87726	UnitedHealthcare (emdeon)

### Add/Edit Payer

Payer name: Magnacare

Payer id: 11303

Specialty: -Same as Account Settings -

Billing npi: Group NPI Number (4995175339)

Eligibility npi: Group NPI Number (4995175339)

Provider name: Practice Name (Good Well Acuj)

Tax id number: Tax ID Number (340569871)

Group Provider #: 12345678

Group provider number qualifier: Taxonomy

Individual Provider #: 12345678000

Individual provider: Location #

number qualifier

Balance billing: No

Filing limit days: 90

Accept assignment:

Send facility provider number:

Processing days: 30

Referring doctor: Sophia Samuel

Ordering doctor: Prof. Pharell Williams

Payer grouping:

Print license numbers in hcfa:  Print license number on CPT lines and box #31 in HCFA form

Close Save

## Primary Doctor for Office: Fabian Newman

### Edit Office

Basic Billing Online Schedule

Billing name:  Leave it blank if same to account settings.

Facility Code: 21 - Inpatient Hospital

Billing Provider Office: ----- Professional medical billing only.

Use facility NPI number in box 32a of HCFA form:

Facility NPI number:  Used in HCFA box#32a and UB04 box#56

Facility provider number: 12345678

Billing Tax ID # (professional):  Leave it blank if same to account settings.

Billing NPI number: 1276897654 Leave it blank if same to account settings.

CLIA Number:  CLIA # for billing. Leave it blank if same to account setting.

CLIA Expiration Date:  Expiration date for CLIA number.

Use alternate pay to address for EDI:  use alternate "pay to" address in EDI billing if checked.

Use alternate pay to address for HCFA:  use alternate "pay to" address in HCFA form block 33 if checked.

### Account Settings ?

Profile General Email Billing eRx Info Services Usage Payment Info Sample Data

Register to use eRx ?

DEA Number:

Physician Date of Birth:

State License Number: 123456

Prescribing Physician's Name:  The prescribing physician's name displayed in eRx. Leave blank if the same as user's name.

DPS Number:  DPS Controlled Substance Registration number. For Texas users only.

Medicaid Provider Number:

Identity confirmation: 0 of 2

Update Entire Profile

This feature will allow you to set up each provider, per payer with the requirements (TIN/SSN/Group vs Individual NPI/state license number/etc) to help ensure your claims are accepted for processing for the payer as quickly and efficiently as possible.

If you have any questions about this screen, please reach out to your account manager or support for help. In addition, here is a [video](#) that will walk you through the Insurance Set Up Screen.

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