

eProvider Solutions- How do I submit an enrollment request?

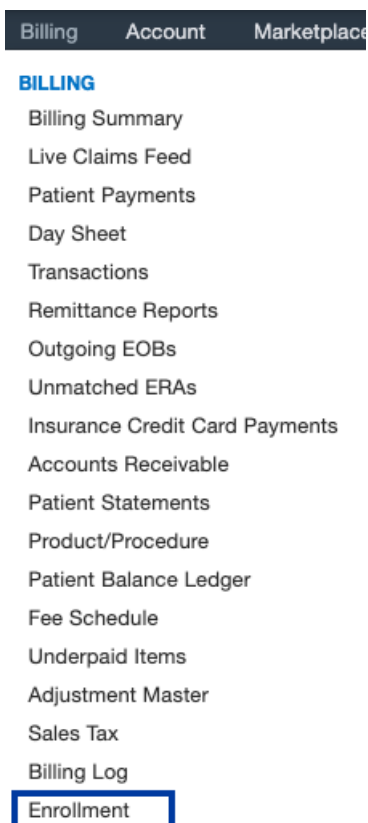
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Submitting enrollment requests through the EPS integrated portal is fast, easy, and efficient. Here is how you can request enrollments, and take care of any necessary paperwork all without leaving your DrChrono account.

Before beginning your enrollment requests, ensure that the billing information under Account > Provider Settings and Account > Offices is correct. The portal will pull information from those areas to complete the request.

To begin -

- Navigate to Billing > Enrollment



- The first screen will ask you to enter contact information for a responsible party in your office. This does not necessarily need to be the person authorized to sign the forms, but rather someone who is responsible for gathering any signatures or additional information and seeing that the enrollments are complete.
 - Once the information is filled in, click on **Create**.

Schedule Clinical Patients Reports Billing Account Marketplace Help

Enrollment Start New Continue Unsubmitted Manage Submitted

New Enrollment - Responsible Party Contact Information

Please specify who we can contact about the agreements

First Name

Last Name

Phone Number

Contact Email

Create

- Billing Summary
- Live Claims Feed
- Patient Payments 2.0
- Day Sheet
- Transactions
- Remittance Reports
- Unmatched ERAs
- Accounts Receivable
- Patient Statements
- Product / Procedure
- Balance / Ledger
- Fee Schedule
- Underpaid Items
- Adjustment Master
- Sales Tax
- Billing Log
- Enrollment**

- The next screen will ask you which NPI you are submitting the request under. Click on the box to the left of the NPI to select. The system will pull demographic information associated with the NPI for verification. Once selected and the information verified, click on **Continue**.

Enrollment Start New Continue Unsubmitted Manage Submitted

New Enrollment - Select NPIs

Selected	NPI	Owner
<input type="checkbox"/>	9876543210	
<input type="checkbox"/>	4503280941	
<input type="checkbox"/>	1234578900	
<input type="checkbox"/>	5286621722	

Back Continue

- The next screen contains 3 separate tabs:
 - Start New** - Use this tab to submit an initial enrollment request
 - Continue Unsubmitted** - Here is where you can continue to work on a request that has not been submitted
 - Managed Submitted** - Here is where you can see the status of any submitted enrollment request, check the status, and receive/sign/upload any required paperwork.

Enrollment Start New Continue Unsubmitted Manage Submitted

The payers and transaction types listed are all that you can request through EProvider Solutions. To help narrow down the list, you can search by Payer Name, Payer ID, Payer Type, or Transaction Type. Once you find the one(s) you would like to enroll with, click **Add** on the left.

New Enrollment - Select Payers

Payer Name
 Payer ID
 Payer Type
 Transaction Type

Search

Available Payers

Next 1/354

	Payer	State	Payer ID	Payer Type	Transaction Type
Add	1199 NATIONAL BENEFIT FUND		13162	Commercial Insurance	eligibility
Add	1199 NATIONAL BENEFIT FUND		13162	Commercial Insurance	remittance
Add	1199 NATIONAL BENEFIT FUND		13162	Commercial Insurance	institutional
Add	1199 NATIONAL BENEFIT FUND		13162	Commercial Insurance	professional
Add	1-888-OHIOCOMP (Ohio BWC)		31147	Commercial Insurance	institutional
Add	1-888-OHIOCOMP (Ohio BWC)		31147	Commercial Insurance	professional
Add	21St Century		51028	Commercial Insurance	professional
Add	21St Century		41556	Auto Accident	institutional
Add	360 Alliance Gilsbar		88053	Commercial Insurance	institutional
Add	3P Administrators		20413	Commercial Insurance	remittance
Add	3P Administrators		20413	Commercial Insurance	institutional
Add	3P Administrators		20413	Commercial Insurance	professional
Add	6 Degrees Health Incorporated		20446	Commercial Insurance	institutional

Once you have selected all of the payers selected, you will be given a chance to take one final look before they are submitted. If all looks good, click **Submit**.

Review and Submit

Please review the following information regarding the requested enrollments. If everything looks correct, press the Submit button to submit the enrollment requests.

NPI	Payer	Payer ID	Payer Type	Transaction Type	Provider ID	Taxonomy Code
9876543210	Aetna	60054	Commercial Insurance	eligibility		207R00000X
9876543210	Aetna	60054	Commercial Insurance	remittance		207R00000X
9876543210	Aetna	60054	Commercial Insurance	professional		207R00000X

Back **Submit**

That's it! As the request processes, you may see a status bar on the screen. Once complete, it will show you which requests are automatically approved and which may need additional information.