## How to change the Accept Assignment for an Insurance?

07/24/2024 5:05 pm EDT

Sales Tax Billing Log

Follow the steps below to set the Accept Assignment for a specific payer.

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

Billing	Account	Marketplace	Help			
BILLING Billing S	Summary		BUSINESS INTELLIGENCE Denial Analysis			
2110 014	ims Feed	Payment Analysis (beta)				
Day She Transac Remitta Unmatc Insuranc	Payments eet tions nce Reports hed ERAs ce Credit Card	Payments	CODING Code Search New Custom Procedure Custom Procedures INSURANCE Bulk Edit Payer IDs Insurance Setup			
Patient Product Patient Fee Sch Underpa	ts Receivable Statements /Procedure Balance Ledge nedule aid Items nent Master	ər	Payer Search			

## • If the payer you need is not listed, you can add it by clicking on +Add New EDI Enrollment

		+ New EDI Enrollment						
Required info for Provider								
All of this info should be in the system. If it's missing we cannot submit billing for the Healthcare Provider.								
Organization Name:								
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:	None *drchrono staff has to set this up once all other work is done.							

2. Click on the pencil icon corresponding to the payer. In the Add/Edit Payer, check the box for Accept Assignment and click on Save.

Enrollments for										
Payer id Payer Name Specialty	Proc Days	Bal Bill	Acc Assg	Group #	Indv #	Billing NPI	Eligibility NPI	Provider Name	Tax ID Number	
60054 Aetna (emdeon)	30	No	Yes	174400000X	89876790	Group NPI Number (1432345456)	Group NPI Number (143234	45456) Practice Name (Red sun)	Tax ID Number (453467832)	× ×
Add/Edit Payer									×	
Payer name	Aet	tna				+ В	alance billing	No	\$	
Payer id	600	054				+ Fili	ng limit days			
Specialty	-S	ame a	as Acco	unt Setti	ngs -	Accept	t assignment	8		
Billing npi	Gr	oup N	IPI Num	ber (143	234545	i6 \$ Send fac		0		
Eligibility npi	Gr	oup N	IPI Num	nber (143	234545		number			
Provider name	Pr	actice	Name	(Red sun	)	₽roo	cessing days	30	٢	
Tax id number	Ta	x ID N	lumber	(4534678	832)	\$ Ref	erring doctor		+	
Group Provider #	174	44000	00X			Orc	lering doctor		+	
Group provider number	_	xonor	ny			¢ Pa	yer grouping			
qualifier						Print lice				
Individual Provider #	898	87679	0				inneia	Print license number or #31 in HCFA form	n CPT lines and box	
Individual provider number qualifier		ovide	r UPIN #	ŧ		<b>▲</b>				
								C	Close	

Once you have made the necessary changes you can go ahead and bill the claim to Insurance. The accept assignment designation will appear on the HVFA-1500 claim form in box 27.

Please note, that some payers will only send reimbursement to the patient if the provider is out of network; no matter what is noted regarding accepting/not accepting assignment on the HCFA form.