



AVAILITY ENROLLMENT FORM

PAYER ID: 61101

PAYER NAME: HUMANA

Enrollment Instructions:

- Log into the Availity Web Portal
- Select Payer Spaces
- Click on Humana
- Select Resources Tab
- Select ERA/EFT Setup-Change Request
- You will be taken to Humana portal to complete the enrollment (screenshots below).

Note:

If you wish to receive 835 remittances through a third party vendor (such as a clearinghouse or billing service), you must have your third party vendor log on to the Availity Health Information Network and complete your organization's registration. They will need your payee tax ID to complete the registration. Your third party vendor will be asked to accept a Terms and Agreement acknowledging responsibility for the assignment of the 835 ERA delivery.

Two Humana checks will be required to complete this enrollment. If you do not have checks from Humana yet, this enrollment will have to be completed at a later date when your checks are received.

You will receive a Confirmation Page with your Confirmation # once the updates have been applied. Print a copy of the Confirmation Page for your records. You will not be able to check the status of an agreement without the confirmation number.

Questions: Please contact Humana at 877-845-3480 or Availity at 800-282-4548 (Availity will not have information regarding your specific Humana account, so questions relating to your Humana account will have to be addressed by Humana specifically.)

When accessing the application from the public portal, you must enter two sets of check information for authentication/security purposes.

ERA/EFT Enrollment and Maintenance Request Process

This function is used to request new ERA and EFT setup and update existing setups. Any adds or updates require verification of the requestor's identification. To perform this validation you must enter two check numbers, check dates and check amounts for recent payments from Humana. Once the validation of the check information is completed, click on the next button in the bottom right corner to proceed to next page.

*Required Field

Requestor Information	
* Person Submitting Enrollment :	<input type="text"/>
*Person Submitting Enrollment Email :	<input type="text"/>
*Person Submitting Enrollment Confirm Email :	<input type="text"/>
*Person Submitting Enrollment Phone Number :	<input type="text"/> (e.g. 999999999)
Person Submitting Enrollment Phone Extension :	<input type="text"/>
*Tax Id :	<input type="text"/>

Check Number Validation	
Please provide full check numbers, including leading zeroes, and their amounts for verification purposes.	
*Note: You may need to add an additional zero to the beginning of the check number.	
For Paper-Check validation please use "Issue Date" of check.	
For EFT-deposit validation please use "Expected Deposit Date" from Remittance - deposit dates must be after 08/19/2010.	
For dental provider, checks from CompBenefits will not work in this tool.	
* Check Number 1 :	<input type="text"/>
* Amount :	<input type="text"/>
* Date :	<input type="text"/> (e.g. mm/dd/yyyy)

First, enter **your contact information** and the **tax ID** for which you wish to add or change an ERA and/or EFT in the top section of the form (sample shown above).

Next, you must enter two different check numbers with the corresponding check dates and amounts. See the next page for more information on locating check numbers, amounts and dates.

Once the information is entered, click the **"Validate"** button. If the check information you have entered matches the tax ID you entered, an on-screen message will confirm the validation was successful. You may continue by clicking the **"Next"** button.

Locating check information

The Humana check number (item 1 below) is located in the top, right section of the check.

The check amount (item 2) and date (item 3) are located on the right side of your check, under the check number.

Below is a sample check highlighting the information needed and the corresponding fields on the "Check Number Validation" screen.

The image shows a sample check from Humana. The check number is 00001000, the amount is \$1,820.00, and the date is 02-06-07. The check is voided. Below the check is a screenshot of the 'Check Number Validation' screen. The screen has three input fields: 'Check Number 1', 'Amount', and 'Date'. The check number field is highlighted with a yellow circle and the number 1. The amount field is highlighted with a yellow circle and the number 2. The date field is highlighted with a yellow circle and the number 3. There are also 'Check Help', 'Validate', and 'Next' buttons.

Check information may also be found in your 835 transaction. This information is located in the BPR and TRN segments of the 835:

Example:

BPR*I*200.5*C*CHK**DA*001-002*999999999*****20090524**

TRN*1*000012345*9999999999

200.5 = check amount

20090618 = check date

000012345 = check number

Requestor information

Requestor information is required for every transaction. This information will be used in the event a Humana associate must contact you about your request. All fields are required except for the phone extension field.

You must enter a valid tax identification (TIN) number to proceed.



ERA/EFT Enrollment and Maintenance Request Process

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*Required Field

Requestor Information	
* Person Submitting Enrollment :	<input type="text"/>
*Person Submitting Enrollment Email :	<input type="text"/>
*Person Submitting Enrollment Confirm Email :	<input type="text"/>
*Person Submitting Enrollment Phone Number :	<input type="text"/> (e.g. 999999999)
Person Submitting Enrollment Phone Extension :	<input type="text"/>
*Tax Id :	<input type="text"/>

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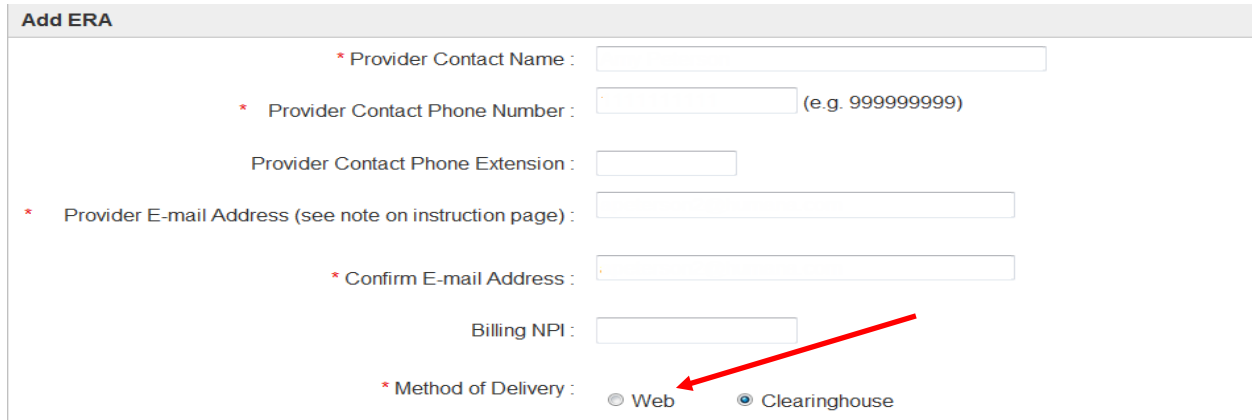
Internet Explorer versions 6.0 or 7.0 are recommended for use on this site. Users may experience functionality issues when using version 8.0 and browsers on

Once all information is entered, click **“Next”** to continue. An error message will appear if the TIN cannot be located in our system. If you receive this message, please call Humana/ChoiceCare® Provider Relations at 1-800-626-2741. Be sure to mention to the representative answering your call that you need to verify the TIN that Humana has on file for your office.

Web vs. clearinghouse

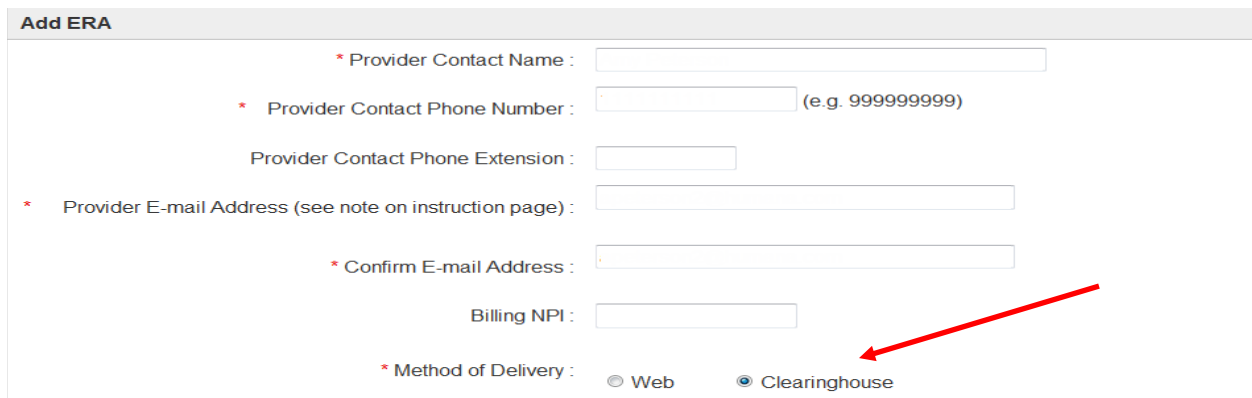
When signing up for electronic remittance advice, you can select how you wish to receive it.

If you want to download ERA from Humana.com, select the **Web** button as shown below. If you choose this option, you will not receive paper or electronic remittances. After selecting “Web”, click “**Next**” to continue. You can then download your remittances from Humana’s remittance inquiry tool, which is accessed via the secure Humana provider website (choose “Claims Tool,” then “Remittance Inquiry” after logging in).



The screenshot shows a form titled "Add ERA" with several input fields and a radio button selection. The fields are: "Provider Contact Name", "Provider Contact Phone Number" (with a hint "(e.g. 999999999)"), "Provider Contact Phone Extension", "Provider E-mail Address (see note on instruction page)", "Confirm E-mail Address", and "Billing NPI". At the bottom, the "Method of Delivery" section has two radio buttons: "Web" (which is selected) and "Clearinghouse". A red arrow points to the "Web" radio button.

If you would like your ERAs delivered to a clearinghouse or billing agency, select the “**Clearinghouse**” button as shown below.



This screenshot is identical to the one above, showing the "Add ERA" form. However, in the "Method of Delivery" section, the "Clearinghouse" radio button is selected, and a red arrow points to it.

The “Clearinghouse Name” drop-down menu will appear. Use it to select your clearinghouse or billing agency.

Clearinghouse Information

* Clearinghouse Name : Select Clearinghouse (If "Other" is selected, please fill out "Other Clearinghouse Information")

Clearinghouse Partner ID (Availity Customer ID) : (For Availity Use Only)

Other Clearinghouse Information :

Clearinghouse Name :

Clearinghouse Contact Name :

Clearinghouse Contact Phone Number : (e.g. 999999999)

Clearinghouse Contact E-mail Address :

Do you want to continue receiving paper along with your ERA for 30 days, or are you ready to convert to ERA?
 (Selecting Paper EOR and ERA during set-up results in a 30 day test period which is not reflected in the Scheduled Completion date)

ERA Paper EOR and ERA

Note: Please make sure you have registered with your clearinghouse to avoid delays.

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If you choose Availity as your clearinghouse, you are required to enter the “Clearinghouse Partner ID” (Availity Customer ID).

If your clearinghouse or billing agency is not listed, select “Other” from the drop-down box and enter the information for your clearinghouse/billing agency in the “Other Clearinghouse Information” section.

Once you have entered the clearinghouse/billing agency information, click “Next” to continue.

Enabling/disabling of check boxes on the “Provider Details” screen

When using the “ERA/EFT Setup-Change Request” application, you must indicate which provider record(s) you wish to work with by selecting the check box next to the record(s).

Provider Demographics

Warning: Selecting multiple provider types, such as group and facility, will cause the remits to be combined to a single 835 data file delivery. The NPI reported on the 835 data file for the N1 segment will contain the first NPI of the first entity in the 835 file.

Please review ALL listings contained on each tab (Group, Facility, Individual and Other) to ensure a correct and complete setup.

All Group Facility Individual Other

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[+] [Blurred Name]	G	[Blurred Tax Id]	[Blurred Billing Address]					MD	[Blurred Record ID]
<input type="checkbox"/>	[Blurred Name]	G	[Blurred Tax Id]	[Blurred Billing Address]					MD	[Blurred Record ID]

Check boxes will be enabled for selection when:

- An active tax ID is found in our system
- Provider records are active
- Multiple active tax IDs do not exist on the provider record

Check boxes will be disabled for selection when:

- An active tax ID is not found in our system
- Provider records are inactive
- Multiple active tax IDs exist on the provider record
- A transaction is already set up for the selected request type

Note: All records selected will be associated with the same setup or maintenance request.

If you only practice under one tax ID but the system shows multiple active tax IDs, contact Customer Service at **1-800-4-HUMANA (1-800-448-6262)** to request the termination of the other tax IDs.

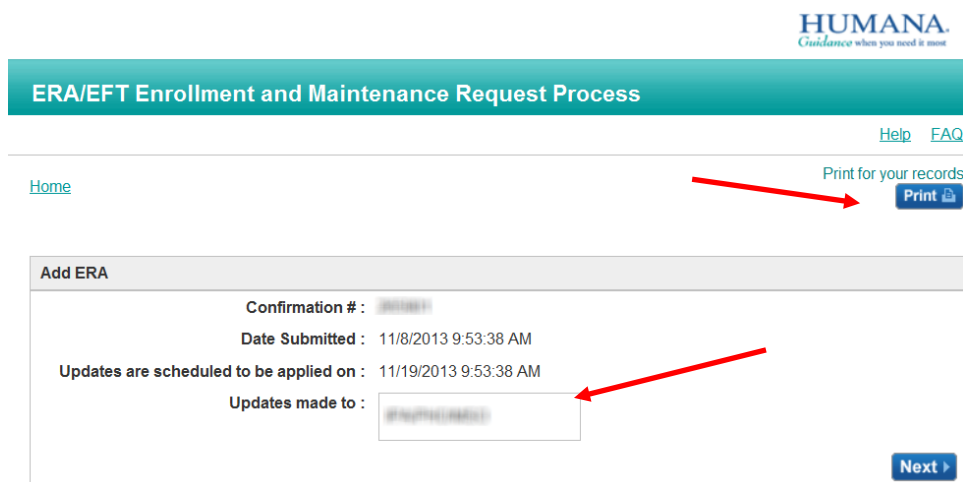
Confirmation pages

For each request, a confirmation page is displayed and a confirmation number generated that is specific to the request submitted. You may print the confirmation page by clicking the **“Print”** button in the top right corner of the screen. Clicking **“Next”** will direct you back to the **“Provider Details”** page.

The confirmation page displays the following information:

- Confirmation number
- Date submitted
- Date updates will be applied
- Provider records that have been setup/modified

Here is a sample confirmation screen:



Provider request types

Providers can perform these functions within the ERA/EFT Setup-Change Request application:

- Add ERA
- Add EFT
- Add ERA/EFT
- Cancel ERA
- Cancel EFT
- Cancel ERA/EFT
- Receive only electronic remits
- Return to paper EOR and ERA
- Change file delivery
- Change bank information
- Confirm pre-note
- Status inquiry

Add ERA/EFT

The Add ERA/EFT request is used to set up provider records to receive electronic remittance advice and electronic funds transfers. From the “Provider Details” page, select “**Add ERA/EFT**” from the “**Request Type**” drop-down box; then, select the provider record for which you wish to add ERA and EFT. Choose “**Next**” to continue.

ERA/EFT Enrollment and Maintenance Request Process

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Provider Details

*Required Field

* Request Type : Add ERA Please Select a Request Type in order to select a record

- Select Request Type
- Add ERA**
- Add EFT
- Add ERA/EFT
- Cancel ERA
- Cancel EFT
- Cancel ERA/EFT
- Receive Only Electronic Remits
- Return to Paper EOR and ERA
- Change File Delivery
- Change Bank Information
- Change Bank Information
- Confirm Pre-Note
- Status Inquiry

Warning: Selecting the 835 data file for the first entity in the 835 file.

Please review the NPI (National Provider Identifier, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[Redacted]	G	[Redacted]	[Redacted]					AM	[Redacted]
<input type="checkbox"/>	[Redacted]	G	[Redacted]	[Redacted]					MD	[Redacted]

The “Add ERA” screen will appear. The first section displays your requestor information. The second section displays the provider records for which you are adding ERA/EFT. The third section displays the fields you need to complete in order to submit the ERA portion of your ERA/EFT setup request.

The provider contact information defaults to your requestor information. If your requestor information will not be the same as the provider contact information, edit these fields to submit the appropriate information. Billing NPI is an optional field.

Next, you must indicate your **file delivery type** by selecting either the **“Web”** or the **“Clearinghouse”** button.

Once you have selected **“Web”** or entered the clearinghouse/billing agency information, choose **“Continue to EFT Setup.”**

The **“Add EFT”** page will display. Enter your **financial institutional routing number** in the field provided and click **“Verify.”** If the number is validated, the bank name and address will be populated in the appropriate fields. If the number is not validated, you have entered an incorrect routing number. Please try again.

Next, enter your **account number** in the field provided and indicate the account type by selecting the **“Checking”** or **“Saving”** button.

Add EFT

Note: Enter your financial institution routing number and click Verify. If your financial institution routing number is found your banking information will automatically populate.

*Financial Institution Routing Number : [Verify >](#)

*Financial Institution Name :

*Address 1 :

Address 2 :

*City :

*State or Providence :

*Zip Code :

*Provider's Account Number :

* Confirm Provider's Account Number :

*Account Type : Checking Saving

Note:

Two pre-note transactions of \$0.01 will be transferred to your account to test the EFT transaction process.

Note: Once your pre-note is received, to expedite your request, return to this tool and select Confirm Pre-Note on the Provider Details page. Pre-Note delay is 8 days.

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Once you have completed the **“Add EFT”** information, choose **“Next”** to submit your request.

A confirmation page will display that summarizes the updates you made. You may print the confirmation page by clicking the **“Print”** link located in the top right corner of the screen.

By clicking the **“Back”** button, you will cancel your request without making any updates and be returned to the **“Provider Details”** page.

Add ERA

The “Add ERA” request is used to set up provider records to receive electronic remittance advice. From the “Provider Details” page, select “Add ERA” from the “Request Type” drop-down box; then, select the provider record for which you wish to add ERA. Click “Next” to continue.

*Required Field

* Request Type : Add ERA
Select Request Type
Add ERA
Add EFT
Add ERA/EFT
Cancel ERA
Cancel ERA/EFT
Cancel EFT
Cancel ERA/EFT
Receive Only Electronic Remits
Return to Paper EOR and ERA
Change File Delivery
Change Bank Information
Confirm Pre-Note
Status Inquiry

Please Select a Request Type in order to select a record

Warning: Selecting the 835 data file for...
Please review...
...ility, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.
...ility, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>		G							AM	
<input type="checkbox"/>		G							MD	

The “Add ERA” screen will appear. The first section displays your requestor information. The second section displays the provider records for which you are adding ERA. The third section displays the fields you need to complete in order to submit your ERA setup request.

The provider contact information defaults to your requestor information. If your requestor information will not be the same as the provider contact information, edit these fields to submit the appropriate information. Billing NPI is an optional field.

Next, you must indicate your **file delivery type** by selecting either the “**Web**” or the “**Clearinghouse**” button.

If you want to download your electronic remittance advice from Humana.com, select the “**Web**” button as shown below. After choosing the “**Web**” button, click “**Next**” to continue.

Add ERA

* Provider Contact Name :

* Provider Contact Phone Number : (e.g. 999999999)

Provider Contact Phone Extension :

* Provider E-mail Address (see note on instruction page) :

* Confirm E-mail Address :

Billing NPI :

* Method of Delivery : Web Clearinghouse

If your electronic remittance advice is delivered via a clearinghouse or billing agency, select the **“Clearinghouse”** button as shown below. If you receive encounter responses, you may also be asked to indicate how you wish to receive your encounter responses.

Add ERA

* Provider Contact Name :

* Provider Contact Phone Number : (e.g. 999999999)

Provider Contact Phone Extension :

* Provider E-mail Address (see note on instruction page) :

* Confirm E-mail Address :

Billing NPI :

* Method of Delivery : Web Clearinghouse

* Encounter Responses : ERA Paper

Once you have selected **“Web”** or entered the clearinghouse/billing agency information, select **“Next”** to submit your **“Add ERA”** request. A confirmation page will display summarizing the updates you have made. You may print the confirmation page by clicking the **“Print”** icon located in the top right corner of the screen.

By clicking the **“Back”** button, you will cancel your request without making any updates and be returned to the **“Provider Details”** page.

Add EFT

The “Add EFT” request is used to set up provider records to receive electronic funds transfers. From the “Provider Details” page, select “Add EFT” from the “Request Type” drop-down box; then, select the provider record for which you wish to add EFT.

ERA/EFT Enrollment and Maintenance Request Process

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Provider Details

*Required Field

* Request Type : Please Select a Request Type in order to select a record

- Select Request Type
- Add ERA
- Add EFT
- Add ERA/EFT
- Cancel ERA
- Cancel EFT
- Cancel ERA/EFT
- Receive Only Electronic Remits
- Return to Paper EOR and ERA
- Change File Delivery
- Change Bank Information
- Confirm Pre-Note
- Status Inquiry

Provider Demogr

Warning: Selecting the 835 data file for...

ility, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.

ality, Individual and Other) to ensure a correct and complete setup.

Please review

All Group Facility

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>		G							AM	
<input type="checkbox"/>		G							MD	

Click “Next” to continue.

The “Add EFT” page will display. The first section displays your requestor information. The second section displays the provider records for which you are adding EFT. The third section displays the fields you need to complete in order to submit your EFT setup request.

Add EFT

Note: Enter your financial institution routing number and click Verify. If your financial institution routing number is found your banking information will automatically populate.

*Financial Institution Routing Number : [Verify ▶](#)

*Financial Institution Name :

*Address 1 :

Address 2 :

*City :

*State or Providence :

*Zip Code :

*Provider's Account Number :

* Confirm Provider's Account Number :

*Account Type : Checking Saving

Note:

Two pre-note transactions of \$0.01 will be transferred to your account to test the EFT transaction process.

Note: Once your pre-note is received, to expedite your request, return to this tool and select Confirm Pre-Note on the Provider Details page. Pre-Note delay is 8 days.

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You must enter your **financial institution routing number** in the field provided and click **“Verify.”** If the number entered is verified, the bank name and address information will be populated in the appropriate fields. If the number is not validated, you have entered an incorrect number. Please try again.

Next, enter your **account number** in the fields provided and indicate the account type by selecting the **“Checking”** or **“Saving”** button.

Once you have completed the **“Add EFT”** form, choose **“Next”** to submit your request. A confirmation page will display that summarizes the updates you made. You may print the confirmation page by clicking the **“Print”** icon in the top right corner of the screen.

By clicking the **“Back”** button, you will cancel your request without making any update and be returned to the **“Provider Details”** page.

Cancel an ERA and/or EFT

To cancel an ERA or EFT setup for a specific provider or multiple providers, select “**Cancel ERA**,” “**Cancel EFT**” or “**Cancel ERA/EFT**” from the “**Request Type**” drop-down box.

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Provider Details

*Required Field

* Request Type : Please Select a Request Type in order to select a record

- Select Request Type
- Add ERA
- Add EFT
- Add ERA/EFT
- Cancel ERA
- Cancel EFT
- Cancel ERA/EFT
- Receive Only Electronic Remits
- Return to Paper EOR and ERA
- Change File Delivery
- Change Bank Information
- Confirm Pre-Note
- Status Inquiry

Warning: Selecting the 835 data file for...
Please review...
...ability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.
...ability, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>		G							AM	
<input type="checkbox"/>		G							MD	

A new page will appear. On this page, you will need to indicate your reason for cancelling the setup by selecting a reason from the drop-down box. If you do not see a selection that describes your reason, select “**Other**” in the drop-down box and indicate why you are cancelling in the comments box supplied.

Receive only electronic remittances

To receive only electronic remittances, select “**Receive Only Electronic Remits**” from the “**Request Type**” drop-down box on the “**Provider Details**” page. Then, choose the records to which you want to apply your request.

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Provider Details

*Required Field

* Request Type : Add ERA Please Select a Request Type in order to select a record

Provider Demogr

Add ERA
Select Request Type
Add ERA
Add EFT
Add ERA/EFT
Cancel ERA
Cancel EFT
Cancel ERA/EFT
Receive Only Electronic Remits
Return to Paper EOR and ERA
Change File Delivery
Change Bank Information
Confirm Pre-Note
Status Inquiry

Warning: Selecting the 835 data file for...

...ability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on...

...ility, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>		G							AM	
<input type="checkbox"/>		G							MD	

The “**Receive Only Electronic Remits**” page will display, along with the records you have selected. By clicking the “**Receive Only Electronic Remits**” button, you will submit your request for the records selected.

Receive Only Electronic Remits

* Required Field

Requestor Name :

Requestor E-mail :

Confirm Requestor E-mail :

Requestor Phone Number :

Requestor Phone Extension :

Provider Demographics

Provider Name	Tax Id	Billing Address	Setup Selection		Vendor Name
			ERA	EFT	
...	✓	✓	Web
...	✓		Web
...	✓		Web

Receive Only Electronic Remits

*Disclaimer : If EFT is set up on the above record(s), please allow up to 10 days to receive your first EFT.
Paper EORs will no longer be sent.*

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A confirmation page will display that summarizes the updates you made. You may print the confirmation page by clicking the “**Print**” icon in the top right corner of the screen.

By clicking the “**Cancel**” button, you will cancel your request without making any update and be returned to the “**Provider Details**” page.

Return to paper explanation of remittance (EOR) and ERA

If you would like to once again receive paper remittances as well as electronic remittances, select **“Return to Paper EOR and ERA”** from the **“Request Type”** drop-down box on the **“Provider Details”** page. Then, select the records to which your request should be applied.

ERA/EFT Enrollment and Maintenance Request Process

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Provider Details

*Required Field

* Request Type : Add ERA Please Select a Request Type in order to select a record

Select Request Type

Add ERA

Add EFT

Add ERA/EFT

Cancel ERA

Cancel EFT

Cancel ERA/EFT

Receive Only Electronic Remits

Return to Paper EOR and ERA

Change File Delivery

Change Bank Information

Confirm Pre-Note

Status Inquiry

Provider Demographics

Warning: Selecting the 835 data file for the first entry in the 835 file. This capability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entry in the 835 file.

Please review the following information:

Warning: Selecting the 835 data file for the first entry in the 835 file. This capability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entry in the 835 file.

Warning: Selecting the 835 data file for the first entry in the 835 file. This capability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entry in the 835 file.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[Redacted]	G	[Redacted]	[Redacted]					AM	[Redacted]
<input type="checkbox"/>	[Redacted]	G	[Redacted]	[Redacted]					MD	[Redacted]

The **“Return to Paper EOR and ERA”** page will display, along with the records you selected. You must enter a reason to explain why you wish to return to paper documentation.

Return to Paper EOR and ERA

* Required Field

Requestor Name : [Redacted]

Requestor E-mail : [Redacted]

Confirm Requestor E-mail : [Redacted]

Requestor Phone Number : [Redacted]

Requestor Phone Extension : [Redacted]

Provider Demographics

Provider Name	Tax Id	Billing Address	Setup Selection		Vendor Name
			ERA	EFT	
[Redacted]	[Redacted]	[Redacted]	✓	✓	[Redacted]

Return to Paper EOR and ERA

Note : The records displayed above will be returned to paper EOR and ERA. This period will last for 30 days. To extend this period past the initial 30 days, return to this tool and select Return to Paper EOR and ERA from the Main Menu.

EFT will be disabled and you will begin receiving paper remits and paper checks.

* Please indicate below why you would like to return to Paper EOR and ERA environment.

Select Reason [Redacted]

* If other is selected, please specify.

Back
Next

By clicking **“Next,”** you will submit your request for the records selected.

A confirmation page will display that summarizes the updates you made. You may print the page by clicking the **“Print”** icon in the top right corner of the screen.

You will receive paper remittances for an additional 30-day period. If you wish to receive only electronic remits before this period is over, you may return to this tool and select the **“Receive Only Electronic Remits”** option.

At the end of the 30-day period, you will receive only electronic remits unless you cancel your ERA and/or EFT setup. **Paper remittances cannot be continued beyond this period.** If you do not wish to receive only electronic remittances beyond the 30-day period, you may return to this tool to cancel your ERA and/or EFT setup.

By clicking the **“Back”** button, you will cancel your request without making any update and be returned to the **“Provider Details”** page.

Confirm pre-note

To confirm that you have received your pre-note after EFT setup, select “**Confirm Pre-note**” from the “**Request Type**” drop-down box on the “**Provider Details**” page.

ERA/EFT Enrollment and Maintenance Request Process

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Provider Details

*Required Field

* Request Type : **Confirm Pre-Note** Please Select a Request Type in order to select a record

Provider Demographics

Warning: Selecting the 835 data file for Facility, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.

Please review Facility, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[REDACTED]	G	[REDACTED]	[REDACTED]					AM	[REDACTED]
<input type="checkbox"/>	[REDACTED]	G	[REDACTED]	[REDACTED]					MD	[REDACTED]

Select the records you wish to confirm. The “**Confirm Pre-note**” page will display.

ERA/EFT Enrollment and Maintenance Request Process

Home

Confirm Pre-Note

* Required Field

Requestor Name : [REDACTED]
Requestor E-mail : [REDACTED]
Confirm Requestor E-mail : [REDACTED]
Requestor Phone Number : [REDACTED]
Requestor Phone Extension : [REDACTED]

Provider Demographics

Provider Name	Tax Id	Billing Address	Setup Selection		Vendor Name
			ERA	EFT	
[REDACTED]	[REDACTED]	[REDACTED]	✓	✓	[REDACTED]

Confirm Pre-Note

* Pre-Note Received Date : 06/01/2009

Note: Only indicate the date you received your pre-note.
Note: If the pre-note was not actually received, but a date was provided, this will cause a delay in your EFT payments.

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Use the calendar beside the “**Pre-Note Received Date**” box to select the date you received the pre-note transactions.

Note: If the pre-note was not actually received but a date is provided, a delay in your EFT payments will result.

Choose “Next” to confirm you received the pre-note transactions on the date provided. A confirmation page will display. You may print the confirmation page by clicking the “Print” link located in the top right corner of the screen.

By clicking the “Back” button, you will cancel your request without making any update and be returned to the “Provider Details” page.

Change bank information

The “Change Bank Information” request is used to update your EFT information, such as your account number or your bank’s address. From the “Provider Details” page, select “Change Bank Information” from the “Request Type” drop-down box; then, select the provider record for which you wish to change bank information. Click “Next” to continue.

*Required Field

* Request Type : Add ERA Please Select a Request Type in order to select a record

Provider Demogr: Add ERA

Warning: Selecting the 835 data file for...
Please review...
...ability, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.
...ility, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>		G							AM	
<input type="checkbox"/>		G							MD	

The “Change Bank Information” page will display. The first section displays your requestor information. The second section displays the provider records for which you are changing bank information. The third section displays the fields you need to complete in order to submit your request.

You must enter your **financial institution routing number** in the field provided and then click “Validate.” If the routing number is verified, the bank name and address will be populated in the appropriate fields. If the number is not verified, you have entered an incorrect routing number. Please try again.

Next, enter your **account number** in the fields provided and indicate the account type by selecting either the “Checking” or “Saving” button.

Add EFT

Note: Enter your financial institution routing number and click Verify. If your financial institution routing number is found your banking information will automatically populate.

*Financial Institution Routing Number : [Verify ▶](#)

*Financial Institution Name :

*Address 1 :

Address 2 :

*City :

*State or Providence :

*Zip Code :

*Provider's Account Number :

* Confirm Provider's Account Number :

*Account Type : Checking Saving

Note:

Two pre-note transactions of \$0.01 will be transferred to your account to test the EFT transaction process.

Note: Once your pre-note is received, to expedite your request, return to this tool and select Confirm Pre-Note on the Provider Details page. Pre-Note delay is 8 days.

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Internet Explorer versions 6.0 or 7.0 are recommended for use on this site. Users may experience functionality issues when using version 8.0 and browsers on Apple computers.
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Once you have completed the EFT information, click **“Next”** to submit your request. A confirmation page will display that summarizes the updates you made. You may print the page by clicking the **“Print”** icon located in the top right corner of the screen.

Change file delivery

The “Change File Delivery Request” option is used to update ERA setup on provider records. From the “Provider Details” page, select “**Change File Delivery**” from the “**Request Type**” drop-down box; then, select the provider record for which you wish to change the file delivery method. Click “**Next**” to continue.

*Required Field

* Request Type : Please Select a Request Type in order to select a record

Provider Demogr: Warning: Selecting the 835 data file for [redacted] facility, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.

Please review [redacted] facility, Individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[redacted]	G	[redacted]	[redacted]					AM	[redacted]
<input type="checkbox"/>	[redacted]	G	[redacted]	[redacted]					MD	[redacted]

The “Change File Delivery” screen appears. The first section displays your requestor information. The second section displays the provider records for which you are changing file delivery. The third section displays the fields you need to complete in order to submit your request.

The provider contact information defaults to your requestor information. If your requestor information will not be the same as the provider contact information, edit these fields to submit the appropriate name, phone number and email address.

Next, you must indicate your **file delivery type** by selecting either the “**Web**” or the “**Clearinghouse**” button.

Once you have selected “**Web**” or entered the clearinghouse/billing agency information, click “**Next**” to submit your request. A confirmation page will display that summarizes the updates you made. You may print the confirmation page by clicking the “**Print**” icon in the top right corner of the screen.

By clicking the “**Back**” button, you will cancel your request without making any update and be returned to the “Provider Details” page.

Status inquiry

The “Status Inquiry” function is used to view the status of open requests by TIN. From the “Provider Details” page, select “**Status Inquiry**” from the “**Request Type**” drop-down box; then, select the provider record for which you wish to view the status of open requests. Click “**Next**” to continue.

*Required Field

* Request Type : Please Select a Request Type in order to select a record

Provider Demogr

Warning: Selecting the 835 data file for [redacted] facility, will cause the remits to be combined to a single 835 data file for delivery. The NPI reported on the first entity in the 835 file.

Please review [redacted] facility, individual and Other) to ensure a correct and complete setup.

Select Providers	Provider Name	Type	Tax Id	Billing Address	Setup Selection		File Delivery Method	Vendor ID	Category	Record ID
					ERA	EFT				
<input type="checkbox"/>	[redacted]	G	[redacted]	[redacted]					AM	[redacted]
<input type="checkbox"/>	[redacted]	G	[redacted]	[redacted]					MD	[redacted]

You will be prompted to enter a confirmation number from a previous transaction to look up a specific request. This is optional. If you do not enter a confirmation number, all requests logged for the TIN you have entered will be displayed. If you enter a confirmation number, the request details for that specific request will display.

HUMANA. Guidance when you need it most.

ERA/EFT Enrollment and Maintenance Request Process

Home

Status Inquiry

* Required Field

Tax Id: [redacted]

Confirmation Number:

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Click “**Next**” to continue.

The “Status Inquiry Summary” page will display if a confirmation number is not entered. This page will show you a summary of the open requests that have been submitted for the TINs selected. The following information is displayed:

- Confirmation number
- Provider name
- Tax ID
- Request type
- Status
- Request submission date
- Scheduled completion date
- Actual completion date

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Status Inquiry Summary

Confirmation Number #	Provider Name	Tax Id	Request Type	Status	Request Submission Date	Scheduled Completion Date	Actual Completion Date
182559	West-Tan Medical Center	440000000	Add ERA/EFT	In Process	6/10/2009 2:37:40 PM	6/17/2009 2:37:40 PM	
182560	West-Tan Medical Center	440000000	Add ERA	In Process	6/10/2009 2:41:27 PM	6/20/2009 2:41:27 PM	
182561	West-Tan Medical Center	440000000	Add EFT	In Process	6/10/2009 2:45:13 PM	6/17/2009 2:45:13 PM	
182562	West-Tan Medical Center	440000000	Change File Delivery	In Process	6/10/2009 2:47:52 PM	6/17/2009 2:47:52 PM	
182563	West-Tan Medical Center	440000000	Change Bank Information	In Process	6/10/2009 2:50:17 PM	6/17/2009 2:50:17 PM	
182564	West-Tan Medical Center	440000000	Receive Only Electronic Remits	In Process	6/10/2009 2:51:40 PM	6/17/2009 2:51:40 PM	
182565	West-Tan Medical Center	440000000	Add ERA	In Process	6/10/2009 2:53:27 PM	6/20/2009 2:53:27 PM	
182566	West-Tan Medical Center	440000000	Extend Paper EOR and ERA	In Process	6/10/2009 2:55:59 PM	6/17/2009 2:55:59 PM	
182567	West-Tan Medical Center	440000000	Cancel ERA	In Process	6/10/2009 3:37:08 PM	6/17/2009 3:37:08 PM	
182568	West-Tan Medical Center	440000000	Cancel EFT	In Process	6/10/2009 3:39:12 PM	6/17/2009 3:39:12 PM	
182569	West-Tan Medical Center	440000000	Cancel ERA/EFT	In Process	6/10/2009 3:41:14 PM	6/17/2009 3:41:14 PM	
182570	West-Tan Medical Center	440000000	Add ERA/EFT	In Process	6/10/2009 3:45:42 PM	6/17/2009 3:45:42 PM	
182571	West-Tan Medical Center	440000000	Add ERA	In Process	6/10/2009 4:07:06 PM	6/20/2009 4:07:06 PM	

[Cancel](#)

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You may click on a link in the “Confirmation Number #” column to display the “Request Details” page (shown below).

[Help](#)

Add ERA

Transaction Details
 Transaction Status :
 Transaction Submitted Date : 6/10/2009 2:41:27 PM
 Scheduled Completion Date : 6/20/2009 2:41:27 PM
 Actual Completion Date : Not Available

Requestor Details
 Requestor Name :
 Requestor E-Mail :
 Confirm E-Mail :
 Requestor Phone :
 Requestor Phone Extension :

Provider Details

Name	Tax Id	Billing Address
West-Tan Medical Center	440000000	West-Tan Medical Center, 1000 West-Tan Medical Center, West-Tan Medical Center, West-Tan Medical Center, West-Tan Medical Center

Add ERA Details
 Provider Contact Name :
 Provider Contact Phone Number :
 Provider E-Mail Address :
 Confirm E-Mail Address :
 File Delivery Type : Web
 Encounter Responses : NA

[Close](#)

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Clicking the “Close” button will close the “Request Details” page and direct you to the “Status Inquiry Summary” page.

Choosing “**Cancel**” from the “Status Inquiry Summary” page will take you to the “Provider Details” page.

Questions?

If you need assistance with the use of the ERA/EFT system, please send an email to deployment@Humana.com. If your message contains financial information and/or members’ protected health information, please send your message using our secure email portal at apps.humana.com/axwayvisitorregistration/axwayvisitorentrypage.aspx. Please note standard email is not secure and may expose information to unauthorized parties.