



Fidelis Care – New York 835

EDI Enrollment Instructions:

- Please save this document to your computer. Open the file in the Adobe Reader program and type directly onto the form.
- Complete the enclosed form using the Group/Billing Provider information as credentialed with this payer.
- ERA setups are generally completed in approximately 10 business days.

837 Claim Transactions:

EDI enrollment applies to ERA only and is not necessary prior to sending claims.

835 Electronic Remittance Advice:

Complete the enclosed letter **Fidelis Care – New York Authorization letter** as appropriate. If you have not received the 835 previously, leave that field blank.

Once completed, save for your records, print on your company letterhead and obtain the appropriate signature.

Submit Completed Authorization letter:

Email to the clearinghouse.

Enrollment Specialist will forward to the payer for processing.

ESH@claimremedi.com

Date

Fidelis Care - New York
Email: ESH@claimremedi.com

Dear Fidelis Care - New York,

Currently I am receiving my Fidelis 835 transactions through _____

Please consider this my request to remove the association with the above named entity and provide my Fidelis 835 transactions to eSolutions Inc., dba ClaimRemedi.

Name of Provider/ Organization	
Tax ID	
NPI	
Contact Name	
Contact Phone	
Contact Email	

Sincerely,