1199 National Benefit Fund
835

EDI Enrollment Instructions:

- Complete the form using the provider's billing/group information as credentialed with this payer.
- Please save this document to your computer. Open the file in the Adobe Reader program and type directly onto the table.
- EDI enrollment processing timeframe is approximately 30 business days.

835 Electronic Remittance Advice:

Complete the table as appropriate. **Submit by Email.**

Complete one form for each **Tax ID/NPI combination.**

Billing Group/Provider Name:	
Provider Street Address:	
Provider City, State and Zip	
NPI:	
Tax ID:	
Name of Contact:	
Contact Phone Number:	
Contact Email Address:	
Enrollment:	◯ New Enrollment ◯ Change Clearinghouse

Submit Completed Document:

Email to eSolutions to complete the setup.

ESH@claimremedi.com