eSolutions
Strengthen your revenue health

Payer: Per the payer list

ECHO
Electronic Remittance Advice
ERA 835

ERA Enrollment Instructions:

- Please save this document to your computer. Open the file and type directly onto the form.
- Complete the form using the provider's **billing/group information as credentialed** with this payer.
- **EDI enrollment applies to ERA only and is not necessary prior to sending claims.**
- Once completed, save for your records, print and obtain appropriate signature(s).
- EDI enrollment processing timeframe is approximately **30-45 business days**.
- To check status of EDI enrollment, please **contact ECHO at 440-835-3511.**

835 Electronic Remittance Advice:

ECHO ANSI 835 Enrollment Form
Complete the form as appropriate.
Complete one form per Tax ID to include all 835 payers offered by ECHO.

Submit Completed Document:

Email to ECHO Healthcare Systems
edi@echohealthinc.com

835 Payer List	
Access Health Services - Arkansas Superior Select	Employee Benefit Consultants
ACS Benefit Services	Employee Benefit Services, Inc. (EBSI)
Affinity Health Plan	Evolutions Healthcare Systems
Affinity Medicare & Medicaid Advantage	Family Health Network (IL)
AFLAC of Georgia (Am. Family Life Assurance)	FMH Benefit Services - CoreSource
AllCare	Fresenius Medical Care Health Plan
Alliance Coal Health Plan	GemCare – Managed Care Systems
AltaMed	Global Care – Boulder Administration
AMA Insurance (Am. Medical Associates)	G.M.P. – Employers Retiree Trust
AmeraPlan	GMS, Inc.
American Healthcare Alliance	Group Health Inc (GHI) – Emblem Health
American Progressive	Health Cost Solutions
America's Choice Healthplan	Health Partners - Pennsylvania
AmeriHealth Caritas Delaware	Healthcare Management Admin. HMA
AmeriHealth Caritas District of Columbia	HealthChoice Oklahoma, DSR, DOC
AmeriHealth Caritas Louisiana	HealthSCOPE Benefits
AmeriHealth Caritas Pennsylvania	Healthscope – Community HA
AmeriHealth Caritas New Hampshire	HealthSmart – All Plans
AmeriHealth Caritas Northeast	HSBS Memphis
AmeriHealth Caritas VIP Care	InHealth Mutual of Ohio
AmeriHealth Caritas VIP Care Plus (Michigan	Insurance Management Services
AmFirst Insurance Co.	INTEGRA Admin. Group
Atlantic Coast Life Ins.	Kalos Gold Health Plan
Benefit Plan Administrators	Keystone First Community Health Choice
Boulder Administration Services	Keystone First Health Plan
Capitol Administrators	Keystone First VIP Choices
Caprock Health Plan	Liberty Dental Plan, Inc.
CareMore Health Plans	Lifestyle Health Plan – Medova Healthcare
CareNCare	Managed Care Systems (MCS03)
CareSource- All States	Maricopa Health Plan
Catholic Life Insurance – United Financial	Marion Health Services - CHW
Central California Alliance for Health (CCAH)	Marrick Medical Finance
CHCS Services, Inc.	MCA Administrators, Inc.
Coastal TPA Inc.	Meritain Health
Community Care Alliance of Illinois	Michigan Blue Cross Complete
Community Health Choice	Mid-American Benefits, Inc.
ConnectiCare Commercial and Medicare Adv.	Monitor Life Insurance Co. of New York
Constitution Life Insurance Co.	Multiplan WI Preferred Provider Network
Consumers Choice Health	Municipal Health Benefit Plan
CoreSource – All Plans	Mutual Health Services
Corporate Benefit Services of America (CBSA)	Native Care Health
Covenant Administrators, Inc.	Nippon Life Benefits
Custom Design Benefits	North American Administrators, Inc.
Delano Regional Medical Group	Ohio PPO Connect
Diversified Group Administration	One Call Medical
EBC, Inc.	Pan American Life Ins. Group
EBSO Inc. - Expert Benefit Services	Pennsylvania's Preferred Health Networks
	Physicians Mutual Insurance Co.

835 Payer List	
Pittman & Associates	
Polish Falcons of America	
Preferred Health Plan of the Carolinas	
Prestige Health Choice	
Pyramid Life Insurance Co.	
QualChoice	
Regence Group Administrators	
Renaissance Life and Health Ins Co of America	
ResourceOne Administrators	
Santa Clara Family Health Plan	
SCAN Health Plan	
Select Health of South Carolina	
Sentinel Security Life	
Significa Benefits Services	
Simply Healthcare	
South Central Preferred/Wellspan	
Standard Life and Accident Insurance Co.	
Symetra Life Ins. Co. Bellevue, WA	
TriStar Benefit Administrators	
Trusteed Plans Services Corp.	
Trust Mark / Starmark	
Union Pacific Railroad Employees	
University Care Advantage	
University Family Care – Maricopa Health	
USAA (United States Automobile Assoc.)	
Valley Care IPA – Valley Care Select IPA	
Wabash Memorial Hospital Association	
WellMed	
William C. Earhart Company, Inc.	

Form Instructions:

1. For new enrollments only *(for changes, contact ECHO at 440.835.3511 ext 106)*
2. Requires Adobe® Reader® 7.x or greater
3. All fields are required, unless otherwise indicated
4. Print completed form, sign it, Fax or e-mail (secure recommended) to ECHO Health, Inc.

ECHO ANSI 835 Enrollment Form

Healthcare Service Provider

* Name _____
* Billing Address *(number & street)* _____
  * City _____ * State/Prov _____ * Zipcode _____ * Phone _____
* Tax ID Number ☐☐☐☐☐☐☐☐☐
* Payer Name ALL ECHO 835 ERA PAYERS
* E-mail address _____ E-mail address 2 *(optional)* _____
* Do you use a clearinghouse? (•) Yes ( ) No
  If "yes," provide clearinghouse name: eSolutions, Inc. (fka ClaimRemedi)
  If "no," provide internal contact name: _____
* I will accept 1099s electronically (•) Yes ( ) No
  If "yes," send to e-mail address shown: _____

Approval by person authorized to sign this document *(e.g., Provider Billing Supervisor)*

* Approved By *(print name)*: _____ *Title _____
* Healthcare Service Provider Name: _____
* Phone _____ * E-mail _____ * Approval Date (mm/dd/yyyy): _____

* Approver signature: _____

* Required field. Must be filled in.

Print Reset

868 Corporate Way ● Westlake, Ohio 44145 ● Phone: 440.835.3511 ● Fax: 440.835.5656 ● www.EchoHealthInc.com