

**UPMC Health Plans
Community Care BHO (PA),
MedStar Select/MedStar Medicare Choice,
Together with Children's Community Health
835**

EDI Enrollment Instructions:

- To authorize UPMC to provide ERA to your clearinghouse, **the provider is to access** the payer's website. Use the link provided to access the UPMC Health Plans **Authorization for 835 ERA Enrollment Form**.
- Complete the forms using the provider's **billing/group information as credentialed** with this payer.
- ERA enrollment is Tax ID based and only one enrollment is required per Tax ID.
- By submitting one enrollment per Tax ID, **all plans will return the ERA**.
- ERA enrollment processing timeframe is approximately **30 business days**.
- To check status of EDI enrollment, **please contact UPMC** at hpeditrequest@upmc.edu .

837 Claim Transactions:

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

835 Electronic Remittance Advice:

Go to: [UPMC Health Plans ERA enrollment](#)

Complete the **Authorization for 835 ERA Enrollment form** as appropriate, using the information provided below.

Contact Name: **Enrollment**

Clearing House Name: **ClaimRemedi**

Contact Phone Number: **866-633-4726**

Clearing House E-mail: enrollment@claimremedi.com

Submit using the **Submit Button** at the end of the enrollment.