



EDI Enrollment Change Form

Utah Health Information Network
 151 East 5600 South #320
 Murray, Utah 84107
 Phone: 877-693-3071
 Fax: 801-466-7169
 www.uhin.org
**e-mail form to :
 enrollment@uhin.org**

Date:

New Transaction OR New trading partner # Update Information OR New provider to existing trading partner #

Trading Partner # - (HT#####-###)

Provider/Group Name (Name Associated with TPN)

Submitter Information

Name:

Title:

Phone Number:

Fax Number:

E-mail:

**EDI Contact Information
(Could be a Billing Service or Clearinghouse)**

Same as Submitter Information

Company Name (If Billing Service/ Clearinghouse Connection):

Name:

Title:

Phone Number:

Fax Number:

E-mail:

Administrative (Billing) EDI Enrollment
 (If more space is needed, please use the EDI Only Enrollment Supplement Spreadsheet.)

**1- Transaction Selection Information Section
(Check all Transactions that Apply)**

***Complete all Sections (1 to 6)**

Dental Claims (837D)

Institutional Claims (837I)

Professional Claims (837P)

Eligibility (270) Real Time

Eligibility (270) Batch

Claim Status (276)

Remittance Advice (835)

***Complete Section 3 and 6 only**

Patient Information (275)

2- Individual Provider Information Section

Name(s) Non-Group:

Rendering NPI:

Tax ID #'s:

Taxonomy Code:

Phone Number:

Fax Number:

3- Provider Physical Address Section (No P.O. Box)

Street:

City:

State:

Zip:

4- Provider "Pay To" Address Section

Same as Provider Physical Address

Street:

City:

State:

Zip:

5- Group Information Section

Group Name:

Group NPI:

Tax ID #'s:

Taxonomy Code:

Contract # (For A-Typical Providers):



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6- Payers EDI Enrollment (Check all that Apply)

***Government Payers Require a Separate EDI Enrollment**

<input type="checkbox"/> Altius	<input type="checkbox"/> Regence Blue Cross Blue Shield (Includes FEP)
<input type="checkbox"/> Chiropractor Health Plans (CHP)	<input type="checkbox"/> SelectHealth
<input type="checkbox"/> Dental Select	<input type="checkbox"/> State Farm
<input type="checkbox"/> Deseret Mutual Benefits Association (DMBA)	<input type="checkbox"/> Fall Tree Administrators
<input type="checkbox"/> Educators Mutual Insurance (EMI - formerly known as EMIA)	<input type="checkbox"/> U of U Health Plans
<input type="checkbox"/> Everest Administrators, Inc	<input type="checkbox"/> Valley Mental Health
<input type="checkbox"/> Public Employees Health Plan (PEHP)	
Other Payer(s): <input type="text"/>	

[Medicaid Homepage](#)

[Medicare \(Noridian\) EDI Enrollment](#)

[Medicaid EDI Enrollment](#)

Total OnBoarding