VIVANTHEALTH (RCMG1)
ERA-ENROLLMENT INSTRUCTIONS

WHICH FORMS SHOULD I COMPLETE?

- Complete the **ERA Enrollment Form**

WHERE SHOULD I SEND THE FORM(S)?

- Email the completed ERA Enrollment Form to edi@vivanthealth.com

WHAT IS THE TURNAROUND TIME?

- Standard Processing Time can take up to 15 business days.

HOW DO I CHECK STATUS?

- If you have not received a remittance file or status update within the allotted turnaround time frame, please respond to the payer via your original email to confirm you are linked to Office Ally.

ERA Enrollment Form

Please write clearly and email the completed form to **edi@vivanthealth.com**

Provider's clearinghouse (select from the following):
- ☑ Office Ally
- ☐ Change (Relay)
- ☐ Change (Emdeon)
- ☐ eSolutions (ClaimRemedi)

Payer ID used for Vivant Health: RCMG1

Organization/provider name: _____

Organization/provider address: _____

City: _____

Provider federal Tax Identification Number (TIN): _____

National Provider Identifier (payee NPI for ERA): _____

Tax ID (TIN): _____

Contact

Name: _____

Title: _____

Telephone number/extension: _____

Email address: _____

Fax number: _____

Authorized signature: _____

Note: Electronic signature (typed name) of person submitting era enrollment.

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