



Empowering Healthcare

ERA Payer Agreement Instructions for:

AmeriHealth Administrators (54763)
IBC Personal Choice (54704)
AmeriHealth Delaware non - HMO (93688)
Keystone Health Plan East (95056)
AmeriHealth New Jersey non-HMO (60061)
Pennsylvania Blue Shield (BS027)
Highmark / KHP Central (Out-of-Area Only) (54771)

Important Notes

ERA transactions are available as an additional McKesson contracted service. To add ERAs to your contract please contact your McKesson Sales person or Value Added Reseller. ERAs must be part of your McKesson contract BEFORE requesting ERA service through the McKesson EDI Enrollment Department.

Electronic Funds Transfer (EFT) is an arrangement between the Physician/ Provider and the Payer. McKesson does not manage or transmit EFTs.

Before receiving ERAs for AmeriHealth the Physician/Provider must:

- Be processing claims electronically with this payer
- Contract with McKesson for All Payer ERA service
- Complete an ERA Enrollment Request Form
- Complete AmeriHealth's Electronic Remittance Advice Enrollment Form.

Guidelines for completing: AmeriHealth Electronic Remittance Advice Enrollment Form:

- You MUST add ERA transactions to your current profile
 - Access your account at:
<https://www.highmark.com/edi/apps/forms/updatetrans.html>
 - Trading Partner Name = MedAvant Healthcare Solutions
 - Trading Partner ID = 494309
- Submit one ERA Payer Agreement for each Physician/Group Tax ID.
- Forward your McKesson ERA Enrollment Request Form to the Enrollment Team for processing.
- Please allow up to 30 days for approval and receipt of AmeriHealth ERA.

Fax completed McKesson ERA Enrollment Request Form to:

McKesson EDI Enrollment

800-633-4763

