



Empowering Healthcare

ERA Payer Agreement Instructions for Minnesota Blue Shield – Payer ID BS085

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 Minnesota Blue Shield 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 Minnesota Blue Shield's Electronic Remittance Advice Enrollment Form.

Guidelines for completing: Minnesota Blue Shield Electronic Remittance Advice Enrollment Form:

- Complete all required fields
- Submit one ERA/EFT Payer Agreement for each Physician/Group Tax ID.
- Once the agreement is open in Adobe Reader you can type information onto the form.
- Forward original ERA agreement along with your McKesson ERA Enrollment Request Form to the Enrollment Team for processing.
- Please allow up to 30 days for approval and receipt of Minnesota Blue Shield ERA.

Fax or E-mail Enrollment form to payer

Attention: ClearConnect Registration

E-mail: register@clearconnect.com

Fax: 651-662-7290

Fax Minnesota Blue Shield ERA Agreement and
McKesson ERA Enrollment Request Form to:

McKesson EDI Enrollment

800-633-4763



Trading Partner Registration Form

For accurate completion of this form, please see registration instructions found at www.clearconnect.com.

For Registration **UPDATES ONLY** ★ (check all that apply)

Business Name Connection Method (Direct/Indirect) Connectivity Type
 Business Address Contracting Provider ID Contact Info
 Tax ID Clearinghouse or Billing Service Other

Business Information				
Type of Business: (choose one) <input type="checkbox"/> Provider <input type="checkbox"/> Clearinghouse <input type="checkbox"/> Billing Service <input type="checkbox"/> Software Vendor <input type="checkbox"/> Central Billing Office <input type="checkbox"/> Service Bureau	Business Name (enter name on the line below)		Trading Partner ID (if assigned): ★ ID required if making UPDATES	
	Street Address (P.O. Boxes are not accepted)			
	City	State	ZIP Code	National Provider ID (NPI): Please attach separate sheet for multiple NPIs
	Phone	Fax		
			Business Federal Tax ID:	

Contact Information		
Primary Contact	Secondary Contact	Connectivity Contact
<i>Name</i>	<i>Name</i>	<i>Name</i>
<i>Phone</i> <i>Fax</i>	<i>Phone</i> <i>Fax</i>	<i>Phone</i> <i>Fax</i>
<i>E-mail</i>	<i>E-mail</i>	<i>E-mail</i>

The 835 transaction is NOT AVAILABLE through PC-ACE Connect software at this time.

Connectivity Method				
<input type="checkbox"/> Indirect - Connecting through a Clearinghouse (CH), Central Billing Office (CBO), Billing Service (BS), or Service Bureau (SB) <div style="display: flex; justify-content: space-between;"> <i>Name of CH, CBO, BS, SB</i> <i>Phone</i> </div> <input type="checkbox"/> Direct - Connecting directly to ClearConnect (A SIGNED AGREEMENT IS REQUIRED, found at www.clearconnect.com) <div style="border: 1px solid black; padding: 2px;"> Direct Connection Type* (Select one type - Please see 835 Registration Instructions for details on the connection type options) <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><input type="checkbox"/> Internet: VPN to Client</td> <td style="width:25%;"><input type="checkbox"/> Internet: VPN to VPN</td> <td style="width:25%;"><input type="checkbox"/> Internet: SSH (Secure Copy)</td> <td style="width:25%;"><input type="checkbox"/> Dial-Up (Required for PC-ACE)</td> </tr> </table> </div> <small>* Additional Forms may be required when registering. Please see Registration Instructions for forms.</small>	<input type="checkbox"/> Internet: VPN to Client	<input type="checkbox"/> Internet: VPN to VPN	<input type="checkbox"/> Internet: SSH (Secure Copy)	<input type="checkbox"/> Dial-Up (Required for PC-ACE)
<input type="checkbox"/> Internet: VPN to Client	<input type="checkbox"/> Internet: VPN to VPN	<input type="checkbox"/> Internet: SSH (Secure Copy)	<input type="checkbox"/> Dial-Up (Required for PC-ACE)	

Payers: At this time ClearConnect only routes 835s for Blue Cross and Blue Shield of Minnesota & CCStpa

Contracting Provider IDs (list all IDs for which you want to receive 835s)

⚠ Please do not list Individual Physician Numbers (IPNs) here, only Contracting Provider IDs.

Send completed Registration Form via Fax: 651-662-7290 or E-mail: register@clearconnect.com, Attention: ClearConnect Registration

For Questions call 1-866-251-6742