

**Dear Provider/Office Manager,**

The QuickBilling Enrollment Form is located on the final page of this document. Please fill it out completely and fax it back to us to begin the enrollment process. All NPIs must be contracted with Medicare, Medicaid, Blue Cross / Blue Shield (or any other carrier that requires a contract) before they can start the enrollment process.

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**Please follow the instructions provided below:**

- 1) Fill out the Practice and Provider information, entirely. Even if enrolling as a group, a separate form is required for each Provider.
- 2) If you are ONLY enrolling to submit claims electronically, ONLY complete Part-1 of the form, and sign and date the form accordingly.
- 3) If you are signing up for any of the following: Medicare, Medicaid, or RailRoad Medicare – you MUST include the following documents:
  - ✓ Most recent EOB letter (separate letter required for each provider individually)
  - ✓ Contract Approval Letter (obtained upon being contracted with the carrier)***NOTE: Enrollment forms will NOT be processed without the aforementioned documents.***
- 4) FAX the completed form to: 212-901-6980. You MUST call 516-745-0888 (during normal business hours M-F, 9AM to 7PM), to confirm that we received the form (and) if you have any questions on how to complete the Enrollment form.

\*NOTE: We will contact you once we have processed the received forms to schedule a test run for electronic claim submissions. During this test run, we check to ensure your computer can connect to our claim server properly and show you how to send claims using the QP software.

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## **Frequently Asked Questions (FAQ)**

### **1) What are common reasons for an enrollment to be rejected?**

Common reasons include but are not limited to: incorrect information, provider numbers that are linked to NPIs and Tax IDs other than the ones you are attempting to enroll and incorrect information in the NPI registry. (ID and Code Reference links are provided below)

### **2. What is a Payer ID?**

A Payer ID is a unique five-digit number for each Insurance Carrier. It is the electronic address where claims are sent. For Insurance payers please list all Payer ID's on the form. You can find the Payer IDs at the link below:

**Link:** <https://access.emdeon.com/PayerLists/>

You can find the Specialty and Taxonomy Code using the link provided below:

**Link:** [www.quickpractice.com/supportdata](http://www.quickpractice.com/supportdata)

***\*NOTE: The payer ID is NOT the provider ID, UPIN or Tax ID. The payer ID has nothing to do with any provider/group numbers.***

IMAGE 1.1

**Claims Payer List**

Please Select a Product: All -- State (Govt. payers only): All --

1. Select "Medical" Payer Type: All -- Payer Name: Aetna

2. Select "Claims" Line Of Business: Medical Payer ID: [ ]

Services: Claims Code: [ ]

Additional Information:  Accepts Secondary  Extended Content Validation  
 Accepts/Requires NPI  Changed Within Last Month

4. Click on the "View List" button

3. Type in the name of the insurance company.

**Claims Payer List**

If the letter in the Enroll column is N, the insurance company does not need you to enroll - otherwise, they need you to enroll.

Payer Name	ST	Payer ID	Model	LOB	CARD	RE-ENR	ENROLL	TPO	Service	Report Level	COB	NPI	ECV	Additional
Aetna		60054	COMMERCIAL	M	B	N	N	1	Claims	4	A	Y	Y	
Aetna Affordable Health		57604	COMMERCIAL	M	X	N	N	0	Claims	4		Y		

### 3. What is the Claims Payer List ?

The **Claims Payer List** is a list of payers (insurance carriers) to which QuickPractice can send electronic claims. If it is not in our list, QuickPractice does not currently submit electronic claims to them. We may be able to submit claims to those payers: please call our support department at 516-745-0888 for more details.

### 4. Why do I need to include EOB's for each payer I want to register?

The additional documentation is required so that we may accurately prepare the carrier agreements for the provider to sign. *Note: New practices will not have EOB's – Contract Approval Letter with provider information can be used instead of an EOB.*

### 5. What is Real-time Eligibility?

Real-time Eligibility is the ability to check the patient eligibility through the Quickpractice software. After all the patient information is entered into the software, one click sends a request to the insurance company and returns all the Eligibility requirements for the patient in less than a minute so that you don't have to spend time on the telephone with the insurance company.

*\*Please contact sales if you have not signed up for this service. 1-800-676-3279*

### 6. What is Electronic EOB?

Just like paper EOB, the data is received electronically, and is available in your software. Visually the Electronic EOB looks similar to a paper EOB, it can be printed, saved, or it can be retrieved again at a later time –for up to 2 years.

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