



# EFT Attestation and Registration Guide

February 2024



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## EFT registration instructions

Participating and non-participating providers can register for electronic funds transfer (EFT) with AmeriHealth HMO, Inc. and AmeriHealth Insurance Company of New Jersey (collectively, AmeriHealth) and perform ongoing maintenance or cancellation using the designated form:

- Participating providers: [Electronic Funds Transfer Enrollment Form – For participating providers.](#)
- Non-participating providers: [Electronic Funds Transfer Enrollment Form – For non-participating providers.](#)

### Completing the EFT Enrollment Form

In order to complete the EFT Enrollment Form, you must:

- enter all fields on the form;
- make sure to enter the contact information so that AmeriHealth can contact that person with any questions on the form;
- complete a separate EFT Enrollment Form for each bank account.

### Make a copy of a voided check

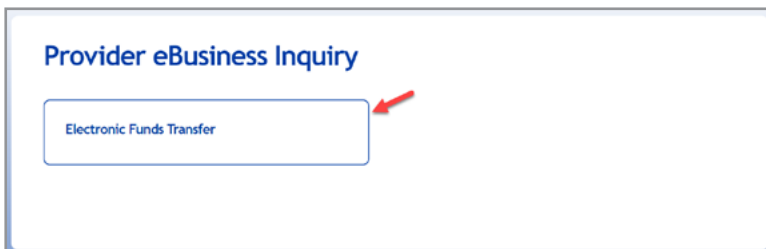
After you complete the necessary fields on the EFT Enrollment Form, you will need to make a copy of a voided check. Bank account verification letter on bank letterhead is also acceptable.

AmeriHealth needs this information to verify the bank name, routing and account number.

### Upload completed EFT Enrollment form and copy of voided check

Please use our online Provider eBusiness Inquiry form for [AmeriHealth New Jersey](#) and [AmeriHealth Pennsylvania](#). To upload the completed EFT Enrollment Form and bank account verification, see instruction below:

1. Select Electronic Funds Transfer.

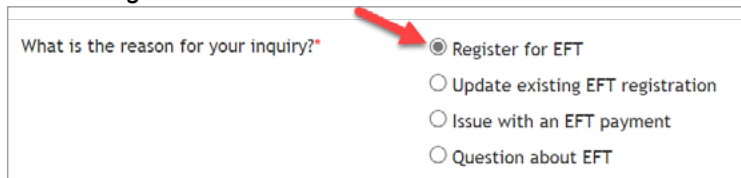


The screenshot shows a form titled "Provider eBusiness Inquiry". Inside the form, there is a button labeled "Electronic Funds Transfer" which is highlighted with a red arrow pointing to it from the right.

2. Fill out all required information on the form marked with a red asterisk (\*).

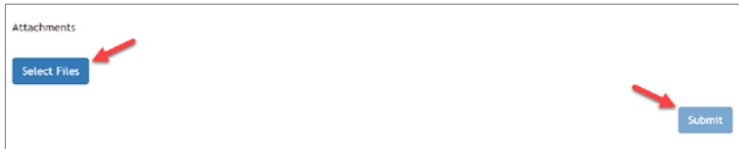
#### **Important steps when filling out the rest of form.**

- Select *Register for EFT* radio button.

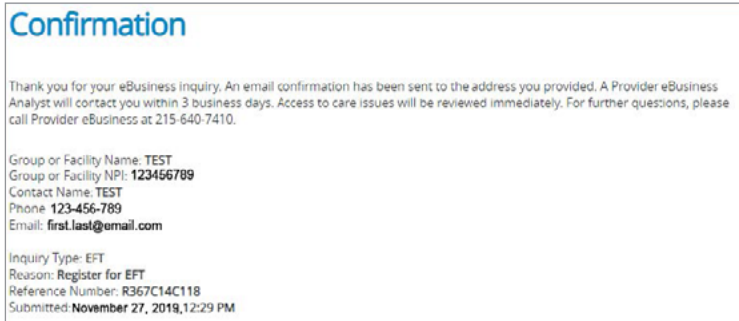


The screenshot shows a question: "What is the reason for your inquiry?\*" with a red arrow pointing to the first radio button option, "Register for EFT". Other options include "Update existing EFT registration", "Issue with an EFT payment", and "Question about EFT".

- Choose *Select Files* to upload the required documents.
- Click the *Submit* button to submit the request.



- A confirmation will then be prompted on the screen.



- A confirmation email will be sent.



A member of our Provider eBusiness team will contact you within three business days to ensure that all required information was submitted on the form. Once AmeriHealth receives all necessary information, your request will be completed within 30 calendar days. A Provider eBusiness analyst will monitor your request and will send you an email confirmation to the email address provided on this form once your EFT request is completed.

## Making changes to your EFT information

If you need to make a change to your EFT information, please complete these steps to ensure your EFT transactions are appropriately handled for all our vendor platforms.

1. Submit the appropriate enrollment form to AmeriHealth:
  - Participating providers: [Electronic Funds Transfer Enrollment Form – For participating providers.](#)
  - Non-participating providers: [Electronic Funds Transfer Enrollment Form – For non-participating providers.](#)
2. Visit [PNC Healthcare\\*](#) and complete the *EFT and ERA Enrollment Form*.

\* Starting January 1, 2024, medical claim payments and remittances for members on the new claims processing platform and all capitation payments will be issued from PNC Bank's Claim Payments & Remittances (CPR) service, powered by ECHO Health.

## Reassociation of Electronic Remittance Advice (ERA/835) and EFT payment

Providers have the ability to automate their patient account posting and reconciliation with the associated electronic payment through use of an Electronic Remittance Advice (ERA/835) and EFT. Providers who receive payment for claims via EFT and also receive the 835 transaction **must contact** their financial institution to arrange for the delivery of the EFT payment data that is needed for re-association of the payment and the 835. The table below defines the payment data needed for reassociation and where that data is located in both the banking system's CCD+ (EFT) format file and the 835 transaction:

| EFT payment data            | Banking system's CCD+ (EFT) format file | 835 transaction data                      |
|-----------------------------|---|---|
| Effective entry date        | Record 5, Field 9                       | BPR16                                     |
| EFT amount                  | Record 6, Field 6                       | BPR02                                     |
| Payment related information | Record 7, Field 3                       | TRN segment<br>(Payment/EFT trace number) |

For changes to your ERA information, submit the *EFT and ERA Enrollment Form* on [PNC Healthcare's website](#).

### Missing or late EFT payment

If an EFT payment has not been received after four business days of receipt of the corresponding ERA/835 file, contact ECHO Health at [allpayer@echohealthinc.com](mailto:allpayer@echohealthinc.com) or 1-888-834-3511.

AmeriHealth defines business days as Monday through Friday, excluding holidays. For EFT, AmeriHealth follows the bank holiday schedule. The electronic funds will be available the next business day following the bank holiday.

### Learn more

If you have questions about EFT attestation or registration with AmeriHealth, contact our Provider eBusiness team through our online Provider eBusiness Inquiry form for [AmeriHealth New Jersey](#) and [AmeriHealth Pennsylvania](#).

For questions about your EFT or ERA registration for PNC Healthcare, contact ECHO Health at [allpayer@echohealthinc.com](mailto:allpayer@echohealthinc.com) or 1-888-834-3511.