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FACSIMILE TRANSMITTAL SHEET

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TO:	FROM: Ivertex Enrollment Team
COMPANY:	E-MAIL ADDRESS: ENROLLMENT@SOLACE-EMC.COM
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
DATE: 6/1/2011	SENDER'S PHONE NUMBER: 602-439-2525
RE: J11 Palmetto	SENDER'S FAX NUMBER: 602-439-0808

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URGENT     FOR REVIEW     PLEASE COMMENT     PLEASE REPLY     PLEASE RECYCLE

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NOTES/COMMENTS:

The following pages contain important information in regards to your EDI Enrollment for:

## J11 Palmetto

Included in this fax are the forms you need to complete in order to enroll in EDI. To obtain additional copies of the forms, please refer to the download link(s) provided in the Enrollment Instructions page.

Comments:  
J11 Palmetto covers NC, SC, VA, and RHHL.



**J11 Palmetto**

**Enrollment Instructions**

Thank you for your interest in Electronic Data Interchange (EDI).

***Required Documents***

The following documents are **required** enrollment documents that must be completed, signed and returned to the Palmetto office prior to initiation of electronic claims submission or inquiry.

1. J11 Palmetto GBA EDI Enrollment Packet

To obtain the forms above, please download them from:

[http://www.palmettogba.com/Palmetto/Providers.Nsf/files/EDI\\_Enroll\\_J11\\_Pack.pdf/\\$File/EDI\\_Enroll\\_J11\\_Pack.pdf](http://www.palmettogba.com/Palmetto/Providers.Nsf/files/EDI_Enroll_J11_Pack.pdf/$File/EDI_Enroll_J11_Pack.pdf)

If you have any questions regarding any of the documents in this package, please phone the Palmetto EDI Technology Support Center at 1-866-749-4301

NOTE:

**VA & WV Part A** - Palmetto GBA has subcontracted with National Government Services (NGS) to continue EDI support of the Virginia and West Virginia Part A workload for Jurisdiction 11 A/B MAC. Please visit the [NGS website](#) or contact the NGS Help Desk at 1-877-273-4334 for EDI support.

***Required Information***

We recommend that you have the following information ready before filling out your forms:

Your Submitter Information	Software Vendor Information
<ul style="list-style-type: none"> <li>• Name</li> </ul>	<ul style="list-style-type: none"> <li>• Vendor Name – Ivertex</li> </ul>
<ul style="list-style-type: none"> <li>• Address</li> </ul>	<ul style="list-style-type: none"> <li>• Contact – EDI Team</li> </ul>
<ul style="list-style-type: none"> <li>• Phone and Fax Numbers</li> </ul>	<ul style="list-style-type: none"> <li>• Vendor Code – 1388NC for NC and 1146SE for RHHI and SC claims, VR1158 for all others</li> </ul>
<ul style="list-style-type: none"> <li>• E-mail Address (if any)</li> </ul>	<ul style="list-style-type: none"> <li>• Phone – 602-439-2525</li> </ul>
<ul style="list-style-type: none"> <li>• Contact Name (if other than name above)</li> </ul>	<ul style="list-style-type: none"> <li>• Fax – 602-439-0808</li> </ul>
<ul style="list-style-type: none"> <li>• Provider PIN numbers for this payer</li> </ul>	<ul style="list-style-type: none"> <li>• Address – PO Box 86609 Phoenix, AZ 85080</li> </ul>
<ul style="list-style-type: none"> <li>• Organization or Group PINs for this payer</li> </ul>	<ul style="list-style-type: none"> <li>• Software Name– SolAce EMC</li> </ul>
	<ul style="list-style-type: none"> <li>• E-mail – Support@Ivertex.com</li> </ul>

## ***Filling out your forms***

### **J11 EDI Application**

- Select your Line of Business
- New Applicants, please choose “Apply for New Submitter ID”
- If you would like to receive your EOBs electronically from Palmetto, please also select “Apply for New Receiver ID”
- New Applicants, please leave the Submitter ID line blank.
  - If you are already an existing electronic submitter and you are just applying for a new Receiver ID to receive electronic EOBs from Palmetto please enter your current Submitter ID.
- If you are applying for your OWN submitter ID please select “Provider”. If you are a Billing Service, please select “Billing Service”
- Complete the EDI contact person section with your information
- For claim submission mode of communication select GPNet Asynchronous
- For Report/Electronic Remittance Retrieval Mode select GPNet Asynchronous
- Report Response Form choose File
- Data compression: choose PKZIP
- Name of Software Vendor: Ivertex
  - Vendor ID = 1146SE for RHHI and South Carolina submitters, 1388NC for North Carolina Submitters, VR1158 for all others.
- Please complete the ‘Providers for Whom Submitter Will be Transmitting’ with your Provider’s information and choose the following options:
  - Enrollment Form Attached: Yes
  - Provider Authorization Form Attached: Yes
  - Mark: Submit claims, Receive Reports, Receive Electronic Remittances
    - If you want to apply for a separate ID for the online FISS/DDE or PPTN service also mark off “Online Inquiry Services”

### **J11 Electronic Data Interchange Enrollment Agreement**

Each provider must complete Section C. of this form and enter his/her Medicare Provider number and NPI.

### **Provider Authorization Form**

Providers listed on the J11 EDI Application Form must also complete this form.

- Select the proper Line of Business
- Select Electronic Claims Submissions, Electronic Remittance, and Electronic Response Reports
  - If you are also applying for FISS/DDE or PPTN access for the specific providers records, please also select “Online Inquiry Services”

### **Please skip the J11 Software Order Form sections**

**If you marked off the “Online Inquiry Services” option on the forms above, please complete the J11 Online Inquiry Service form.** Otherwise, you may also skip this entire section.

- If you need a Network Service Vendor that will provide the connection for your FISS/DDE and/or PPTN access please ask us about our **ClaimShuttle** service! We can have you logged in to your FISS/DDE or PPTN screens in no time!

### ***Submitting your forms***

It is recommended that you keep a copy of all the forms you will be submitting for your records. Mail the enrollment forms reflecting **original** signatures to:

**Palmetto GBA EDI**  
J11 EDI Operations, AG-420  
PO Box 100145  
Columbia SC 29202-3145

It is very important that you complete and return the entire enrollment packet as described above. ***Incomplete packets will not be processed and will be returned to the submitter.***

### ***Waiting for a response***

Once the complete provider enrollment packet has been received, the documents will be processed. Processing will take approximately two weeks from the date of receipt. (Remember that mailing time can take as much as five days.)

After processing, a confirmation will be faxed to you as notification to begin filing claims electronically. If neither confirmation nor a returned packet is received after two weeks, contact Palmetto EDI Technology Support Center at 1-866-749-4301.

### ***Testing***

Once you have received your Submitter ID and password from Palmetto, please call the Ivertex Support Team and set an appointment for a Mailbox setup and Test Transmission to Palmetto.

Please have 25 test claims ready for testing. Test files should consist of a variety of claims that represent the type of claims you will be submitting once production status is achieved. Test claims will not be processed for payment but will be validated against production files; therefore, they must contain valid patient procedure, diagnosis, and provider information.