



Capario Enrollment
1901 E. Alton Ave. #100
Santa Ana, CA. 92705
Phone: (800) 792-5256 Option 1
Fax: (404) 877- 3324
provider.enrollment@Capario.com

ERA Payer Agreement Instructions for Molina Healthcare of:
California (38333) / Texas (20554)
New Mexico (NM505) / Michigan (38334)
Ohio (20149) / Washington (38336)

NOTE: As of June, 2011, Molina Healthcare has partnered with F.I.S. for ERA and EFT processing. This new partnership requires that both EXISTING and NEW Molina ERA recipients enroll via the F.I.S. website.

To request Molina ERAs for any of the regions listed you will need to complete the F.I.S. online enrollment. In addition, please complete and send the Capario ERA Enrollment Request Form to our EDI Team. Specific instructions for this Payer are shown below.

ERA Transactions are available as an additional Capario contracted service. To add ERAs to your contract please contact your Capario Sales person or Account Manager. ERAs must be part of your contract and you must be enrolled with this Payer BEFORE submitting this ERA Payer Agreement.

EFT enrollment and transmission is an arrangement between the provider and the Payer. If the Payer offers EFT transactions contact them to determine if they:

- Require you to receive EFTs in order to receive their ERAs
- Charge an additional fee for EFTs/ERAs
- Require you to enroll for EFTs on this ERA enrollment form.

Guidelines for Enrolling with this Payer

1. Register on the F.I.S. ProviderNet website:

1. Go to <https://providernet.adminisource.com>
2. Click Register
3. Accept the Terms
4. Verify your information
 - a. Select Molina Healthcare from the Payers list
 - b. Enter your primary NPI
 - c. Enter your primary Tax ID
 - d. Enter a recent Claim Number and/or Check Number associated with this Tax ID and Molina Healthcare
5. Enter your User Account Information
 - a. Use your email address as your user name
 - b. Strong passwords are enforced (at least 8 characters consisting of letters and numbers)
6. Verify your Contact Information

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7. Verify your Bank Account Information
8. Verify your Payment Address
 - a. Note: any changes to this address may interrupt the EFT process
9. As soon as your historical payment information is loaded to ProviderNet, (within 24 – 48 hours) you will be able to view your EOP PDF documents online for checks on and after 3/28/2011!
10. Be sure to add any additional payment addresses, accounts, and Tax IDs once you have logged in.

To select your Clearinghouse:

1. Go to Connectivity
2. Click the Clearinghouses tab
3. Select the TaxID for which this clearinghouse applies
4. Select a Clearinghouse (You must select the **Practice Insight ID: PI835X12**)
5. If applicable (Utah provider only), enter your UHIN Trading Partner ID
6. Select the File Types you would like to send to this clearinghouse
7. Click Save

2. Fax the Practice Insight ERA Request Form to:

Enrollment Dept.
(713) 333-0138

3. Fax or mail the Capario ERA Enrollment Request Form to:

Fax: (404) 877-3324

EDI Team
Capario

1901 E. Alton Ave. Suite 100
Santa Ana, CA. 92705

To obtain the Capario ERA Enrollment Request Form, go to:

www.capario.com/services/resource_center/enrollment_instructions.html

Questions? Contact Capario Enrollment at: (800) 792-5256 Option 1

For Portal Users: Enroll using the Capario Portal Enrollment Tool.

The ERA Enrollment Request Form is not needed.



1 Greenway Plaza, Suite 350 • Houston, Texas 77046
713.333.6000 • Fax 713.333.0138 • www.practiceinsight.com

ERA Request Form

⚠️ WARNING TO PROVIDERS WHO SHARE A TAX ID#, NPI# and/or LEGACY# WITH ANOTHER BILLING GROUP OR ENTITY: Each payer generates and delivers ERA files according to its own capability—many payers deliver ERA files “by Tax ID.” Your enrollment for 835-ERA files could affect the retrieval of remit files for other provider group(s) that share your Tax ID# and cause ERA files for these other group(s) to be delivered to Practice Insight.

BEFORE ENROLLING FOR ELECTRONIC REMITS—Check to make sure your ERA enrollment will not affect other provider groups or entities that share your Tax ID#.

FAX ALL FORMS TO PRACTICE INSIGHT
Enrollment Dept
713-333-0138

Trading Partner Information			
Trading Partner Name: (Deliver ERA to?)	<i>Capario</i>		
Contact Name			
Phone:		Email:	
Provider Information			
Provider Name:			
Tax ID:		NPI:	

IMPORTANT: To ensure timely processing of your request, recheck the information completed on this form to make sure it is complete, accurate, and legible.

ALLOW 2-4 WEEKS FOR PROCESSING

If it has been over 30 days since request was submitted and ERAS are not being received, contact Practice Insight, Enrollment Department at enrollment@practiceinsight.net