PROVIDER 835 AUTHORIZATION FORM FOR BILLING AGENTS/CLEARINGHOUSES

Please send completed form to ProviderRelations@goldchp.org
or mail to: Gold Coast Health Plan, Attention: ERA Processing - Provider Relations Dept.
P.O. Box 9153, Oxnard, CA 93031

The provider 835 Authorization Form is required to be complete by all providers who wish to have their billing agent or clearinghouse retrieve their Explanation of Benefits/Remittance Advice electronically (X12N 835 transactions) on their behalf.

FIELD NAME / DEFINITION	USER INPUT
Preference for Aggregation of Remittance Data (e.g., Account Number Linkage to Provider Identifier) Provider preference for grouping (bulking) claim payment remittance advice – must match preference for EFT payment	Please select one: ☐ Individual Provider ☐ Group Provider/Practice
Provider Name Complete legal name of institution, corporate entity, practice or individual provider	
Street, City, State/Province, ZIP Code/Postal Code • Street: The number and street name where a person or organization can be found • City: City associated with provider address field • State/Province: ISO 3166-2 Two Character Code associated with the State/Province/Region of the applicable Country • ZIP Code/Postal Code: System of postal-zone codes (zip stands for "zone improvement plan") introduced in the U.S. in 1963 to improve mail delivery and exploit electronic reading and sorting capabilities	
Provider Contact Name Name of a contact in provider office for handling ERA issues	
Email Address An electronic mail address at which the health plan might contact the provider	
Payer Requested	Gold Coast Health Plan - 77160
Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN) A Federal Tax Identification Number, also known as an Employer Identification Number (EIN), is used to identify a business entity	
National Provider Identifier (NPI) A Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification Standard. The NPI is a unique identification number for covered healthcare providers. Covered healthcare providers and all health plans and healthcare clearinghouses must use the NPIs in the administrative and financial transactions adopted under HIPAA. The NPI is a 10-position, intelligence-free numeric identifier (10-digit number). This means that the numbers do not carry other information about healthcare providers, such as the state in which they live or their medical specialty. The NPI must be used in lieu of legacy provider identifiers in the HIPAA standards transactions	

FIELD NAME / DEFINITION	USER INPUT
Have you ever authorized ACS to allow another billing agent or clearinghouse to retrieve your Explanation of Benefits/Remittance Advice electronically (X12N 835 transactions) on your behalf for this payer?	Please select one: ☐ Yes ☐ No
Reason for Submission	Please select one: ☐ New Enrollment ☐ Change Enrollment
NEW CLEARINGHOUSE / VENDOR	**USER INPUT**
Billing Agent/Clearinghouse ACS Trading Partner/Submitter ID	
Clearinghouse Name Official name of the provider's clearinghouse to be added	
Name of authorized individual confirming request	
Electronic Signature of Person Submitting Enrollment The signature of an individual authorized by the provider or its agent to initiate, modify or terminate an enrollment	☐ Please check this box to indicate your authorization of the designated Billing Agent/Clearinghouse provided above. The checked box is the equivalent of your electronic signature
CANCEL CLEARINGHOUSE / VENDOR	**USER INPUT**
Xerox Trading Partner/Submitter ID of the billing agent or clearinghouse for whom you will be terminating rights	Gold Coast Health Plan - 77160
Cancel Clearinghouse/Vendor Official name of the provider's clearinghouse to be cancelled.	
Name of authorized individual confirming request	
Electronic Signature of Person Submitting Enrollment Cancellation The signature of an individual authorized by the provider or its agent to initiate, modify or terminate an enrollment.	☐ I hereby cancel my request for delivery of Explanation of Benefits/Remittance Advice electronically (X12N 835 transactions) for this payer to the above specified trading partner