



840 Carolina St
Sauk City, WI 53583-1374
1-800-362-3308

**EDI DATA FORM
(EDI CLAIMS SUBMITTED TO UNITY HEALTH INSURANCE)**

Date of initial contact:

Name of Provider:
Address:

Name of contact person:
Phone #: Ext:
Fax #:
Email address:

Tax ID:

Claim type you will be submitting:	How do you plan to receive your remittance?:
<input type="checkbox"/> UB94 <input type="checkbox"/> 1500 <input type="checkbox"/> Both	<input type="checkbox"/> 835 <input type="checkbox"/> Paper <input type="checkbox"/> Both

What is your **weekly** average of claim submission to Unity Health Insurance?

When would you like to start submitting to Unity Health Insurance electronically?

Can you send us a small initial file so we can look at claims to ensure all fields are populated correctly?

Will you submit EDI claims directly to Unity or through a Clearinghouse? If through a Clearinghouse, which Clearinghouse do you utilize?

Contact for claim questions (if different from above):

Name: _____

Address: _____

Phone Number: _____ Email: _____

*******PLEASE READ THE FOLLOWING PAGE*******

PLEASE READ:

- We do not accept corrected or reprocessed claims. These claims must be submitted on paper.
- Individual dates of services must be submitted for outpatient therapy claims.
- All 835 electronic remit checks will be cut at the Unity Provider Payee level.

Name: _____

Address (street, city, zip code): _____

Phone Number: _____ Email: _____

1500's-

- You must use the NPI number.
- Provider tax ID must be sent in a REF segment with a REF01 of "EI". Note: A REF segment identifying the provider must appear in the 2010AA, 2310B, or 2420A loop. The 2000A provider tax ID applies to the entire 837 unless overridden by the 2310B loop. The 2310B loop applies to the entire claim unless overridden by the 2420A loop.
- The provider taxonomy code must be sent in a PRV segment with a PRV02 of "ZZ". A PRV segment identifying the provider taxonomy must appear in the 2000A, 2310B, or 2420A loop. The 2000A provider taxonomy applies to the entire 837 unless overridden by the 2310B loop. The 2310B loop applies to the entire claim unless overridden by the 2420A loop

UB04's

- The DRG must be submitted on inpatient claims.
- The provider tax ID must be sent in an REF segment with a REF01 of "EI". Note: A REF segment identifying the provider must appear in the 2010AA or 2310E loop. The 2010AA provider tax ID applies to the entire 837 unless overridden by the 2310E loop.
- If the outpatient Revenue Code has a corresponding CPT/HCPCS code, both codes should be submitted on the claim.

Electronic Remits

- Every billing provider (type 1 and 2, 2010AA loop) and rendering provider (type 1 and 2, 2310B loop) submitted on electronic claims must be credentialed with Unity.
- The billing provider NPI found in a claim getting paid will be sent in the N104 of the 1000B loop on the 835.
- The rendering provider NPI found in a claim getting paid will be sent in the NM109 of the 2100 loop on the 835.

Any questions please contact: Paul Jankoski
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Email: EDI@unityhealth.com