



Amerigroup - EDI Registration Form

Please return this completed form via fax or email to:
Fax: (866) 959-2854
Email E-Solutions.Support@anthem.com

Current submitters only, please supply:

Sender ID #: _____

All items with an asterisk (*) must be completed.

*Type of Request: New Submitter Change Data Specify change: _____

1. Trading Partner Information:

*Trading Partner Name _____
*Address (include suite) _____
*City _____ *State: _____ *Zip: _____
*Contact Name _____ *Phone () _____
*E-Mail Address _____ *Fax () _____
*NPI _____ *Tax _____

2. Business Type: * Physician/Provider Hospital Clearinghouse Billing Service Lab

3. Vendor Information: *Please indicate the individual who is responsible for the development/maintenance of your EDI software:

In House Development
Technical Contact: _____ Phone () _____
 Software / System Vendor
Vendor Name _____ Product _____
Address _____
City _____ State _____ Zip _____
Contact Name _____ Phone () _____
E-Mail Address _____ Fax () _____

4. Data Transmission Method: *Indicate protocol and compression:

HTTPS Post (Real-Time only available for 270 and 276*)

5. Provider Tax ID:

6a. Select HIPAA Transaction(s) *

270/271 Eligibility*
 276/277 Claim Status *

*In Louisiana, Amerigroup Louisiana, Inc. In New Mexico, Amerigroup Community Care of New Mexico, Inc. In Texas, Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members are served by Amerigroup Texas, Inc. In Washington, Amerigroup Washington, Inc.

Amerigroup Amerivantage is an HMO plan with a Medicare contract and a contract with the state Medicaid program. Enrollment in Amerivantage depends on contract renewal.