



ePACES – Support Files Provider, Other Payer and Submitter

Overview

The Support Files available in ePACES allow the Administrator to create, edit or review database files for an ePACES account associated with an ETIN*. Click on one of Support File subheading hyperlinks on the bottom of the left-hand menu bar: *Provider*, *Other Payer* and *Submitter* to access these files. The Provider and Other Payer files may be edited, but the Submitter file is display only.

*ETIN - Electronic Transmitter Identification Number.

For more detailed information, please see the Help Documentation available on the eMedNY website:
http://www.emedny.org/selfhelp/ePACES/ePACES_Help.pdf .

Click on one of the subheadings to access the Support Files.

The screenshot shows the ePACES web application interface. The top navigation bar includes the eMedNY logo, the text 'ePACES', and links for 'Help' and 'Log Out'. Below the navigation bar, there is a 'PROVIDER NAME - NPI' field and a 'Change Provider' dropdown menu with a 'Go' button. The main content area features a 'welcome to ePACES' message and a large 'ePACES' logo. The left-hand menu is expanded to show the 'Support Files' category, which includes links for 'Provider', 'Other Payer', and 'Submitter'. The main content area also contains a paragraph of text: 'The New York State Department of Health invites you to use the ePACES application to request and receive a variety of HIPAA-compliant Medicaid transactions. Using the links in the menu-bar on the left and the Help link on the top right of each page, you will be able to easily navigate through all the available functionality. If you do not see the necessary links in the menu at the left, please contact your Primary Administrator. Please make sure your Provider Name is displayed at the top of the page before continuing. If your Provider Name is incorrect or not available in the "Change Provider" drop-down box at the top of the page, please contact the CSC HelpDesk at 800-343-9000. For further information, please visit these sites: eMedNY DOH'. The bottom left corner of the page features the 'DOH' logo.

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A. Provider Support File Administration

Clicking on *Provider* under the *Support File* heading displays a list of all Providers that the Administrator added to the *Support file*. The Administrator added these Providers using either the *Add New Provider* function or the *Add New Non-Medicaid Provider* function available on both claims and MEVS transactions. The Providers listed in the *Support file* may be selected on a claim's Physician Information Tab or on MEVS transactions as Referring Providers, Ordering Providers, etc. The list may be sorted by clicking on the green arrows in the column headers for Name, License Number or Provider type.

There are two types of Providers, Medicaid and Non-Medicaid. Medicaid Providers are enrolled with New York State Department of Health (NYSDOH) and their information is drawn from the master file on the Medicaid Management Information System (MMIS), based on the information a Provider supplies to the NYSDOH. Non-Medicaid Providers are licensed professionals that may refer or order medically related services for a Medicaid Recipient, but are not enrolled in the NYS Medicaid program. The Administrator has the ability to add Non-Medicaid Provider information to the local Support File, accessed through the Provider hyperlink under the Support files found near the bottom of the left menu bar. Medicaid Providers may be added to or deleted from the Support file view but the information may not be altered.

Change Provider: PROVIDER NAME - NPI Go

Provider Support File

Add New Provider ← Click here to add a new Provider.

Name	License No.	Provider Type	Contact Information	Edit	Delete
DOE JAMES MD		046 PHYSICIAN	STREET ADDRESS CITY, STATE ZIP Phone Number		
DOE JANE MD		046 PHYSICIAN	STREET ADDRESS CITY, STATE ZIP Phone Number		
DOE JOHN C MD		046 PHYSICIAN	STREET ADDRESS CITY, STATE ZIP Phone Number		
DOE JOHN F MD	00111111				
DOE ROBERT MD		046 PHYSICIAN	STREET ADDRESS CITY, STATE ZIP Phone Number		

Page size: 50 76 items in 2 pages

Edit allows the Administrator to review and make changes to the information for Non-Medicaid Providers. A Medicaid Provider's information cannot be changed through ePACES.

Delete allows the Administrator to delete Non-Medicaid Providers from the local support file. Medicaid Providers may be deleted from the local support file view, but not the master eMedNY file.



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Adding a New Provider

Both Medicaid and non-Medicaid Providers may be added to the local support file. These Providers are then available for selection, in the claim entry process, from the drop down lists on the Physician's Tab.

Adding a Medicaid Provider

Clicking on the *Add New Provider* button brings up a screen that allows the Administrator to add either a Medicaid or Non-Medicaid Provider. The screen shot below shows the *Add an existing Medicaid Provider* portion of the screen.

•• Provider Support File

To execute a refined search that will limit the number of responses returned in a search, enter a Last Name and First Name with a space between them (ex: Smith Adam) or a *Provider Number/NPI*.

Click on *Go* to initiate the search.

The Search for a Medicaid Provider will yield a list of Providers who match the search criteria entered. The screen shot below displays the results of a search on the last name: Zone. A search by Provider Number will be more precise and only return the specific Provider associated with that number.

• Provider Support File

Add Provider Click on the radio button to select a Provider(s) to add to your local support file.

Records 1-5 of 5 |

Select	Name	License No.	Provider Type	Contact Information
<input checked="" type="radio"/>	ZONE, JANE MD	PA123456	046 PHYSICIAN	STREET ADDR CITY, STATE ZIP PHONE #
<input type="radio"/>	ZONE, JOHN DDS	00111111	020 DENTIST	STREET ADDR CITY, STATE ZIP PHONE #
<input type="radio"/>	ZONEN, JOE	00222222	050 PODIATRIST	STREET ADDR CITY, STATE ZIP PHONE #
<input type="radio"/>	ZONER, JAMES MD	00333333	046 PHYSICIAN	STREET ADDR CITY, STATE ZIP PHONE #
<input type="radio"/>	ZONERIST, JOHN MD	00444444	046 PHYSICIAN	STREET ADDR CITY, STATE ZIP PHONE #

Records 1-5 of 5 |

← Click on Submit to add the selected Provider(s) to your local support file.



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Adding Non-Medicaid Providers

Adding Non-Medicaid Providers to the local support file requires more information be entered about the Provider to make the addition, as it cannot be pulled from an existing database.

Add a new Non-Medicaid Provider

Person Non-Person Entity

* Last Name:

First Name:

Middle Initial:

* EIN or SSN: EIN SSN

Note: EIN = Employee Identification Number
SSN = Social Security Number

* NPI #:

AND/OR
State License:

Select the appropriate *Provider Type* from the drop down.

* Provider Type:

Optional Information:

Address Line 1:

Address Line 2:

City, State, Zip: NY

Telephone:

The *Optional Information* fields may be completed if desired for the Administrator's purposes.

Click on Go to complete the addition of this Provider to the local support files.



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▶ General Claim Information
▶ Institutional Claim Information
▶ **Provider Information**
▶ Diagnosis/ Procedure
▶ Other Payers
▶ Service Line(s)

* Indicates required field(s) if entering information for a provider type

- **Attending/Serviceing Physician**
 - **Use an Existing Provider**

*Select a Name:

[▶ Go](#)

OR Search for a Medicaid Provider:

Last Name:

Provider Number:

[▶ Go](#)
 - **Enter a New Non-Medicaid Provider**

* NPI #: [▶ Go](#)

Once new Providers, whether Medicaid or Non-Medicaid, are added to the local support files, they are available in the drop down list of Rendering, Ordering, Referring and other types of Providers on the Physician Tab when entering claims or Dispensing Validation System (DVS) authorization.

B. Other Payer Support Files

The Other Payer Support File contains a listing of all payers currently on file in the ePACES system. Information displayed includes the *Other Payer ID Number*, the *Other Payer Name*, and the *Claim Filing Indicator* for that Other Payer. You may navigate through the list of Other Payers using the links above and below the table. Clicking on the green triangle in the heading of a particular column will sort the Payers by that information. On this page, you may also select to *Edit* or *Delete* an existing payer, or *Add a New Payer*, if you are unable to find the payer you are looking for.

•• **Other Payer Support File**

[▶ Add New Payer](#) Records 1 - 9 of 9 |

Other Payer ID ▼	Other Payer Name ▼	Claim Filing Indicator ▼	Edit	Delete
1000000002	MEDICARE PART A	Medicare Part A		
1000000003	MEDICARE PART B	Medicare Part B		
1000000004	COMMERCIALINS	Commercial Insurance Co.		
1000000005	OXFORD HEALTH CARE	Commercial Insurance Co.		
1000000006	WELLCARE	Health Maintenance Organization (HMO) Medicare Risk		
1000000007	CIGNA	Commercial Insurance Co.		
1000000008	NYC FAMILY HEALTH SERVICES	Health Maintenance Organization (HMO) Medicare Risk		
1000000009	MEDICARE	Medicare Part A		
1100000000	XYZ HEALTH CENTER INS	Health Maintenance Organization (HMO) Medicare Risk		
Other Payer ID	Other Payer Name	Claim Filing Indicator	Edit	Delete

Records 1 - 9 of 9 |



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Adding a New Payer

Clicking on the *Add New Payer* button brings up this screen. Enter the Other Payer's Name. Click on the drop down list to select the Claim Filing Indicator associated with this Payer.

Change Provider: DRUGSTORE # 1 Go

Other Payer Support File

Add Payer

Other Payer ID:

Other Payer Name: All-Star Health

Claim Filing Indicator: Preferred Provider Organization (PPO)

Submit Cancel

The newly added Other Payer will be available on the drop down list for Other Payers on the Other Payer Tab of a claim.

General Claim Information Professional Claim Information Provider Information Diagnosis **Other Payers** Service Line(s)

* Indicates required field(s) if entering information on this tab

Other Payer Details

Next Other Payer View Other Payers

Other Payer Information

* Other Payer Name: ALL-STAR HEALTH
BLUE CROSS BLUE SHIELD
BLUE CROSS BLUE SHIELD
BLUE CROSS BLUE SHIELD
EMPIRE BC
MEDICARE
PRUDENTIAL
PRUDENTIAL

* Payer Sequence Number:

* Payer Type:

Other Payer Paid Amount:

Other Payer Claim Control Number:

Date Claim Paid:

Other Subscriber

Newly added Other Payer will appear on drop down list in alphabetical order.



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C. Submitter Support File

The Submitter Support File screen is read-only and displays the ETIN associated with the Submitter. A valid ETIN is required for the submission of claim batches.

TSN/ETIN: The Tape Supplier Number (TSN) or Electronic Transmitter Identification Number (ETIN) for the submitter.

Change Provider: Go

•• Submitter Support File

Submitter Information

Transmission Supplier Number (TSN):	888
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Phone Contact

eMedNY Call Center: (800) 343-9000

Hours of Operation:

For provider inquiries pertaining to non-pharmacy billing or claims, or provider enrollment: Monday through Friday: 7:30 a.m. - 6:00 p.m., Eastern Time (excluding holidays)

For provider inquiries pertaining to eligibility, DVS, and pharmacy claims: Monday through Friday: 7:00 a.m. - 10:00 p.m., Eastern Time (excluding holidays) Weekends and Holidays: 8:30 a.m. - 5:30 p.m., Eastern Time