

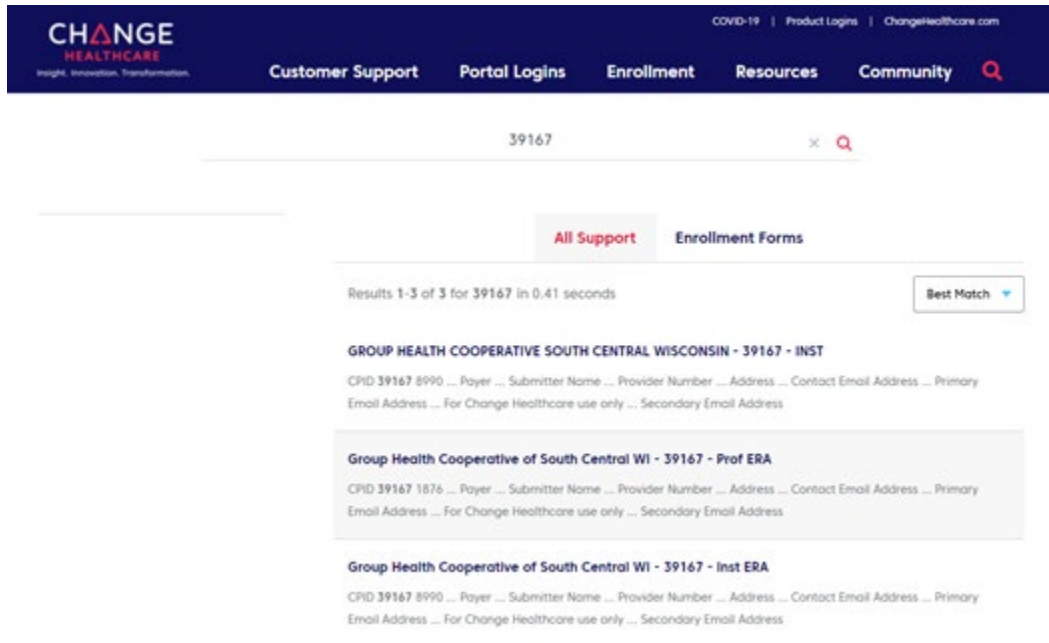
Electronic Remittance Advice (ERA) Request Form

To receive electronic EOBs/ERAs you must complete the setup form with our clearinghouse, Change Healthcare. Please note the entire setup will be completed between Change Healthcare and you directly or your clearinghouse, not with GHC.

To enroll through Change Healthcare

<https://support.changehealthcare.com/search?q=39167&t=All%20Support&sort=relevancy&numberOfResults=12>

Search for 39167 (GHC-SCW's number) to get to the Change Healthcare form. Please note you will need to choose one of the ERA forms below:



The screenshot shows the Change Healthcare support portal search results for the query '39167'. The page header includes the Change Healthcare logo and navigation links for Customer Support, Portal Logins, Enrollment, Resources, and Community. The search results are displayed under the 'All Support' tab, showing three results for '39167' in 0.41 seconds. The results are:

- GROUP HEALTH COOPERATIVE SOUTH CENTRAL WISCONSIN - 39167 - INST**
CPID 39167 8990 ... Payer ... Submitter Name ... Provider Number ... Address ... Contact Email Address ... Primary Email Address ... For Change Healthcare use only ... Secondary Email Address
- Group Health Cooperative of South Central WI - 39167 - Prof ERA**
CPID 39167 1876 ... Payer ... Submitter Name ... Provider Number ... Address ... Contact Email Address ... Primary Email Address ... For Change Healthcare use only ... Secondary Email Address
- Group Health Cooperative of South Central WI - 39167 - Inst ERA**
CPID 39167 8990 ... Payer ... Submitter Name ... Provider Number ... Address ... Contact Email Address ... Primary Email Address ... For Change Healthcare use only ... Secondary Email Address

Once you are set up with Change Healthcare they will forward your ERA form on to EDI@ghcscw.com to complete the process on our end.