

Provider Self Enrollment Humana

<http://www.humana.com/providers/>

Login In to the Provider Self – Service Center

Or

Register Today if you do not have a User ID

The screenshot shows the Humana website's provider self-service center. At the top, there are links for 'Humana.com Home', 'Explore Provider Self-Service Center', and 'Español'. The main navigation bar includes 'Providers', 'Plans & Products', 'Contracting Resources', 'Health & Wellness', and 'Tools & Resources'. The 'Providers' section is highlighted, featuring a banner with a doctor and a 'Log In to Provider Self-Service Center' form. The form has fields for 'User ID' and 'Password', a 'Log In' button, and a 'Forgot User ID/ Password?' link. A red arrow points to the 'Log In' button and the 'Forgot User ID/ Password?' link, with the text 'Log In to Provider Self-Service Center or Register Today'. Below the banner, there are sections for 'Plans & Products', 'Tools & Resources', 'Contracting', and 'Health & Resources'. The 'Tools & Resources' section includes a 'Register Today' button. The 'Highlights' section features a 'Submit prior authorizations online' link. The 'Provider Search' section lists various provider types, and the 'Quick Links' section lists various tools and resources.

Under Electronic Remittance Advice (835) and Electronic Funds Transfer Request Forms

Request Forms there is a link for ERA/EFT Setup-Change Request

HIPAA

[HIPAA Companion Guides](#)

[HIPAA Resources](#)

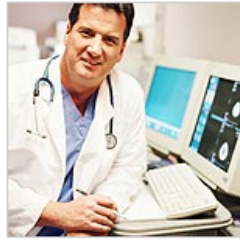
[HIPAA Edits](#)

[National Provider Identifier](#)

» [Electronic Remittance Advice \(835\)](#)



Printer-Friendly Page



Electronic Remittance Advice (835) and Electronic Funds Transfer Request Forms

With the move to being Health Insurance Portability Assurance Act (HIPAA) compliant, Humana has made available the HIPAA X12N 835 version 4010 A1 electronic remittance advice (ERA). The electronic format may be accessed in the following ways:

[Explore the Provider Self-Service Center](#) ▶

The online remit inquiry is a self-service application that enables providers to view remittance information online via the secured provider section of Humana.com. The function offers several different inquiry methods and the ability to customize the viewing of the data with the use of filters and sorts. Providers can also download the HIPAA X12N 835 version 4010 A1 electronic remittance advice remittance in a format (text or Word document) or as a remittance inquiry supplement file (Excel spreadsheet)

If you are not a current user of the secured provider section, please [register](#).

Once you have access to the secured provider section of Humana.com, you can immediately access the online remit inquiry function to inquire about paid claims.

Request Forms

The Electronic Remittance Advice (ERA) offers a more automated process for providers who can accept auto posting transactions through a vender, billing agency or clearinghouse. Humana utilizes Avality as the central gateway for delivery of 835 transactions. Upon enrollment, the ERA will replace the paper version of the explanation of remittance (EOR).

[ERA/EFT Setup-Change Request](#) ↩



ERA/EFT FAQ

Frequently asked questions and answers for Humana ERA/EFT.

(29 KB) - Download PDF

[English](#)

Terms And Condition For Service Fund Provider Payments

Use this form to request Electronic Funds Transfer for provider capitation payments which are released from Service Fund.

(40 KB) - Download PDF

[English](#)

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Use the “Help” file to assist in completing the ERA/EFT request.
<https://providers.humana.com/EraEft/PDF/EraEftHelp.pdf> On page 9 it show they need to choose Vendor and then page 10 it shows a dropdown to select which Vendor – Emdeon is in the Dropdown.

ERA/EFT Enrollment and Maintenance Request Process

[Help](#)

This function is used to request new ERA and EFT setup and update existing setups. Any adds or updates require verification of the requestor's identification. To perform this validation you must enter two check numbers, check dates and check amounts for recent payments from Humana.

*Required Field

| Requestor Information | |
|-----------------------------|---------------------------------------|
| * Requestor Name : | <input type="text"/> |
| *Requestor E-mail : | <input type="text"/> |
| *Confirm Requestor E-mail : | <input type="text"/> |
| *Requestor Phone Number : | <input type="text"/> (e.g. 999999999) |
| Requestor Phone Extension : | <input type="text"/> |
| *Tax Id : | <input type="text"/> |