Quick Reference Guide

Provider Relations	(888) 550-8800 Option 4
Provider Relations Fax	(305) 620-5973
Authorization	(888) 550-8800 Option 1
Authorization Fax	(855) 410-0121
Claims	Provider Web Portal - Claims Inquiries/Claims Status (877) 372-1273 Option 6 - non claims status inquires
Electronic Claims Submission (EDI)	Direct Data Entry (DDE) through the HS1 Web Portal, or through the Clearinghouse, Smart Data Solutions, using: **Professional Payer ID:** 65062 **Institutional Payer ID:** 12k89
Electronic Remittance Advice (ERA)	ERA provided via Smart Data Solutions. Provider must complete Smart Data Solutions ERA Provider Setup
Paper Claims Submission	P.O. Box 240385 Apple Valley, MN 55124
Electronic Funds Transfer (EFT)	Initial payment sent via VPay with options for EFT or check available by calling: (855) 388-8374 (Vpay EOB's will be sent via Fax to Providers)
Web Portal Access Requests	Administered by Health System One (HS1). Please complete the HS1 Web Portal Access Form online at: https://therapynetwork.com/fl
Provider Web Portal Link	https://therapynetwork.com/fl