



## Electronic Funds Transfer Instructions and Definitions

Florida Blue offers Electronic Funds Transfer (EFT) services for claim and capitation payments. EFT enables you to receive payments by direct deposit. Providers with multiple office locations can now have funds automatically routed and deposited into multiple bank accounts. EFT transactions are faster than transferring funds by check and available for all Florida Blue products.

To register for the EFT service, visit Availity online at [Availity.com](http://Availity.com). Choose Enrollments Center then Transaction Enrollment.

EFT registration can be processed in as little as 48 hours but may remain open for a maximum of 30 days to accommodate the validation process.

**Note:** Once EFT has been set up, providers must proactively contact their financial institution to arrange for delivery of data required to successfully re-associate the EFT payment with the Electronic Remittance Advice (ERA). The minimum data required from the bank for re-association is shown in the table below:

CCD+ Record Number	Field Number	Field Name
5	9	Effective Entry Date
6	6	Amount
7	3	Payment Related Information

### Definitions

**Provider Name** – complete Legal name of institution, corporate entity, practice or individual provider. Please use the billing provider, practice or entity name in this field.

**Provider Address** – street, city, state/province, zip code/postal code – Street number and name, city, state and zip code associated with the provider. Please use the billing provider, practice or entity address in these fields.

**Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)** – used to identify the business entity (billing provider).

**National Provider ID (NPI)** – unique identification number for covered healthcare providers. Please use the billing provider NPI in this field.

**Provider Contact Name** – name of a contact in the provider’s office for handling EFT issues.

**Telephone Number** – number associated with the contact person.

**Email address** – electronic mail address at which the health plan might contact the provider.

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**Financial Institution** – registered name of the provider’s financial institution.

**Financial Institution Routing Number** – a nine-digit identifier of the financial institution where the provider maintains an account to which payments are to be deposited.

**Type of Account at Financial Institution** – type of account used to receive EFT payments – checking or savings. Currently, Florida Blue can only deposit to checking accounts.

**Provider’s Account Number with Financial Institution** – provider’s account number at the financial institution to which EFT payments are to be deposited.

**Reason for Submission** – new, change, or cancel.

**Voided Check** – attached to provide confirmation of identification/account numbers. Name on the voided check must match the customer’s name in Availity.

**Bank Letter** – a letter on bank letterhead that formally certifies the account owner’s routing and account numbers. Customer name on the bank letter must match the customer’s name in Availity.

**Authorized Signature** – signature of an individual authorized by the provider or its agent to initiate, modify or terminate an enrollment. A written signature is required for paper-based enrollments and an electronic signature for online enrollments.

**Submission Date** – the date on which the enrollment is submitted.

<sup>1</sup>Availity LLC is a multi-payer joint venture company. For more information or to register, visit [availity.com](http://availity.com)

Florida Blue and Florida Blue Medicare are Independent Licensees of the Blue Cross and Blue Shield Association.