



**County of Sacramento
DHHS EDI Trading Partner Information**



**County Medically Indigent Services Program
(CMISP/PEMS)**

**EDI - Trading Partner
Registration Form**

Version 2.0

Revision Date: May, 2008



County of Sacramento DHHS EDI Trading Partner Information

EDI Transaction Registration Form

Transactions accepted by DHHS

Please mark the 'Sending' column to indicate the transactions that you will be sending.

Sending	Transaction	Version
	837P: Health Care Claim: Professional	004010X098A1

Submitter's Remittance Advice (835 / EOB)

Please mark the 'Request' column if you plan to receive an 835 transaction.

Request	Transaction	Version
	835* – Health Care Claim Payment/Advice	004010X091A1
	EOB – Explanation of Benefits	

*Will be available Q3 2008

Acknowledgement Request

Type	
TA1	
997	



County of Sacramento DHHS EDI Trading Partner Information

EDI Provider Contact Information

EDI Provider Information

Provider Name:	
Sacramento County Issued Vendor ID #	
Federal Tax Payer ID (EIN or SSN)	

Business Contact

Name:	
Title:	
Address:	
City/State:	
Phone (include area code)	
Fax (include area code):	
E-mail:	

Technical / EDI Contact

Name:	
Title:	
Address:	
City/State:	
Phone (include area code):	
Fax (include area code):	
E-mail:	

FAX to: Rique Fortes at (916) 391-0762

Once we receive your DHHS EDI Trading Partner Information Forms, we will send you the instructions for electronic submission. DHHS's Companion Guide(s) will be available on the Sacramento County Website:

<http://www.sacdhhs.com/CMS/download/pdfs/HIP/CMISP837PCompanionGuide.pdf>