

How to Register for PaySpan

- Call 1-877-331-7154 Option 1 for your unique registration code.
- Go to <u>www.payspanhealth.com</u> and click the **Register Now** button.
- Enter your Registration Code and click Submit.

😵 PaySpan.		EMPOWERING THE HEALTHCARE ECONOMY
New Enrollment		
Get Started Personal Info Account Set Up	erify Your Info	
Get Started		
Welcome to PaySpan, where we are empowering the health care economy. PaySpan o costs and improve cash flow.	ters a solution that delivers electronic payments (ACH), electronic remittance advices (ERAs), analytics, and much more. This solution gives Providers access to remittance and claim details onlin	e, and straightforward reconciliation of payments to reduce
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 Enter your Registration Code, Provider ID Number (PIN), Tax ID Number (TIN) or Employer Identification Number (EIN) and you National Provider Identifier (NPI) and click Start Registration.

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Tell Us About Yourself

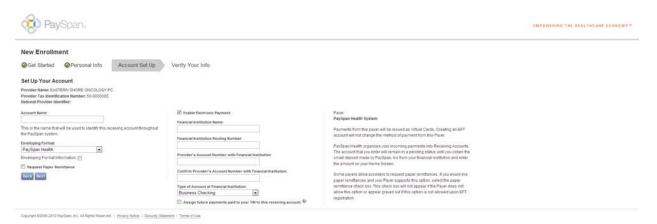
- Designate a user name of your own, or just use your email address.
- Create a unique password of at least 8 characters and include one capital letter, one lower case letter and a number.
- Select a challenge question, enter your answer and click the **Next** button to continue.

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New Enrollment		
Get Started Personal Info Account	Set Up Verify Your Info	
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	to create a user account for you on the PaySpan Health system.	
Provider Name: EASTERN SHORE ONCOLOGY PC Provider Tax Identification Number: 50-0000005 National Provider Identifier:		
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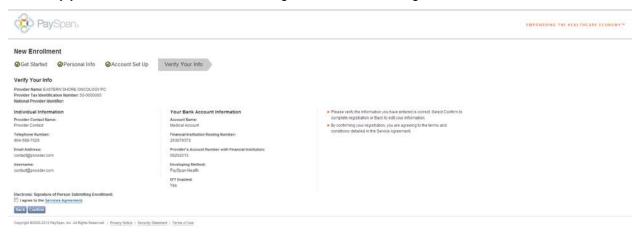
Set Up Your Account

• Designate the account you wish to have funds deposited to and click the Next button to continue.



Verify Your Info

• Verify your information, check the box to agree to the Services Agreement and click **Confirm**.



If you registered for electronic payments, you will receive a deposit of less than one dollar from PaySpan within a few business days. To begin receiving electronic payments and remittance advice, follow these steps to activate your account.

Contact your financial institution to obtain the amount of the test deposit from PaySpan Log into PaySpan Click Your Payments Click the Account Verification link on the left side of the screen Enter the amount of the deposit you received in this format: 0.00 The deposit does not need to be returned to PaySpan

For assistance: 1-877-331-7154 Option 1 providersupport@payspanhealth.com

Our Provider Services Team is available Monday through Friday, 8am to 8pm, Eastern Time.