

To register for the first time, access the site at <https://www.payspanhealth.com>. An existing user can log in with a username and password. A new user will select Register to create a new account.



Empowering the healthcare economy®

Thank you for being a loyal payspan customer.

With an evolving healthcare economy comes new changes and concerns for provider organizations. Payspan is ready with innovative provider solutions for the challenges your practice is facing.

Username

Password

LOGIN

REGISTER The registration process on our site is secure, free and fast!

[Forgot your Username or Password?](#)
[Need more help?](#)

A new provider will click Register to create a new account. The enrollment process consists of 4 steps - the following screen is presented:



EMPOWERING THE HEALTHCARE ECONOMY

New Enrollment

Get Started Personal Info Account Setup Verify Your Info

Get Started

Welcome to PaySpan, where we are empowering the healthcare economy. PaySpan offers a solution that delivers electronic payments (ACH), electronic remittance advices (ERAs), much more. This solution gives Providers access to remittance and claim details online, and straightforward reconciliation of payments to reduce costs and improve cash flow.

[Already Registered?](#)

Reg Code

Submit

[What is a Reg Code?](#)

The user must enter a valid registration code. If an invalid code is entered, an error message is displayed. If the code has already been registered an error message will be displayed advising the code has already been registered. If the user enters a valid registration code, the following screen is presented:



EMPOWERING THE HEALTHCARE ECONOMY

New Enrollment

Get Started

Personal Info

Account Setup

Verify Your Info

Get Started

Welcome to PaySpan, where we are empowering the healthcare economy. PaySpan offers a solution that delivers electronic payments (ACH), electronic remittance advices (ERA) much more. This solution gives Providers access to remittance and claim details online, and straightforward reconciliation of payments to reduce costs and improve cash flow.

Reg Code

6ZYB5DA7

Provider Identification Number (PIN)

Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)

OPTIONAL - National Provider Identifier (NPI)

Atypical Service Provider

- Enter your Tax Identification Number (TIN) and National Provider Identifier (NPI)
- An Atypical Service Provider is one that does not furnish healthcare services. Examples of Atypical Service Providers are taxi drivers, auto mechanics and carpenters.
- [Support](#)
- [How to Register](#)
- [Step by step video](#)
- [Already Registered?](#)
- [Need a registration code? Click here to request one.](#)

The user must complete the remaining fields:

New Enrollment

- Get Started
- Personal Info
- Account Setup
- Verify Your Info

Get Started

Welcome to PaySpan, where we are empowering the healthcare economy. PaySpan offers a solution that delivers electronic payments (ACH), electronic remittance advices (ERA) much more. This solution gives Providers access to remittance and claim details online, and straightforward reconciliation of payments to reduce costs and improve cash flow.

Reg Code
6ZYB5DA7

Provider Identification Number (PIN)
PIN147256

Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)
789357421

OPTIONAL - National Provider Identifier (NPI)

Atypical Service Provider

Start Registration

- Enter your Tax Identification Number (TIN) and National Provider Identifier
- An Atypical Service Provider is one that does not furnish healthcare services. Examples of Atypical Service Providers are taxi drivers, auto mechanics and carpenters.
- [Support](#)
- [How to Register](#)
- [Step by step video](#)
- [Already Registered?](#)
- [Need a registration code? Click here to request one.](#)

The registration code, PIN and TIN are validated. An error message is displayed if the user enters the wrong TIN#. The same applies if the user enters the wrong PIN. Once all correct information is entered, the following screen is presented:

New Enrollment

- Get Started
- Personal Info
- Account Setup
- Verify Your Info

Tell Us About Yourself

Please provide us with your basic contact information to enable us to create a user account for you on the PaySpan Health system.

Provider Name: DrBarbaraSmith
 Provider Tax Identification Number: 789357421
 National Provider Identifier:

Provider Contact Name

Administrators full name

Email Address

Notifications will be sent to this address.

Confirm Email Address

Telephone Number

Please use the 000-000-0000 format.

Title
Office Manager

Username

Minimum 8 characters and may include: letters (a-z), numbers (0-9), dashes (-), underscores (_), ampersands (@), periods (.)

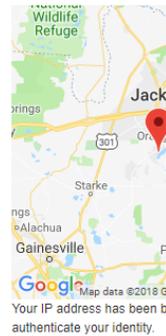
Password

Confirm Password

Challenge Question
In what city was your first job?

Challenge Answer

Next



PROVIDER REGISTRATION PROCESS

The user must complete all fields on this screen. This information will be associated with the individual user.

Note: The 1st person to register the practice/facility is considered an account Administrator. The user name will automatically default to the e-mail address entered. If the e-mail address entered is already being used as a username, the username will be highlighted in red:

New Enrollment

Get Started Personal Info Account Setup Verify Your Info

Tell Us About Yourself

Please provide us with your basic contact information to enable us to create a user account for you on the PaySpan Health system.

Provider Name: A GOLDMAN PSYD
Provider Tax Identification Number: 547117270
National Provider Identifier: 1871518258

Provider Contact Name
Test Provider LLC

Administrators full name

Email Address
Test.provider@payspan.com

Notifications will be sent to this address.

Confirm Email Address
Test.provider@payspan.com

Telephone Number
904-588-1111

Please use the 000-000-0000 format.

Title
Office Manager

Username

josephinedemo01

Minimum 8 characters and may include:
letters (a-z), numbers (0-9), dashes (-),
underscores (_), ampersands (&), periods (.)

Password

••••••••

Confirm Password

••••••••

Challenge Question

What is your pet's name?

Challenge Answer

Spot

Next



Your IP address has been logged and may be used to authenticate your identity.

PROVIDER REGISTRATION PROCESS

Updated screen with valid Username entered:



EMPOWERING THE HEALTHCARE ECONOMY™

New Enrollment

Get Started Personal Info Account Setup Verify Your Info

Tell Us About Yourself

Please provide us with your basic contact information to enable us to create a user account for you on the PaySpan Health system.

Provider Name: A GOLDMAN PSYD
Provider Tax Identification Number: 547117270
National Provider Identifier: 1871518258

Provider Contact Name
Test Provider LLC

Administrators full name

Email Address
Test.provider@payspan.com

Notifications will be sent to this address.

Confirm Email Address
Test.provider@payspan.com

Telephone Number
904-588-1111

Please use the 000-000-0000 format.

Title
Office Manager

Username
Test.provider@payspan.com

Minimum 8 characters and may include:
letters (a-z), numbers (0-9), dashes (-),
underscores (_), ampersands (@), periods (.)

Password

Confirm Password

Challenge Question
What is your pet's name?

Challenge Answer
Spot

Next



The user is then presented with the following screen:

Get Started Personal Info Account Setup Verify Your Info

Set Up Your Account

Provider Name: DrBarbaraSmith
Provider Tax Identification Number: 789357421
National Provider Identifier:

Account Name

Account Description

Financial Institution Routing Number
This field is required.

VYSTAR CREDIT UNION
 The name shown above is correct.

Provider's Account Number with Financial Institution

Confirm Provider's Account Number with Financial Institution

Type of Account at Financial Institution
Business Checking

- Enable Electronic Payment
- Request Paper Remittance
- Assign new or additional Payers to this receiving account

Payer:
Fabrikam Insurance Company

PaySpan Health organizes your incoming payments into Receiving Accounts that you enter will remain in a pending status until you obtain the small PaySpan, Inc from your financial institution and enter the amount on your card.

Some payers allow providers to request paper remittances. If you would like to request paper remittances and your Payer supports this option, select the paper remittance option. This check box will not appear if the Payer does not allow this option or this option is not allowed upon EFT registration.

Note: The name of the Financial Institution is displayed once the routing # is entered:

- Get Started
- Personal Info
- Account Setup
- Verify Your Info

Set Up Your Account

Provider Name: DrBarbaraSmith
 Provider Tax Identification Number: 789357421
 National Provider Identifier:

Account Name

Account Description

Financial Institution Routing Number

VYSTAR CREDIT UNION
 The name shown above is correct.

Provider's Account Number with Financial Institution

Confirm Provider's Account Number with Financial Institution

Payer:
Fabrikam

PaySpan
 that you e
 PaySpan,

Some pay
 remittanc
 This chec
 this optio

Once all information is entered, the user should click Next:

Set Up Your Account

Provider Name: DrBarbaraSmith
 Provider Tax Identification Number: 789357421
 National Provider Identifier:

Account Name

Account Description

Financial Institution Routing Number

VYSTAR CREDIT UNION
 The name shown above is correct.

Provider's Account Number with Financial Institution

Confirm Provider's Account Number with Financial Institution

Type of Account at Financial Institution

- Enable Electronic Payment
- Request Paper Remittance
- Assign new or additional Payers to this receiving account

Once all steps have been completed, the following screen is displayed. The user can view all information previously entered.



EMPOWERING THE HEALTHCARE ECONOMY

New Enrollment

- Get Started
- Personal Info
- Account Setup
- Verify Your Info

Verify Your Info

Provider Name: DrBarbaraSmith
 Provider Tax Identification Number: 789357421
 National Provider Identifier:

Individual Information

Provider Contact Name:
Mr. Test Provider

Telephone Number:
904-588-7027

Email Address:
Sakia.Robertson@Payspan.com

Username:
Testprovider71618

Your Bank Account Information

Account Name:
July Test Account

Financial Institution Name:
VYSTAR CREDIT UNION

Financial Institution Routing Number:
263079276

Provider's Account Number with Financial Institution:
789456

EFT Enabled:
Yes

- Please verify the information you have entered is correct. Select Confirm to complete registration or Back to edit your information.
- By confirming your registration, you are agreeing to the terms and conditions detailed in the Service Agreement.
- Access to view remittance details online is available the day after you complete registration and your account is activated (no longer in Pending status.)
- Payments from all current and future payers will be assigned to this receiving account unless you designate a separate account.

Electronic Signature of Person Submitting Enrollment:

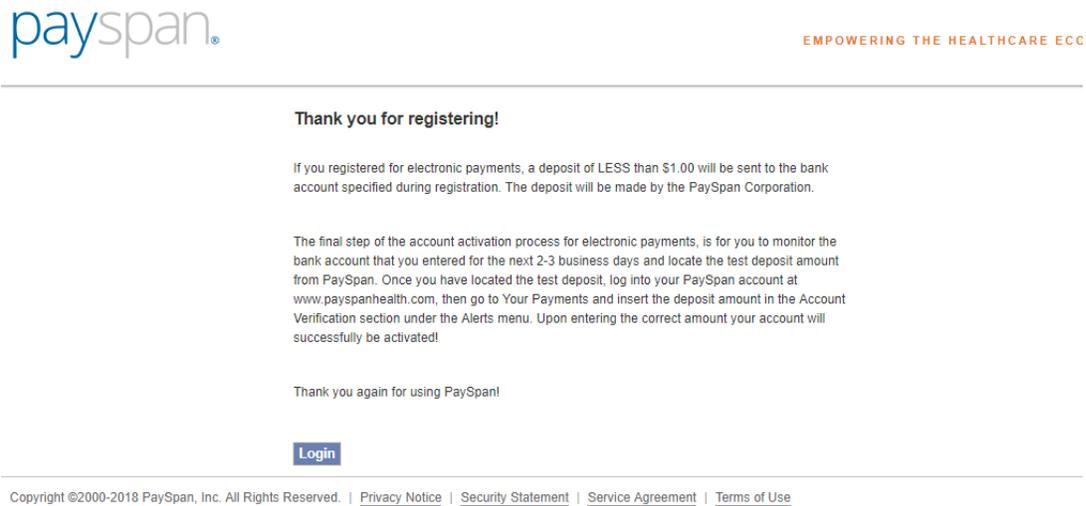
- I agree to the [Services Agreement](#).
- I accept the [Business Associate Agreement](#)

The provider must agree to the Services Agreement and Business Associate Agreement, then select Confirm to proceed.

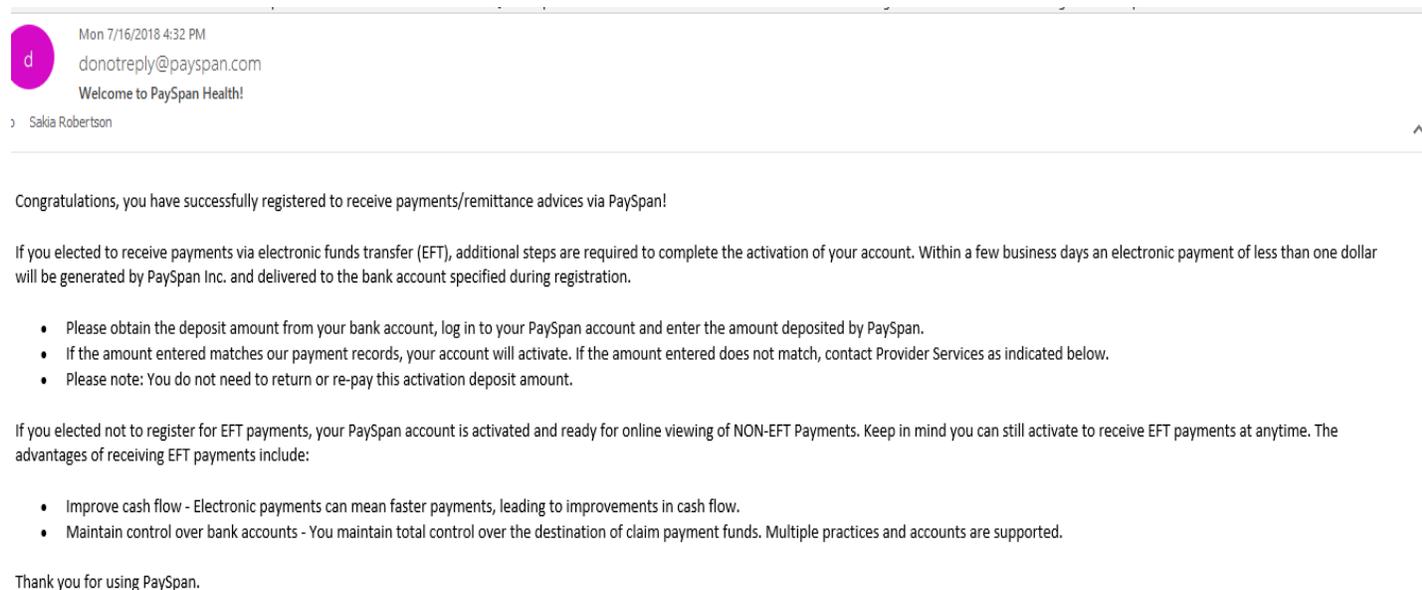
Electronic Signature of Person Submitting Enrollment:

- I agree to the [Services Agreement](#).
- I accept the [Business Associate Agreement](#)

The following screen is displayed that confirms a successful registration. The user is advised of the minimal test deposit process to complete the final step of the activation process.



The user will also receive the following confirmation e-mail which reminds them of the Penny Drop process.



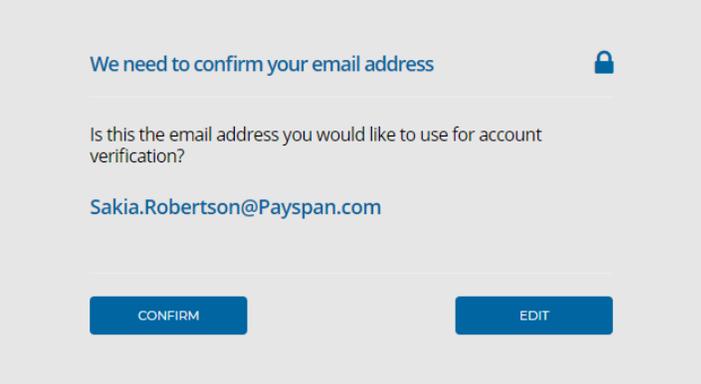
The user should check their bank account in 2-3 days to obtain the minimal test deposit amount.

PROVIDER REGISTRATION PROCESS

The user will be prompted for the MFA validation upon logging in for the first time after creating their new account. User will be prompted with the following MFA validation screen after attempting to log in with new credentials:

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We need to confirm your email address 

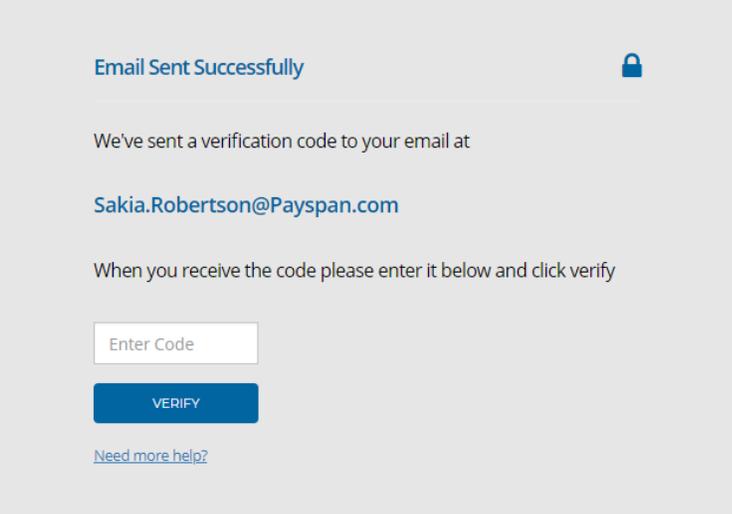
Is this the email address you would like to use for account verification?

Sakia.Robertson@Payspan.com

After selecting Confirm, user is presented with the following screen:

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Email Sent Successfully 

We've sent a verification code to your email at

Sakia.Robertson@Payspan.com

When you receive the code please enter it below and click verify

[Need more help?](#)

The user will receive the code via e-mail. The user will enter the code and select Verify.



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Email Sent Successfully 

We've sent a verification code to your email at

Sakia.Robertson@Payspan.com

When you receive the code please enter it below and click verify

[Need more help?](#)

If the code is correct, the user is granted access to the Payspan provider portal – home landing page:

patient reimbursement last 30 days

Payers who paid **0**

Amount received **\$0.00**

Your Payments
Your Payments

Pending Payments
Pending Payments

Payment Invitations
Payment Invitations

Provider Profile
Provider Profile

Notices and Alerts

Communicator
Communicator

Enhancements

Denial Detector
Detect and manage your denials in one

Output 4010
Output 4010

IS ICD-10 DISRUPTING YOUR CASH FLOW?
The financing you need is here.
Get Started
PROVIDERWEB CAPITAL

To enter the minimal test deposit (Penny Drop), the user will select Your Payments.

Patient Reimbursement last 30 days

Payers who paid	0
Amount received	\$0.00

\$

Your Payments

Your Payments

The user will see an Alerts section at the bottom left of the screen. The user will click Account Verification.


EMPOWERING THE HEALTHCARE ECONOMY

Home > Your Payments
Testprovider71618 Admin Help Log Out

📄 Research

- Claims
- Payments
- Capitation
- Reports

👤 Manage

- Accounts
- Reg Codes
- Manage 835

🔔 Alerts

- 1 Account Verification

Your Latest Payments

Select the payment count or posting report link to view a listing of new payments by receiving account. add new report

Receiving Account	Payments	Amount	Actions
All of the payments in your accounts have been confirmed. When new payments arrive, they will be shown here.			
Total	0	\$0.00	

PROVIDER REGISTRATION PROCESS

The following screen is displayed. The user will select “Verify Account”.

Account Verification

To verify your bank account information a deposit is made to the account. This deposit is made within one to two days from when the account was entered. To activate the account follow the steps below:

1. Locate the amount deposited by PaySpan in to your bank account.
2. Then select the Verify Account link below for the account you would like to activate.
3. On the next screen, enter the amount in the Deposit Amount field using the 0.00 format.
4. Select Save.

Once you have completed these steps you will begin to receive payments electronically and have the ability to view your remittance details online within 24 hours.

Account Name	Account Type	Account Status	
July Test Account	Business Checking	Pending	Verify Account

The minimal test deposit is entered here:

Account Verification

Please enter the dollar amount of the payment that was deposited to your account. Please enter the amount carefully. You will be allowed three opportunities to enter the correct amount after which your account will be locked and you will need to contact PaySpan Provider Support. Enter the amount in 0.00 form.

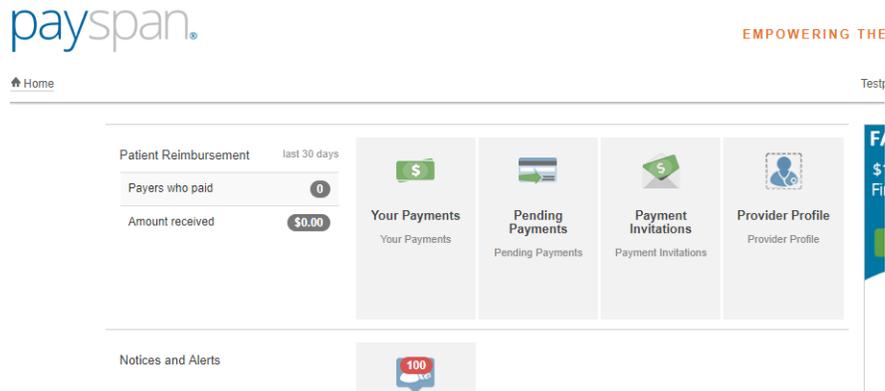
Deposit Amount:

[Save](#) [Manage Pending Accounts](#) [Close](#)

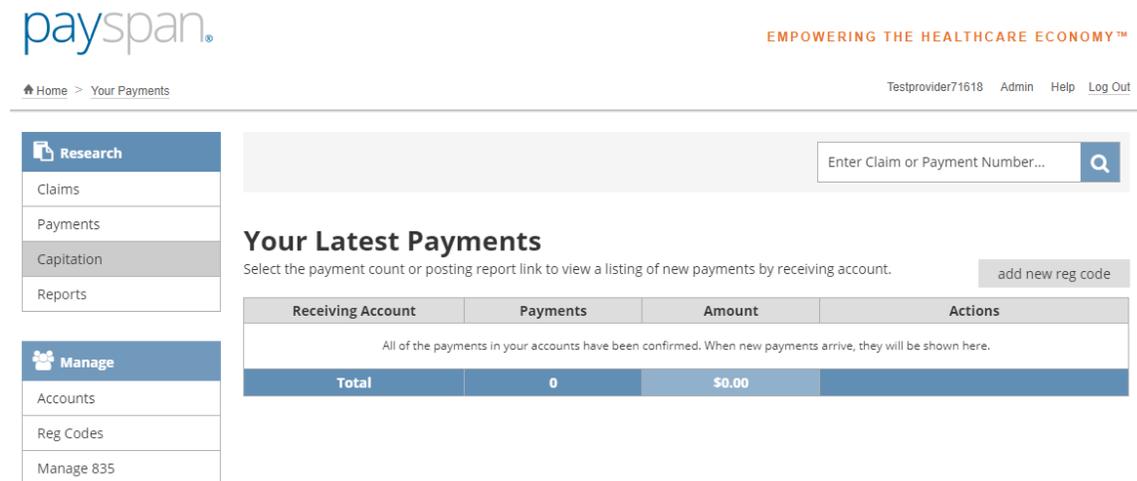
The user will select Save and close the account verification screen.

PROVIDER REGISTRATION PROCESS

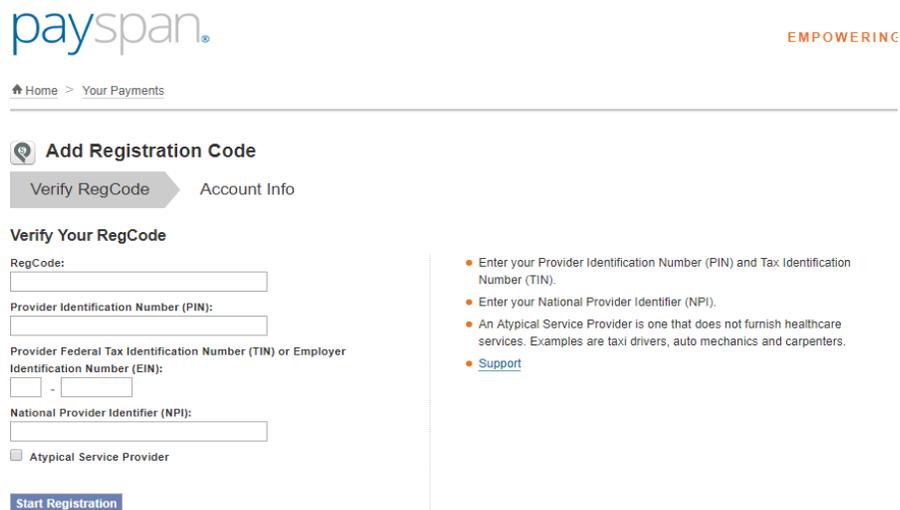
An existing provider can add a registration code to their existing account. The user will login to their Payspan account and select Your Payments.



The user will select Add New Reg Code on the far right of the screen:



After selecting Add New Reg Code, the following screen is displayed:



The user will be prompted to complete all fields to start the registration process for the new code. Once all fields are complete, the user will select Start Registration.

The screenshot shows the 'Add Registration Code' screen with the 'Verify RegCode' step selected. The 'Account Info' step is also visible. The 'Verify Your RegCode' section contains the following fields and options:

- RegCode:** 9PSN56VV
- Provider Identification Number (PIN):** PIN1472521
- Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN):** 78 - 9357421
- OPTIONAL - National Provider Identifier (NPI):** (Empty field)
- Atypical Service Provider**

On the right side, there are instructions:

- Enter your Provider Identification Number (PIN) and Tax Identification Number (TIN).
- **OPTIONAL** - Enter your National Provider Identifier (NPI).
- An Atypical Service Provider is one that does not furnish healthcare services. Examples are taxi drivers, auto mechanics and carpenters.
- [Support](#)

A 'Start Registration' button is located at the bottom left.

If all information entered is valid, the following screen is displayed. The user can select from an existing account, or add a new one:

The screenshot shows the 'Add Registration Code' screen with the 'Account Info' step selected. The 'Verify RegCode' step is also visible. The 'Select an Account' section contains the following information:

- Provider Name:** DrBarbaraSmith
- Provider Tax Identification Number:** 78-9357421
- National Provider Identifier:** (Empty field)
- Existing Receiving Account(s):** July Test Account
- OR:** [Create New Receiving Account](#)
- Request Paper Remittance**

On the right side, the 'Registration code:' is 9PSN56VV and the 'Payer:' is Fabrikam Insurance Company. There is a warning icon and the text 'Viewing Payment Data' with a note: 'Access to view remittance details online is available the day after you complete registration and your account is activated (no longer in Pending status).'

At the bottom, there is a 'Confirm' button and a checkbox for 'I agree to the [Services Agreement](#)'.

PROVIDER REGISTRATION PROCESS

If the user chooses to add a new receiving account, the following screen is displayed:

Create New Receiving Account

About Account Settings...

You can update your receiving account details and Electronic Mailbox options can be managed on this page. Check the Confirm Delivered Payments checkbox if payments should be confirmed when delivered to your electronic mailbox. Enveloping format is also managed here.

For additional security you may add an account access code to your account. Once you create an account access code, the code must be entered whenever there is an attempt to make changes to your account.

You must create your receiving account before you can manage your mailbox or delivery settings. After you have set up your account, the additional actions will be available to you.

Account Name: <input type="text"/>	Enable EFT: <input checked="" type="checkbox"/>	<input type="checkbox"/> Confirm Delivered Payments
Account Description: <input type="text"/>	Type of Account at Financial Institution: <input type="text" value="Business Checking"/>	Enveloping Format: ?
	Financial Institution Routing Number: <input type="text"/>	Payer Plan ID <input type="text"/>
	Provider's Account Number with Financial Institution: <input type="text"/>	<input type="button" value="Save"/> <input type="button" value="Close"/>
	Confirm Provider's Account Number with Financial Institution: <input type="text"/>	

The user must complete all fields and select Save.

Create New Receiving Account

About Account Settings...

You can update your receiving account details and Electronic Mailbox options can be managed on this page. Check the Confirm Delivered Payments checkbox if payments should be confirmed when delivered to your electronic mailbox. Enveloping format is also managed here.

For additional security you may add an account access code to your account. Once you create an account access code, the code must be entered whenever there is an attempt to make changes to your account.

You must create your receiving account before you can manage your mailbox or delivery settings. After you have set up your account, the additional actions will be available to you.

Account Name: <input type="text" value="July Test Account 2"/>	Enable EFT: <input checked="" type="checkbox"/>	<input type="checkbox"/> Confirm Delivered Payments
Account Description: <input type="text" value="South Location"/>	Type of Account at Financial Institution: <input type="text" value="Business Checking"/>	Enveloping Format: ?
	Financial Institution Routing Number: <input type="text" value="263079276"/>	Payer Plan ID <input type="text"/>
	VYSTAR CREDIT UNION	<input type="button" value="Save"/> <input type="button" value="Close"/>
	The name shown above is correct: <input checked="" type="checkbox"/>	
	Provider's Account Number with Financial Institution: <input type="text" value="54321"/>	
	Confirm Provider's Account Number with Financial Institution: <input type="text" value="54321"/>	

PROVIDER REGISTRATION PROCESS

The following confirmation screen is presented after the new receiving account is created. The user will click Close. The user can also choose to set up Mailbox routing for the new Receiving Account from this screen.

Create New Receiving Account

Account Details

Congratulations! You have successfully created a new account. You can now **edit this account** to set up a mailbox.

About Account Settings...

You can update your receiving account details and Electronic Mailbox options can be managed on this page. Check the Confirm Delivered Payments checkbox if payments should be confirmed when delivered to your electronic mailbox. Enveloping format is also managed here.

For additional security you may add an account access code to your account. Once you create an account access code, the code must be entered whenever there is an attempt to make changes to your account.

Electronic mailbox configuration options appear in a pop up window when the Mailbox Settings and Delivery Setting option is selected.

Mailbox Settings: Displays FTP address and password generation, as well as file names.
Delivery Settings: Displays a list of all payers associated with this receiving account and file routing options.

Account Name: July Test Account 2	Enable EFT: Yes	Confirm Delivered Payments: <input type="checkbox"/>
Account Description: South Location	Type of Account at Financial Institution: Business Checking	Enveloping Format: Payer Plan ID
Receiving Account Locked: <input type="checkbox"/>	Financial Institution Routing Number: 263079276	Close
	Provider's Account Number with Financial Institution: *4321	

After selecting Close, the user is returned to the following screen. The user must agree to the Services Agreement.

Add Registration Code

Verify RegCode Account Info

Select an Account

Provider Name: DrBarbaraSmith
Provider Tax Identification Number: 78-9357421
National Provider Identifier:

Existing Receiving Account(s):
July Test Account

OR: **Create New Receiving Account**

Request Paper Remittance

Confirm

Registration code:
9PSN56VV

Payer:
Fabrikam Insurance Company

Viewing Payment Data

Access to view remittance details online is available the day after you complete registration and your account is activated (no longer in Pending status).

Electronic Signature of Person Submitting Enrollment:
 I agree to the [Services Agreement](#).

The user will then select Confirm.

PROVIDER REGISTRATION PROCESS

User is routed to the Manage Reg Codes screen.

The screenshot shows the 'Manage Reg Codes' interface. At the top, there is a search bar and buttons for 'Manage Preferences' and 'Add New Reg Code'. Below this is a table of registration codes. The table has columns for Payer, Provider, Reg Code, PIN, NPI, RegCode Status, RegCode Type, and Registration Date. Two entries are visible, both for Fabrikam Insurance Company and DrBarbaraSmith. The first entry has Reg Code 6ZYB5DA7 and PIN 147256. The second entry has Reg Code 9PSN56VV and PIN 147251. Both are active and registered on 7/16/2018. The interface also includes navigation controls like 'Page 1 of 1' and 'Items Per Page: 10'.

Payer	Provider	Reg Code	PIN	NPI	RegCode Status	RegCode Type	Registration Date
Fabrikam Insurance Company	DrBarbaraSmith	6ZYB5DA7	PIN147256		Active	Other	7/16/2018
Fabrikam Insurance Company	DrBarbaraSmith	9PSN56VV	PIN147251		Active	Other	7/16/2018

The user receives the following e-mail:

The email notification is from 'A' (alerts@payspan.com) dated Mon 7/16/2018 5:35 PM. The subject is 'Testprovider71618 Recent change to your PaySpan provider account'. The sender is identified as Sakia Robertson.

The purpose of this message is to notify you that User Testprovider71618 performed the following action:

Update/changes to your receiving account set up.

For additional information concerning this matter, click the following link to the [Activity Log](#). If you still need assistance, please call 1-877-331-7154 and select option 1.

Thank you for using PaySpan.

Provider Payment Services
1-877-331-7154 option 1
www.PaySpanHealth.com

Below is a list of Security Tokens that can be granted to Administrators and/or Users:

The screenshot shows the 'Security Tokens' configuration interface. It features a tree view under the heading 'App'. The 'App' folder is expanded, showing a list of tokens with checkboxes: 'Select All', 'PaySpan Health App', 'Communicator App', and 'Denial Detector App'. Below this list are three expandable sections: 'Account', 'Feature', and 'Report'.