



SANDHILLS CENTER

Managing Mental Health, Intellectual/Developmental Disabilities and Substance Abuse Services
910-673-9111 (FAX) 910-673-6202 www.sandhillscenter.org Victoria Whitt, CEO

Emergency Department Services

PROVIDER ENROLLMENT / MEDICAID REIMBURSEMENT REQUEST FORM

Entity Type	Hospital Physician Group		
Legal Facility Name			
Physical Address	Street Address:		
	City:	State:	Zip Code + 4:
Billing Address	Street Address:		
	City:	State:	Zip Code + 4:
Contact Name			
Contact Phone Number (s)			
Contact Email Address			
Taxonomy Code			
Tax ID #			
Medicaid #/NPI # (s) <i>(Please list all provider associated Medicaid/NPI pairs you intend to use.)</i>			

For general inquiries, please contact the SHC Help Desk
providerhelpdesk@sandhillscenter.org or phone: 1-855-777-4652

PROVIDER BILLING OPTIONS

Provider Electronic Billing	Billing Questions	Paper Claims Process Billing, Finance Contact Representatives/Claims Specialists
Please access the following link to complete and submit the TRADING PARTNER AGREEMENT (TPA) – Electronic Data Interchange (EDI). This document constitutes an agreement for exchanging Electronic Data Interchange (EDI) between the Trading Partner, provider, and Sandhills Center. http://www.sandhillscenter.org/for-providers/provider-forms/	billing@sandhillscenter.org	Access Finance webpage for technical assistance: http://www.sandhillscenter.org/for-providers/provider-forms/

Qmcappd 09/27/2016

P.O. Box 9, West End, NC 27376
24-Hour Access to Care Line: 1-800-256-2452
TTY: 1-866-518-6778 or 711
Serving Anson, Davidson, Guilford, Harnett, Hoke, Lee,
Montgomery, Moore, Randolph, Richmond and
Rockingham counties

