

esMD HIH Onboarding Request Form

To be considered for acceptance in the esMD Health Information Handler's (HIH's) Onboarding Process, complete and return this form, along with attachment for number 18, to CMS esMD [Support Team](#).

Required information: *The form below will be used by CMS to capture pertinent information regarding the perspective HIH's organization and system information. Each field must be filled out upon submitted the form otherwise the form will be considered incomplete*

No.	ITEMS	DETAILS
1	Date of Form Submission:	
2	HIH Company Name:	
3	HIH Office Address:	
4	HIH Business Contact Name: <ul style="list-style-type: none"> • Office Phone: • Cell Phone: • Email Address: • Time zone: 	
5	HIH Technical Contact: <ul style="list-style-type: none"> • Office Phone: • Cell Phone: • Email Address: • Time zone: 	
6	IT Vendor Name:	
7	IT Vendor Point-of-Contact: <ul style="list-style-type: none"> • Office Phone: • Cell Phone: • Email Address: • Time zone 	
8	Statement of permission to list your IT vendor on CMS esMD website following certification:	

No.	ITEMS	DETAILS
9	HIH Distribution Address for esMD-related notifications:	
10	Company URL:	
11	Has partnership agreement been signed (If yes attach agreement to this form)	
12	Statement of permission to use URL and logo in esMD related brochures, presentations, and websites:	
13	Where do you plan to offer esMD Services (nationwide/specific states):	
14	What esMD services will your organization offer? (You may select more than one):	<input type="checkbox"/> Submit Response to Additional Document Requests (ADR) <input type="checkbox"/> Receive Pre-Pay Electronic Medical Documentation Request (eMDR) Letters <input type="checkbox"/> Receive Post-Pay Electronic Medical Documentation Request (eMDR) Letters <input type="checkbox"/> Submit First Level Appeals Request <input type="checkbox"/> Submit Second Level Appeals Request <input type="checkbox"/> Submit Recovery Auditor Discussion Request <input type="checkbox"/> Submit Advance Determination of Medicare Coverage Request (ADMC) <input type="checkbox"/> Submit / Accept XDR Prior Authorization (PA) Request and Responses: Repetitive Scheduled Non-emergent Ambulance Transport Home Health Pre-Claim Review (HHPCR) Durable Medical Equipment, Prosthetics/Orthotics & Supplies (DMEPOS) Hospital Outpatient Department (HOPD) <input type="checkbox"/> Submit Paperwork (PWK) Unsolicited Documents <input type="checkbox"/> Submit Durable Medical Equipment (DME) Phone Discussion Requests
15	Estimated Monthly Submission Volume:	
16	Planned/estimated Go Live date:	
17	HIH Implementation Guide reviewed:	
18	Brand & version of server platform:	

No.	ITEMS	DETAILS
19	Describe HIH application interface:	
20	Have you stood up your HIH application interface:	
21	X12 Submission Sending and Receiving ID: (only applicable for X12 Submissions)	
22	Brand & version of (CONNECT compatible) software: Note: X 12 Submissions require CONNECT 4.4 or compatible CAQH software.	
23	CONNECT compatible software self-test results: (Only CONNECT 4.4 or higher version is supported)	
24	HL7 OID:	
25	Validation Inbound IP Address(es) (CMS requires HIHs to keep a validation environment separate from the Production environment during and after Onboarding)	
26	Validation Outbound IP Address(es)	
27	Validation Endpoint URL	
28	Production Inbound IP Address(es)	
29	Production Outbound IP Address(es)	
30	Production endpoint URL	
31	Certificate Authority Name:	
32	Validation SSL/TLS Certificates	
a	Server Certificate: Right click the your server certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE	

No.	ITEMS	DETAILS
	strings	
b	Cert Start and End date	
c	Intermediate Certificate: Right click your Intermediate certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE strings	
d	Cert Start and End date	
e	Root Certificate: Right click the certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE strings	
f	Cert Start and End date	
33	Production SSL/TLS Certificates	
a	Server Certificate: Right click the your server certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE strings	
b	Cert Start and End date	
c	Intermediate Certificate: Right click your Intermediate certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE strings	
d	Cert Start and End date	
e	Root Certificate: Right click the certificate and copy the content to the right including the BEGIN CERTIFICATE and END CERTIFICATE strings	
f	Cert Start and End date	