



**University Physicians Health Plans  
Electronic Funds Transfer (EFT)  
Banking Information**

**Instructions:** Please answer the questions below and attach a copy of a voided check to ensure the bank routing number is correct. Please fax it to:

**520-874-7144 (Southern Arizona)**

**602-344-8358 (Northern Arizona)**

The EFT set-up can take up to 30 days before it becomes effective. Your Provider Relations Representative will call you and let you know when the set-up is complete.

Vendor Name: \_\_\_\_\_

Vendor Contact Name: \_\_\_\_\_

Vendor Contact Phone: \_\_\_\_\_

Bank Account Name: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Wire Transfer ABA Routing Number: \_\_\_\_\_

ACH ABA Routing Number: \_\_\_\_\_

Do you submit claims via Emdeon (Medifax, Envoy/NEIC, WebMD) or the SSI Group?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

Can you accept an electronic Explanation of Benefits (EOB) EDI 835 through Emdeon (Medifax, Envoy/NEIC, WebMD) or the SSI Group?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If not, do you use another software vendor or clearinghouse? \_\_\_\_\_

Who is your Provider Relations Representative? \_\_\_\_\_

**NOTE: University Physicians Health Plans (including University Family Care and Maricopa Health Plan) are not responsible for monies deposited to an incorrect account due to non-notification of a change in bank or account number.**

For Internal Use Only: Date Received _____ RightFax Date _____
List All Master Vendor #s _____
Provider Relations internal phone and email: _____