



Electronic Payments & Statements (EPS)

NATIONAL PROVIDER IDENTIFIER (NPI) ADDENDUM FORM

If your organization uses more than one business bank account and would like to direct specific payments to these accounts by NPI number, please complete the information below for each NPI number. If you have more than two NPI numbers, please complete as many additional addendum forms as necessary.

If you wish to designate users to receive payment notifications for NPI(s), your Administrator(s) can add users within the 'Manage Users' tab in EPS and upon selection of 'email notifications', these users will receive NPI payment notifications.

After you complete this form, please fax (preferred) or mail it and a copy of the voided check to the following: **Fax: (800) 765-6766**; Mailing Address: **Attn: Processing Manager, Optum EPS, PO Box 30777, Salt Lake City, UT 84130-0777**. For questions, please contact us at **1-877-620-6194 option 1**.

Choose One

- Register an NPI number and NPI name only (no banking info required)
- Set up an NPI level bank account

Date: _____

TIN #: _____ Organization Name: _____

First Name: _____ Last Name: _____

Email Address: _____

Phone Number: _____ Title: _____

NPI number: _____ NPI name: _____

This financial Institution section will collect banking information for payments made to your provider/organizational NPI. An NPI Bank Account is only required if you want deposits directed to an account different than the one assigned at the TIN level. All fields are required.

Financial Institution Information for your NPI: _____

Financial Institution Name: _____

Street: _____

City: _____ State/Province: _____ Zip Code/Postal Code: _____

Financial Institution Telephone Number: _____

Financial Institution Routing Number: _____

Type of Account at Financial Institution: Checking Savings

Provider's Account Number with Financial Institution: _____

Included with Enrollment Submission: Voided Check Bank Letter

Financial Institution Information for your NPI: _____

Financial Institution Name: _____

Street: _____

City: _____ State/Province: _____ Zip Code/Postal Code: _____

Financial Institution Telephone Number: _____

Financial Institution Routing Number: _____

Type of Account at Financial Institution: Checking Savings

Provider's Account Number with Financial Institution: _____

Included with Enrollment Submission: Voided Check Bank Letter

IMPORTANT: Please tape a voided check here or copy the check/bank letter for every NPI Bank Account you are enrolling and fax it along with the enrollment form.



Please note: In some instances the ACH routing number on your check differs from the ACH routing number identified by your bank in an official bank letter. In these cases, the ACH number identified in the bank letter is the number you should provide in the Financial Institution Information section.