

# **PAYFAST** Software Xpress

## XML Registration Instructions

### New York Worker's Compensation Claim Submitters

The NY WCB requires all rendering providers to complete a separate registration to be authorized to submit claims electronically to the New York WC Board. Providers must sign and notarize a "Signature on File" legal agreement for claims to be accepted by the NY WCB electronically.

**This is the direct link to the WCB xml registration form:**

[http://www.wcb.ny.gov/content/ebiz/XMLSubmissions/xmlSubmissions\\_overview.jsp](http://www.wcb.ny.gov/content/ebiz/XMLSubmissions/xmlSubmissions_overview.jsp)

- You will be directed to a page that looks like this:
- Click on the "Continue Button"

### On-line Registrations

#### Health Care Provider Registration to allow XML Form Submission

Health care providers who are interested in having their medical forms submitted to the Board by a Board Authorized XML Submission Partner(s) must register with the Board.

To register you must complete the online registration form. Upon submission of the online registration form, you will receive a confirmation number. If you do not get a confirmation number, your registration form was not successfully received.

After the Board processes your registration, you will be emailed a legal agreement. Sign and return this agreement to the Board.

Note: You do not pick a Board Authorized XML Submission Partner as part of this on-line registration form. Your arrangement to have a Board Authorized XML Submission Partner submit your forms is done separately between you and the [Board Authorized XML Submission Partner](#). However, the Board Authorized XML Submission Partner will be unable to submit your forms until your registration and signed legal agreement have been received and approved by the Board.

You can send an e-mail to [WCBCustomerSupport@wcb.ny.gov](mailto:WCBCustomerSupport@wcb.ny.gov) if you have any questions regarding this registration.

- You will be directed to the Online Registrations Page below
- Under "The Registering Provider is:" Choose what best represents you.
- Click on the "Provider Information tab"

## Online Registrations

### XML Submission of Medical Claim Forms

Authorization Status

\* The Registering Provider is:

- NYS Licensed Provider-Board Authorized
- NYS Licensed Provider-Not Board Authorized
- Out of State Provider - Not Board Authorized and Not NYS Licensed
- Additional

- Fill out the registration form and submit. **All** communication will be through this email address
- Once the registration has been submitted, the Workers Compensation Board will process the registration verifying the information. If there are any problems with the registration it will be communicated to you through the email in the registration.

## XML Submission of Medical Claim Forms

Authorization Status

Provider Information

### Provider's Information:

I am registering as an OT/PT Provider

\*WCB Authorization Number:

\*Doctor License Number:

\*NPI Number:

\*First Name

M.I.:

\*Last Name:

\*Address Line 1:

Address Line 2:

\*City:

\*State:

\*Zip Code:

\*Area Code:

Phone Number:

Extension:

\*Email:

Submit

- When the registration has been verified and processed, an email will be sent to the email address in the registration with an attached Legal Agreement that will need to be filled out, signed, notarized and returned via email to the WCB at the email address in the instructions.
- When the Legal Agreement has been received by the WCB, it will be processed, and an email will be sent to the address in the registration confirming the registration has been completed and providing you with an authorization# this will then need to be entered into the provider's profile in the Payfast software.

### Questions:

WCB Customer Support Unit

Phone: (844) 337-6305

Email: [WCBcustomersupport@wcb.ny.gov](mailto:WCBcustomersupport@wcb.ny.gov)