

**AUTHORIZATION AGREEMENT
FOR ELECTRONIC VOUCHERS**

All providers are now able to search, view, print and download their vouchers electronically by going to the *Providers* section of **highmarkbcbdsde.com** and clicking on *NaviNet*. If you submit this form, you will stop receiving printed vouchers and will only see your vouchers online.

Please Note: To stop receiving printed vouchers, you must also sign up to receive payments by direct deposit. Printed vouchers will still accompany a paper check, even if you have chosen to stop receiving printed vouchers. To sign up for direct deposit, go to the *Providers* section of **highmarkbcbdsde.com**, click on *Downloadable Forms* and select *Authorization Agreement for Direct Deposit Transactions*. Then, fax the completed form to **302.421.2119**.

If you have any questions regarding electronic vouchers or the direct deposit process, please contact **Andy Rumford at 302.421.8428**.

As evidenced by your signature below, you (the provider) have authorized Highmark Blue Cross Blue Shield Delaware to stop printing and mailing paper vouchers to you. This selection is effective starting with the next voucher that is processed after receipt of this form by Highmark Blue Cross Blue Shield Delaware. You agree that, for purposes of law and regulation, you will be deemed to have received each voucher on the date the voucher is posted online.

Provider's Signature: _____ Date: _____

Provider Name: _____

Office Contact Name: _____

Office Contact Phone Number: _____

Office Contact Email Address: _____

Tax Identification (ID) Number: _____

Organization National Provider Identifier (NPI): _____

Please fax this completed form to Andy Rumford at 302.421.2119

HIGHMARK BLUE CROSS BLUE SHIELD DELAWARE USE ONLY		
NAME	SYSTEM NO.	DATE