## 

Complete this form to set up eClaims in your practice management software. Account information can be found on the eClaims portal at <u>providereservices.telushealth.com</u>.

Username:		
Password:		
First name:		
Last name:		
Location ID:		
Organization name:		
Organization CPR ID:		
Provider 1 name:	 Provider 2 name:	Provider 3 name:
Provider 1 type:	 Provider 2 type:	Provider 3 type:
Provider 1 CPR ID:	 Provider 2 CPR ID:	Provider 3 CPR ID:

Learn more at telushealth.com/eClaimsIntegration



eClaims