



South Carolina

*BlueCross BlueShield of South Carolina
is an independent licensee of the
Blue Cross and Blue Shield Association*

**ADDENDUM TO ERA ENROLLMENT FORM
FOR CORPORATE HEADQUARTERS
BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA
2300 Springdale Drive Attn: AG-280 Camden, SC 29020-1728**

Our corporate headquarters will be receiving Electronic Remittance Advices (ERAs) for the branch/satellite companies listed in this addendum. I am authorized to endorse this addendum on behalf of my company, and I acknowledge that it is my responsibility to notify BlueCross in writing if I wish to make revisions to this authorization.

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA PROVIDER NUMBER		TRADING PARTNER/SUBMITTER ID NUMBER
NATIONAL PROVIDER IDENTIFIER (NPI #)		NAME/TITLE (PLEASE PRINT)
CORPORATE/HEADQUARTER'S NAME		SIGNATURE
ADDRESS		DATE
CITY/STATE/ZIP		PHONE NUMBER
		E-MAIL ADDRESS

