

Pharmacy Network Management



Formerly NetCard Systems Pharmacy Network

835 Payment Set-Up/Change Form

Please send completed 835 document to RetailManager@netcardsystems.com or fax to (855) 404-0968.

Payer: WellDyneRx / Netcard Systems

BIN: 008878

Federal Tax ID: 84-1515837

Date:

Provider Information			
Provider is a:	NCPDP/NPI	NCPDP/Chain	#
Provider Name:			
Business Name (DBA):			
Business Address:			
Business Tax ID:			

Contact Information			
Contact Details	Name	Phone	Email
Primary Contact:			
Alternate Contact:			
Technical Contact:			
Notification Email:			

Delivery Method	
Zip with password (if applicable):	
PGP (if applicable):	
Push or Pull: (If Push, provide delivery destination)	

**Please note all 835 files will be available for only 7 days from OptumRx location*

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