

EPay Billing Guide



Mission

Good Days exists to pay prohibitively costly insurance co-pays of life-extending and life-saving treatments for people otherwise unable to afford those treatments. Further, to offer patients and families additional financial help and guidance to the best available information and support for each specific disease state.

Purpose

Good Days is proud to introduce our Electronic Payment Program or EPay! This method of payment allows providers to easily submit claims and receive payment by ACH transfer. EPay is for provider payment only and is not intended for pharmacies or members requesting reimbursement.

Enrollment

In order to enroll in the Good Days EPay program, you must first be registered with our Patients and Pros portal. To register, please visit <https://pnp.mygooddays.org/Enroll-Now>. Once you are a registered user you will have access to enroll your office and receive electronic payment by visiting <https://mygooddays.org/epay>. You will need to provide the following information:

- Office name
- Billing Contact Person
- Billing Contact Phone
- Billing Contact Email
- Bank Name
- Bank Account Number
- Bank Routing Number

Verification

Once you have submitted your EPay application, Good Days will verify your banking information. Good Days utilizes a third party called Bill.com to process electronic payments. They will send a test transaction of \$0.01 to your bank to ensure the information is correct. See picture below as an example.



Activation

When we have confirmed the bank connection, you will receive an enrollment email and can submit electronic payment requests. Until then, your EPay registration will remain in a *pending* status. Please allow 2-3 business days for validation purposes.

Questions? Please contact Good Days at (855)215-2719 or epay@mygooddays.org.

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Claims Submission

After your office is registered and active, you may submit a claim for electronic payment by visiting <https://www.mygooddays.org/payment-request>. You will be required to provide the following information to submit a claim:

- Good Days ID (CSN)
- Patient Last Name
- Patient Date of Birth
- Prescriber's NPI
- Treatment Name or NDC
- Program
- Amount Requested
- Service Date
- Day Supply
- Quantity

You may use the "Comment" field in order to add your own office notes such as order number, ID number, etc. Please note: all fields are required with the exception of the comment field. Failure to provide all information will result in an error. If you receive an error upon submission, you may wish to contact the Good Days EPay team at epay@mygooddays.org or call (855)215-2719.

Claim Confirmation

Upon submission of the claim, you will receive an immediate determination of success. If the claim was successful, no further action is needed. We recommend that you download the confirmation page for your records. You may request another payment for the same patient, a different patient or choose to exit the page.

If the claim was unsuccessful, you may wish to contact the Good Days EPay team at epay@mygooddays.org or call 855-215-2719 for additional information.

Payment Frequency

Healthcare providers will be provided payment by ACH transfer on a monthly basis for all approved payment requests within the previous month. For example, all claims submitted January 1st – 31st will be paid no later than the 15th of February. If a claim is submitted on the first day of the month, it cannot be included on the prior month's payment cycle. Should immediate payment be needed, we recommend use of our ACP payment system.

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Payment Reports

On the first day of the month, you will be able to download a report which indicates all approved claims for the prior month. For example, on February 1st a report will be available for all paid claims from January 1st -31st. The report will remain available for 90 days but can be requested again by sending an email to epay@mygooddays.org.