

Provider Network News

April 1, 2025

Effective September 1, 2025, Paramount is Moving to All Electronic Medical Claims Processing.

Thank you for working with us to provide the best care possible for our members. In an effort to simplify and make claims processing more efficient, beginning Sept. 1, 2025, all **medical claims** submitted to Paramount must be done so through electronic submission. After Sept. 1st we will no longer accept **medical claim** submissions via paper or email. **Dental claims are not included with this change.**

There are a number of advantages with electronic claims submission.

- Faster, more efficient claims processing by not sending paperwork through the mail.
- Increased accuracy through electronic system editing which allows for immediate correction of claims prior to submission.
- Paper claims submitted with incorrect or missing information are returned, slowing down processing.
- Improved tracking of claims status.
- A reduction in postage costs.

Electronic claims can be submitted through a clearinghouse. If you do not have an established clearinghouse, you can submit claims electronically through **Transshuttle** without the overhead of purchasing a practice management system. **Transshuttle** allows you to submit claims through a streamlined web-based interface at no cost.

Transshuttle Login

Transshuttle is accessed through your Paramount Provider Portal account at MyParamount.org.

To request one-on-one training and guidance with Transshuttle registration and/or claim submission, providers can reach out to our Paramount Provider Relations team at ProviderRelations.Paramount@medmutual.com.

Waiver Request Form

An electronic claim waiver request form is available on our website at:

Paramounthealthcare.com > Providers > Tools & Resources > Documents & Forms

This waiver request form must be submitted for review by any provider who has sufficient reason(s) to be exempt from this process. This form will be reviewed, along with historical claims data. You will be notified by letter of our waiver decision. Providers already submitting electronic claims will NOT receive a waiver. Please complete all sections of the waiver request form.

Forms should be mailed to:

Paramount
PO Box 497
Toledo, OH 43697-0497

