

Blue Earth County
MEC² PRO Provider Request for Electronic Billing
Add Providers

The information requested on this form is necessary for enrollment in the MEC² PRO Electronic Billing system. The information requested will be maintained in a private manner and will not be released to anyone other than the State of Minnesota or their agents without your prior written approval.

PLEASE PRINT: COMPLETE ONE FORM FOR EACH PERSON INTENDING TO USE MEC² PRO.

NAME OF AUTHORIZED USER	ADDRESS
TELEPHONE	E-MAIL ADDRESS
PROVIDER NAME AS IT APPEARS ON THE 1099	PROVIDER TAX ID

County Completes:

USER ID:	PASSWORD:
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