

WHICH FORM(S) SHOULD I DO?

- Providers can complete the EDI Express Enrollment online by clicking <u>here</u>.
 - o Select that you are a healthcare provider
 - Select the EDI transaction: 5010 837 Professional Claim Inbound (CMS 1500)
 - o Enter Office Ally's Trading Partner ID 98366 and click Validate
 - Select IOWA J5 B
 - Review the Mock Agreement
 - o Complete the contact information
 - Enter the following information for the Clearinghouse Information:
 - Name: Office Ally
 - First Name: Customer
 - Last Name: Service
 - Contact Title: Customer Service
 - Phone Number: (360) 975-7000
 - Email: <u>Support@officeally.com</u>
 - Enter your Business Information
 - Use a valid physical address for the business
 - Enter the provider's identifying information (NPI/Tax ID/PTAN)
 - o Click Complete & Submit to sign the agreement

WHAT IS THE TURNAROUND TIME?

You will receive an email with confirmation of your enrollment within 30-45 minutes

HOW DO I CHECK STATUS?

 Once you receive confirmation that you have been linked to Office Ally, you MUST email <u>Support@officeally.com</u> with the below information PRIOR to submitting claims electronically.

Email Subject: MEDICARE IOWA (05102) - EDI Approval

Body of Email:

Please log my EDI approval for MEDICARE IOWA.

- o Provider Name
- o NPI
- o Tax ID