

**WHICH FORMS SHOULD I COMPLETE?**

- Go to <https://enrolledi.ngsmedicare.com/enrollment> and accept the Attestation. (For detailed enrollment instructions, reference the [NGS Enrollment Instructions](#))
- Select 'Start Enrollment Process' under Step 1.
- Select box titled 'Provider' or 'Billing Service' (whichever is applicable) and click on 'Next' at the bottom of the screen.
- From the System Access screen, select the box titled 'I want to complete an EDI Registration Form' and click on 'Next' at the bottom of the screen.
- From the Select Contractor Code drop-down, select: **14212 – JK Part B MA** and click on 'Next' at the bottom of the screen.
- The EDI Registration Form is presented on the screen:
  - In the Provider section, enter all information relevant to you.
  - In the What Transactions will you Authorize for this Submitter section, select the boxes for the transactions for which you're enrolling. (Office Ally is approved for the 837 and 835 transactions.)
  - In the PTAN/NPI Information section, enter the appropriate information.
  - In the Trading Partner Information section:
    - Select **Link to Third Party** from the drop-down
    - Select **Clearinghouse** from the Submitter Type drop-down
    - Enter '**7166**' in the Trading Partner ID box. Once entered, information pertaining to the Office Ally clearinghouse will automatically populate on the screen.
      - Contact Name: Cara Trahey
      - Title EDI Enrollment Manager
      - Email: [payerenrollment@officeally.com](mailto:payerenrollment@officeally.com)
      - Phone: 360-975-7000
- Complete the Authorized Signature section and click on 'Submit' at the bottom of the form.
- Once submitted, you'll be presented with a **Packet ID number**. **Make note of this number**, as you will use this number to check on the status of your enrollment.

## WHAT IS THE TURNAROUND TIME?

- Standard Processing Time is 1 to 2 weeks.

## HOW DO I CHECK STATUS?

- You can check the status of your enrollment [here](#) and entering the Packet ID number which was assigned at the time you submitted the enrollment form.
- You can also call NGS Medicare at (877) 273-4334 and ask if you have been linked to our Submitter ID
- For claim enrollments, once you receive confirmation that you have been linked to Office Ally, you MUST email [payerenrollment@officeally.com](mailto:payerenrollment@officeally.com) PRIOR to submitting claims electronically.
  - o Email Subject: Medicare Massachusetts Part B (14212) – EDI Approval
  - o Body of Email:
    - Please log my EDI approval for Medicare Massachusetts Part B
    - Provider Name
    - NPI
    - Tax ID
    - PTAN