

**WHICH FORMS SHOULD I COMPLETE?**

- Submit an email to [payerenrollment@officeally.com](mailto:payerenrollment@officeally.com) as follows:
  - o Email Subject: Providence Health Plan (PHP01) ERA Enrollment Request\_(insert your billing NPI)
  - o Email Body:
    - Hi, please process my ERA Enrollment request for Providence Health Plan with the following details:
      - Provider Name:
      - Provider NPI:
      - Provider TIN:
      - Provider Contact Name:
      - Provider Contact Email:

**WHAT IS THE TURNAROUND TIME?**

- Standard Processing Time is 7 Business Days.

**HOW DO I CHECK STATUS?**

- After you submit the email, the payer will process the request and notify Office Ally of the ERA Enrollment approval. Office Ally will convey the approval once we have received confirmation from the payer.