

HealthPartners MN (HEALTHPARTNERS-MN) PRE-ENROLLMENT INSTRUCTIONS

WHICH FORMS SHOULD I COMPLETE?

Send an email to support@officeally.com with the following information.

- o Subject Line: Health Partners MN ERA Pre-enrollment request
- o Provider's Legal Name
- o Provider's Specialty
- o Billing Address/City/State/Zip
- o Physical Address if different from Billing
- o Phone Number
- o Fax Number
- o Contact Person's Name
- o Provider's Email Address
- o Tax ID
- o Billing NPI
- o Is the request for Professional Claims (List "Yes" or "No")
- o Is the request for Institutional Claims (List "Yes" or "No")
- o ERAs (List "Yes" or "No")
- o Eligibility Transactions (List "Yes" or "No")

WHAT IS THE TURNAROUND TIME?

- Standard Processing Time is 5 business days
- You will receive an email from Office Ally once approved

HOW DO I CHECK STATUS?

Send an email to <u>support@officeally.com</u> OR Call (360) 975-7000 Option 1 and ask if you have been approved for EDI submissions to Health Partners MN or are set up to receive ERAs.