

**WHICH FORMS SHOULD I COMPLETE?**

If you do not already have an account, you must complete the [online enrollment registration](#).

Before you begin, please have the following available:

- **National Provider Identifier (NPI)**
- **Tax Identification Number (TIN)**
- **PIN** from the PIN letter mailed to your organization
- **Email address**

**1. Enter Required Information**

Provide your Provider Details, NPI, TIN, and PIN.

- If you have not received your PIN letter, contact **DCEDI@gainwelltechnologies.com**. Please include:
  - Provider name
  - Medicaid ID or NPI
  - Service address
- You may also call the Contact Center at **(844) 366-4237**, Monday–Friday, **8:00 a.m. – 5:00 p.m. EST**.

**2. Complete Security Setup**

Complete identity verification, create your password, and enable multi-factor authentication (MFA).

**3. Review and Confirm Your Profile**

Log in and confirm or update your profile information, including addresses, service locations, and taxonomy.

**4. Add Users and Enroll in ERA**

Invite staff users, assign appropriate roles, and (recommended) enroll in Electronic Remittance Advice (ERA).

**ONCE YOU ARE REGISTERED:****For Claims (837):**

1. You will navigate to the top right corner of the [home page](#) and click [Sign In](#).
2. You will now associate billing agents in the portal.
  - a. Select Trading Partner Account
  - b. Select Manage Billing Agents
  - c. Select our Trading Partner ID (**Office Ally- DCTPID000736**) from the drop-down menu

**If you are also enrolling in ERA (835):**

1. Select **EDIT ERA** from the **Manage Providers** window
2. Complete Electronic Remittance Advice Information
  - a. **Demographic & User Information**  
Complete all required demographic and user detail fields.
  - b. **Remittance Data Aggregation Preference**  
Select **National Provider Identifier (NPI)** as the aggregation preference.
  - c. **NPI Confirmation**  
Enter and/or confirm the appropriate **NPI**.
  - d. **Method of Retrieval (Optional)**  
Select **Generate 835**.
  - e. **835 Receiver Selection**  
Choose **Office Ally** as the 835-receiver.
  - f. **Reason for Submission**  
Select **New Enrollment**.
  - g. **Authorized Signature**  
Enter the electronic signature of the individual authorized to approve the ERA agreement.
  - h. **Requested ERA Effective Date**  
Enter **today's date**.
  - i. **Submit Enrollment**  
Select **Submit** and follow the on-screen prompts to confirm and agree to the terms and conditions.

**WHAT IS THE TURNAROUND TIME?**

- Standard processing time is 7 business days

**WHEN CAN I BEGIN SUBMITTING ELECTRONIC CLAIMS (837)?**

- Call Gainwell at **(844) 366-4237** and ask if you are linked to Office Ally's Trading Partner Number DCTPID000736.
- **Once the Claims (837) enrollment has been approved, you MUST notify Office Ally at [payerenrollment@officeally.com](mailto:payerenrollment@officeally.com) PRIOR to submitting claims electronically. Please include the following details:**
  - o **SUBJECT LINE:** Medicaid District of Columbia EDI Approval – NPI (Insert NPI)
  - o **BODY OF EMAIL:**
    - Please add our EDI approval for Medicaid Washington (District of Columbia) to your system:
    - Provider Name:
    - TIN:
    - NPI: