



Office Ally

MEDICARE TENNESSEE - PART B (MR034) EDI-ENROLLMENT INSTRUCTIONS

WHICH FORMS SHOULD I COMPLETE?

- [Palmetto GBA EDI Online Enrollment](#)
- Select your State: **TN**
- Customer Type: **Existing**
- Action Type: **Add provider to an existing Submitter ID**
- Click **Next**
- Choose your Option: **Change Clearinghouse or Billing Service**
- What transaction(s) do you want the EDI Submitter to perform: If you wish to only enroll for Claims check **Submit Claims**, or if you wish to enroll for both claims and remittance also click **Receive Electronic Remittances**
- Click **Next**
- Complete the Provider Information & Contact Information sections
- Submitter Information
 - o Submitter ID: **TN200864**
 - o Receiver ID: **TN200864**
 - o Submitter Name: **Office Ally, Inc**
 - o Type of Submitter: **Clearinghouse**
- Click **Next**
- Complete the Provider Authorization Form, review and click **Submit**
- Document the tracking number to be used to check status

WHAT IS THE TURNAROUND TIME?

- Standard Processing Time is 15 business days

HOW DO I CHECK STATUS?

- Check on the enrollment status through the [EDI Enrollment Status Tool](#) using the tracking number from your submitted enrollment.
- For claim enrollments, once you receive confirmation that you have been linked to Office Ally, you **MUST** contact Customer Support at (360) 975-7000 option 1 or Support@officeally.com PRIOR to

submitting claims electronically.

- Email Subject: Medicare Tennessee Part B (MR034) – EDI Approval

- Body of Email:

 - Please log my EDI approval for Medicare Tennessee Part B

 - Provider Name
 - NPI
 - Tax ID
 - PTAN