

MEDICARE MICHIGAN PART B (08202) PRE-ENROLLMENT INSTRUCTIONS



WHAT FORM(S) SHOULD I DO?

- Providers can complete the EDI Self Registration on line by clicking [here](#).
 - Enter email
 - Division (Medicare)
 - Provider PTAN (Provider Transaction Access Number)
 - Provider NPI
 - Provider Name
 - Office Ally submitter ID: 98366
 - Submitter Name: Office Ally, Inc
- Once Self Registration has been completed, you will receive and email agreement that will need to be completed.
 - The agreement must be signed by the provider listed on the registration.
 - The signed agreement form must be named using the unique **Tracking ID** as the file name.

WHERE SHOULD I SEND THE FORM(S)?

- Upload signed agreement to the WPS Managed File Transfer (MFT) system at:
<https://edi.wpsic.com/Transfer/cfcc/login/login.jsp>
- For both the **User Name** and **Password** use the same value of **EDIEnroll#17**.

WHAT IS THE TURNAROUND TIME FOR ENROLLMENT?

- Email confirmation with the turnaround time will be emailed to you from WPS after each step of the enrollment.

HOW DO I CHECK STATUS?

- Once you receive confirmation that you've been linked to Office Ally, you must email support@officeally.com with the below information prior to submitting claims electronically.

Email Subject: MEDICARE MICHIGAN PART B (08202) - EDI Approval

Body of Email:

Please log my EDI approval for MEDICARE MICHIGAN PART B.

- Provider Name
- NPI
- Tax ID