

**WHICH FORMS SHOULD I COMPLETE?**

- PEHP (SX106) EDI-Enrollment Form (Page 2)

**WHERE SHOULD I SEND THE FORM(S)?**

- Email the completed form to [UHN.ERA@officeally.com](mailto:UHN.ERA@officeally.com)
  - o **Subject Line:** PEHP – EDI/ERA Enrollment\_(Insert your NPI)
  - o **Email Body:** Please process my attached enrollment request for PEHP.
- You will receive an auto-generated email with a case number, which will be used for tracking your enrollment progress.

**WHAT IS THE TURNAROUND TIME?**

- You should receive confirmation your request has been processed by Office Ally and forwarded to the Payer for approval within 2-5 business days.
- Our team will relay notice of the Payers approval as soon as we receive an update, which may take up to 30 days after submission.

**HOW DO I CHECK STATUS?**

- If you have not received a follow-up/resolution within the expected timeframes listed above, please reply to the original auto-generated case confirmation to request an update.



## PROVIDER INFORMATION

Provider Name:

Provider Address:

## PROVIDER IDENTIFIER INFORMATION

Tax Identifier (TIN or EIN):

National Provider Identifier (NPI):

## PROVIDER CONTACT INFORMATION

Provider Contact Name:

Telephone Number:

Email Address:

## TRANSACTIONS REQUESTED

Please check your desired transaction types below:

Institutional Claims/837P

Professional Claims/837P

Electronic Remittance Advice (ERA)/835

## SUBMISSION INFORMATION

Authorized Signer Name:

Authorized Signature:

**NOTE:** *Electronic Signature (typed name) of person submitting ERA Enrollment*