

# VAPCCC REGION 3 (VAP03) PRE-ENROLLMENT INSTRUCTIONS



## WHAT FORM(S) SHOULD I DO?

- Providers can complete the EDI Express Enrollment on line by clicking [here](#).
  - Select that you are a healthcare provider
  - Select the EDI transaction for which you will be submitting:
    - 5010 837 Institutional Claim Inbound (UB-04)
    - 5010 837 Professional Claim Inbound (CMS 1500)
  - Enter Office Ally's Trading Partner ID **98366** and click Validate.
  - Select VA CHOICE & PC3 PROGRAMS
  - Review the Mock Agreement
  - Complete contact information
  - Enter the following information for the Clearinghouse Information
    - Name: Office Ally
    - First Name: Customer
    - Last Name: Service
    - Contact Title: Customer Service
    - Phone number: (360) 975-7000
    - Email: [Support@officeally.com](mailto:Support@officeally.com)
  - Enter your Business information
    - Use **valid physical address** for the business
  - Enter Tax ID
  - Click **Complete & Submit** to sign the agreement

## WHAT IS THE TURNAROUND TIME FOR ENROLLMENT?

- You will receive an email with confirmation of your enrollment within 30-45 minutes.

## HOW DO I CHECK STATUS?

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

**Email Subject:** VAPCCC REGION 3 (VCP03) - EDI Approval

**Body of Email:**

Please log my EDI approval for VAPCCC REGION 3.

- Provider Name
- NPI
- Tax ID
- Line of business (837P/837I)