

BLUE CROSS BLUE SHIELD VERMONT (BCSVT) ERA ENROLLMENT INSTRUCTIONS



WHAT FORM(S) SHOULD I DO?

- [Electronic Data Interchange \(EDI\) 835 Enrollment and Change Form](#)
 - Vendor/Clearinghouse Name: Office Ally
 - Vendor/Clearinghouse Contact: Customer service
 - Primary Contact Telephone Number: (360) 975-7000 Option 1
 - Primary Contact E-Mail Address: Support@officeally.com
 - Existing Submitter ID Number: 7230

WHERE SHOULD I SEND THE FORM(S)?

- The form is submitted online

HOW DO I CHECK STATUS?

- Call BCBS Vermont at (800) 247-2583 and ask if you have been linked to Office Ally for ERA's.