

**WHICH FORMS SHOULD I COMPLETE?**

- **835 Enrollment Information Form** (Pg. 2)

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

- The completed **835 Enrollment Information Form** can be emailed to [edisupport@allcaretoyou.com](mailto:edisupport@allcaretoyou.com)

**HOW DO I CHECK STATUS?**

- Standard processing time can take up to 10 business days.

**HOW DO I CHECK STATUS?**

- If you have not started receiving your (ERA) Electronic Remittance Files after the allotted timeframe, you can reach out to [edisupport@allcaretoyou.com](mailto:edisupport@allcaretoyou.com) to confirm if you are now approved with Office Ally for the 835/ERA transaction.



## 835-ENROLLMENT INFORMATION FORM

### 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:

### PAYER NAME

Name of Payer Enrolling:

### SUBMISSION INFORMATION

Authorized Signer Name & Title:

Authorized Signature:

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