

WHICH FORMS SHOULD I COMPLETE?

- EMI Health (SX110) ERA-Enrollment Form (Page 2)

WHERE SHOULD I SEND THE FORM(S)?

- Email the completed form to UWIN.ERA@officeally.com
 - o **Subject Line:** EMI Health ERA Enrollment_NPI (Insert your NPI)
 - o **Email Body:** Please process my attached enrollment request for EMI Health.
- 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?

- Standard Processing Time is 30-45 days.

HOW DO I CHECK STATUS?

- Office Ally will email you a confirmation when the enrollment has been entered. If the enrollment receives a rejection from the Payer, we will notify you within the standard turnaround time frame.
- If you have not received a status update within the allotted turnaround time frame, please reply to your original case number email received.

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:

Fax Number:

Email Address:

ELECTRONIC REMITTANCE ADVICE INFORMATION

Preference for aggregation of remittance data:

Tax ID Number (TIN)/National Provider Identifier (NPI)

National Provider Identifier (NPI)

NOTE: Account number linkage to provider identifier should match preference for EFT payments**SUBMISSION INFORMATION**

Reason for Submission:

Authorized Signature:

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