

WHICH FORMS SHOULD I COMPLETE?

This Payer requires both ERA & EFT to receive the payments electronically. EFT and ERA are supported at the Provider TIN level. All providers billing under that TIN will be enrolled in the EFT/ERA process.

This is a Two-Step Enrollment Process:

1. First you must complete the enrollment on the MagnaCare Website. Follow the instructions below:
 - a. Go to <https://clm.magnacare.com/MGProviderclms/Login.aspx>
 - i. If the Provider is already a user, then enter Username/Password.
 - ii. If the Provider is not already a user, click 'Registration For First Time Users' and obtain a Pin from MagnaCare to continue with the registration.
 - b. Once logged in, go to Forms- ERA/EFT Application
 - c. (Leave blank: Method of Retrieval & Vendor Information)
 - d. Choose **Clearinghouse**
 - i. Clearinghouse Name: **Trizetto Provider Solutions LLC**
 - ii. Contact Name: **PE Enrollment**
 - iii. Phone Number: **800-969-3666**
 - iv. Email Address: support@madakethealth.com
 - v. Fax Number: **617-274-8745**
 - e. The ERA TP/Receiver: Enter '**Clearinghouse**'
2. Once the payer has notified you of the approval, you **must** complete the following form and email it to Office Ally:
 - a. **MEDICAL OFFICE PROVIDER ENROLLMENT FORM**
 - o You must complete:
 - Group Information and Provider Information Sections
 - Service Location Address
 - Pay To Address (if different)

WHERE SHOULD I SEND THE FORM(S)?

1. After you receive approval from the payer, email payerenrollment@officeally.com with
 - o Subject: MagnaCare ERA Enrollment_(insert NPI)
 - o Email Body: MagnaCare has approved my ERA Enrollment on xx/xx/xxxx. Please process my Medical Office Provider (MOP) Enrollment Form.

WHAT IS THE TURNAROUND TIME?

- Standard Processing Time is 15-30 business days.

HOW DO I CHECK STATUS?

- Office Ally will email once we have confirmation from the vendor that Step 2 is completed.