

WHICH FORMS SHOULD I COMPLETE?

- Complete the **North Dakota Medicaid 835 Enrollment Form** (Pages 2-3)

HOW SHOULD I SUBMIT THE FORM(S)?

- You can submit the form by:
 - o Emailing it to ndmmisedi@nd.gov
 - OR
 - o Faxing it to (701) 328-6062 (ATTN: EDI-835)

HOW DO I CHECK STATUS?

- You may call the EDI department at (844) 848-0844 or email ndmmisedi@nd.gov to check on your ERA Enrollment status

By Completing the "Printed Name of Person Submitting Enrollment", the submitting individual is attesting and acknowledging on behalf of North Dakota Medicaid Provider listed above that:

- He or she is authorized to complete and submit this 835 Enrollment Form.
- The indicated Trading Partner is authorized to receive the 835 ERA for the listed Provider.
- The Information provided is accurate and true.
- North Dakota Medicaid will not exchange the 835 transactions with a Trading Partner on behalf of Provider without this Enrollment Form.
- The Trading Partner must have an active Trading Partner Agreement with North Dakota Medicaid or this 835 Enrollment Form is null and void.
- Any changes to the Provider NPI will require an updated 835 Enrollment Form.
- This information will be kept current by completing a new 835 Enrollment Form as necessary.

* By entering an "X" in this box, means I have read and agree to all the terms and conditions stated above.

If you have questions or to check the status of this ERA enrollment, please contact the North Dakota EDI Help Desk at:
1-844-848-0844 or ndmmisedi@nd.gov

ATTN: EDI 835 Enrollment
ND Department of Human Services
600 E Boulevard Ave
Bismarck ND 58505-0250

After completing the form, save a copy, and email as an attachment to ndmmisedi@nd.gov.