

# MEDICARE INDIANA (MR089) ERA ENROLLMENT INSTRUCTIONS



## WHAT FORM(S) SHOULD I DO?

- Providers can complete ERA Self Registration on line by clicking [here](#).
  - Enter Email
  - Division (Medicare)
  - Select Line of Business (Medicare Indiana B - 08102)
  - Office Ally submitter ID: ZH2C0000
  - Submitter Name: Office Ally, Inc
  - Provider PTAN
  - Provider NPI
  - Provider Name
- Click Submit to submit the form for review and processing.

**Note:** You will receive emails from WPS Community Manager to complete the ERA Agreement and EFT enrollment if requested. Use the below information in regards to Office Ally for the clearinghouse section of your ERA agreement.

- DEG 2: Trading Partner ID – ZH2C0000
- DEG 7: Method of Retrieval – Clearinghouse
- DEG 8: ERA Clearinghouse information.
  - Clearinghouse Name: Office Ally, Inc
  - Clearinghouse Contact Name: Customer Service
  - Telephone Number: (360) 975-7000 Option 1
  - Email Address: support@officeally.com

## WHAT IS THE TURNAROUND TIME FOR ERA ENROLLMENT?

- Standard processing time 15 to 30 days.

## HOW DO I CHECK STATUS?

- After 30 days you may call WPS at (800) 782-2680 and verify if you are linked to Office Ally's submitter number ZH2C0000 for ERAS.