



OPTUM 835 ENROLLMENT REQUEST

Email this form to Support@officeally.com or Fax to (360) 896-2151. Once your form is received and processed, Office Ally will email you a confirmation. If you do not receive a confirmation email from us within 2-3 business days or faxing or emailing this form, please send it again. Please make sure to print legibly and to complete this form in its entirety. You risk delaying enrollment if the application is unreadable or incomplete. All fields in **bold** are **required**.

PROVIDER INFORMATION

Provider Name:

Provider Address:

City:

State:

Zip:

PROVIDER IDENTIFIERS INFORMATION

**Provider Federal Tax Identification Number
Employer Identification Number (EIN):**

National Provider Identifier (NPI):

PROVIDER CONTACT INFORMATION

Contact Name:

Telephone Number/Extension:

Email Address:

Fax Number:

SUBMISSION INFORMATION

Reason for Submission:

Authorized Signature:

Note: Electronic Signature (Typed Name) of Person Submitting ERA Enrollment.

NOTE: If you have received ERA's from these payers through another clearinghouse, you may be prompted via email from your previous clearinghouse to confirm the change. If you do not confirm the change, enrollment will be delayed.

This form can be used to enroll for ERAs from any of the following payers. Check all that apply.

Payer ID	Payer Name	Payer ID	Payer Name
36273	AARP (Insured by UnitedHealthcare)	45281	Riverside Health Inc.
26119	American Insurance Administrators (AIA)	83035	Senior Whole Health
77799	AmeriHealth Caritas Delaware	76342	Sierra Health Services / Health Plan of NV
20488	Better Health Plan of Florida	76048	Texas Childrens Health Plan
87726	Care Improvement Plus (CIP) / XL Health	75228	Texas Childrens Health Plan Medicaid
10629	Christus Health Medicare Advantage	39026	UMR (formerly Wausau/UHIS)
65391	CBHNP - Health Choice	37602	United HealthOne / Golden Rule
13285	Clover Health	81400	United HealthOne / UnitedHealthcare Life Insurance
COACC	Colorado Access	87726	UnitedHealthcare
PROH1	Dignity Health - Mercy MG / Woodland	81400	UnitedHealthcare / All Savers Insurance
44054	GEHA / Texas Dental Plan	87726	UnitedHealthcare / MAHP - MD IPA - Optimum - MLH (MAMSI)
77950	Health Alliance Medical Plans	03432	UnitedHealthcare Community Plan / AZ (APIPA)
22100	Health Choice Integrated Care	04567	UnitedHealthcare Community Plan / DE, FL, HI, LA, MA, MD, NM, OH, PA, VA, WA
96475	Healthlink HMO	95378	UnitedHealthcare Community Plan / IA, MS CAN & CHIP, TN
3135M	Mdwise Healthy Indiana Plan	96385	UnitedHealthcare Community Plan / KS
3519M	Mdwise Hoosier Healthwise	95467	UnitedHealthcare Community Plan / MI
94265	Medica and Medica UHC	86050	UnitedHealthcare Community Plan / MO
78857	Medica HealthCare Plans / FL	UFNEP	UnitedHealthcare Community Plan / NE
MAHP1	Medical Associates Health Plan	86047	UnitedHealthcare Community Plan / NJ
74323	Medical Benefits Mutual	NYU01	UnitedHealthcare Community Plan / NYU
75190	NCAS - Fairfax Virginia	TEX01	UnitedHealthcare Community Plan / TX
87726	Neighborhood Health Partnership	WID01	UnitedHealthcare Community Plan / WI
39144	Network Health Plan of WI	95378	UnitedHealthcare Plan of the River Valley
91068	Northwest Administrators	00773	UnitedHealthcare Vision / Spectera
41194	OptumHealth Complex Medical Conditions (CMC)	95959	UnitedHealthcare West / CA, OK, OR, TX, WA - PacifiCare of AZ, CO, NV
41161	OptumHealth Physical (Includes Oxford)	VACCN	VA Community Care Network