# PRIMEWEST HEALTH SYSTEMS (61604) ERA ENROLLMENT INSTRUCTIONS



Phone: 360-975-7000

Fax: 360-896-2151

# WHAT FORM(S) SHOULD I DO?

PrimeWest Health Electronic Remittance Advice (ERA) Authorization Agreement.

# WHERE SHOULD I SEND THE FORM(S)?

• Submit the ERA Authorization Agreement using the "Submit" button or print the ERA Authorization Agreement using the "Print" button and return it to PrimeWest Health.

Attn: Claims Department/Accounts Payable PrimeWest Health 3905 Dakota St Alexandria, MN 56308

• Fax form to: (360) 762-1805

Note: If using Google Chrome, you will need to "Save As" prior to clicking on the "Submit" button.

### WHAT IS THE TURNAROUND TIME FOR ERA ENROLLMENT?

Standard processing time is 14 days.

### **HOW DO I CHECK STATUS?**

• After 14 days, you may call (866) 431-0802 to verify if you are linked to Office Ally for ERAs.