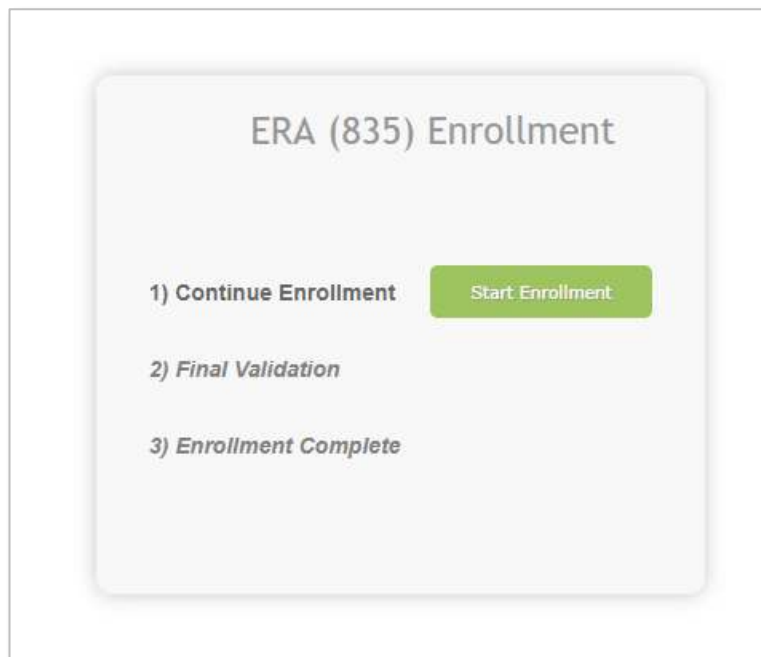


ERA ENROLLMENT

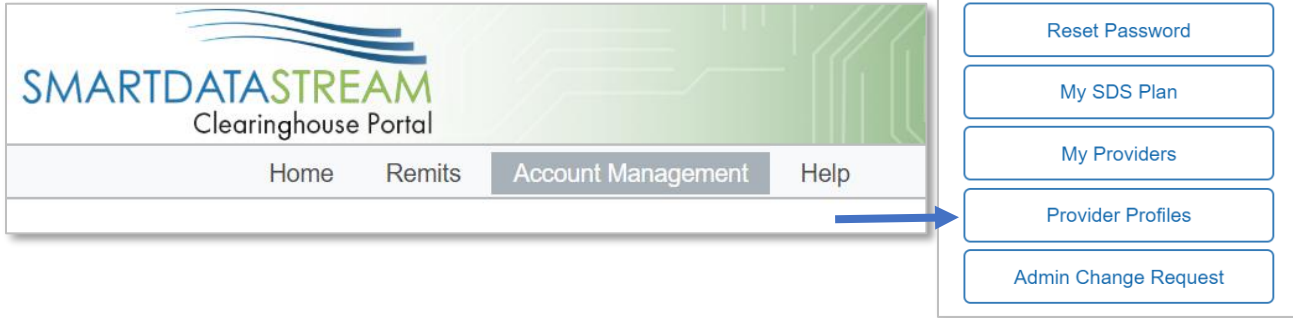
- Providers can create an account with this link – [SDS Account Creation](#)
-

STARTING ERA ENROLLMENT

- After you've logged in and changed your password, you should be immediately prompted to start your ERA enrollment.

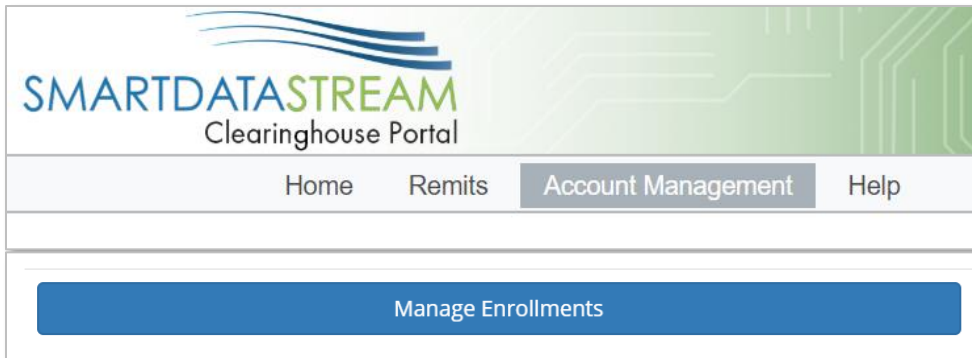


- If the above screen does not automatically appear you can select Account Management at the top bar. Then select Provider Profiles



OR

- Select Remits at the top bar then Manage Enrollments



ENROLLMENT FORM

Profile

Profile Nickname

Provider Information

* Name
Test Provider T1000

Doing Business As (DBA)

* Address Line 1

Address Line 2

Provider Identifiers Information

* Tax Identification Number (TIN) * Verify TIN:

National Provider Identifier (NPI) Verify NPI:

Trading Partner ID

Provider Contact Information

* Last Name * First Name

test test

* Contact Phone

(651) 555-5555 x55555

Contact Fax

Profile Name will not affect your ERAs and is only for labeling enrollments on your account

Don't forget to verify your tax ID

NPI is not required for your ERA enrollment. If left blank, you will receive ERAs for all NPIs associated with the Tax ID you enroll

Trading Partner ID is not required if you do not have one

Fax may be left blank if unavailable

- Under Payer Selection select "or select individual payers" You will then see the screen below:

Select Payers
✕

Click on the following alphabets to search by payer name.

All A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Show entries

Select Payer	Payer Name	Payer ID
G		
<input type="checkbox"/>	Government Employees Hospital Association (GEHA) (Not VA)	44054

Showing 1 to 1 of 1 entries (filtered from 54 total entries)

Previous 1 Next

Save Payers

- Select Clearinghouse

Payer Selection


[...or select individual payers](#)

Payer Name	Payer ID	Clearinghouse Name	Actions
Government Employees Hospital Association (GEHA) (Not VA)	44054	<input style="width: 100%;" type="text" value="DentalXChange"/>	Apply All ✕

- The form will automatically have New Enrollment selected. If you click Save Progress and then come back to it, it will say Change Enrollment.
 - This does not affect your enrollment and only indicates that this is no longer the first time you are accessing this form.
- Type in your name for the signature.


- For the effective date, the soonest date available will be three days after the submission date. Any payments you receive after that submission date will have a corresponding ERA sent to your account.

Submission Information


Reason for SUBMISSION 

New Enrollment
 Change Enrollment
 Cancel Enrollment

Authorized Signature

* Signature 

Submission Date
2019-08-27

* Requested ERA Effective Date 

[SAVE PROGRESS](#)

[SUBMIT](#)

- After you click Submit it will redirect you to a page that looks like this. If you see this page, you have successfully submitted your ERA enrollment.

Account Management

This page is for maintaining account wide preferences such as viewing or re-issuing your API key, or managing payment methods.

- Users
- Reset Password
- Provider Profiles**
- Admin Change Request

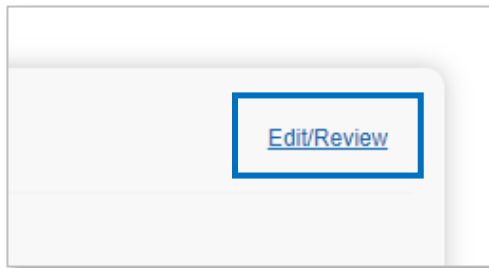
Provider Profiles

Test 111111111 [Edit/Review](#)

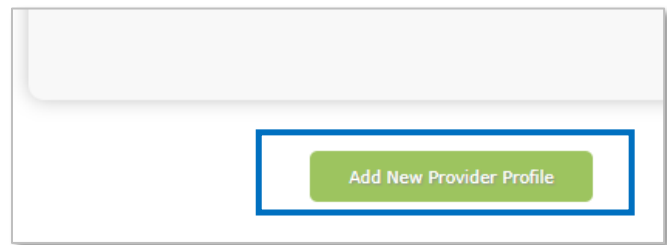
Current Status: Complete

[Show Details](#) [Delete Provider Profile](#)

[Add New Provider Profile](#)



- To change contact information, add or remove payers, change retrieval method, or cancel your enrollment you can click on Edit/Review



- To enroll additional tax ID's or NPI's click Add New Provider Profile