

## Wisconsin Medicaid 835

### EDI Enrollment Instructions:

- To link with the clearinghouse for ERA, **the provider is to access the payer's website** and complete the appropriate form. Use the link provided below to access the Forward Health portal.
- Complete the form using the provider's **billing/group information as credentialed** with this payer.
- **Complete a form for each Billing Provider number.**
- Once completed, save for your records, print and obtain appropriate signature(s).
- EDI enrollment processing timeframe is **approximately 10 business days.**
- To check status of EDI enrollment, please contact the **Medicaid EDI Helpdesk at 866-416-4979.**

### 837 Claim Transactions:

EDI enrollment applies to ERA only and is not necessary prior to sending claims.

### 835 Electronic Remittance Advice:

Access the [Forward Health Portal](#).

Click on Trading Partner 835 Designation **Form** link.

Complete the form as appropriate, using the information provided below.

Name – Trading Partner = **ClaimRemedi**

Trading Partner Identification Number = **100001639**

Print and obtain appropriate signature

### Submit Completed Document

Fax to Forward Health

**608-221-0885**