Arizona Medicaid
AHCCCS
835

EDI Enrollment Instructions:

- Please save this document to your computer. Open the file in the Adobe Reader program and type directly onto the form.
- Arizona Medicaid - AHCCCS requires that ERA setup requests be submitted directly **by the provider or provider's office only**.
- Arizona Medicaid – **AHCCCS will notify the provider by email,** that the ERA enrollment process has been initiated.
- The welcome email will contain **username/password account information** and direct the provider to the **AHCCCS Community Manager Web Portal** to activate an account and **complete electronic forms.**
- The provider will be asked to define their affiliation with eSolutions. Our Trading Partner number with Arizona Medicaid is **00194**.
- A final email will be generated to the Provider and the clearinghouse indicating when to expect to receive the first 835 file for the provider.

837 Claim Transactions:

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

835 Electronic Remittance Advice:

Complete the fields below.

Submit Completed Request: Provider or provider's office must click "Submit by E-Mail" to generate the ERA E-Mail request.