



Claims Enrollment Instructions

Medicaid of Iowa

Attention Providers:

Medicaid of Iowa has developed an interactive enrollment tool called EDISS Connect required for all providers to submit electronically to the payer. Begin your online enrollment today by printing out this informational document and clicking on the following link:

<https://connect.edissweb.com>

Payer:	Medicaid of Iowa
Payer ID:	CKIA1
For Enrollment Questions:	Contact the EDS Enrollment Department at (800) 482-3518 or Enrollment@edsedi.com
Payer Enrollment Application:	EDISS Connect Online Registration
Approval Process and Timeframe:	Log back on to your EDISS Connect account 7-10 business days after you submit your enrollment request to check status. Once enrollment is approved, please contact Enrollment at (800) 482-3518 or Enrollment@edsedi.com to complete your enrollment.
Special Instructions:	Please see the steps below for step-by-step instructions on how to enroll for electronic claim submissions for Medicaid of Iowa. *if you think you have an account with Medicaid of Iowa please contact them 800-967-7902 to start your enrollment Once you have completed online enrollment please contact us to provide us your Submitter ID at 800-482-3518.

800.482.3518

400 Vermillion St . Hastings. MN 55033

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Step 1:	Log into the Provider Portal or Register at https://connect.edissweb.com
Step 2:	For first-time users, select “I’m A Provider”
Step 3:	Choose “Vendor” when asked “Who will manage your account and transactions?”
Step 4:	Choose our Trading Partner ID # CH00184
Step 5:	Log in to your EDISS Connect Account to add transactions by selecting “Add Transaction” from top menu bar.
Step 6:	Enter the NPI(s) and TIN for your office. You must enter each NPI that you will use to submit claims.
Step 7:	Select the state(s) where the NPI(s) you entered will be performing transactions.
Step 8:	Choose “Dental” as the type of transaction and select the line(s) of business.
Step 9:	Select the types of transactions you would like to enroll for in the “Enroll” column. You can enroll for 837 Health Care Claim: Dental and 835 Health Care Claim Payment/Advice. Also, select who will perform transactions and add EDI Health Group Inc (CH00184) as a Vendor for that transaction.
Step 10:	To view the EDI Enrollment Form, click the EDI Enrollment Terms and Conditions link. To accept the EDI Enrollment Form, check the I agree to the EDI Enrollment Terms and Conditions box. Click Continue.