

Overview

Dental providers can now use the Availity registration wizard to complete the web portal registration process for access to eligibility, benefits, claim status, and remittances for members of Florida Blue's Federal Employee Program (FEP).

HOW DO I GET STARTED?

Use this unique URL to begin the wizard: www.availity.com/FEPdental

WHAT DO I NEED TO DO?


A person who has legal authority to sign agreements for your organization must complete the steps below. Availity calls this person the **Primary Controlling Authority (PCA)**.

Before you begin, gather your organization information, tax ID, NPI, and a recent Florida Blue check (dated 6 months prior to the current date).

Don't have an NPI? Apply here: <https://nppes.cms.hhs.gov/>

1. Identify a person who will perform administrative tasks in the Availity Web Portal, Availity calls this person the **Primary Access Administrator (PAA)**.
2. Enter a valid Florida Blue check number and check amount.
3. Electronically accept the **Organization Access Agreement (OAA)**.

Partial screenshot of the first page of the registration wizard


Registration

Tell Us About Yourself
Select Your Administrators
Submit Your Registration
Next Steps

Tell us about yourself:

Do you have an Availity account? ☐ Yes ☒ No

To register a dental organization, you need a recent payment from the health plan to complete this process.

First Name:

Last Name:

Phone:

-

-

ext.

E-mail Address:

Re-enter E-mail Address:

Create a User ID:

6-15 alpha numeric characters

Tell us about your organization:

My organization is a: ☒ Dental Org

☐ Billing Service (Does not include Central Billing Offices)

☐ Technology Company (Practice Management Systems, EMR, Clearinghouse)

☐ Health Plan (and Third-Party Administrators)

Organization Name:

Tax ID:

Select One

Complete Your Registration and Start Using Availity!

After the check information is validated, the PCA can review, accept the Organization Access Agreement (OAA), and then submit the information to complete process.

WHAT HAPPENS AFTER THE PCA SUBMITS THE REGISTRATION?

Availity sends a couple of e-mails that include the application ID and PAA user ID to finalize the process.

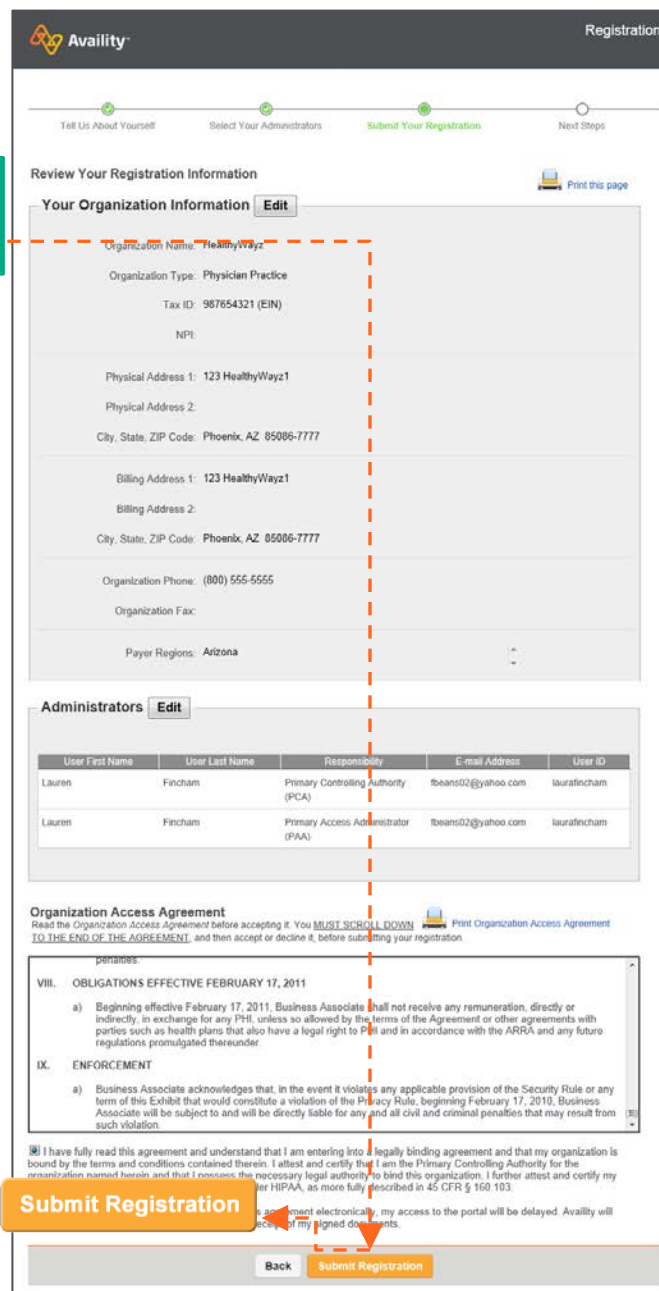
Note: Availity sends the temporary PAA password in a separate e-mail. The temporary password is valid for 90 days.

Important! Before you log in to Availity, please allow Florida Blue up to 72 hours to set up your assigned sender ID in their system.

WHERE DO I LOG IN AND START USING AVAILITY?

After your registration is completed and approved:

1. Go to <http://www.availity.com/>
2. Click [Web Portal Users Login](#) at the top right of the page. Enter your user ID and password to log in to the Availity Web Portal.



Registration

Tell Us About Yourself | Select Your Administrators | **Submit Your Registration** | Next Steps

Review Your Registration Information Print this page

Your Organization Information Edit

Organization Name: HealthyWayz

Organization Type: Physician Practice

Tax ID: 987654321 (EIN)

NPI:

Physical Address 1: 123 HealthyWayz1

Physical Address 2:

City, State, ZIP Code: Phoenix, AZ 05006-7777

Billing Address 1: 123 HealthyWayz1

Billing Address 2:

City, State, ZIP Code: Phoenix, AZ 05006-7777

Organization Phone: (800) 555-5555

Organization Fax:

Payer Regions: Arizona

Administrators Edit

User First Name	User Last Name	Responsibility	E-mail Address	User ID
Lauren	Fincham	Primary Controlling Authority (PCA)	lbeans02@yahoo.com	laurafincham
Lauren	Fincham	Primary Access Administrator (PAA)	lbeans02@yahoo.com	laurafincham

Organization Access Agreement Print Organization Access Agreement

Read the Organization Access Agreement before accepting it. You **MUST SCROLL DOWN TO THE END OF THE AGREEMENT**, and then accept or decline it, before submitting your registration.

penalties:

VIII. OBLIGATIONS EFFECTIVE FEBRUARY 17, 2011

a) Beginning effective February 17, 2011, Business Associate shall not receive any remuneration, directly or indirectly, in exchange for any PHI, unless so allowed by the terms of the Agreement or other agreements with parties such as health plans that also have a legal right to PHI and in accordance with the ARRA and any future regulations promulgated thereunder.

IX. ENFORCEMENT

a) Business Associate acknowledges that, in the event it violates any applicable provision of the Security Rule or any term of this Exhibit that would constitute a violation of the Privacy Rule, beginning February 17, 2010, Business Associate will be subject to and will be directly liable for any and all civil and criminal penalties that may result from such violation.

☒ I have fully read this agreement and understand that I am entering into a legally binding agreement and that my organization is bound by the terms and conditions contained therein. I attest and certify that I am the Primary Controlling Authority for the organization named herein and that I possess the necessary legal authority to bind this organization. I further attest and certify my compliance with HIPAA, as more fully described in 45 CFR § 160.103.

Submit Registration Back

MAKE THE MOST OF YOUR AVAILITY EXPERIENCE!

- Refer to [GET THE MOST OUT OF THE AVAILITY WEB PORTAL](#) to increase your knowledge of Availity.
- Review the [Using the Administrator Dashboard](#) help topic to find information about managing your organization and users.
- Click **Free Training** at the top of any Availity Web Portal page to display the [Availity Training](#) help topic that includes live and recorded webinars!