

# Medicare Enrollment for Physicians, Non-Physician Practitioners and Other Health Care Suppliers

# INFORMATION ABOUT ENROLLING IN THE MEDICARE PROGRAM

Physicians, non-physician practitioners, and other health care suppliers must enroll in the Medicare program to be eligible to receive Medicare payment for covered services provided to Medicare beneficiaries.

The Medicare enrollment application is used to collect information about you and to secure the necessary documentation to ensure you are qualified and eligible to enroll in the Medicare program. Suppliers, other than suppliers of Durable Medical Equipment, Prothetics, Orthotics, and Supplies (DMEPOS), use three different enrollment application forms to enroll or change their Medicare enrollment information. They are:

- Medicare Enrollment Application for Physicians and Non-Physician Practitioners (Form CMS-855I)— This application is used by individual physicians or non-physician practitioners to initiate the Medicare enrollment process or to change their Medicare enrollment information.
- Medicare Enrollment Application for Clinics/Group Practices and Certain Other Suppliers (Form CMS-855B)—This application is used by group practices or other organizational suppliers, except DMEPOS suppliers, to initiate the Medicare enrollment process or to change their Medicare enrollment information.
- Medicare Enrollment Application for Reassignment of Medicare Benefits (Form CMS-855R) —This application is used to initiate a reassignment of a right to bill the Medicare program and receive Medicare payments (Note: only individual physicians and non-physician practitioners can reassign the right to bill the Medicare program).

# **HOW TO ENROLL**

A designated Medicare fee-for-service contractor will process the enrollment application and verify the information provided. During the processing of your application, the contractor may require additional information. It is important to respond to any request as soon as possible. Failure to do so may delay your enrollment.

For certain suppliers, such as Ambulatory Surgical Centers, Portable X-ray Facilities, and Independent Diagnostic Testing Facilities, an onsite survey is required prior to enrollment. For other suppliers, the contractor has the discretion to perform an onsite survey, but is not required to do so.



# **HOW TO REPORT CHANGES**

Physicians, non-physician practitioners, and certain other healthcare suppliers must notify the designated fee-for-service contractor within 90 days of any changes in their enrollment information. Changes of information are submitted on the same application forms used to initiate the Medicare enrollment process. A change of ownership or control must be reported within 30 days.

### WHAT IS PARTICIPATION

In Medicare, "participation" means you agree to always accept assignment of claims for all services you furnish to Medicare beneficiaries. By agreeing to always accept assignment, you agree to always accept Medicare-allowed amounts as payment in full and to not collect more than the Medicare deductible and coinsurance from the beneficiary. Unlike many private insurance plans, the Social Security Act requires you to submit claims for Medicare beneficiaries whether you participate or not.

### BENEFITS OF PARTICIPATION

If you decide to participate in the Medicare program as a participating supplier, submit a participation agreement, using the "Medicare Participating Physician or Supplier Agreement," (Form CMS-460). It should be submitted simultaneously with the Medicare enrollment form. Although you have up to 90 days to submit the agreement, your physician benefits will not start until the agreement is submitted. There is a CMS annual enrollment period, which is generally conducted in November. The benefits of Medicare participation include:

- Medicare reimbursement is 5 percent higher than it is for those who do not participate.
- Medicare payments are issued directly to the physician/supplier because the claims are always assigned.
- Claim information is forwarded to Medigap (Medicare supplemental coverage) insurers.

## **ENROLLMENT AND ENUMERATION**

The National Provider Identifier (NPI) will replace health care provider identifiers in use today in standard health care transactions. Suppliers must obtain their NPI prior to enrolling in the Medicare program. Enrolling in Medicare authorizes you to bill and be paid for services furnished to Medicare beneficiaries.

You may apply for an NPI at https://nppes.cms.hhs.gov or by calling the Enumerator at 1-800-465-3203 or TTY 1-800-6922326.

### **ADDITIONAL INFORMATION**

When you are ready to enroll or make changes to your enrollment information, visit the CMS provider enrollment web site at <a href="http://www.cms.hhs.gov/MedicareProviderSupEnroll/">http://www.cms.hhs.gov/MedicareProviderSupEnroll/</a> to access and download the appropriate Medicare enrollment application, find responses to commonly asked questions, or to find telephone and mailing address information for the fee-for-service contractor serving your area.

Anesthesiology Assistant

Audiologist

Certified Nurse Midwife

Certified Registered Nurse Anesthetist

Clinical Nurse Specialist

Clinical Social Worker

Nurse Practitioner

Occupational Therapist in Private Practice

Physical Therapist in Private Practice

Physician Assistant

Psychologist, Clinical

Psychologist billing independently

Registered Dietitian or Nutrition Professional

Suppliers, other than Durable Medical Equipment Prosthetics, Orthotics and Supplier (DMEPOS), include:

Ambulance Service Supplier

**Ambulatory Surgical Center** 

Clinics/Group Practices

Hospital Departments

Multi-Specialty Clinic

Physical/Occupational Therapy Group in Private Practice

Public Health/Welfare Agency

Single Specialty Clinic

Competitive Acquisition Program (CAP) Part B Drug Vendor

Independent Clinical Laboratory

Independent Diagnostic Testing Facility

Mammography Center

Portable X-ray Facility

Radiation Therapy Center

Slide Preparation Facility

Voluntary Health/Charitable Agency

If your supplier type is not listed above, contact the designated fee-for-service contractor (i.e., carrier) before you complete and submit the Medicare enrollment application.