

## **Medicare Enrollment and PECOS Frequently Asked Questions**

First convened in September 2007, the Chiropractic Summit represents leadership from some 40 organizations within the profession. The Summit meets regularly to collaborate, seek solutions, and support collective action to address challenges with the common goal of advancing chiropractic.

A major focus of the Summit has been to improve practitioner participation, documentation, and compliance within the Medicare system. The article that follows is the eleventh in a series developed by the Chiropractic Summit Documentation Committee.

### **Do I HAVE to enroll in Medicare?**

Yes, if you are going to treat Medicare patients. If you treat Medicare beneficiaries, you must bill for all covered services and, to be able to bill, you must be enrolled.

### **What do I do first?**

You must obtain a National Provider Identifier (NPI) prior to submitting a Medicare enrollment application, as that NPI must be reported on the enrollment application. The preferred method for this is through PECOS, although paper applications are also acceptable.

### **What is PECOS?**

The Centers for Medicare & Medicaid Services (CMS) has created a way for providers to enroll in Medicare online. The system for enrolling online is called the Internet-based Provider Enrollment, Chain and Ownership System (PECOS). If you choose not to complete an enrollment application online, you can submit a paper application to your local contractor and they will create an electronic PECOS enrollment record for you.

### **I am already enrolled with Medicare. Do I need to “re-enroll” through PECOS?**

If you enrolled in Medicare prior to 2003, and have not provided any updates or changes to your enrollment record since 2003, then you will eventually be required to complete an initial enrollment application so that an enrollment record for you is created in PECOS. Your contractor should initiate this process. You may complete this process either via PECOS or the paper CMS-855 form. Please note that, if you have never submitted the CMS-588 Electronic Funds Transfer (EFT) Agreement, you will also have to do this as part of the update/revalidation process.

### **How can I check to see if I have an enrollment record in PECOS?**

You can log into PECOS at <https://pecos.cms.hhs.gov/pecos/login.do> to see whether you have an existing enrollment record. To log into the system, you must have an active National Provider Identifier (NPI) and a web user account (User ID/Password) established in the National Plan and Provider Enumeration System (<https://nppes.cms.hhs.gov/NPPES/>).

### **Can I still submit a paper enrollment application?**

Although CMS is strongly encouraging providers to use the online enrollment process (PECOS), you still have the option of submitting a paper enrollment application.

## **What are the deadlines for enrolling?**

If you are new to Medicare, an initial enrollment application should be submitted as soon as possible. Medicare claims can only be submitted for dates of service up to 30 days prior to the date your application is accepted.

Providers that enrolled in Medicare prior to 2003, and have not completed a Medicare enrollment application since that time, may voluntarily re-enroll. Physicians who choose not to voluntarily re-enroll will be asked to do so by their Medicare contractor. This re-enrollment process is referred to as “revalidation.” Once a revalidation request is received, the provider only has 60 days to respond to their contractor’s request. Providers who do not respond to a revalidation request could face revocation of their billing privileges.

## **What happens if I don’t submit an updated enrollment application when requested?**

Your billing privileges could be revoked, if you do not respond to the revalidation request. Ensuring that CMS has up to date provider enrollment information also impacts other Medicare programs. For example, to participate in Medicare’s EHR incentive program, you must have an enrollment record in PECOS.

## **What if I don’t want to have funds deposited electronically to my bank account?**

You don’t have that choice. Federal regulations require that providers and suppliers receive electronic funds transfer (EFT) at the time of enrollment, revalidation, change of Medicare contractors, or submission of an enrollment change request. Providers must submit the CMS-588 form to receive Medicare payment via electronic funds transfer.

## **I am concerned that the federal government will have access to both deposit and withdraw funds from my account. What should I do?**

If this is a concern, you can set up a separate bank account just for Medicare payments.

## **Once I begin to receive funds electronically, will I also be required to bill Medicare electronically?**

If you have fewer than 10 full time equivalent employees in your office, you are not required to bill electronically.

### **ITEMS TO REMEMBER**

- If you have not submitted an 855i since 2003, you must resubmit the initial enrollment form.
- If you make any changes to your enrollment information, you must submit an update and apply for EFT.
- CMS Regulations state that providers must resubmit and recertify (update) the accuracy of their enrollment information every 5 years.
- If you receive a request to revalidate your enrollment record from your Medicare contractor, respond promptly. Failure to update your record when requested by the contractor can result in a loss of billing privileges.

## **Resources**

CMS Overview of PECOS:

<http://www.cms.hhs.gov/MedicareProviderSupEnroll/Downloads/OrganizationOverview.pdf>

Accessing PECOS:

[http://www.cms.hhs.gov/MedicareProviderSupEnroll/04\\_InternetbasedPECOS.asp#TopOfPage](http://www.cms.hhs.gov/MedicareProviderSupEnroll/04_InternetbasedPECOS.asp#TopOfPage)

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