If You Are a DMEPOS Supplier

DMEPOS suppliers enroll with the NSC. When you are ready to enroll, visit the CMS Provider Enrollment web site at: http://www.cms.hhs.gov/providers/enrollment/forms to access and download the CMS-855S enrollment form. You may also contact the NSC at 1-866-238-9652 for a paper form. The NSC can answer questions and will send you the appropriate enrollment package material, including:

- An explanation of the supplier number issuance process and the role of the NSC.
- An explanation of the unique supplier number concept for suppliers with one tax reporting number but multiple billing offices.
- A Medicare Participating Physician or Supplier Agreement (CMS-460 form). This form can be downloaded from the CMS web site.

Upon enrollment, you will receive a 10-digit billing number from the NSC. Your claims will be submitted to a Durable Medical Equipment Regional Carrier or DMERC.

Accessing the Forms

PDF versions of the Medicare enrollment forms are available for downloading, printing, and completion by hand from the CMS Provider Enrollment web site. Electronic versions of the enrollment forms are also available for downloading from that web site and allow you to complete the forms using your computer. These electronic forms provide real-time edit checks and can be saved for future changes. However, the electronic forms must be printed and submitted with an original signature along with any applicable attachments.

PARTICIPATION

Having a Medicare provider number allows you to bill the Medicare program and receive payment for covered services, but it does not automatically designate you as a "participating" provider within the Medicare program.

Medicare's meaning of "participation" is different from the meaning it has in most private plans. 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, Medicare law requires you to submit claims for Medicare beneficiaries whether you participate or not.

Physician Benefits of Participation

If you decide to participate in Medicare, 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% higher than it is for those who do not participate.
- Medicare reimbursement is issued directly to the physician/supplier because the claims are always assigned.
- Claim information is forwarded to Medigap (Medicare supplemental coverage) insurers.

For more information, visit our web site at:
http://www.cms.hhs.gov/providers/enrollment/

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Baltimore, MD 21244-1850

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Medicare Enrollment *for* Physicians, Practitioners *and* Suppliers

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

WHAT IS MEDICARE?

Medicare, the nation's largest health insurance program, covers over 39 million Americans, including people age 65 and older, those who have permanent kidney failure, and certain people with disabilities.

WHAT IS CMS?

The Centers for Medicare & Medicaid Services (CMS), a Federal agency within the U.S. Department of Health and Human Services, administers the Medicare and Medicaid programs—two health programs that benefit about 75 million Americans. CMS contracts with private insurance companies (referred to as contractors or carriers) to process Medicare enrollment applications and claims and make payments to physicians/practitioners and other healthcare suppliers on behalf of the Medicare program. Suppliers of durable medical equipment, prosthetics, orthotics or supplies are enrolled by the National Supplier Clearinghouse (NSC), which also is considered a contractor/carrier.

DEFINITIONS

Carriers

Carriers are private insurance companies with which CMS contracts to perform local provider enrollment and claims processing and adjudication functions on behalf of Medicare. They make all final enrollment decisions.

Durable Medical Equipment, Prosthetics, Orthotics or Supplies (DMEPOS)

The term "durable medical equipment" includes iron lungs, oxygen tents, hospital beds, and wheelchairs. Supplies include prescription drugs used in immunosuppressive therapy, erythropoietin for dialysis patients, and oral anticancer drugs. "Prosthetics and Orthotics" includes prosthetic devices (other than dental), which replace all or part of an internal body organ; leg, arm, back, and neck braces, and artificial legs, arms, and eyes; and extra-depth shoes with inserts or custom molded shoes with inserts for an individual with diabetes.

Provider Identification Number (PIN)

Your Medicare carrier issues your PIN, which is also known as your individual billing number. It identifies on the Medicare claim form who provided the service to the beneficiary. It allows you or the beneficiary to receive payment for claims filed to the Medicare carrier.

Unique Physician/Practitioner Identification Number (UPIN)

The UPIN, also known as the individual identification number, is a national number used to identify the physician/practitioner ordering or referring services. It is required for consultations, radiology services, and laboratory and diagnostic tests. All physicians/practitioners enrolled in Medicare who order or refer Medicare beneficiary services must receive a UPIN even though they may never bill Medicare directly.

Suppliers, Other than DMEPOS, Can Include:

Ambulance Service Supplier
Ambulatory Surgical Center
Diagnostic Radiology Group Practice/Clinic
Hospital Department(s), Hospital Outpatient Location(s) and/or Hospital Clinic(s)
Independent Clinical Laboratory
Independent Diagnostic Testing Facility
Mammography Screening Center
Managed Care Plan (non-Medicare+Choice)
Mass Immunizer (Roster Biller only)
Medicare+Choice Organization
Medical Faculty Practice Plan
Single or Multi-Specialty Clinic or Group Practice
Occupational Therapy Group
Physicians and Other Individual Healthcare Practitioners
Physical Therapy Group
Physiotherapy Group
Portable X-ray Facility
Public Health/Welfare Agency
Voluntary Health/Charitable Agency

ENROLLMENT

Physicians/practitioners and other healthcare suppliers must enroll in the Medicare program to be eligible to receive Medicare payment for covered services. This Medicare enrollment form is used to collect payment and other general information about you and to secure documentation to ensure you are qualified and eligible to enroll in the Medicare program.

To enroll, you must submit the appropriate Medicare enrollment form(s):

- CMS-855B for organizational suppliers, including group practices
- CMS-855I for individual physicians/practitioners
- CMS-855S for DMEPOS suppliers
- CMS-855R for individual physicians/practitioners to allow payment to a group practice or other eligible party

Your carrier will process the enrollment form by verifying all submitted information. There will be occasions when a carrier will require additional information. **It is important to respond to the carrier as soon as possible.** Failure to do so may delay your enrollment.

Reporting Changes

Physicians, practitioners, and other healthcare suppliers must notify their carrier whenever an enrollment change occurs. Changes of information are submitted on the same forms that are used for initial enrollment. This includes those who are enrolled but never completed a CMS enrollment application.

If You Are a Physician or Healthcare Practitioner or Supplier

When you are ready to enroll or make a change to your enrollment information, visit the CMS Provider Enrollment web site to access and download the appropriate Medicare enrollment form: http://www.cms.hhs.gov/providers/enrollment/forms.

You can access additional forms that may need to be submitted with the application at this site. They are:

- Medicare authorization agreement for electronic funds transfers (CMS-588 form)
- An Electronic Data Interchange (EDI) Agreement
- Medicare Participating Physician or Supplier Agreement (CMS-460 form)

From this site, you can also locate the local Medicare carrier with whom you will enroll: http://www.cms.hhs.gov/providers/enrollment/contacts.

If you do not have access to the Internet, contact CMS at 1-877-267-2323. Contact your carrier to obtain a paper enrollment form, any additional forms, or to ask questions about the enrollment process.