

**PMC – Consultants to Health Professionals, Inc.**

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## **Memorandum**

**To:** Our Clients

**From:** Alan Fritzshall, Janet McLaughlin

**Date:** July 19, 2010

**Re:** PMC Recommendation - Confirm PECOS Registration, Or Register Now

PECOS supports the Medicare provider and supplier enrollment process by capturing provider/supplier information from the CMS-855 family of forms (the forms used when registering to participate in Medicare). The system manages, tracks, and validates enrollment data collected in both paper form and electronically via the Internet. Registered users may:

- Submit an enrollment application to Medicare.
- View or update existing enrollment information.
- View the status of applications submitted to Medicare from this website.
- Voluntarily withdraw enrollment in Medicare.

There's been a flurry of PECOS-related communications in recent weeks, including notice that Medicare would begin rejecting claims from providers not enrolled in PECOS as of July 6. Thankfully, while the July 6 PECOS regulations are in effect, Medicare will not be rejecting claims. (see CMS press release below.) At this time, it is unknown whether Medicare will begin rejecting claims on January 3, 2011, as originally planned.

PMC recommends that all of our clients take steps necessary to determine if they are already registered with PECOS, and if not, to register. Confirming registration and/or registering now is your best bet to avoid costly claim rejections in the future.

Use the following link to check if the doctor is already registered

[http://www.cms.gov/MedicareProviderSupEnroll/06\\_MedicareOrderingandReferring.asp](http://www.cms.gov/MedicareProviderSupEnroll/06_MedicareOrderingandReferring.asp)

If you learn that you are not registered in PECOS, sign into the PECOS website and register. Sign in using the login from NPPES (the NPI site), visit: <https://pecos.cms.hhs.gov/pecos/login.do>. Use this site to verify all of the data. This site is also where to update any incorrect or missing information, or to initiate a new registration. Providers may also enroll using paper enrollment forms; paper forms are anticipated to take much longer.

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## **CMS TO REVIEW PECOS ENROLLMENT PROCESS**

### *Medicare Working with Ordering and Referring Providers and Suppliers to Streamline Enrollment Process*

The Centers for Medicare & Medicaid Services (CMS) is working with providers to address concerns about enrollment in the Provider Enrollment, Chain and Ownership System (PECOS) to ensure that Medicare beneficiaries continue to receive the health care services and items they need. PECOS is the electronic system used to enroll physicians and eligible professionals into the Medicare program.

As part of those efforts, CMS will, for the time being, not implement changes that would automatically reject claims based on orders, certifications, and referrals made by providers that have not yet had their applications approved by July 6, 2010. While more than 800,000 physicians and other health professionals have enrolled and have approved applications in the PECOS system, some providers have encountered problems. CMS is continuing to update and streamline the process, and more providers have been enrolled in the past few days.

CMS issued an interim final regulation on May 5, 2010 implementing provisions of the Affordable Care Act that permit only a Medicare enrolled physician or eligible professional to certify or order home health services, durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS), and certain items and services under Medicare Part B. The new law applies to orders, referrals and certifications made on or after July 1. The comment period for the regulation closes on July 6, after which the comments will be reviewed and considered before a final regulation is issued.

The Affordable Care Act provisions and the regulation were designed as steps to prevent fraud in Medicare by ensuring that only eligible and identifiable providers and suppliers can order and refer covered items and services to Medicare beneficiaries.

Many physicians and other providers and suppliers have continued to make good faith efforts to comply with the requirements of the law and regulation. These efforts will be a significant factor in determining the procedures and processes that will be incorporated in the final rule.

While the regulation will be effective July 6, 2010, CMS will not implement automatic rejections of claims submitted by providers that have attempted to enroll in PECOS. However, until the automatic rejections are operational, providers should not see any change in the processing of submitted claims, they will continue to be reviewed and paid as they have historically been reviewed and paid.

Additionally, though CMS is taking a more deliberative approach to using the PECOS enrollment system, the agency will employ a contingency plan to meet the ACA requirement that written orders and certifications are only issued by eligible professionals effective July 1.

CMS will continue to send informational notices to providers reminding them of the need to submit or update their enrollment and will work with the provider community to provide guidance on enrollment and will process all applications expeditiously.