

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



The Basics of Internet-based Provider Enrollment, Chain and Ownership System (PECOS) for Provider and Supplier Organizations

PROVIDER-SUPPLIER ENROLLMENT FACT SHEET SERIES





Internet-based Provider Enrollment, Chain and Ownership System (PECOS) is the electronic Medicare enrollment system by which providers and suppliers can submit Medicare enrollment applications, view and print enrollment information, update enrollment information, complete the re-enrollment process, voluntarily withdraw from the Medicare Program, and track the status of a Medicare enrollment application that was submitted in the system. This fact sheet provides education to provider and supplier organizations on how to use Internet-based PECOS to enroll in the Medicare Program and includes a list of Frequently Asked Questions (FAQs).

Please note, this fact sheet does not pertain to suppliers of Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) that are organizations. For more information on DMEPOS supplier organizations and PECOS, please refer to “The Basics of Internet-based Provider Enrollment, Chain and Ownership System (PECOS) for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers” at http://www.cms.gov/MLNProducts/downloads/MedEnroll_PECOS_DMEPOS_FactSheet_ICN904283.pdf on the Centers for Medicare & Medicaid Services (CMS) website.

What Are Provider and Supplier Organizations?

Provider and supplier organizations are entities that meet the Medicare definitions of “provider” and “supplier” and have business structures of corporations, partnerships, professional associations, or limited liability companies. Provider and supplier organizations do not include business structures that are sole proprietorships or “disregarded entities” as defined by the Internal Revenue Service (IRS).

The Employer Identification Number (EIN) issued by the IRS is the Taxpayer Identification Number (TIN) of an organization provider or supplier. Examples of providers and suppliers that are usually organizations as defined in this fact sheet include hospitals, medical group practices and clinics, Portable X-Ray Suppliers (PXRSSs), Ambulatory Surgical Centers (ASCs), hospices, Skilled Nursing Facilities (SNFs), and others.

Medicare Enrollment Application Submission Options

All eligible provider and supplier organizations can apply for enrollment in the Medicare Program, make a change in their enrollment information, or voluntarily withdraw from Medicare by using either:

- Internet-based PECOS; or
- The paper enrollment application process (i.e., Form CMS-855A or Form CMS-855B).



Some enrollment scenarios cannot be accommodated by Internet-based PECOS at this time. These scenarios are listed in the “Limitations of Internet-based PECOS for Provider and Supplier Organizations” section of this fact sheet.

Steps That Must Be Taken Before a Provider or Supplier Organization Can Use Internet-based PECOS

Before any enrollment action can be taken by an individual using Internet-based PECOS on behalf of a provider or supplier organization, a number of steps must be completed. These steps will register and authenticate the Authorized Official (AO) of the provider or supplier organization and the individual(s) who will use Internet-based PECOS on behalf of the provider or supplier organization. In addition, the steps listed below will establish the relationship between the provider or supplier organization and the individual(s) who will use Internet-based PECOS on behalf of the provider or supplier organization.

NOTE: These steps begin with the AO of the provider or supplier organization, and they may take several weeks to complete.

AO of the Provider or Supplier Organization:

1. The AO of the provider or supplier organization will go to Internet-based PECOS at <https://pecos.cms.hhs.gov> to register in the PECOS Identification and Access (PECOS I&A) system. The AO must meet the regulatory definition of “Authorized Official,” which can be found at 42 Code of Federal Regulations (CFR) Section 424.502. Once the I&A process is successfully completed, the AO may use Internet-based PECOS; however, most AOs will want to delegate this work to another individual who is either employed by the provider or supplier organization or who is employed by an organization other than the provider or supplier organization.

The AO will create a PECOS User ID and password as part of this registration process.

NOTE: User IDs and passwords are secure data and should not be shared. Do not use dates of birth or Social Security Numbers (SSNs) or any other personal identification information as or within a User ID or password.

- a. The AO will provide the requested information to CMS.
- b. The CMS External User Services (EUS) Help Desk will verify the information furnished by the AO.

2. If the AO is approved by the CMS EUS Help Desk, he or she will receive an e-mail notification to that effect from the CMS EUS Help Desk.
3. For security reasons, the AO should change his or her PECOS password periodically – at least once a year. User IDs cannot be changed.

NOTE: The AO approves the individual (or individuals) who will use Internet-based PECOS on behalf of the provider or supplier organization. Therefore, after the AO has been approved by the CMS EUS Help Desk, the AO should periodically check his or her e-mail to take the actions requested by the CMS EUS Help Desk.

Individual(s) Who Will Use Internet-based PECOS on Behalf of a Provider or Supplier Organization:

1. An individual who will use Internet-based PECOS on behalf of a provider or supplier organization will go to Internet-based PECOS at <https://pecos.cms.hhs.gov> to register in the PECOS I&A system.
 - a. The individual will create a PECOS User ID and password as part of this registration process.

NOTE: User IDs and passwords are secure data and should not be shared. Do not use dates of birth or SSNs or any other personal identification information as or within a User ID or password.
 - b. The individual will provide the requested information to CMS. This will include information about the individual's employer and about the provider or supplier organization on whose behalf the individual will be submitting enrollment applications. If the individual is employed by the provider or supplier organization, then the information entered for the employer would be the same as that entered for the provider or supplier organization.
 - c. The AO will approve or disapprove the individual by responding to a system-generated e-mail from the CMS EUS Help Desk.
 - d. Once the individual's request for access is approved, the individual is considered a PECOS user.
2. As a PECOS user, the individual may log on to Internet-based PECOS to submit an enrollment application on behalf of the provider or supplier organization.
3. If the Security Consent Form has not already been generated and approved, the user will download the Security Consent Form from Internet-based PECOS. The individual will ensure the form is completed and will obtain the signature, and the date signed, from the AO of the provider or supplier organization and of the representative of the individual's employer (referred to as the "Employer Organization" in the Security Consent Form and who, by virtue of its representative signing and dating the Security Consent Form, is requesting approval to submit enrollment applications on behalf of the provider or supplier organization).



(If the individual is employed by the provider or supplier organization itself, then the information entered for the employer organization would be the same as that entered for the provider or supplier organization, and the AO would sign and date the form in two places.) The individual will mail the completed, signed, and dated Security Consent Form to the CMS EUS Help Desk.

4. If the Security Consent Form is approved by the CMS EUS Help Desk, the AO of the provider or supplier organization will receive an e-mail notification to that effect from the CMS EUS Help Desk.

NOTE: The Security Consent Form cannot be approved if the AO of the provider or supplier organization is not already verified by PECOS I&A.

NOTE: The Security Consent Form is completed only one time to establish the relationship between the provider or supplier organization and the employer organization whose employee(s) would submit enrollment applications on behalf of the provider or supplier organization. More than one individual may request access to Internet-based PECOS for a given provider or supplier organization, but the Security Consent Form is generated and completed by the first approved user who logs on to Internet-based PECOS to submit an enrollment application for the given provider or supplier organization. A Security Consent Form must be completed, signed, dated, and mailed to the CMS EUS Help Desk even if the employer organization is the provider or supplier organization.

5. For security reasons, the user should change his or her PECOS password periodically – at least once a year.

Resources

- For more information about the Medicare enrollment process, visit the Medicare Provider-Supplier Enrollment web page at <http://www.cms.gov/MedicareProviderSupEnroll> on the CMS website.
- To access Internet-based PECOS, visit <https://pecos.cms.hhs.gov/pecos/login.do> on the CMS website. To report an Internet-based PECOS navigation, access, or printing problem, contact the CMS EUS Help Desk at 1-866-484-8049, or send an e-mail to EUSsupport@cgi.com.

- Please contact the designated Medicare enrollment contractor for your State about any additional questions regarding the Medicare enrollment process. Medicare provider enrollment contact information for each State can be found at http://www.cms.gov/MedicareProviderSupEnroll/downloads/contact_list.pdf on the CMS website.

The following pages contain Frequently Asked Questions (FAQs) and answers about Internet-based PECOS for provider and supplier organizations.



Internet-based PECOS for Provider and Supplier Organizations Frequently Asked Questions (FAQs)

General Information

What are the advantages of Internet-based PECOS?

The primary advantages of Internet-based PECOS are to:

- Reduce the time necessary for you to enroll or make a change in your Medicare enrollment information;
- Streamline the Medicare enrollment process for you;
- Allow you to view your Medicare enrollment information to ensure that it is accurate; and
- Reduce the administrative burden associated with completing and submitting enrollment information to Medicare.

What information will I need before beginning to complete the enrollment via Internet-based PECOS for my provider-supplier organization?

The list below shows the type of information needed to complete an initial enrollment application for a provider or supplier organization using Internet-based PECOS. This information is similar to the information needed to complete a paper Medicare enrollment application.

- An active National Provider Identifier (NPI);
- Other identifying information, to include the legal business name and the TIN of the provider or supplier organization;
- Bank account information;
- Practice location address(es);
- Business license(s); and
- Information about any final adverse actions (if applicable).

Am I required to complete and submit my enrollment applications via Internet-based PECOS?

No. You continue to have the option of completing and mailing paper Medicare enrollment applications to Medicare enrollment contractors. Visit the CMS Provider-Supplier Enrollment web page at <http://www.cms.gov/MedicareProviderSupEnroll> to find telephone and mailing address information for the Medicare enrollment contractor serving your area.

My skilled nursing facility has been enrolled in Medicare for many years, but when I access Internet-based PECOS to view its enrollment record, I cannot find the facility. Is this an error?

Even though a facility may be enrolled in Medicare, its enrollment record might not be in Internet-based PECOS. If a provider or supplier organization enrolled in Medicare prior to 2003 but has not submitted an update to the enrollment information since 2003, the provider or supplier organization does not have an enrollment record in PECOS. A provider or supplier organization that does not have an enrollment record in PECOS will have to submit an initial Medicare enrollment application, either via Internet-based PECOS or by using the paper application process. Once that enrollment application is processed, the provider-supplier organization will have an enrollment record in PECOS.

Whom do I call if I am unable to access Internet-based PECOS even though I have a PECOS User ID and password?

You should contact the CMS EUS Help Desk at 1-866-484-8049, or send an e-mail to EUSSupport@cgi.com.

Whom do I call if I have a general provider enrollment question?

Medicare enrollment contractors (fiscal intermediaries, carriers, or A/B Medicare Administrative Contractors [A/B MACs]) answer general enrollment questions.

Are there any processing limitations for Internet-based PECOS?

Yes. While Internet-based PECOS supports most enrollment scenarios for provider and supplier organizations, there are some limitations that will not be available until a future date. For example, changes of ownership, consolidations/acquisitions, and mergers cannot be accommodated in Internet-based PECOS at this time. Limitations are described in the “Limitations of Internet-based PECOS for Provider and Supplier Organizations” section of this fact sheet. At this time, these actions must be done using the paper enrollment application.

What types of enrollment actions can I take using Internet-based PECOS?

Provider-supplier organizations can submit four basic enrollment actions via Internet-based PECOS. They are:

1. Establish a new enrollment record – This occurs when you are newly enrolling or you do not have an existing enrollment record in PECOS and are establishing one.



2. Make a change to information in an existing enrollment record – This occurs when you have an existing enrollment record in PECOS and are reporting a change of information to that record.
3. Reactivate enrollment – This occurs when you reactivate an existing enrollment record that had been deactivated.
4. Voluntarily withdraw from Medicare – This occurs when a provider or supplier organization takes action to voluntarily withdraw from the Medicare Program.

If a Medicare Contractor requests that my hospital revalidate its Medicare enrollment information, can the hospital use Internet-based PECOS to do this?

Yes.

My facility's information has changed. Must that information be updated?

Yes. Following an initial enrollment, you are required to report certain changes in the enrollment record, called reportable events.

What is a reportable event?

A reportable event is any change that affects information in a Medicare enrollment record. A reportable event may affect claims processing, claims payment, or a provider or supplier organization's eligibility to participate in the Medicare Program.

For a list of reportable events, go to the Medicare Provider-Supplier Enrollment web page at www.cms.gov/MedicareProviderSupEnroll on the CMS website and review the applicable Reportable Event Fact Sheet, which is available under the "Downloads" section.

What days and times will Internet-based PECOS be available?

Internet-based PECOS will be available from 5:00 a.m. to 1:00 a.m. Eastern Time, Monday through Saturday.

Application Fee, Certification Statement, and Supporting Documentation

Do I need to pay an application fee?

Yes. Effective March 25, 2011, all institutional providers of medical or other items or services or suppliers must pay an application fee. ("Institutional provider" includes any

provider or supplier that submits a paper Medicare enrollment application using Form CMS-855A, Form CMS-855B [not including physician and non-physician practitioner organizations], Form CMS-855S, or the associated Internet-based PECOS enrollment applications). Application fees do not apply to physicians, non-physician practitioners, physician organizations, and non-physician organizations. The application fee will vary from year to year.

NOTE: CMS and its contractors will not be able to process any applications without the proper application fee having been paid and credited to the United States Treasury or an approved hardship exception. If the fee or hardship exception is not submitted with the CMS enrollment, the application will be rejected or billing privileges revoked (as applicable). The provider or supplier must pay the application fee electronically through <http://www.pay.gov> on the Internet, via credit card or debit card. CMS will provide to Medicare enrollment contractors, on a regular basis, a listing of providers and suppliers that have paid an application fee. However, providers and suppliers are strongly encouraged to submit a copy of their <http://www.pay.gov> receipt of payment with their application. Requests for hardship exceptions should be submitted to the Medicare enrollment contractor. CMS will make a determination on whether to grant the request on a case-by-case basis.

What is the Certification Statement?

The two-page Certification Statement lists requirements that provider and supplier organizations must meet and maintain in order to bill the Medicare Program. The Certification Statement is generated when you use Internet-based PECOS. It contains the information found in Section 14 of the paper Forms CMS-855A and CMS-855B. Please read these requirements carefully. By signing and dating the Certification Statement, the AO of the provider or supplier organization is attesting to having read the requirements and understand them.

Is there additional information that needs to be sent to the Medicare enrollment contractor other than the electronically submitted application?

Yes. The signed and dated Certification Statement must be mailed to the Medicare enrollment contractor. In addition, you may need to submit certain supporting documentation, such as a copy of the CP-575 that was issued by the IRS. When the user submits the Medicare enrollment application for the provider or supplier organization, the user will see the “Mailing Instructions, Print/Save Materials” page. This page lists the Certification Statement and the supporting documentation required to be mailed to the Medicare enrollment contractor in order to complete the enrollment action.



NOTE: The signed and dated Certification Statement must be mailed to the Medicare enrollment contractor as soon as possible after submitting the enrollment application over the Internet, ideally no later than one week after submitting the application. The Medicare enrollment contractor is not permitted to begin processing an application submitted using Internet-based PECOS until it receives the signed and dated Certification Statement. The effective date of filing of an Internet-based PECOS enrollment application is the date the signed and dated Certification Statement is received by the Medicare enrollment contractor for an enrollment application that has been successfully submitted to the Medicare enrollment contractor via Internet-based PECOS. The signature must be an original signature and in ink (blue ink is recommended). Copied or stamped signatures will not be accepted.

What are the penalties for falsifying information when using Internet-based PECOS?

During the application submission process in Internet-based PECOS, the “Penalties for Falsifying Information” page, which has the same text as its counterpart on the paper Medicare enrollment application, informs you of the consequences of providing false information on the enrollment application. You must acknowledge the “Penalties for Falsifying Information” page by clicking the “Next Page” button before continuing with the Internet submission process.

How will I know if I have successfully submitted the enrollment application using Internet-based PECOS?

Once the application has been electronically submitted to the Medicare enrollment contractor, the “Submission Receipt” page appears. This page informs the user that the Internet application has been submitted to the Medicare enrollment contractor for processing. The “Submission Receipt” page reminds the user that the Certification Statement must be signed and dated by the AO of the provider or supplier organization, and that the Certification Statement and the supporting documentation must be mailed to the Medicare enrollment contractor. As a reminder, Internet-based PECOS sends a notification to each e-mail address listed in the Contact Person information section of the application.

Enrollment Application Issues

I received an “Invalid Address” error. How do I resolve this error?

An “Invalid Address” error indicates that the address entered is inconsistent with the United States Postal Service addresses. This page allows you to continue by either saving the address information that you entered or by selecting the address that Internet-based PECOS displays.

What is the Special Payments address?

Since Medicare claims payments will be made by electronic funds transfer, the Special Payments address should indicate where all other payment information (e.g., paper remittance notices, special payments) should be sent.

Should I keep a copy of the enrollment application?

Yes. You can print a copy for your records when using Internet-based PECOS. **Do not** mail a printed copy to your designated Medicare enrollment contractor.

Will I be timed out when using Internet-based PECOS?

As a security feature, you may be timed out if you are inactive (that is, you do not hit any keys) for a period of 15 consecutive minutes. The system will warn users of the inactivity and if no response is received after five additional minutes, the user is logged off automatically. If you are in the process of completing an application in Internet-based PECOS and need to tend to something else, you should save your work. If you do not save your work and are timed out, you will have to restart the process from the beginning.

How do I change my PECOS password?

You may change your PECOS password by going to Internet-based PECOS at <https://pecos.cms.hhs.gov> on the CMS website, logging on, and following the instructions on the screens.

NOTE: CMS recommends that PECOS users change their PECOS passwords at least once a year.

Whom do I contact if I cannot remember the password I established to use for Internet-based PECOS?

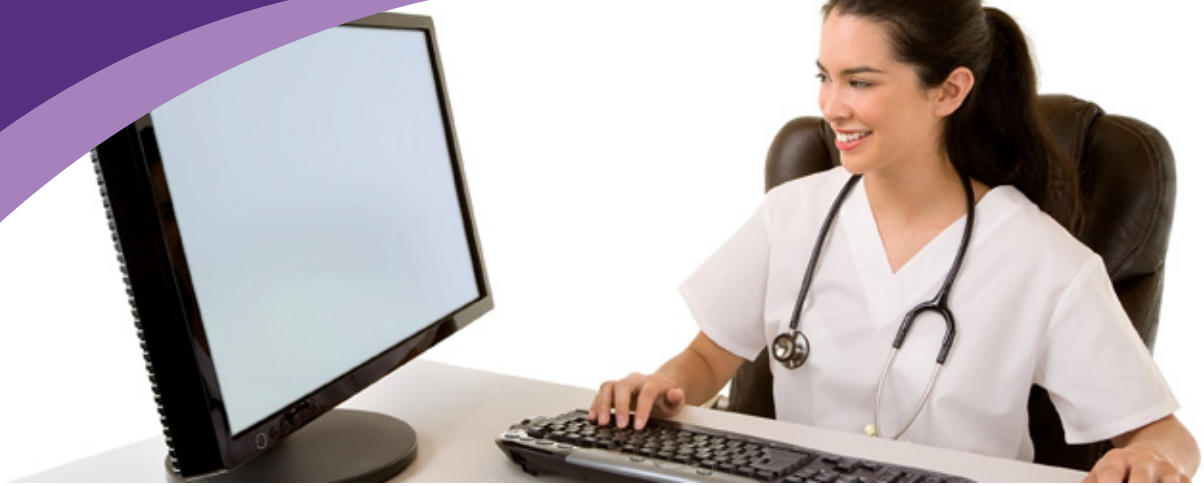
You should contact the CMS EUS Help Desk at 1-866-484-8049, or send an e-mail to EUSsupport@cgi.com for assistance.

How long does it take to change a PECOS password?

In most cases, a password change can be made in less than five minutes.

Can I change my PECOS User ID?

For security reasons, you **cannot** change your PECOS User ID.



Obtaining Access to Internet-based PECOS for Provider and Supplier Organizations

Obtaining access to Internet-based PECOS by a provider or supplier organization involves several steps. The first step must be taken by the AO of a provider or supplier organization. A summary of the process is below.

The AO of a provider or supplier organization must register in the PECOS I&A system and be verified by the CMS EUS Help Desk. The individual who will be using Internet-based PECOS on behalf of that provider or supplier organization must also register in the PECOS I&A system. He or she must submit a signed and dated Security Consent Form to the CMS EUS Help Desk. The CMS EUS Help Desk will verify the information provided by the individual. The CMS EUS Help Desk will also notify the AO of the establishment of the relationship between the provider or supplier organization and the entity who will be using Internet-based PECOS on behalf of the provider or supplier organization. **Please note that these processes may take several weeks to be completed.**

More details about obtaining access to Internet-based PECOS can be found in the “Steps That Must Be Taken Before a Provider or Supplier Organization Can Use Internet-based PECOS” section of this fact sheet.

Navigating Through Internet-based PECOS to Initiate an Enrollment Application for a Provider or Supplier Organization

A PECOS user must follow these steps when using Internet-based PECOS to submit an enrollment application to a Medicare enrollment contractor on behalf of a provider or supplier organization:

1. Log on to Internet-based PECOS at <https://pecos.cms.hhs.gov> on the CMS website.
2. From the “My Home” or “My Enrollments” pages in Internet-based PECOS, initiate an enrollment application by selecting an existing enrollment or an initial enrollment. Since Internet-based PECOS is a scenario-driven system, it will present a series of questions to retrieve only the information needed to process the specific enrollment scenario.
3. Once Internet-based PECOS determines the scenario, the “Enrollment Overview” page summarizes the task that you are about to begin and allows you to confirm that it is the correct task. To complete the task, enter the required information by navigating through the screens that are displayed.

4. At the end of the data entry process, Internet-based PECOS:

- Ensures that all required data have been entered.
- Provides you with the option of printing a copy of the enrollment application; however, it is recommended that the user print a copy for the provider or supplier organization's records.
- Displays a list of any required paper documentation that must be mailed to the Medicare enrollment contractor (e.g., the IRS-generated CP-575, the Form CMS-588 Electronic Funds Transfer Agreement).
- Prompts you to print the two-page Certification Statement. The Certification Statement must be printed and signed (an original signature, with blue ink recommended) and dated by the AO of the provider or supplier organization. It is imperative that the user mail the signed and dated Certification Statement to the designated Medicare enrollment contractor as soon as possible, ideally within one week after submitting the application over the Internet.
- Displays the name and mailing address of the appropriate Medicare enrollment contractor.

NOTE: The signed and dated Certification Statement must be mailed to the Medicare enrollment contractor as soon as possible after submitting the enrollment application over the Internet, ideally no later than one week after submitting the application. The Medicare enrollment contractor is not permitted to begin processing an application submitted using Internet-based PECOS until it receives the signed and dated Certification Statement. Furthermore, the effective date of filing for an Internet-based PECOS enrollment application is the date on which the signed and dated Certification Statement is **received** by the Medicare enrollment contractor for an enrollment application that has been successfully submitted to the Medicare enrollment contractor. The signature must be an original signature and in ink (blue ink is recommended). Copied or stamped signatures will not be accepted.

- Electronically transmits the enrollment application. (The user who electronically submits an enrollment application using Internet-based PECOS should **not** mail a copy of the printed application to the Medicare enrollment contractor; that copy is for your records.)
- Sends an e-mail to you indicating that the enrollment application was successfully transmitted to the Medicare enrollment contractor. Please note that you still need to ensure the timely mailing of the signed and dated Certification Statement to the Medicare enrollment contractor in order for the Medicare enrollment contractor to begin to process the enrollment application. In addition, CMS and its contractors will not be able to process any applications without the proper application fee having been paid and credited to the United States Treasury or an approved hardship exception.



5. Once the enrollment application is electronically submitted, it is “locked,” meaning the data cannot be edited by you unless the Medicare enrollment contractor returns the enrollment application to you electronically via e-mail through Internet-based PECOS for corrections.

Checking the Status of an Enrollment Application of a Provider or Supplier Organization Submitted Using Internet-based PECOS

If desired, **within 15 days or more after the electronic submission of the enrollment application**, the user may log on to Internet-based PECOS to check the status of the application. One of these statuses will be displayed:

1. **Received by the Medicare Enrollment Contractor** – A user successfully submitted an electronic enrollment application to a Medicare enrollment contractor.

NOTE: A Medicare enrollment contractor is not permitted to begin to process an electronically-submitted enrollment application without receipt of the signed and dated (original signature, preferably in blue ink) Certification Statement.

2. **Reviewed by the Medicare Enrollment Contractor** – The Medicare enrollment contractor is reviewing the enrollment application.

3. **Returned for Additional Information** – The Medicare enrollment contractor has returned the application to you for additional information. You should respond to any requests from the contractor as soon as possible, but within 30 days of the request. A user who does not respond timely to a contractor’s request for information will cause the application processing to be delayed or may cause the application to be denied or rejected.

Enrollment Process Enhancements

Filing and tracking Medicare enrollment records and specialty status in Internet-based PECOS has never been easier!

Recent enhancements provide an improved submission process, simpler directions for signing up, a clearer process for follow-up, and a **15-day submission** time frame to submit signed paperwork (instead of 7 days).

A **new application status module** has been added for checking whether enrollment applications have been:

- Received by the Medicare enrollment contractor;
- Reviewed by the Medicare enrollment contractor;
- Returned for additional information; or
- Approved or rejected.

4. **Approved or Rejected** – The Medicare enrollment contractor has processed the enrollment application and the final status will be displayed.

Medicare Enrollment Application Processing Time Frames

Since Internet-based PECOS helps reduce the time necessary for a Medicare enrollment contractor to review and process a Medicare enrollment application, CMS has established processing time frames for applications submitted via the Internet separately from those submitted on paper.

For enrollment applications submitted using Internet-based PECOS, CMS requires that Medicare enrollment contractors process 90 percent of the applications (e.g., initial enrollments and changes of information) within 45 days of receipt of the signed and dated two-page Certification Statement and the supporting documentation.

For paper enrollment applications, CMS requires that Medicare enrollment contractors process 80 percent of initial paper enrollment applications within 60 days, and 80 percent of paper changes within 45 days.

Limitations of Internet-based PECOS for Provider and Supplier Organizations

There are some scenarios that Internet-based PECOS cannot accommodate at this time; they will be available at a future date. These scenarios are:

- Changes in the TIN. These must be done using the paper enrollment application (CMS-855).
- Changes in legal business name. These must be done using the paper enrollment application (CMS-855).
- An enrolled Medicare Part A provider or supplier organization wants to enroll with a Medicare carrier or A/B MAC to bill for Part B services. This must be done using the paper enrollment application (CMS-855).
- Initial applications submitted by Federal Qualified Health Centers, Rural Health Clinics, and End-Stage Renal Disease Facilities.



This fact sheet was current at the time it was published or uploaded onto the web. Medicare policy changes frequently so links to the source documents have been provided within the document for your reference.

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