



Provider Inquiry Assistance

One-Time Mailing of Supplier Responsibilities Letter – Individual Practitioners Only – JA6278

Note: MLN Matters article MM6278 was revised to reflect changes made to Change Request (CR) 6278 on January 29, 2010. The article was revised to include the three scenarios below. The CR release date, transmittal number, and the Web address for accessing CR 6278 were also revised.

Related CR Release Date: January 29, 2010 **Revised**

Date Job Aid Revised: March 12, 2010

Effective Date: November 2, 2009

Implementation Date: November 2, 2009

Key Words MM6278, CR6278, R626OTN, One-Time, Mailing, Supplier, Letter

Contractors Affected

- Medicare Carriers
- Part A/B Medicare Administrative Contractors (A/B MACs)

Provider Types Affected All physician and non-physician practitioners with Medicare billing privileges are affected.



The Centers for Medicare & Medicaid Services (CMS) has directed Medicare Carriers and A/B MACs to notify all sole proprietor physicians and non-physician practitioners of their reporting responsibilities with a one-time mailing. Carriers and A/B MACs must complete this mailing to physicians, who are sole proprietors, by November 30, 2009, and to sole proprietor non-physician practitioners by December 31, 2009.

Provider Needs to Know...

- Medicare Carriers and A/B MACs must notify all active physicians and non-physician practitioners of their reporting responsibilities with a one-time mailing using the CMS developed materials, as mentioned in the Background section below. Links to these materials are in the Reference Section below.
 - Medicare Carriers and A/B MACs must complete this mailing to sole proprietor physicians by November 30, 2009, and to sole proprietor non-physician practitioners by December 31, 2009.
 - Medicare Carriers and A/B MACs will deactivate the billing privileges for the practice locations associated with any Provider Transaction Access Number (PTAN) of any letter
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returned by the post office as undeliverable and the contractor does not already have a change of address enrollment application pending based on the following three scenarios:

- **Scenario 1:** If the provider has one PTAN and multiple practice locations, contractors will deactivate the practice location of the returned letter and mail a revalidation letter to the special payment or correspondence address of the provider/supplier. If the provider/supplier does not respond to the revalidation letter, the Medicare contractor will revoke all practice locations.
- **Scenario 2:** If a provider/supplier has two or more PTANs and multiple practice locations, the contractor will deactivate the practice location of the returned letter(s) and mail a revalidation letter to the provider's special payment or correspondence address. If the provider does not respond for all PTANs, the contractor will revoke all practice locations. If the provider responds for only one of the PTANs, the contractor will deactivate the practice locations of the PTANs for which there was no response.
- **Scenario 3:** If a letter is returned for a provider whose only practice location is a hospital or skilled nursing facility, the contractor will not deactivate that providers' PTAN, but will mail a follow-up letter and revalidation request to the provider's correspondence address.
- The follow-up revalidation letter will explain the need to report current address information via a CMS-855 form.
- Billing privileges will remain deactivated until the CMS-855 is received and processed. Claims for services rendered from the date of deactivation until the date of reactivation may not be payable per 42 Code of Federal Regulations (CFR) 424.516(d)(1)(iii) and 42 CFR 424.540(a)(2).
- Medicare Carriers and A/B MACs will follow the procedures in the *Program Integrity Manual*, Chapter 10, Section 13 to reactivate Medicare billing privileges.

Background

- Currently, CMS and Medicare Carriers and A/B MACs conduct general outreach to physicians and non-physician practitioners about their reporting responsibilities.
- Change Request CR6278 is a continuation of this outreach.
- CMS has directed Medicare Carriers and A/B MACs to use established communication channels (i.e., listserv announcements, bulletins, etc.) to notify all physicians and non-physician practitioners of their reporting responsibilities, using CMS developed fact sheets available at the links in the Reference Materials section below.

Operational Impact N/A

The related MLN Matters® article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6278.pdf> on the CMS website.

The official instruction (CR6278) issued regarding this change may be found at <http://www.cms.hhs.gov/Transmittals/downloads/R626OTN.pdf> on the CMS website.

Following are the titles and brief descriptions of the fact sheets cited above (along with their Web addresses) which may be downloaded from the CMS website:

Reference
Materials

- **Fee-For-Service Provider Enrollment Reporting Responsibilities for Individual Physicians Enrolled in the Medicare Program (March 2009) (ICN# 901643)**

After enrolling in the Medicare Program, all physicians are responsible for maintaining and reporting changes in their Medicare enrollment information to their designated Medicare contractor. This fact sheet outlines such reportable events for physicians and may be found at

<http://www.cms.hhs.gov/MedicareProviderSupEnroll/Downloads/PhysicianReportingResponsibilities.pdf> on the CMS website.

- **Fee-For-Service Provider Enrollment Reporting Responsibilities for Individual Non-Physician Practitioners Enrolled in the Medicare Program (March 2009) (ICN# 901644)**

After enrolling in the Medicare Program, all non-physician practitioners are responsible for maintaining and reporting changes in their Medicare enrollment information to their designated Medicare contractor. This fact sheet outlines such reportable events for individual non-physician practitioners and may be found at

<http://www.cms.hhs.gov/MedicareProviderSupEnroll/Downloads/Non-PhysicianReportingResponsibilities.pdf> on the CMS website.
