MEDICARE ENROLLMENT FOR PROVIDERS WHO SOLELY ORDER OR CERTIFY

Target Audience: Medicare Fee-For-Service Providers

The Hyperlink Table, at the end of this document, provides the complete URL for each hyperlink.

Quick Start Guide

1. Get an NPI
   - Check for yours
   - None? Apply online, use a paper application, or an EFI
2. Enroll
   - Online in PECOS
   - Using a paper application (CMS-855O)
3. Respond to MAC requests
4. Keep enrollment information up to date using PECOS or a paper enrollment form

New Final Rule for Part C and Part D Providers and Prescribers

Final Rule CMS-4182-F says providers of Part C services and items or Part D drug prescribers or both no longer need to enroll in Medicare to get paid. The Centers for Medicare & Medicaid Services (CMS) is creating a "Preclusion List" to replace enrollment.

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Recent legislation says physicians and other eligible professionals must enroll in the Medicare Program or have a valid opt-out affidavit on file to solely order or certify items or services for Medicare beneficiaries.

Those physicians and other eligible professionals enrolled solely as ordering or certifying providers **do not** send billed services claims to a Medicare Administrative Contractor (MAC). Go to these booklets for enrollment information on Medicare health care professionals that do submit claims for payment:

* PECOS for DMEPOS Suppliers
* Medicare Enrollment for Institutional Providers
* Medicare Enrollment for Physicians, NPPs, and Other Part B Suppliers

This booklet outlines Medicare rules for providers who solely order or certify by describing who qualifies as an eligible provider, and how to enroll in Medicare as an eligible provider.

Ordering and Certifying Terms

Medicare Part B claims use the term "ordering/certifying provider" (was "ordering/referring provider") to identify the professional who orders or certifies an item or service reported in a claim. The following are technically correct terms:

* A provider **orders** non-physician beneficiary items or services, such as Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS); clinical laboratory services; or imaging services.
* A provider **certifies** beneficiary home health services.

The health care industry uses the terms "ordered," "referred," and "certified" interchangeably. To see terminology comments, go to the Changes in Provider and Supplier Enrollment, Ordering and Referring, and Documentation Requirements; and Changes in Provider Agreements Final Rule.

Who Are Eligible Ordering or Certifying Providers?

This booklet focuses on physicians or eligible professionals who order or certify Part A or Part B services but **do not** want to submit Medicare claims.

An individual already enrolled as a Medicare Part B provider, DMEPOS supplier, or Part A Home Health Agency (HHA) provider may submit claims with ordering or certifying information and get paid without re-enrolling using Form CMS-855O.

Those who enroll as eligible providers using Form CMS-855O **may not bill Medicare or get paid** for their furnished services. They do not have Medicare billing privileges.

Eligible providers **must meet these three basic conditions**:

1. Have an individual National Provider Identifier (NPI)

   NOTE: Organizational NPIs **do not** qualify and you **cannot** use them to order or certify

2. Be enrolled in Medicare in either an "approved" or an "opt-out" status

3. Be an eligible specialty type to order or certify

Denial of Ordering or Certifying Claims

If claims lack a valid individual NPI, MACs deny them if they are:

- Claims from clinical laboratories for ordered tests
- Claims from imaging centers for ordered imaging procedures
- Claims from DMEPOS suppliers for ordered DMEPOS
- Claims from Part A HHAs that are not ordered or certified by a Doctor of Medicine [M.D.], Doctor of Osteopathy [D.O.], or Doctor of Podiatric Medicine [DPM])

If you bill a service that needs an eligible provider and one is not on the claim, the MAC denies the claim. The claim must have a valid NPI, and the eligible provider's name as it appears in the Provider Enrollment, Chain, and Ownership System (PECOS).

If a provider on the Preclusion List prescribes a drug, Part D plans deny Part D covered drugs.

Requirement 1: You Must Have an Individual NPI

There are two types of NPIs: Type 1 (individual) and Type 2 (organizational). **Medicare only allows Type 1 NPIs for solely ordering items or certifying services.** Apply for an NPI in one of three ways:

> **Not Sure If You Have an NPI?**
>
> Search for your NPI on the NPPES NPI Registry.

1. **Online Application:** Get an Identity & Access Management (I&A) System user account. Then apply in the National Plan and Provider Enumeration System (NPPES) for an NPI.

2. **Paper Application:** Complete, sign, and mail the NPI Application/Update Form (Form CMS-10114) paper application to the address on the Enumerator form. To request a hard copy application, call 1-800-465-3203 or TTY 1-800-692-2326, or email customerservice@npienumerator.com.

3. **Bulk Enumeration:** Apply for Electronic File Interchange (EFI) access and upload your own comma-separated values (CSV) files.

One Account, Multiple Systems

The I&A System lets you:

- Use NPPES to manage your NPIs
- Use PECOS to enroll in Medicare or update your current enrollment information

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Requirement 2: You Must Enroll in Medicare in an "Approved" or "Opt-Out" Status

When you have an NPI, use PECOS to verify current Medicare enrollment record information, **including** your NPI and that you have an "approved" status, or go to the Opt Out Affidavits list to check for "opt-out" status. To "opt-out" of Medicare, you must submit an affidavit expressing your decision to opt-out of the program.

Effective June 15, 2018, CMS no longer says Part C and Part D providers must enroll in Medicare in an "approved" or "opt-out" status.

Table 1. Options to Verify Your Current Enrollment Record Exists in PECOS

Verification Option	Enrollment Record Is Current If:
Go to the Medicare Ordering and Referring files for physicians/non-physician practitioners (NPPs) and for power mobility device (PMD) suppliers.*	You are identified on one of these reports.
Go to PECOS to locate your enrollment record.	Your enrollment record displays a status of "approved."
If you submitted an enrollment application as one of the eligible provider types on paper (Form CMS-855O) or using PECOS and want to check the status, go to the Initial Physician Applications Pending Contractor Review and Initial Non-Physician Applications Pending Contractor Review datasets. **Remember:** these applications are not fully processed and are awaiting contractor review.	Your enrollment application is pending contractor review if you are on one of these reports.

* Certain claims for PMDs are denied if the ordering provider is not on Medicare's eligible providers list. Read MLN Matters® Article MM2398, Denial for Power Mobility Device (PMD) Claim from a Supplier of Durable Medical, Orthotics, Prosthetics, and Supplies (DMEPOS) When Ordered By a Non-Authorized Provider for more information.

If you do not have an enrollment record in PECOS, go to the "How Do I Enroll in Medicare as an Eligible Provider?" section of this booklet.

Requirement 3: You Must Be Eligible to Order or Certify

The physicians and eligible professionals who may enroll in Medicare solely for ordering or certifying include, but are not limited to, those physicians and eligible professionals who are:

- Department of Veterans Affairs (DVA) employees
- Public Health Service (PHS) employees
- Department of Defense (DOD)/TRICARE employees
- Indian Health Service (IHS) or a Tribal Organization employees
- Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), or Critical Access Hospitals (CAHs) employees
- Licensed Residents in an approved medical residency program defined in 42 Code of Federal Regulations [CFR] Section 413.75(b)
- Dentists, including oral surgeons
- Pediatricians
- Retired, licensed physicians

If you are not sure your specific provider specialty qualifies to enroll as an ordering or certifying provider, go to Section 4 of Form CMS-855O or contact your MAC at Medicare Fee-For-Service Provider Enrollment Contact List before submitting a Medicare enrollment application.

Interns and Residents

Claims for items or services ordered or certified by interns and residents, whether licensed or unlicensed, must specify the NPI and name of a teaching physician. State-licensed residents may enroll to order or certify, and claims may list them. If States provide provisional licenses or otherwise permit residents to order or certify, CMS allows interns and residents to enroll consistent with State law.

How Do I Enroll in Medicare as an Eligible Provider?

CMS lets certain physicians and other eligible professionals enroll in Medicare solely for ordering or certifying specific Medicare beneficiary items or services.

Step 1: Get an Individual NPI

Providers must get an NPI before enrolling in the Medicare Program. See "Requirement 1: You Must Have an Individual NPI," for instructions on getting an individual NPI.

Protect Your Information

Your NPI and Tax ID are publicly available information. Use extra caution to monitor and protect your professional and personal information to help prevent fraud and abuse. Secure your patients' personal health information, too. CMS has the following resources:

- Medicare Fraud & Abuse: Prevent, Detect, Report
- Office of Inspector General
- Help Fight Medicare Fraud (for patients)

Step 2: Complete the Proper Medicare Enrollment Application

After you get an NPI, you can complete the Medicare Program enrollment, revalidate your enrollment, or change your enrollment information. Before starting the application, be sure you have the necessary enrollment information. Complete the following actions using PECOS or the paper enrollment form.

A. Online PECOS Application

CMS wants providers to use the online Medicare enrollment system. Use your I&A System credentials to log in to PECOS to enroll as a Medicare provider.

PECOS is a scenario-driven application—it presents a series of questions to get needed information to process your specific enrollment scenario. You can use PECOS to submit all supporting documentation.

PECOS Is Easy!

We encourage you to use PECOS instead of the Medicare paper enrollment application. PECOS advantages include:

- Paperless process, including electronic signature and digital document feature

   NOTE: You must use PECOS to upload handwritten signatures for web-based submissions

- Faster enrollment
- Submitting only relevant information
- More control over your enrollment information, including reassignments
- Easy to check and update information
- Less staff time and administrative costs

B. Paper Medicare Enrollment Application (Form CMS-855O)

You may submit the Medicare Enrollment Application: Enrollment for Eligible Ordering, Certifying, and Prescribing Physicians and Other Eligible Professionals (Form CMS-855O). Form 855O collects your information, including the documentation verifying your Medicare Program enrollment eligibility. If you submit a paper application, the MAC creates the PECOS record.

NOTE: If you submitted an abbreviated Form CMS-855I to enroll solely to order or certify prior to using Form CMS-855O, your enrollment is still valid and you do not need to re-apply.

Application Fee

Physicians, NPPs, physician organizations, and non-physician organizations do not pay an application fee. Go to the Application Fee Requirements Matrix for more information about the provider types subject to an application fee.

Step 3: Respond to MAC Requests for More Information

MACs pre-screen and verify enrollment application information. During processing, your MAC may need additional information. Respond to information requests within 30 days; otherwise, the MAC may reject your application. When your MAC approves your application, it switches the PECOS record to an "approved" status and sends you an approval letter.

Step 4: Use PECOS to Keep Enrollment Information Up to Date

Report a Medicare enrollment change using PECOS. You must report a change of ownership or control, a change in practice location, and any final adverse legal actions (such as revocation or suspension of a Federal or State license) within 30 days of the reportable event (go to the PECOS FAQs section for a definition). Submit all other changes within 90 days of a reportable event.

Resources

Go to the Medicare Provider-Supplier Enrollment webpage for more information about:

- PECOS, including how to update your PECOS records
- Paper Medicare enrollment application forms
- Frequently asked questions (FAQs)
- MAC contact information
- CMS provider enrollment updates

Table 2. Resources

For More Information About…	Resource
CMS External User Services (EUS) Help Desk	To report PECOS navigation, access, or printing problems, contact the CMS EUS Help Desk at EUS.custhelp.com.
Form CMS-855O Processing Guide	CMS.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83attachment855O.pdf
I&A System Account Registration	NPPES.CMS.HHS.gov/IAWeb/register/startRegistration.do
Initial Non-Physician Applications Pending Contractor Review	Data.CMS.gov/Medicare-Enrollment/Pending-Initial-L-and-Ts-Non-Physicians/n86y-dqck
Initial Physician Applications Pending Contractor Review	Data.CMS.gov/Medicare-Enrollment/Pending-Initial-L-and-Ts-Physicians/ip7y-ztn9
MACs	Provider Enrollment Contact List CMS.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/contact_list.pdf MAC Website List Go.CMS.gov/MAC-website-list
MLN Matters® Article MM7097, Eligible Physicians and Non-Physician Practitioners who need to Enroll in the Medicare Program for the Sole Purpose of Ordering and Referring Items and Services for Medicare Beneficiaries	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM7097.pdf
MLN Matters Article MM7723, Instructions for Processing Form CMS-855O Submissions	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM7723.pdf
MLN Matters Article MM8239, Denial for Power Mobility Device (PMD) Claim from a Supplier of Durable Medical, Orthotics, Prosthetics, and Supplies (DMEPOS) When Ordered By a Non-Authorized Provider	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8239.pdf
MLN Matters Special Edition Article SE1305, Full Implementation of Edits on the Ordering/Referring Providers in Medicare Part B, DME, and Part A Home Health Agency (HHA) Claims	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1305.pdf

Table 2. Resources (cont.)

For More Information About…	Resource
MLN Matters Special Edition Article SE1311, Opting out of Medicare and/or Electing to Order and Certify Items and Services to Medicare Beneficiaries	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1311.pdf
NPI	CMS.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand
Order and Referring Data Files, Eligible Physicians/NPPs	Data.CMS.gov/Medicare-Enrollment/Order-and-Referring/qcn7-gc3g
Order and Referring PMD Data Files, Eligible Physicians/NPPs	Data.CMS.gov/Medicare-Durable-Medical-Equipment-DME-/Order-and-Referring-PMD/g6jg-y93m
PECOS	PECOS System PECOS.CMS.HHS.gov About PECOS CMS.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/InternetbasedPECOS.html
PECOS Technical Assistance Contact Information	CMS.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243418.html
Video Resources	Medicare Provider Enrollment, Chain, and Ownership System (PECOS) YouTube.com/playlist?list=PLaV7m2-zFKpia1McB1WKKkw2esAdiZRem What's New in NPPES 3.0 YouTube.com/embed/BOJCAj1P2u8

Table 3. Hyperlink Table

Embedded Hyperlink	Complete URL
Application Fee Requirements Matrix	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/ApplicationFeeRequirementMatrix1.pdf

Table 3. Hyperlink Table (cont.)

Embedded Hyperlink	Complete URL
Change of Ownership or Control	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE1617.pdf
Changes in Provider and Supplier Enrollment, Ordering and Referring, and Documentation Requirements; and Changes in Provider Agreements Final Rule	https://www.federalregister.gov/d/2012-9994
Check NPPES NPI Registry	https://npiregistry.cms.hhs.gov
Denial for Power Mobility Device (PMD) Claim from a Supplier of Durable Medical, Orthotics, Prosthetics, and Supplies (DMEPOS) When Ordered By a Non-Authorized Provider	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM8239.pdf
Electronic File Interchange EFI	https://nppes.cms.hhs.gov/webhelp/nppeshelp/EFI%20HELP%20PAGE.html
Final Rule CMS-4182-F	https://www.federalregister.gov/d/2018-07179
For Physicians/Non-Physician Practitioners (NPPs)	https://data.cms.gov/Medicare-Enrollment/Order-and-Referring/qcn7-gc3g
For Power Mobility Device (PMD) Suppliers	https://data.cms.gov/Medicare-Durable-Medical-Equipment-DME-/Order-and-Referring-PMD/g6jg-y93m
Help Fight Medicare Fraud	https://www.medicare.gov/forms-help-resources/help-fight-medicare-fraud
Identity & Access Management (I&A) System I&A System	https://nppes.cms.hhs.gov/IAWeb
Initial Non-Physician Applications Pending Contractor Review	https://data.cms.gov/Medicare-Enrollment/Pending-Initial-L-and-Ts-Non-Physicians/n86y-dqck
Initial Physician Applications Pending Contractor Review	https://data.cms.gov/Medicare-Enrollment/Pending-Initial-L-and-Ts-Physicians/ip7y-ztn9

Table 3. Hyperlink Table (cont.)

Embedded Hyperlink	Complete URL
Medicare Enrollment Application: Enrollment for Eligible Ordering, Certifying, and Prescribing Physicians and Other Eligible Professionals (Form CMS-855O) CMS-855O	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/cms855O.pdf
Medicare Enrollment for Institutional Providers	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243482.html
Medicare Enrollment for Physicians, NPPs, and Other Part B Suppliers	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243432.html
Medicare Fee-For-Service Provider Enrollment Contact List	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/contact_list.pdf
Medicare Fraud & Abuse: Prevent, Detect, Report	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243333.html
Medicare Provider-Supplier Enrollment	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll
National Plan and Provider Enumeration System NPPES	https://nppes.cms.hhs.gov
Necessary Enrollment Information	https://pecos.cms.hhs.gov/pecos/help-main/checklists.jsp
NPI Application/Update Form (Form CMS-10114)	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS10114.pdf
NPPES NPI Registry	https://npiregistry.cms.hhs.gov
Office of Inspector General	https://oig.hhs.gov
Online	https://nppes.cms.hhs.gov/IAWeb
Opt Out Affidavits List	https://data.cms.gov/Medicare-Enrollment/Opt-Out-Affidavits/7yuw-754z

Table 3. Hyperlink Table (cont.)

Embedded Hyperlink	Complete URL
Paper Application	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS10114.pdf
PECOS FAQs	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/ICN909015.html
PECOS for DMEPOS Suppliers	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243483.html
PECOS	https://pecos.cms.hhs.gov
Preclusion List	https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/PreclusionList.html
Submit an Affidavit	https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1311.pdf