

Rural Emergency Hospitals

Medicare has established Rural Emergency Hospitals (REHs) as a new Medicare provider type to address the growing concern over closures of rural hospitals.

Who Can Convert to an REH

A facility is eligible to convert to an REH if it was a Critical Access Hospital (CAH) or rural hospital with not more than 50 beds as of December 27, 2020 (including a hospital that closed after December 27, 2020). REHs must provide emergency services and observation care and are prohibited by the statute from providing inpatient services.

How to Enroll

Submit a change of information online via [PECOS](#) or a paper [CMS-855A](#) application to your Medicare Administrative Contractor (MAC) to convert to an REH. Use the following steps:

PECOS Submissions

1. Log into PECOS and locate your CAH enrollment under “Existing Enrollments.”
2. Select “More Options.”
3. Select “Perform a Change of Information to Current Enrollment Information.”
4. Select “Yes” that the application is to convert a CAH facility to a REH facility.
5. Continue through the screens entering all applicable enrollment data for your REH.
6. Upload all required state licenses and/or certifications for operation as an REH (if available to you at the time).
7. Electronically sign and submit your application.

Paper Submissions

1. Check the “You are changing your Medicare information” box in Section 1(A).
2. Check the “Other” box in Section 2(A)(2) and write “Rural emergency hospital” or “REH” in the space provided.
3. Complete Sections 2(B) (with REH information), 3, and 15 and/or 16 (as applicable).
4. Report any additions, deletions, or changes to your current enrollment information (that is, your current or most recent CAH or rural hospital enrollment) that will stem from your conversion to an REH (e.g., new billing agency, adding/deleting managing employees, deleting 5% or greater owners).
5. Submit all required state licenses and/or certifications for operation as an REH (if available to you at the time).

Note: You are not required to pay an application fee. In addition, you are not required to submit a voluntary termination application to terminate your existing CAH or rural hospital

enrollment. The termination of your existing enrollment will take effect when your REH enrollment is approved.

What to Expect After Submitting Your Enrollment Application

Your MAC will screen your application to confirm your eligibility to convert to an REH and to ensure compliance with all Medicare enrollment requirements. To avoid enrollment delays or rejection, be sure to respond to any requests for additional information or documentation from your MAC(s) in a timely manner.

The MAC will send their recommendation for approval to the state who will perform a survey and thereafter refer the application to the CMS Location for final review. The MAC will notify you when your application has been approved or denied. The effective date for billing privileges is based on when all applicable federal requirements have been met.

Once enrolled, the REH must maintain compliance with the enrollment requirements in 42 CFR Part 424, subpart P. This includes, but is not limited to, reporting changes to its enrollment information, undergoing revalidation, etc.

It is possible that an enrolled REH may seek to return to its former status as a CAH or rural hospital. To do so it must submit an initial enrollment application and, for the REH enrollment, a voluntary termination application. It cannot do so via a change of information.

Identify Your MAC

MACs process all Medicare enrollment applications for Part A and B providers and suppliers. MACs serve as the primary avenue of communication between health care providers and the CMS Medicare Fee-For-Service program.

[Find and contact your MAC \(PDF\).](#)