

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



HEALTH CARE PROFESSIONAL
Frequently Used Webpages

TABLE OF CONTENTS

General Medicare Information	2
Medicare Contracting	3
Provider Enrollment and Certification	3
Coverage	4
Billing and Payment – General Information	5
Billing and Payment – Provider Specific	6
Provider Centers	8
Quality	9
Outreach and Education	10
Laws and Regulations	11

GENERAL MEDICARE INFORMATION

Medicare health care professionals should understand how the Medicare Program works so that they may identify Medicare benefits, accurately bill Medicare services, and provide quality care to beneficiaries. Select a webpage below to learn the basics of Medicare.

Medicare Home Page

<https://www.cms.gov/Medicare/Medicare.html>

Health Plans – General Information

<https://www.cms.gov/Medicare/Health-Plans/HealthPlansGenInfo>

Building an Organizational Response to Health Disparities

Resources and concepts for improving equity and responding to disparities. Concepts include: data collection, data analysis, culture of equity, quality improvement, and interventions.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Health-Disparities-Guide.pdf>

Part C and D Performance Data Stratified by Race and Ethnicity

Shows national level results for certain Medicare quality measures stratified by race and ethnicity for 2014, and Medicare Advantage contract level results stratified by race and ethnicity for 2013 and 2014. This activity provides information that will be useful for targeting quality improvement activities and resources, monitoring health and drug plan performance, and advancing the development of culturally and linguistically appropriate quality improvement interventions and strategies.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/research-and-data/statistics-and-data>

Medicare Health Support (formerly Chronic Care Improvement Program [CCIP])

<https://www.cms.gov/Medicare/Medicare-General-Information/CCIP>

Centers for Medicare & Medicaid Services (CMS) Office of Minority Health

Tools to eliminate health disparities and improve the health of all minority populations, including racial and ethnic minorities; people with disabilities; members of the lesbian, gay, bisexual, and transgender (LGBT) community; and rural populations.

<https://www.cms.gov/about-cms/agency-information/omh>

CMS Forms

<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms>

Event Calendar

<https://www.cms.gov/apps/events>

TO BECOME A NEW PROVIDER:

1 Obtain a [National Provider Identifier \(NPI\)](#).

2 Meet Medicare provider-specific [eligibility requirements](#).

3 Complete the appropriate [CMS-855 enrollment application](#).

4 Complete [Electronic Data Interchange \(EDI\) Forms](#).

5 Enroll for [Electronic Funds Transfer \(EFT\)](#).

For quick access to these pages, bookmark them or save them in your web browser Favorites!

MEDICARE CONTRACTING

CMS contracts with private companies to perform many functions on behalf of the Medicare Program including provider enrollment and claims processing. Learn more by selecting a contractor resource below.

Contractor Provider Customer Service Program – General Information

<https://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen>

Medicare Administrative Contractors (MACs)

<https://www.cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/MedicareAdministrativeContractors.html>

Contractor Resources

<https://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/Contractor-Resources.html>

Review Contractor Directory – Interactive Map

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Review-Contractor-Directory-Interactive-Map>

Exemplary Practices

<https://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/Exemplary-Practices.html>

Medicare Advantage (MA)/Part D Contract and Enrollment Data

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCR-AdvPartDEnrolData>

Performance Data

<https://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/Performance-Data.html>

PROVIDER ENROLLMENT AND CERTIFICATION

Health care professionals must enroll in the Medicare Program to receive payment for covered services they furnish to Medicare beneficiaries. The following webpages offer information regarding the enrollment process.

NPI Standard

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/NationalProvIdentStand>

Survey & Certification – Certification & Compliance

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc>

Medicare Provider-Supplier Enrollment

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll>

Internet-Based Provider Enrollment, Chain, and Ownership System (PECOS)

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/InternetbasedPECOS.html>

Enrollment Applications

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/EnrollmentApplications.html>

Electronic Billing & Electronic Data Interchange (EDI) Transactions

<https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans>

Electronic Funds Transfer (EFT)

<https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/EFT.html>

COVERAGE

Medicare coverage policies specify the circumstances under which benefits are provided under the Medicare Program. Select a link below to access specific coverage information including Medicare coverage determinations.

Medicare Coverage Center

<https://www.cms.gov/Center/Special-Topic/Medicare-Coverage-Center.html>

Medicare Coverage Database

<https://www.cms.gov/medicare-coverage-database>

Medicare Coverage Determination Process

<https://www.cms.gov/Medicare/CoverageDeterminationProcess>

NCDs Alphabetical Index

<https://www.cms.gov/medicare-coverage-databaseindexes/ncd-alphabetical-index.aspx>

Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS) Help (270/271)

<https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/HETSHelp>

Premium, Deductible & Coinsurance Amounts

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MedicareProgramRatesStats/PremiumsDeductiblesCoinsurance.html>

Prevention – General Information

<https://www.cms.gov/Medicare/Prevention/PrevntionGenInfo>

Beneficiary Notices Initiative (BNI)

<https://www.cms.gov/Medicare/Medicare-General-Information/BNI>

Telehealth

<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth>

Medicare Approved Facilities/Trials/Registries

<https://www.cms.gov/Medicare/Medicare-General-Information/MedicareApprovedFacilitie>

The Medicare Coverage Database is a searchable database of all National Coverage Determinations (NCDs), Local Coverage Determinations (LCDs), local policy articles, and proposed NCD decisions.

Medicare Clinical Trial Policies

<https://www.cms.gov/Medicare/Coverage/ClinicalTrialPolicies>

From Coverage to Care (C2C)

Resource to help beneficiaries understand their health coverage and how to connect to primary care and preventive services.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/OMH-Coverage2Care.html>

BILLING AND PAYMENT – GENERAL INFORMATION

Submitted claims must be completed accurately to receive payment for Medicare-covered services and supplies. The following webpages offer important provider billing and payment information.

Healthcare Common Procedure Coding System (HCPCS) – General Information

<https://www.cms.gov/Medicare/Coding/MedHCPCSGenInfo>

International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM)

<https://www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes>

International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM)

<https://www.cms.gov/Medicare/Coding/ICD10>

National Correct Coding Initiative (NCCI) Edits

<https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd>

Outpatient Code Editor (OCE)

<https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit>

Coordination of Benefits (COB)

<https://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Recovery-Overview/Coordination-of-Benefits/Coordination-of-Benefits.html>

Medicare Claims Processing Manual

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912.html>

Documentation Guidelines for Evaluation and Management (E/M) Services

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243514.html>

Preventive Services

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications-Items/CMS1243319.html>

On October 1, 2015, ICD-10 code sets replaced the ICD-9 code sets used to report medical diagnoses and inpatient procedures.

Therapy Services

<https://www.cms.gov/Medicare/Billing/TherapyServices>

Fee Schedules – General Information

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/FeeScheduleGenInfo>

Prospective Payment Systems (PPS) – General Information

<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ProspMedicareFeeSvcPmtGen>

PC Pricer

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PCPricer>

Health Care Payment and Remittance Advice

<https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/Remittance.html>

Medical Review

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Medical-Review>

Comprehensive Error Rate Testing (CERT)

<https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/CERT>

Appeals

<https://www.cms.gov/Medicare/Appeals-and-Grievances/OrgMedFFSAppeals>

MACs use the Remittance Advice (RA) to communicate claim processing decisions about payments, adjustments, and denials.

BILLING AND PAYMENT – PROVIDER SPECIFIC

Select a link below for billing and payment information specific to health care professionals.

Acute Inpatient PPS

<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS>

Ambulance Fee Schedule

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AmbulanceFeeSchedule>

Ambulatory Surgical Center (ASC) Payment

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ASCPayment>

Clinical Laboratory Fee Schedule

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched>

Durable Medical Equipment, Prosthetics/Orthotics & Supplies (DMEPOS) Fee Schedule

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSFeeSched>

DMEPOS Competitive Bidding

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/DMEPOSCompetitiveBid>

Home Health PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HomeHealthPPS>

Hospice

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Hospice>

Hospital-Acquired Conditions (Present on Admission Indicator)

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond>

Hospital Outpatient PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS>

Inpatient Psychiatric Facility PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientPsychFacilPPS>

Inpatient Rehabilitation Facility PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS>

Long-Term Care Hospital PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/LongTermCareHospitalPPS>

Physician Bonuses

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HPSAPSAPhysicianBonuses>

Physician Fee Schedule

<https://www.cms.gov/apps/physician-fee-schedule>

Skilled Nursing Facility (SNF) PPS

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPSS>

SNF Consolidated Billing

<https://www.cms.gov/Medicare/Billing/SNFConsolidatedBilling>

Competitive Acquisition Program for Part B Drugs & Biologicals

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/CompetitiveAcquisforBios>

Historical Part B Drug Pricing Files

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/HistPartBDrugPricingFiles/Overview.html>

Medicare Part B Drug Average Sales Price

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice>

The CMS Frequently Asked Questions (FAQ) webpage at <https://questions.cms.gov> allows health care professionals to ask Medicare-related questions or search existing FAQ topics.

PROVIDER CENTERS

Provider Centers contain helpful links to billing and payment resources as well as other topics such as CMS manuals/transmittals, educational resources, policies/regulations, coverage, and contacts. Select the Provider Center link below specific to your provider type to learn more.

Use the [Review Contractor Directory – Interactive Map](#) to find your MAC's contact information.

All Fee-For-Service Providers Center

<https://www.cms.gov/Center/Provider-Type/All-Fee-For-Service-Providers-Center.html>

Ambulance Services Center

<https://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html>

Ambulatory Surgical Centers (ASCs) Center

<https://www.cms.gov/Center/Provider-Type/Ambulatory-Surgical-Centers-ASC-Center.html>

American Indian/Alaska Native Center

<https://www.cms.gov/Center/Special-Topic/American-Indian-Alaska-Native-Center.html>

Anesthesiologists Center

<https://www.cms.gov/Center/Provider-Type/Anesthesiologists-Center.html>

Clinical Labs Center

<https://www.cms.gov/Center/Provider-Type/Clinical-Labs-Center.html>

Critical Access Hospitals (CAHs) Center

<https://www.cms.gov/Center/Provider-Type/Critical-Access-Hospitals-Center.html>

Durable Medical Equipment (DME) Center

<https://www.cms.gov/Center/Provider-Type/Durable-Medical-Equipment-DME-Center.html>

End Stage Renal Disease (ESRD) Center

<https://www.cms.gov/Center/Special-Topic/End-Stage-Renal-Disease-ESRD-Center.html>

Federally Qualified Health Centers (FQHCs) Center

<https://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center.html>

Home Health Agency (HHA) Center

<https://www.cms.gov/Center/Provider-Type/Home-Health-Agency-HHA-Center.html>

Hospice Center

<https://www.cms.gov/Center/Provider-Type/Hospice-Center.html>

Hospital Center

<https://www.cms.gov/Center/Provider-Type/Hospital-Center.html>

Pharmacist Center

<https://www.cms.gov/Center/Provider-Type/Pharmacist-Center.html>

Physician Center

<https://www.cms.gov/Center/Provider-Type/Physician-Center.html>

Practice Administration Center

<https://www.cms.gov/Center/Provider-Type/Practice-Administration-Center.html>

Rural Health Clinics (RHCs) Center

<https://www.cms.gov/Center/Provider-Type/Rural-Health-Clinics-Center.html>

Skilled Nursing Facility (SNF) Center

<https://www.cms.gov/Center/Provider-Type/Skilled-Nursing-Facility-Center.html>

QUALITY

Quality health care for Medicare beneficiaries is a high priority for CMS. The following webpages offer information regarding CMS' quality initiatives.

Quality of Care Center

<https://www.cms.gov/Center/Special-Topic/Quality-of-Care-Center.html>

Quality Initiatives – General Information

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Quality-InitiativesGenInfo>

CMS Office of Minority Health

Tools to eliminate health disparities and improve the health of all minority populations, including racial and ethnic minorities; people with disabilities; members of the lesbian, gay, bisexual, and transgender (LGBT) community; and rural populations.

<https://www.cms.gov/about-cms/agency-information/omh>

Quality Improvement Organizations

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Quality-ImprovementOrgs>

Quality Measures

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures>

Building an Organizational Response to Health Disparities

Resources and concepts for improving equity and responding to disparities. Concepts include: data collection, data analysis, culture of equity, quality improvement, and interventions.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Health-Disparities-Guide.pdf>

Part C and D Performance Data Stratified by Race and Ethnicity

Shows national level results for certain Medicare quality measures stratified by race and ethnicity for 2014, and Medicare Advantage contract level results stratified by race and ethnicity for 2013 and 2014. This activity provides information that will be useful for targeting quality improvement activities and resources, monitoring health and drug plan performance, and advancing the development of culturally and linguistically appropriate quality improvement interventions and strategies.

<https://www.cms.gov/About-CMS/Agency-Information/OMH/research-and-data/statistics-and-data>

OUTREACH AND EDUCATION

CMS offers numerous outreach and education resources including the Medicare Learning Network® (MLN), Quarterly Provider Updates, and Open Door Forums. Select a link below to access these resources.

Outreach & Education

<https://www.cms.gov/Outreach-and-Education/Outreach-and-Education.html>

Medicare Learning Network® (MLN) – General Information

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo>

MLN Catalog

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/MLNCatalog.pdf>

MLN Products

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts>

MLN Matters® Articles

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles>

MLN Educational Web Guides

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/MLN-EducationalWebGuides-FastFact-Archive.pdf>

Web-Based Training (WBT)

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/WebBasedTraining.html>

MLN Guided Pathways: Provider Specific Medicare Resources

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNEdWebGuide/Downloads/Guided_Pathways_Provider_Specific_Booklet.pdf

MLN Provider Compliance

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ProviderCompliance.html>

MLN Connects® Provider Association Partnerships

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLN-Partnership>

MLN Electronic Mailing Lists

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/mailling_lists_factsheet.pdf

The Medicare Learning Network® provides a variety of health care professional training and educational materials.

Subscribe to an MLN electronic mailing list to receive the latest Medicare news.

CMS.gov Email Updates

<https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/EmailUpdates.html>

Quarterly Provider Updates

<https://www.cms.gov/Regulations-and-Guidance/Regulations-and-Policies/QuarterlyProviderUpdates>

Open Door Forums

<https://www.cms.gov/Outreach-and-Education/Outreach/OpenDoorForums>

Newsroom Center

<https://www.cms.gov/Newsroom/Newsroom-Center.html>

Glossary

<https://www.cms.gov/apps/glossary>

Acronyms

<https://www.cms.gov/apps/acronyms>

LAWS AND REGULATIONS

The following webpages provide information on Medicare guidance, legislation, regulations, and policies impacting Medicare health care professionals. Select a link below to learn more.

Regulations and Guidance

<https://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html>

Health Insurance Portability and Accountability Act (HIPAA) – Administrative Simplification Overview

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/HIPAA-ACA>

Physician Self Referral

<https://www.cms.gov/Medicare/Fraud-and-Abuse/PhysicianSelfReferral>

Privacy and Security Standards

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/HIPAA-ACA/PrivacyandSecurityInformation.html>

Internet-Only Manuals (IOMs)

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs.html>

Transmittals

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals>



The Medicare Learning Network® Disclaimers are available at <http://go.cms.gov/Disclaimer-MLN-Product>.

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health & Human Services (HHS).

Check out CMS on:

