

## Part B Insider (Multispecialty) Coding Alert

### ENROLLMENT: 10 Mistakes That Could Scuttle Your Medicare Enrollment Applications

#### Your enrollment contact should be easy to reach

If you're having trouble with your Medicare enrollment, it's your own fault.

That's what top **Centers for Medicare & Medicaid Services** (CMS) official **Jim Bossenmeyer** told providers in a June 29 Open Door Forum on enrollment. It's not feasible for Medicare contractors to provide you with updates on the status of your delayed application, he insisted.

-In fact, if you're submitting a complete application the first time or responding fully to requests, there should be little or no need to follow up and obtain status requests,- Bossenmeyer added.

Providers are still reporting long, hopeless delays getting their applications processed at some carriers. One of the worst is **Trailblazer Health Enterprises**, which said in a recent letter that it's taking an average of 180 days to deal with applications due to staffing turnover, according to attorney **Catherine Greaves** with **Thompson & Knight** in Austin, TX.

Some providers are reporting delays of over 200 days, reports **Leslie Witkin** with **Physicians First Consulting Services** in Orlando, FL.

But Bossenmeyer said most of the time, providers aren't providing all the required information or answering follow-up questions in a timely fashion. He did say CMS is working with the carriers who have backlogs. But that's the same thing CMS officials have been saying for a year, Witkin complains.

Bossenmeyer seemed more aware than before that this is becoming a hotter issue, however, Witkin adds.

**One problem:** Carriers are sending provider communications to the wrong addresses. Instead of sending them to your -correspondence address,- they're sending letters to your -pay-to address,- also known as the -Special Payment address.- Only remittances and payments are supposed to go to this address, says Witkin.

This causes huge headaches for larger physician groups with separate business offices and multiple locations, Witkin explains. Bossenmeyer said CMS is working on communicating with the carriers about this issue.

Bossenmeyer provided some tips to help make sure your doctor's enrollment application goes through without a hitch:

- **Use the correct form.** If you submit the 2001 version of the enrollment form, or an earlier version, the contractor will send it back right away, Bossenmeyer warned. You can get the correct form at [www.cms.hhs.gov/medicareprovidersupenroll](http://www.cms.hhs.gov/medicareprovidersupenroll).

- **Make sure the physician reads the application** over and checks that all the information is accurate and complete before you send it in. Use ink, not pencil.

- **Be prepared.** If a physician has not submitted an enrollment application since 2001, you'll have to submit a whole new form for the doctor--even if you're just changing some information. Although, for changes of information, you only have to fill out Section 1B of the form.



- **Your legal business name must match** the name listed with the **Social Security Administration** and the National Provider Identifier (NPI) database. And if you're applying as an organization, it also must match the name in the **Internal Revenue Service** database. Don't abbreviate it or change anything.

- **If the provider is reassigning Medicare benefits** to someone else, list that person's Medicare ID number in section 1A, if applicable.

- **You must check -yes- or -no-** for the question in Section 3 about adverse legal actions. If the answer is -yes,- you have to list all adverse legal actions that you've faced--and provide any supporting documentation.

- **If your physician has multiple NPIs** or associated Medicare ID numbers, list all possible combinations in Section 4.

- **Choose your contact person carefully**, and list this person in Section 13. This will be the only person the Medicare contractor will try to reach, so it should be someone who's easy to get ahold of. And it should be someone with direct access to your physicians, so he or she can obtain the answers to any questions quickly. If the contact person is hard to reach, your application may be delayed. If you don't list anybody, the contractor will try to call your physician directly.

- **Include all documentation**, including professional licenses, business licenses, the notification you received of the physician's NPI number, and your electronic funds transfer agreement with Medicare, CMS form 588. The CMS 588 should be signed by the physician who's signing the enrollment application.

- **Don't use a copied or stamped signature.** Get your physician to sign the form personally.