

Part B Insider (Multispecialty) Coding Alert

Physicians Could Wait Months To Bill Under New Rule

CMS Imposes Tough Requirements On Enrollment, Say Reps

A proposed rule for physician enrollment in Medicare would make your life impossible without adding any benefits, according to top associations.

The rule, published in the April 25 Federal Register, would force hundreds of thousands of physicians to submit tons of paperwork in the near future. And it would tip the scales away from Medicare participation for many physicians, claim physician associations in their comments submitted to the **Centers for Medicare & Medicaid Services** in late June. Among the complaints about the proposed rule:

The forms are too intrusive and onerous. The proposal would require physicians, in effect, to re-enroll every three years, and give them only 60 days each time to verify their information. Physicians can't be expected to update that much data regularly, and the Medicare carriers will be overburdened trying to process it, insists the **American Academy of Family Physicians**. And the estimated 305,000 physicians who were billing Medicare before the 855 enrollment form debuted in 1996 will all have to file the complete form, creating a deluge.

Instead of forcing physicians to report every change in their staffing, for a whole range of "managing employees," CMS should provide physicians with the list of individuals excluded from Medicare, says the **American College of Physicians**. That way, the physicians can check the list for current employees themselves.

There's no need. The **HHS Office of Inspector General's** estimates of incorrect physician payments have dropped without new enrollment requirements, so why add a new burden anyway? And given the years of training and residency that physicians must go through, what makes CMS think it'll catch a problem in the enrollment process that a decade of training didn't weed out?

It duplicates HIPAA requirements. HIPAA already will require universal and unique identifiers for physicians and other providers soon, so why duplicate that requirement?

It will drive physicians out of Medicare. And the proposal goes against recent CMS efforts to reduce physicians' regulatory burden, the AAFP insists. "We cannot conceive why CMS would create such a giant new regulatory scheme to gather information on physicians," the AAFP writes.

Physicians must wait months to bill. The proposed rule may prohibit physicians from billing Medicare for dates of service before the carrier approves their enrollment forms, which can take months even if the carriers somehow manage to meet their deadlines, worries the AAFP. CMS needs to clarify this issue, adds the ACP.