

Part B Insider (Multispecialty) Coding Alert

Reader Questions: Get the Scoop on Billing Before Credentialing

Question: Our practice has a new physician coming on board to replace a retiring doctor. When can I start billing for his services? Does it matter when he gets credentialed with the insurance companies?

Answer: When you can bill for a new physician's services does depend on when you're able to get him credentialed. You'll also need to know the differences between the payers you'll be reporting the services to.

Medicare: For Medicare, you're allowed to bill 30 days retroactively. Note that you'll count back 30 days from the physician's application date, not the Medicare approval date. So the sooner you get the application in, the better.

The date depends on how you're submitting the application as well. If you submit the application via the Provider Enrollment, Chain, and Ownership System (PECOS), you have 30 days from the day you submitted the enrollment application to the Medicare carrier. If you file a paper application, the filing date is the day the carrier receives your application in the mail, however.

Don't start counting from the day you put the application in your mailbox.

Private payers: Check with the individual payer as the rules vary. Some may give you an effective date for when you can start billing. Most payers will not take claims from dates of service prior to the date when they approved the physician as a credentialed paneled participating physician with their plan.

Warning: You should not bill services under another provider while you're waiting for the new physician's credentialing.

Alternative: If a patient needs to see the new physician before that physician is credentialed, you can take the selfpay route, if the patient is willing.

Best bet: Focus on getting the physician credentialed and once the applications are in, then you can look at letting the physician start seeing patients.