Colorado M.E.S.A. Initiative

Medicare Experts/Senior Access

Innovations in Geriatric Practice and Alzheimer's Care

Webinar Presentation

Internet-Based PECOS

Housekeeping

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Housekeeping

- Handouts for this webinar available at www.ColoradoMESA.org
  - Sign in
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- Archive will be posted on Monday
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  - Go to Classroom, Webinar Archives

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Intro to The Colorado M.E.S.A Initiative

- The Colorado M.E.S.A. Initiative
  - Medicare Experts / Senior Access
  - Be adept at Medicare coding & documentation so you are paid fairly for work
  - Be comfortable serving patients with dementia & other geriatric syndromes
- A collaboration:
  - Funded by The Colorado Health Foundation, The Kaiser Permanente Foundation, and Caring for Colorado
  - Alzheimer's Association, Colorado Chapter
  - Senior Care of Colorado/IPC

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Shelly Thomas, CPC

- MESA Education Coordinator
- With Senior Care of Colorado practice since 2001
  - Built in-house billing department
  - 60+ providers
  - Virtually 100% Medicare
- CPC from American Academy of Professional Coding
- BS in Healthcare Administration with minor in Gerontology

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Medicare Enrollment Application Submission Options

- Physicians and non-physician practitioners can apply for enrollment in the Medicare Program or make a change in their enrollment information using either:

- Internet-based PECOS (Focus of Webinar), or

- The paper enrollment application process (e.g., Form CMS 855I and, if appropriate, Form CMS 855R).

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Internet-Based PECOS

- Provider Enrollment, Chain and Ownership System (PECOS)
  - What is It?
    - Internet-Based Provider Enrollment.
    - Allows a provider to enroll in Medicare, view their Medicare enrollment data and update their Medicare enrollment information.
    - TrailBlazer Provider Enrollment encourages physicians, non-physician practitioners, and provider or supplier organizations to use PECOS to expedite enrollment.

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5 Basic Enrollment Actions in PECOS

Five basic enrollment actions are allowed via Internet based PECOS. They are:

1. Establish a new initial enrollment record
   - This occurs when you are newly enrolling in Medicare or do not have an existing enrollment record in PECOS and are establishing one.
2. Make a change of information in an existing enrollment record
   - This occurs when you have an existing enrollment record in PECOS and are reporting a change of information to that record.

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5 Basic Enrollment Actions in PECOS

3. Add or change a reassignment of benefits
   - This occurs when you are adding, changing, or ending an existing reassignment of benefits.
4. Reactivation
   - This occurs when you reactivate an existing enrollment record that had been deactivated.
5. Voluntary withdrawal
   - This occurs when you voluntarily withdraw from the Medicare Program. When a practitioner retires, surrenders his or her license for any reason, or chooses to no longer participate in the Medicare Program, he or she would voluntarily withdraw from the Medicare Program.

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3-Steps for Individual Provider Enrollment

- **Physicians and NPPs must complete the following three steps to complete an enrollment action using Internet-based PECOS:**

1. You must have an active National Provider Identifier (NPI) and a National Plan and Provider Enumeration System (NPPES) user ID and password to use Internet-based PECOS

   For assistance in establishing an NPPES user ID and password, or if you have forgotten your ID or password or wish to change your NPPES password, contact the NPI Enumerator at 1-800-465-3203 or send an e-mail to customerservice@npienumerator.com.

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3-Steps for Individual Provider Enrollment

2. Go to Internet-based PECOS at https://pecos.cms.hhs.gov and complete, review, and submit the electronic enrollment application.

3. Print, sign, and date the two-page Certification Statement for each enrollment application submitted and mail the Certification Statement and all supporting paper documentation to your designated Medicare enrollment contractor, ideally **within one week of the electronic submission**.

   NOTE: A Medicare enrollment contractor is not permitted to begin processing an Internet enrollment application without the signed and dated Certification Statement. In addition, the effective date of filing an enrollment application is the date the Medicare enrollment contractor receives the signed and dated Certification Statement.

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e-Signature vs. Paper Process

- When submitting an Internet-based PECOS application, the provider has the **option** to sign through e-signature **or** paper.
  - The e-signature feature will save time and expedite review of the enrollment application.
  - The PECOS application will not be considered received until TrailBlazer Provider Enrollment receives the certification statement on paper or e-signature.

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e-Signature Process

- Electronic e-Signature Process:
  - An e-mail will be sent to the authorized signer of the application that will contain a pass code for the e-signature submission.
  - The authorized signer will enter the pass code into Internet-based PECOS to finalize submission of the application.
  - Mail any supporting documents and include the PECOS tracking number.

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Paper Process

- Paper Process:
  - The certification statement must be printed, signed and dated, and mailed to TrailBlazer Provider Enrollment with any supporting documents that may be required.
    - Must be signed by you in order to complete the enrollment or to make changes to your enrollment information.
    - Signatures must be original and in ink (blue ink is recommended).
    - Copied or stamped signatures will **not** be accepted.

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Provider and Supplier Organizations

Provider and supplier organizations must complete the following steps to complete an enrollment action using Internet-based PECOS:

1. The first step is taken by the Authorized Official (AO) of the provider or supplier organization.
   - This is done only one time.
   - The individual will register in the Internet-based PECOS Identification and Authentication System (PECOS I&A).
   - CMS will verify the information provided and the CMS EUS Help Desk will notify the AO of the verification.

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Provider and Supplier Organizations

2. Go to Internet-based PECOS at https://pecos.cms.hhs.gov and complete, review, and submit the electronic enrollment application.
3. The AO of the provider or supplier organization must electronically sign using the e-signature process or sign and date the two-page certification statement that the user will print from Internet-based PECOS.
   - The user must mail the signed and dated certification statement (if using the paper option), along with any required supporting paper documentation, to the designated Medicare contractor. **The Web application is not considered a receipt until the contractor receives the certification statement.**

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Who is an AO?

- An individual who will use Internet-based PECOS to submit enrollment applications for the provider or supplier organization will also register in PECOS I&A.

- This individual may be an employee of the provider or supplier organization or an employee of a separate organization.

- CMS will verify the information provided and the permission of the AO for that individual to use Internet-based PECOS on behalf of the provider or supplier organization.

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Who is an AO?

- The individual will complete the Security Consent Form and have it signed by an official of the employer and by the AO of the provider or supplier organization.

- The individual will mail the signed and dated Security Consent Form to the CMS EUS Help Desk.

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Who is an AO?

- The AO will need to periodically log on to Internet-based PECOS to see if there is a pending request for permission to access Internet-based PECOS on behalf of the provider or supplier organization.

- More than one person may be approved to use Internet-based PECOS on behalf of a given provider or supplier organization, but the Security Consent Form is completed only one time.

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AO Verification Process

- Once the registration and verification processes are completed, the CMS EUS Help Desk will notify the AO of the establishment of the relationship between the provider or supplier organization and the organization that will be using Internet-based PECOS on its behalf.

- It may take several weeks for the registration and verification processes to be completed.

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Using Internet-Based PECOS

- From the "My Home" or "My Enrollments" pages on Internet-based PECOS, which can be found at https://pecos.cms.hhs.gov on the CMS website, you may initiate an enrollment action by selecting an existing enrollment or an initial enrollment.
- Since Internet-based PECOS is a scenario-driven application, it will present a series of questions to obtain only the information needed to process a specific enrollment scenario.

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Using Internet-Based PECOS

- The Internet-based PECOS Enrollment web page summarizes the task you are about to begin and confirms that it is correct.

- To complete each task, simply enter the required information and navigate through the screens that are displayed.

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Using Internet-Based PECOS

- Once your Internet-based PECOS application is electronically submitted, it is "locked," meaning it cannot be edited by you, unless the Medicare enrollment contractor returns the application to you electronically for corrections through Internet-based PECOS.
- You may use Internet-based PECOS to check on the status of the enrollment application no earlier than 15 days after you submitted the application.

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Four Application Statuses

There are four application statuses:

1. Received
   A practitioner successfully submitted an electronic enrollment application to a Medicare enrollment contractor.
2. Reviewed
   The Medicare enrollment contractor is reviewing the enrollment application.

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Four Application Statuses

3. Returned for Additional Information

   You should respond to any request(s) from the Medicare enrollment contractor as soon as possible, but within 30 days of the request.

   If you do not respond timely to a Medicare enrollment contractor request for information it will delay the processing of the application, or may cause the application to be denied or rejected.

4. Approved or Rejected

   The Medicare enrollment contractor has processed the enrollment application and the final status will be displayed.

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Trailblazer Notification Process

- A system-generated e-mail will be sent to the contact person listed on the application.
- This e-mail states the application "status".
- "Processed" can indicate the application is approved, rejected, returned or denied.
- Timely follow-up and response to requested information is "key".

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Trailblazer Confirmation Process

- After the initial e-mail is sent, there are still some necessary steps TrailBlazer must initiate to enter the Provider Transaction Access Number (PTAN) into the Medicare systems.
- These steps ensure the provider's newly assigned or updated PTAN is active for billing purposes.
- **This process takes 3 to 5 days**.
- When completed, a confirmation letter will be mailed to the contact person notifying them of the new or updated PTAN.
- **Providers should not begin billing Medicare until they have received their confirmation letter from TrailBlazer.**

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Reminder

- Physicians, non-physician practitioners and provider/supplier organizations should mail all required supporting documentation and the signed/dated certification statement (if using the paper option) to TrailBlazer.

- Medicare contractors are mandated by CMS to **reject** any pending Internet-based application if the e-signature or signed/dated certification statement is not received within **15 days** of the Internet-based application creation date.

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Limitations

- The following scenarios are not available through Internet-based PECOS for provider or supplier organizations at this time.
- **The paper CMS-855 must be used for:**
  - Applications and changes in enrollment when the practice location is in a different state from the enrollment state (i.e., centralized flu billers).
  - Changes in ownership, acquisitions, and mergers and consolidations.
  - Changes in Taxpayer Identification Number (TIN).
  - Changes in Legal Business Name (LBN).
  - An enrolled Medicare Part A provider, supplier or organization wanting to enroll to bill for Part B services.

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Processing Time Frames

- Since Internet-based PECOS helps reduce the time necessary for a Medicare enrollment contractor to review and process a Medicare enrollment application, CMS has established processing time frames for applications submitted via the Internet separately from those submitted on paper.

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Processing Time Frames

In general:

- For Internet-based PECOS, CMS requires that Medicare enrollment contractors process **90 percent** of the applications (e.g., initial enrollments, changes of information, and reassignments) within **45 days** of receipt of the signed and dated Certification Statement and the supporting documentation.
- For paper enrollment applications, CMS requires that Medicare enrollment contractors process **80 percent** of initial applications within **60 days**, and 80 percent of changes and reassignments within 45 days.
- These time frames may be adjusted by CMS in situations of extreme increases or decreases in the number of enrollment applications received for processing.)

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Access to Internet-Based PECOS

- To access Internet-based PECOS, visit
  https://pecos.cms.hhs.gov/pecos/login.do

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Advantages of PECOS

- The primary advantages of Internet-based PECOS are to:
  - Reduce the time necessary for you to enroll or make a change in your Medicare enrollment information;
  - Streamline the Medicare enrollment process for you;
  - Allow you to view your Medicare enrollment information, including any reassignments, to ensure that your enrollment information is accurate; and
  - Reduce the administrative burden associated with completing and submitting enrollment information to Medicare.

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Resources

- For more information about the Medicare enrollment process, visit the Medicare Provider-Supplier Enrollment web page at http://www.cms.gov/ MedicareProviderSupEnroll on the CMS website.
- The "Internet-based PECOS" page within the Medicare-Provider Supplier Enrollment web page contains multiple start-to-finish webinars on a variety of enrollment scenarios.
- To access Internet-based PECOS, visit https://pecos.cms.hhs.gov/pecos/login.do on the CMS website.
- To report an Internet-based PECOS navigation, access, or printing problem, contact the CMS EUS Help Desk at 1-866-484-8049, or send an e-mail to EUSSupport@cgi.com.

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Q&A, Wrap-Up

Q&A

- If you would like to ask any questions, please type them into the "Questions" box in your Go-to-Webinar control panel now

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MESA Website

- Reminder to use resources on www.ColoradoMESA.org
- Sign in to access
- Webinar archives and handouts
- Videos
- Documents and links
- Discussion forum
  - Ask any questions that weren't answered today

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Next Webinar

- Friday, July 13 (delayed 1 week due to holiday)
- 12:15 – 12:45 pm
- Special guest speaker:

  Steven Mildward

  Provider Outreach and Education

  TrailBlazer Health Enterprises, LLC

  "The Top 10 Things We (TrailBlazer) Wish You Knew"

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