

**Medicare Provider Enrollment of Individuals
(Physicians and Non-Physician Practitioners)
October 4, 2007**

All individuals (physicians and non-physician practitioners) who will be providing services to Medicare beneficiaries must complete form CMS-855I (Medicare Enrollment Application – Physicians and Non-Physician Practitioners) to enroll with Medicare. In some situations, the physician/non-physician practitioner must also complete form CMS-855R (Medicare Enrollment Application – Reassignment of Medicare Benefits). The physician/non-physician practitioner should refer to the documents entitled, “Tips to Facilitate the Medicare Enrollment Process for Physicians and Non-Physician Practitioners” and “CMS-855I Section Specific Tips” when completing the CMS-855I.

Physicians/non-physician practitioners must obtain an NPI from the National Plan and Provider Enumeration System (NPPES) prior to completing the CMS-855I or CMS-855R enrollment applications because the NPI must be reported on the applications. If the NPI is not reported, the enrollment application can not be processed by the Medicare carrier.

*If a physician/non-physician practitioner wants to **opt out** of Medicare, he/she should contact the Medicare contractor for instructions on the opt out process.*

Physician/Non-physician Practitioner Enrollment Scenarios

The following scenarios describe how the CMS 855I should be completed depending on how the physician/non-physician practitioner will be providing services and billing Medicare. All appropriate sections of the CMS-855I are to be completed. We note below where the Medicare Identification Number (MIN) and National Provider Identifier (NPI) are to be reported for each scenario. We have also included other pertinent information, such as when a CMS-855R or a CMS-855B (Medicare Enrollment Application – Clinics/Group Practices and Certain Other Suppliers).

Scenario 1: Physician assistant only.

A physician assistant furnishes his/her Medicare Identification Number (if assigned) and NPI in Section 1A, item 1, of the CMS-855I. Instructions included with the CMS 855I should be followed in completing the rest of the CMS 855I.

The following scenarios do not apply to a physician assistant.

Scenario 2a: A physician/non-physician practitioner who has a sole proprietorship business.

Note: A sole proprietorship is a business whereby all of the business’s assets and liabilities are tied directly to the physician/non-physician practitioner’s (the sole proprietor’s) Social Security account. The sole proprietor and the sole proprietorship

are considered a single legal entity: an individual. The sole proprietor's Social Security Number (SSN) serves as the Taxpayer Identification Number (TIN) of the sole proprietorship. Often, the Internal Revenue Service (IRS) issues an Employer Identification Number (EIN) to a sole proprietorship to protect the sole proprietor's SSN from being disclosed on W-2s and in transactions, such as claims sent to health plans. Therefore, at the option of the sole proprietor, the EIN (if issued) instead of the SSN could be used as the TIN in submitting a sole proprietorship's Medicare claims. The IRS links that EIN to the sole proprietor's SSN for tax reporting purposes.

If a physician/non-physician practitioner is enrolling in Medicare and will have a private practice operating as a sole proprietorship, he/she does not complete Section 4A of the CMS 855I. If the physician/non-physician practitioner will have a private practice operating as a sole proprietorship and will also be working in a group/organization setting, a CMS 855R should be submitted for each group/organization to which the physician/non-physician practitioner will be reassigning benefits. The physician/non-physician practitioner completes Section 4B, item 2. The physician/non-physician practitioner's (i.e., the sole proprietor's) MIN (if issued) and NPI are reported in Section 4C and the physician/non-physician practitioner completes the information for his/her sole proprietorship business in Section 4C. [The NPI would be an Entity type 1-Individual.] The EIN of the sole proprietorship (if it has been issued an EIN) is reported in Section 4F.

Scenario 2b: A physician/non-physician practitioner with no sole proprietorship business (i.e., physician/non-physician practitioner who has no private practice and works only in a group/organization).

If the physician/non-physician practitioner will be reassigning all of his/her benefits to a group or organization and will not have any private practice locations, he/she provides his/her Medicare Identification Number (MIN) (if issued) and NPI in section 1A, item 2. [The NPI would be an Entity type 1-Individual.] The physician/non-physician practitioner completes all appropriate sections of the CMS-855I. Item 1 in Section 4B1 is checked YES and the physician/non-physician practitioner enters the name(s) of the group(s)/organization(s). The physician/non-physician practitioner then completes section 13, if applicable, and section 15. In addition to the CMS 855I, the physician/non-physician practitioner must also submit a CMS 855R for each group/organization for which he/she will be working. In any scenario where a CMS 855R is required, the CMS 855I is not required if the physician/non-physician practitioner has already enrolled with the Medicare contractor that would be processing that CMS-855I application.

Scenario 3: A physician/non-physician practitioner who is a sole owner of a PC, PA, or LLC.

A physician/non-physician practitioner who is the sole owner of a professional corporation (PC), professional association (PA), or a limited liability company (LLC) and who will be billing Medicare through that business entity must furnish his/her NPI (Entity type 1-Individual) and the NPI of the organization (PC, PA, LLC) (Entity type 2-

Organization). The physician/non-physician practitioner's MIN (if issued) and NPI are reported in section 1A, item 2. [The NPI would be an Entity type 1-Individual.] The group/organization's MIN (if issued) and NPI are reported in sections 4A and 4C. [The NPI would be an Entity type 2-Organization.] When a sole owner elects to bill Medicare through the group/organization, he/she must complete sections 1, 2 and 3 of the CMS 855I with his/her [individual] information. Section 4A captures information about the organization (including the organization's MIN and NPI [the NPI would be an Entity type 2-Organization]). The remainder of the 855I is to be completed with the group/organization's information. When the CMS 855I is submitted by a sole owner, neither the CMS 855B nor the CMS 855R need to be completed.

Scenario 4: A physician/non-physician practitioner who is an owner, but not a sole owner, of a PC, PA, LLC, or a partner in a partnership.

A physician/non-physician practitioner who is a part-owner of a PC, PA, LLC, or a partner in any type of partnership, and who will be rendering services through that group/organization or partnership, must complete the CMS-855I and/or the CMS-855R in accordance with the instructions in Scenario 2b. The PC, PA, LLC, or partnership is enrolled using the CMS-855B.