

# GETTING STARTED:

- Don't put your Medicare payments at risk.
- Act now if your revalidation request has been received.
- To revalidate use Internet-based PECOS (<https://pecos.cms.hhs.gov/pecos/login.do>) or complete the CMS-855 enrollment application (<https://www.cms.gov/Medicare/Provider-enrollment-and-Certification/MedicareProviderSupEnroll/EnrollmentApplications.htm>).
- Unsure if your revalidation request has been sent? Check this link to find out: <http://go.cms.gov/MedicareRevalidation>

Section 6401 (a) of the Affordable Care Act established a requirement for all enrolled providers/suppliers to revalidate their Medicare enrollment information under new enrollment screening criteria. The Centers for Medicare & Medicaid Services (CMS) has completed its initial round of revalidations and will be resuming regular revalidation cycles in accordance with 42 CFR 424.515.

Providers are required to submit their CMS-855 revalidation enrollment applications by the revalidation due date listed on the CMS website <http://go.cms.gov/MedicareRevalidation>. MACs will send a revalidation notification 2-3 months prior to the revalidation due date.

Revalidation information should be completed as a "snapshot in time" on the correct CMS enrollment application. Revalidation application checklists are available on this website to help verify completion and submission of supporting documents. Providers revalidating their Medicare enrollment using Internet-based PECOS should review all their current information before submitting the application to ensure that any changes are being reported.

Providers are also reminded that they must respond to the prescreen request from CGS asking for additional information within the timeframe noted in the request. All information requested by CGS in the notification must be provided in full within 30 days from the date of the request. CGS encourages providers to respond to the prescreen request as soon as possible, as this allows more time to ensure that all missing information has been submitted. If information is not received within the 30 day timeframe, billing privileges are subject to termination until accurate information is received.

## APPLICATION FEE:

Organizations submitting a CMS-855B to revalidate their enrollment information must submit

documentation of payment of the application fee and/or a request for a hardship exception to the application fee. Providers submitting paper applications should pay the application fee prior to submitting the application via the CMS website (<https://pecos.cms.hhs.gov/pecos/feePaymentWelcome.do>). It can be paid by electronic check, debit card, or credit card. Providers submitting Internet-based PECOS applications will be prompted to pay the fee during the application process.

## HARDSHIP EXCEPTION REQUEST:

Providers may submit a letter and financial statements to request a hardship exception in lieu of the application fee along with their application or certification statement. Revalidations are processed only when fees have cleared or the hardship exception has been granted. Providers are notified by mail if their hardship exception request has been granted or if a fee is required.

## MAILING ADDRESS:

The mailing address for paper applications and, as applicable, certification statements and required documents for Internet-based PECOS applications, is:

J15 – Part B Provider Enrollment  
CGS  
PO Box 20003  
Nashville, TN 37202-4011

## REVALIDATION INQUIRIES:

If you have questions regarding revalidation, please direct your call to the CGS Part B Provider Contact Center at 1.866.276.9558, Option 3. We are available to assist you from 8:00 a.m. to 5:00 p.m. ET.