TITLE: Billing for Unenrolled Providers

POLICY/PURPOSE: The purpose of provider enrollment in the Medicare and Medicaid programs is to secure the documentation necessary to ensure that a provider is appropriately credentialed and eligible to enroll in the Medicare and Medicaid programs. A provider’s choice as to whether or not to accept assignment on Medicare claims, which is made at the time of enrollment, impacts payment and patient financial liability. The enrollment process may take considerable time to complete. The Office of Compliance is often asked whether services performed by an unenrolled physician may be billed under the provider number of an enrolled physician if the enrolled physician supervises the services provided by the unenrolled physician. This practice is inappropriate and is considered a misuse of the enrolled provider’s identification number.

DEFINITIONS:

PROCEDURE:

1. Knowing misuse of providers’ identification numbers which result in improper billing is identified as an area of compliance risk by the Health and Human Service’s Office of the Inspector General (the “OIG”).

2. The following example is provided by the OIG to illustrate misuse of a provider’s identification number.

   Example:

   A practice bills for services performed by Dr. B., who has not yet been issued a Medicare provider number, using Dr. A’s Medicare provider number.

3. This scenario would also apply if the services were performed by an unenrolled nonphysician practitioner.

4. The faculty practice plan must not engage in this practice and must bill using the correct provider number, even if that means delaying billing until the physician or nonphysician practitioner performing the service receives his or her billing provider number.

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