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Reassignment Is Now Reported on 855I; MFTs, MHCs Check 'Undefined' Box

By Nina Youngstrom

Two types of practitioners—marriage and family therapists (MFTs) and mental health counselors (MHCs)—were welcomed into the Medicare fold Jan. 1; they can now bill Part B independently for services provided for the diagnosis and treatment of mental illnesses. Medicare will pay them 75% of what it pays clinical psychologists under the physician fee schedule. But first they must jump through enrollment hoops using either the Provider Enrollment, Chain and Ownership System (PECOS) or a paper enrollment form. The twist: If they reassign their benefits, MFTs and MHCs, like everyone else, are now required to use the 855I instead of the 855R because CMS disappeared the latter form Nov. 1.

“CMS has merged 855R into 855I,” said Osato Chitou, principal consultant with Compli by Osato, at an HCCA webinar Jan. 16. “With this merger, 855R no longer exists. All data that used to be collected on the 855R will now be captured on the 855I. If you send 855R after Nov. 1, if your MAC gets 855R, that application will be sent back to you.”

Reassignment allows organizations and groups to bill Medicare Part B on behalf of physicians and nonphysician practitioners (NPPs) for services they have provided as a member of the organization or group. But the 855I isn't exclusively for reassignment. It's also used for enrolling physicians who only order or refer services, revalidating enrollment, reactivating it, enrolling with another MAC, reporting a change and voluntary terminating, Chitou noted. In fact, Section 1 is where they explain the reason for submitting the application. Again, this is for providers who go the paper route, not the PECOS route.

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