

Report on Medicare Compliance Volume 33, Number 9. March 11, 2024 With Stay of Enrollment, CMS Makes it Easier to Fix Errors, Omissions

By Nina Youngstrom

In an MLN Matters (13449) posted March 1, CMS spells out its new “stay of enrollment” for providers who are out of compliance with enrollment forms.^[1] The stay of enrollment status allows providers to do a quick fix before too much damage is done to their Medicare standing or their bank account.

The stay of enrollment was introduced in the 2024 Medicare Physician Fee Schedule (MPFS) rule, although CMS made an important payment change between the proposed and final versions of the rule.

“It’s almost a timeout while CMS gives you a chance to get your paperwork complete,” said attorney Judy Waltz, with Foley & Lardner LLP in San Francisco.

Until now, some errors or omissions on the Medicare enrollment form (855)—or a lack of billing with the Medicare number—could result in deactivation, which put billing privileges on ice until the Medicare provider followed enrollment procedures. CMS uses deactivation when it thinks a more modest sanction than revocation is appropriate. “With deactivation you can generally resurrect your enrollment by filling out a new form with complete and accurate information. Unlike a revocation, it doesn’t cast any aspersions on you as a provider,” Waltz said. But deactivation is still disruptive and stops cash flow until it’s resolved, which is why CMS came up with the stay of enrollment.

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