Enrollment guide: Chapter 1 - Introduction to Provider Enrollment

Provider Enrollment

[1.1 Introduction](#1.1)

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Provider/supplier enrollment is a critical function that attempts to ensure only qualified and eligible individuals and entities are enrolled in the Medicare program and receive reimbursement for services furnished to Medicare beneficiaries. Physicians, suppliers, organizations, facilities, etc., that wish to be reimbursed for services furnished to Medicare beneficiaries must enroll in Medicare in order to submit claims. If not enrolled, payments for Medicare covered services cannot be issued.

Our Provider Enrollment Services department is responsible for reviewing each CMS-855 application in its entirety; verifying and validating the information collected; coordinating with State survey/certification agencies and CMS Regional Office's Survey and Operations Group (SOG) location; utilizing various information sources to confirm that the applicant has not had any adverse legal history and maintaining the highest level of confidentiality with all information provided.

If you are new to the Medicare program, you can read an overview of the Medicare enrollment process.

Additionally, CMS IOM Pub. 100-08 Medicare Program Integrity Manual, [Chapter 10](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c10.pdf) specifies the procedures Medicare contractors must use to establish and maintain provider and supplier enrollment in the Medicare program.

Please note that enrollment in the Medicaid program is a separate process from enrollment in the Medicare program. Please refer to your state agency to obtain information related to Medicaid enrollment. Additionally, Railroad Medicare is administered by [Palmetto GBS](http://palmettogba.com/palmetto/providers.nsf/docsCat/Providers~Railroad%20Medicare~Resources~Provider%20Enrollment?open&).