Bringing the Medicare physician enrollment process up to speed in the digital world may take some time, but recent significant steps in the right direction should reduce the hassles many physicians have experienced with the online process.

Recent changes made by the Centers for Medicare & Medicaid Services (CMS) aim to streamline a historically complicated enrollment process. Responding to years of AMA feedback, CMS’s latest improvements simplify documentation collection and access for physicians and their representatives to the online Provider Enrollment, Chain and Ownership System (PECOS).

Whereas physicians previously had to submit hard copy supporting materials through the mail, a new digital document repository can collect electronic versions of such documentation as medical licenses and certifications, tax documents, voided checks for setting up electronic funds transfer and the CMS-460 participation agreement form. CMS offers a step-by-step guide for using this new feature.

The system also allows physicians to use an electronic signature to certify their applications, rather than submitting an ink signature on paper, as was required previously. Other modifications include digital notification of Medicare contractors’ requests for revalidation, a single screen from which to view a physician’s complete enrollment information, and the ability to quickly update and resubmit a corrected application.

Registration for using the system, meanwhile, also has been upgraded. Improved features include:

- Users can manage and reset their user ID and password online instead of calling the CMS help desk.
- Individual physicians and group practices can securely authorize people to act on their behalf within the system.
- Large practices with numerous staff can manage employee access to the different functions within the online system.
- Increased security should better protect physicians from identity theft or unauthorized access to their information.
The AMA has pressed CMS for nearly a decade to make the Medicare enrollment process less burdensome for physicians and their practices. Many of the improvements over time can be traced back to the AMA’s constant feedback about features that needed to be changed since the system became widely available in 2009. The AMA will continue to advocate for further improvements.