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New cycle of provider revalidations and revalidation tools released by CMS

On March 1, 2016, the Center for Medicare and Medicaid Services (CMS) rolled out a new cycle of provider revalidations, including new tools for monitoring a specific provider's revalidation status and a new uniform schedule of revalidation due dates.

Section 6401(a) of the Affordable Care Act requires all providers to revalidate all the information associated with their Medicare enrollments and establishes the ongoing, regular revalidation requirements. The timing of these recurring revalidations is determined by the provider type. Over the last several years, CMS has completed its initial round of revalidations. It is now releasing the second round of revalidations. In an effort to reduce some of the confusion and administrative difficulties encountered with the initial round of enrollments, CMS has created several online tools for providers to determine when revalidations have been issued and when they are due.

CMS continues to caution providers not to submit unsolicited revalidations, *i.e.*, revalidations submitted more than six months before the revalidation's due date or before a revalidation request has been issued for the provider. The Medicare Administrative Contractor (MAC) will continue to send provider-specific notifications to revalidate, but it remains a provider's responsibility to revalidate by its appointed due date. Failure to respond with a complete revalidation in a timely manner could result in a deactivation of the provider number and a gap in payments. Unlike the past, when a supplier or provider is deactivated, the supplier or provider will not have their billing privileges reactivated until the date on which a new enrollment application is submitted leaving a gap in time in which the supplier or provider is not permitted to retroactively bill. Suppliers and providers must stay on top of their revalidations to prevent billing gaps. All suppliers and providers should verify that their enrollment appears on the lookup tool, and if it does not or if the information is incorrect, notify CMS at providerenrollment@cms.hhs.gov.

For additional information and links to the various CMS online revalidation and lookup tools, see CMS's "[Revalidations](#)" page.

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