



Medicare Payments: Questions and Answers

1) What should I do if I have moved and I am not receiving my Medicare checks?

You should notify our Provider Enrollment Department of a change of address as soon as possible. Medicare checks cannot be forwarded to your new address by the post office. Checks that cannot be delivered to the address shown on the envelope are returned to us by the post office and are held until the mailing address has been corrected on our records. (Refer to Question 1 of **Changes to Provider Enrollment Information: Questions and Answers** for information on how to report a change of address.)

2) Am I required to receive Medicare payment via electronic funds transfer (EFT)?

All applications for initial enrollment require that Form CMS-588, "Electronic Funds Transfer (EFT) Authorization Agreement," be included with the application. Established providers who are not already receiving payment via EFT, and who are reporting any change to their enrollment information, must submit Form CMS-588 to initiate payment via EFT.

Providers already receiving payments via EFT are not required to complete Form CMS-588 when reporting a change of information. If, however, there is a change in banking information (e.g., bank name or account number), the provider must complete a new Form CMS-588 form.

When EFT information is being changed, a complete CMS 855I or CMS 855B may also be required to update the provider's enrollment information. If the required CMS 855I or CMS 855B is not submitted within 60 days of the request, the change in EFT information will not be processed, and the provider's Medicare enrollment will be subject to revalidation requirements per 42 CFR § 424.515.

Note: Established entities not receiving payment via EFT are not required to complete Form CMS 588 when they submit Form CMS-855R, Reassignment of Medicare Benefits, to report the addition or termination of members to their group practice