

American
Medical
Billing
Association

May 22, 2008

Centers for Medicare & Medicaid Services
Secretary of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Room 615F
Washington, DC 20201

Attn: Secretary Michael Leavitt

Dear Secretary Leavitt:

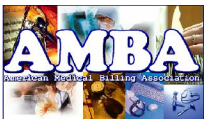
Our Association, the American Medical Billing Association, works primarily with small, independent, third party medical billers that provide a range of billing services to physicians and other healthcare providers.

We have been working with our members to try and help them resolve their continuing NPI issues before the May 23rd, 2008 deadline. We have contacted our CMS Provider Partnership Representative; however, it has become very apparent that our member's clients will undoubtedly experience significant cash flow issues due to their inability to resolve NPI and legacy number crosswalk inconsistencies. Please note, these inconsistencies are through no fault of the provider, rather they are the result of difficulties beyond their control.

Many of our member's providers started receiving letters last week from CMS stating that their providers' PTANs are not properly linked to their group NPIs although CMS has been paying claims as though these providers are linked properly until last week. CMS is advising providers to re-enroll in Medicare if they encounter problems matching their old legacy numbers to their new NPI numbers. Completing a new form 855 could leave many physicians in the middle of the enrollment process and small practices, in particular, simply cannot afford a cash-flow interruption spanning ninety days or more while waiting on CMS to complete the process of re-enrollment.

Additionally, there appears to be any varying requirements within the clearinghouse community as to whether the biller should continue to submit legacy information and then rely upon their clearinghouse to strip that information on electronic claims. Some want claims with it and some do not.

We are very concerned about these widespread issues and urge you to allow physician practices and others to continue to submit transactions that contain both legacy and NPI numbers for a minimum of six additional



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months after May 23, 2008. The additional time will allow each party to resolve NPI/legacy cross-walk problems, as well as other related technical data and field elements on claims submission.

Furthermore, we urge you to closely monitor the readiness level of covered entities and take all appropriate steps necessary to ensure that the industry does not experience wide-scale disruption in claims processing and payment during this time.

Should CMS hold firm with the current deadline of May 23, 2008, we would request that CMS closely monitor claims rejection rates and processing interruptions.

CMS must be prepared to allow claims to be resubmitted with the NPI and legacy numbers together if there are significant interruptions as we believe will be the case.

Thank you for your consideration in the matter.

Sincerely,

A handwritten signature in cursive script that reads "Cyndee Weston".

Cyndee Weston
Executive Director
AMBA