

# CMS & NCPA Meeting: Enrolling Pharmacies as Mass Immunizers

Moderated by: Hannah Fish  
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## Table of Contents

Announcements & Introduction.....	2
Presentation .....	2
Enrollment Process.....	3
Question & Answer Session .....	3

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Operator: At this time, I would like to welcome everyone to today's call. All lines will remain in listen only mode until the question-and-answer session. This call is being recorded and transcribed. If anyone has any objections, you may disconnect. I would now like to turn the call over to Ms. Hannah Fish. Thank you. You may begin.

## **Announcements & Introduction**

Hannah Fish: Thank you. Good afternoon or good morning from wherever you're calling from. My name is Hannah Fish, and I am the Associate Director of Strategic Initiatives with the National Community Pharmacists Association. I want to thank everyone for joining us today. This is a very unique opportunity to hear directly from our staff at CMS about rolling in Medicare Part B as a supplier in which you will be able to bill for and get reimbursed for vaccine services that you're providing, especially related to COVID-19.

Since the beginning of the pandemic, this is something that NCPA has encouraged all of our members to do, not only from the vaccine perspective but also the point of care testing perspective, but this is your chance to talk directly to CMS staff about any of those questions that you have about the enrollment process and what that means.

So, we're going to hear specifically from them, and you'll be able to get your answers straight from the source. So, again just want to iterate what a unique opportunity this is to hear from CMS and make sure that you guys have all the things you need to know about becoming Medicare Part B suppliers so that you get reimbursed for the COVID-19 vaccine. With that, I will turn it over to Zabeen Chong, who is the Director of Provider Enrollment. Zabeen?

## **Presentation**

Zabben Chong: Hi. Thank you, Hannah. Thanks everyone for taking the time to get together with us. This is a great way to collaborate, and I'm glad we have this opportunity to share with you what we've implemented as far as Medicare enrollment goes. As you know, CMS is committed to ensuring providers have the tools and resources they need to administer the COVID-19 vaccine and ensuring there's a quick and easy Medicare enrollment process as part of that commitment. So, as Hannah said, today we will go over the steps you need to take to enroll in Medicare, and this is only applicable if you're not already enrolled as a provider type that is eligible to bill for the vaccine.

So, for example, if you're already enrolled in Medicare as a Part B pharmacy or a mass immunizer, you don't need to take any additional action on your enrollment. We do have a full listing of the provider types that are eligible to administer and bill for the vaccine on the CMS.gov website in our provider tool kit. If you don't already have the link, we can certainly send it out after this call, but everything that we're going to go over today is included in that toolkit. And if you do need to enroll in Medicare, we have implemented a fast enrollment process that can be done entirely through our enrollment hotline. I'm going to hand it off to Alisha Sanders on my team, who is going to go into a bit more detail on exactly what you need, who do you need to call to get your enrollment process quickly and efficiently. Alisha?

## Enrollment Process

Alisha Sanders: Thanks for being here and hello everyone. I'm going to talk through the enrollment process for providers that want to administer and bill for the vaccine. So, as Zabeen previously mentioned, CMS has published toolkits that outlined in different scenarios for providers administering the vaccine, and the enrollment actions for each of those scenarios. So, if you are currently enrolled, but as a provider type that is not eligible to administer the vaccine, such as a DME pharmacy, or you are not currently enrolled in Medicare at all as Medicare provider, you will need to contact the Medicare Administrative Contractor, or the MAC, their provider enrollment hotline to enroll as a Part B pharmacy or another provider type that was eligible to provide the vaccine.

The toolkit includes contact information for each of the MAC hot lines and their hours of operation for your reference. You should only contact the MAC that services your geographic area, and the state break down is also provided, so you can identify which MAC you need to contact. When you call into the MAC hotline, they will ask you a number or ask for limited information to establish your Medicare enrollment, such as your entity's legal business name, your National Provider Identifier or NPI, your tax identification number, address information such as your practice location, license information if it applies in that state that you're enrolling in, and contact information.

The MAC will screen and enroll the provider during the phone conversation and will follow up with a letter notifying the provider of its approval within 24 hours. The letter will be sent by email using the contact information provided during the call, and also include the provider's PTAN information. I want to know if that providers can have multiple PTAN, so if you are currently enrolled to provide other services and are now separately enrolling to provide the vaccine, you will have multiple PTANs, one for each that are separately enrolled provider types. Once enrollment is complete, you are eligible to provide the COVID vaccine, the monoclonal antibody treatments, and the flu vaccines.

I also want to point out that during the hotline call, the MAC will ask the provider if they also want to enroll in Medicaid to administer vaccines. If so, they will share the state Medicaid agency's contact information and website information with the provider so they can separately initiate the enrollment process with the state. We also have a process in place to share with states currently enrolled and newly enrolled Medicare providers who are eligible to administer the vaccine so that states can rely on the enrollment information already collected by Medicare to help expedite the state's enrollment process.

However, the provider is still required to separately enroll with the state, and any additional information not required by Medicaid or Medicare but required by Medicaid would be still required to be collected by the state to finalize the enrollment process. With that, I'll turn it back over to Blair, our operator, to open it up for questions.

## Question & Answer Session

Operator: To ask a question, press star followed by the number one on your touchtone phone. To remove yourself from the queue, press the pound key. Remember to pick up your handset to ensure clarity. Once your line is open, state your name and organization. Please note, your line will remain open during the time you're asking your question. So, anything you say, or any background noise, will be heard in a conference. If you

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have more than one question, press star one to get back in the queue and we will address additional questions if time permits. Please hold while we compile the Q&A roster. Please hold as we compile the Q&A roster. Our first question comes from the line of Angelina Tucker.

Angelina Tucker: Yes, this is the Angelina Tucker. I was just wondering, the enrollment with CMS under Medicaid, will that allow us to bill a COVID-19 vaccine for Medicaid patients as well?

Alisha Sanders: If you're enrolled as a DME supplier in Medicare, you would need to have a separate enrollment as a Part B pharmacy or as a mass immunizer to administer and bill for the COVID vaccine from Medicare. On the Medicaid side, I would recommend that you contact your state. I would expect that their rules would be similar and that you wouldn't be able to bill for the vaccine as a DME supplier, but that is something you should reach out to your specific state Medicaid agency for.

Angelina Tucker: So, if we're already enrolled with the Medicaid number under DME, would that suffice? Okay, and there's been a lot of confusion with pharmacies in terms of having multiple PTAN numbers and billing for vaccines that potentially goes to the wrong PTAN because sometimes even the processes and got 855B changeable form to get from the mass immunizer to pharmacy, do you have any comments on that?

Alisha Sanders: I do not at this time, but I'm happy to get additional details on that issue and we can look into that.

Hannah Fish: This is Hannah with NCPA, I believe that some of the issue involves some of the tax on immune codes that are associated with your NPI number and your medical billing intermediary. So, someone like Omnicef, EBS, Change Healthcare, or FDS, for example, should be able to help you with that transaction process, but that is my understanding from an NCPA standpoint, but I would love for our colleagues at CMS to follow up.

Angelina Tucker: With my understanding that the fees are being waved right now for Medicare B enrollment, is that correct?

Alisha Sanders: That is correct.

Angelina Tucker: Thank you.

Operator: And again, to ask an audio question, you may do so by pressing star followed by the number one on your touchtone phone. Remember to pick up your handset to assure clarity. Once your line is open, state your name and organization. Please note your lines will remain open during the time you're asking your questions, so anything you say, or any background noise will be heard in the conference. If you have more than one question, press star one to get back in the queue and we'll address additional questions if time permits. The next question will come from the line of Torrie Wolery.

Torrie Wolery: Yes. So, I guess I'm a little confused as far as if the pharmacy needs to be set up as a mass immunizer or a pharmacy in order to bill Medicare, or what the advantage or disadvantage is doing one versus the other.

Alisha Sanders: So, you can enroll as either to provide the vaccine. There aren't many advantages or disadvantages, we're still collecting the same level of information for you to enroll. Both enrollments can go through the hotline through that expedited process that we mentioned, and both will be issued a PTAN to be able to administer and bill for the vaccine.

Torrie Wolery: Okay. So, can you explain to me what the difference is between being a mass immunizer and being just a pharmacy?

Zabeen Chong: I think it would just be your preference, I mean Part B pharmacy, both of them can bill for the vaccine, the flu shot as we indicated. It would just be a separate provider type that you're enrolling as. Most of the time, organizations will enroll as mass immunizers to provide the vaccine to multiple patients at once. So, that's probably the only difference.

Hannah Fish: This is Hannah again, with NCPA, our understanding is that with the pharmacy provider type, there is additional services that you can provide beyond vaccines such as I believe diabetes education and some other services. So, in terms of looking beyond vaccine, the pharmacy provider type might allow you to do more with some reimbursing or being billed through Medicare program.

Torrie Wolery: Okay. Thank you so much.

Operator: Our next question will come from the line of Amanda Shive.

Amanda Shive: Hello. So, I just had a quick question. I know you were talking about Medicare and Medicaid. How do we go about making sure that we are signed up as a provider to do the Medicaid vaccinations because I know we've been having issues trying to bill them?

Alisha Sanders: Would likely have to reach out to your state Medicaid program to see how they have you currently enrolled and if you're currently able to provide the vaccine under your existing enrollment.

Amanda Shives: Okay. Perfect. That's all I need to know. Thank you so much.

Operator: The next question comes from the line of Joline Mussinger.

Joline Mussinger: Yes, I actually had a question about roster billing. I know with the flu vaccinations; we have a flu roster and then pneumonia rosters. So, is there going to be a COVID roster also?

Tricia Rodgers: Hi this is Tricia, you're able to roster bill for COVID vaccine. I guess now we have one available, so yes, you'll be able to start billing for COVID vaccines with the roster bill.

Joline Mussinger: Okay. Where do we find the roster form for the COVID?

Tricia Rodgers: So, there is information in the toolkit that Zabeen mentioned and that is at [CMS.gov/covidvax-provider](https://www.cms.gov/covidvax-provider). That is the provider toolkit and there's information there about billing for the COVID-19 vaccine shot and if you scroll down on the page, there is information on getting the roster form from your MAC, and then as Alisha mentioned, there is a contact-your-MAC link, and you can figure out which MAC you need to contact in

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the contact information. It's a little bit different in the enrollment hotline. It's a different phone number, but there is information to figure out from which state you bill, which mac you would contact. Again, that's in the provider toolkit at [CMS.gov/covidvax-provider](https://www.cms.gov/covidvax-provider).

Joline Mussinger: Okay. Thank you.

Operator: And again, to ask a question, press star followed by the number one on your touchtone phone. Remember to pick up your handset to assure clarity. Once your line is open, state your name and organization. Please note, your line will remain open during the time you're asking your questions, so anything you say, or any background noise, will be heard in the conference. If you have more than one question, press star one to get back in the queue and we'll address additional questions as time permits. The next question will come from the line of Angelina Tucker.

Angelina Tucker: Hello. You actually just answered my question. I was trying to get out the website for the toolkit that you mentioned. So, thank you.

Operator: The next question will come from the line of Steve Detter.

Steve Detter: Total Care Pharmacy in Burlington, North Carolina. We already bill Medicare Part B like flu shots and pneumonia shots already, so do we need to sign up again to bill the COVID?

Alisha Sanders: No. If you're already enrolled as a provider type that can provide the vaccine or other flu shots or vaccines, then there's no additional enrollment actually required.

Steve Detter: Okay. I have another question, but I'll get back in line. Thank you.

Operator: And we have Steve Detter back in line. Steve, go ahead.

Steve Detter: Also, I'm under the understanding that the vaccines will be provided to the pharmacies, we're in the CPSN network and we've provided at no charge. I guess we haven't really got a handle on how, as far as our pharmacy system, how to bill, just do we put in the -- be an NDC for the vaccine and we go to like now we go and put in preventive health and that sort of thing, incentive fee for the immunization part. Is that going to be the same type of thing or?

Tricia Rodgers: Hi Steve, this is Tricia, so for the vaccine, administering the COVID vaccine, as you mentioned because it is free for providers, the government is providing it, you would only bill for the administration code for administering the vaccine and we have CPT codes listed on, there's a link off of the provider tool kit that gives the information for whichever type of vaccine we have information out there right now on Pfizer, we also have the codes that we will likely use for Moderna if and when there is an EUA approval for that and we will continue to add as manufacturers request an EUA or an approval from the FDA, we will add those CPT codes.

But right now, you can see through the provider toolkit, there's a link and it shows you the vaccination code for administering the vaccine. There is also the actual vaccine code, but you would not bill that. It would just be administering the vaccine at this time. It's unlike what you've done for flu or pneumonia. Does that help?

Steve Detter: Yes, I'm still, I guess, a little confused as far as billing it because we billed a flu shot through Palmetto in North Carolina. I'll bill through our pharmacy system like we're filling a regular prescription. So, if I'm not putting the drug in, I guess I don't have it down yet where we're going to put the codes and that sort of thing because we really don't put a code in for the flu shot because we actually are billing the drug.

Tricia Rodgers: You can contact Palmetto and they can help walk you through what you need to do. Their systems are set up to allow just for administering the vaccine code rather than both and so they can help walk you through that.

Steve Detter: Okay. That'll work. Thank you.

Operator: The next question will come from the line of Susan Robbins.

Susan Robbins: Hey, I'm calling from Terrain Pharmacy. I had a question about the mass immunization versus the pharmacy. Is there an accreditation process for the pharmacy? I know with the DME, there is an accreditation process. I did not know if there was one as far as pharmacies.

Alisha Sanders: No. There's not an accreditation process for a Part B pharmacy or a mass immunizer.

Susan Robbins: But there is one for DME, correct?

Alisha Sanders: Correct.

Susan Robbins: Thank you.

Operator: The next question comes from the line of Robert Mosby.

Robert Mosby: It's Robert Mosby with Amerisource Bergen. On the enrollment hotline, I see a lot of information about enrolling as a mass immunizer. I have actually called and tried to enroll pharmacy. I just wanted to confirm that you can enroll as a Part B pharmacy by using the hotline.

Alisha Sanders: Yes, you can, and we've provided updated guidance with the contractors that are handling the hotline to allow those enrollments as well.

Robert Mosby: Okay. Thank you, and one of the things on the enrollment hotline, I understand the fee is waived on the enrollment hotline even though you don't complete the final application until after the public health emergency, is the fee still waived at that time or will the fee be assessed at that time?

Alisha Sanders: This fee is currently waived under the public health emergency. It would be reassessed after the PHES has been lifted.

Robert Mosby: Though somebody uses the hotline to enroll, they would have a provider number until the public health emergency is over and then they need to pay to reenroll?

Alisha Sanders: When you're going through the hotline, you're establishing temporary Medicare billing privileges; at the end of the PHEs, would follow up with those providers to fully enroll, at that time the fee could be assessed.

Robert Mosby: Okay. So, going through PECOS would eliminate that issue of being charged?

Alisha Sanders: At this time, yes.

Robert Mosby: Okay. Thank you.

Hannah Fish: Hi Alisha, this is Hannah. I just want to follow up and clarify from my own knowledge and for those on the line because I think that was a really important question. If you call in through the hotline, you are only receiving a temporary enrollment, however, if you follow the typical online PECOS enrollment or fill out the 855B form, then that is a full enrollment and won't need to be reassessed. The benefit of the hotline is that it is a quicker process than following PECOS or filling out the full paper form. Is that correct?

Alisha Sanders: That's correct, but there are certain things that we are waving like the application fee was mentioned and just to clarify, I don't know that the applications be applied for pharmacies in mass immunizers. There are some other provider types that it would apply, but not in this case. So, the fee doesn't seem like it'd be a concern right now for pharmacies and mass immunizers at this point, but there are other screening mechanisms that are being waived under the PHE. So, if a provider comes in and enrolls whether through the hotline or the standard enrollment process and we waived something under the PHE, at the conclusion of the PHE, we would go back to follow up to make sure those providers were screened under those requirements. Just to provide an example like if you're a provider type that is required to pay a fee or receive fingerprints, those are things that we're currently waiving right now, but at the conclusion of the PHE, we would go back and make sure that those screening actions are taking place.

Hannah Fish: Great. Thanks for that clarification. Operator?

Operator: Our next question will come from the line of Ahmid Roboteah.

Ahmid Roboteah: Hi. My question is in regards to new pharmacies. I'm a new pharmacy. So, I have enrolled through the PECOS system as a Part B pharmacy and I guess I was reading information and enrolled as mass immunizer as well. Can you tell me the timeframe as far as doing the general traditional application versus just getting a temporary PTAN number for the COVID-19 vaccinations?

Alisha Sanders: So, the timeframe for the hotline, the MACs are trying to process those within 24 hours. They're also expediting any applications that are coming through PECOS and through the paper enrollment process as well. So, as long as those applications are clean and don't require any development or don't have any items missing, they're trying to process those applications within seven days for online applications and 14 days for paper application.

Ahmid Roboteah: Okay. Is there any additional, I guess, process with CMS in terms of like the site visit for the Part B or mass immunization application?

Alisha Sanders: So, the site visit, there's no site visits currently required for pharmacies and mass immunizers. So, that would not be something that we require part of the enrollment because they are currently limited risk providers.

Ahmid Roboteah: Okay. So, if my application has been, I guess, more than two weeks or even a month, how could I follow up? As far as I know when I call for a status update on my application, they had stated site visit. So, I just wanted to clarify if there actually was one and they told me it would be 45 to 90 days before my application probably will get approved or not. So, that timeframe seemed a little bit too long to get a PTAN number for actual COVID-19 administration.

Alisha Sanders: So, they should be following the 7 to 14 business day processing times that I mentioned earlier. If you are having issues, you can send an inquire to our mailbox, it's [providerenrollment@CMS.HHS.gov](mailto:providerenrollment@CMS.HHS.gov) and we can check into the status for you.

Ahmid Roboteah: Okay. Thank you.

Tricia Rodgers: Which MAC are you working with?

Ahmid Roboteah: Noridian.

Tricia Rodgers: Okay. Thank you.

Hannah Fish: Just double check that you didn't apply for the dummy post application, make sure that it was for the pharmacy and/or mass immunizer because they are two different processes, and I believe the dummy post application requires the site visit.

Ahmid Roboteah: Yes. It's the 855B that I applied for under the category type of pharmacy and then also 855B as a mass immunizer. The 855S is I think the DME one that you need accreditation and like a surety bond I guess, but so yes, I wasn't sure whether you know the Part B also required site visit and it could take up to 90 days for review of the application.

Hannah Fish: If you can send us the information for those, the mass immunizer and pharmacy enrollment, we'll definitely look into it. It's not making sense to me why they would be requiring a site visit for those enrollments. So, we will get on top of that as soon as we get the info.

Ahmid Roboteah: Okay. Thank you.

Joe Schultz: Alisha, this is Joe I'd just like to clarify one additional thing for the sake of the group. So, when we're not under the PHE, the application fee does apply to pharmacies and mass immunizers for enrollment. So, I just wanted to make that point clear, and then secondly, related to the gentleman the last question applying both as a pharmacy and a mass immunizer, I just want to make it clear that you don't have to do both if you are already enrolled as a Part B pharmacy. You can bill for the COVID vaccine. You do not have to and also enroll as a mass immunizer. I just wanted to make sure that was clear. That's all.

Operator: Our next question will come from the line of Mike Delpiere.

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Mike Delpiere: Hi. It's Mike Delpiere from Harbor Drug in Michigan and quick question, maybe more for Hannah. So, a bunch of websites have been thrown out there. Are you going to provide any of that information to us as a follow up for or?

Hannah Fish: Yes. I will work with Tricia and our CMS colleagues on the phone to send out or make sure that we post our website all of the resources that have been mentioned on this call as well as the audio file and transcript of today's recording once that is available later this month.

Mike Delpiere: Perfect. Thank you.

Operator: Our next question comes from the line of Saman Thasuh.

Saman Thasuh: Yes hi. I guess pretty much you guys answered my question, but I just wanted to double check because I have my own pharmacy in Carrollton, Texas. I am also mass immunizer. I have both and DME. So, what he's saying that we just bill basically as a mass immunizer for the vaccine. Is that correct?

Alisha Sanders: Yes. You can bill because you are a mass immunizer enrollment or your Part B pharmacy enrollment.

Saman Thasuh: Okay. I mean you just said he mentioned I guess is very much worried, and I actually have both as a DME pharmacy and (inaudible). I don't know if anybody else is interested, but when I actually applied for the DME, they did come and did a site like this was about a month ago and it was just really easy process so and it was pretty quick. So, that's why I was just like, you know, it wasn't so bad application wise and the fees were all paid, which was a good thing, I guess.

Alisha Sanders: I just want to clarify that pharmacy DME enrollment is separate from a Part B pharmacy enrollment. So, on the DME side, there is that site visit requirement and accreditation maturity bond requirements and other things on the Part B pharmacy enrollment. For the Part B pharmacy enrollment, there isn't that same site visit requirement. So, just wanted to clarify there is a difference between the two.

Saman Shasuh: Okay. Thank you for the information though.

Hannah Fish: This is Hannah and I think it might be beneficial to reiterate and I think Joe what you said, it is possible for pharmacies to have multiple PTAN as was just mentioned if you have a DME or DMEPOS PTAN that is separate and apart from the Medicare Part B enrollment type, you might also if you enrolled as an independent clinical laboratory to do point of care testing has an additional PTAN, and then you should have one or the other of a pharmacy or mass immunizer PTAN. So, the MAC number seems like you should have three PTANs or if you're involved in all three of those services. If you have four, you likely don't need either the mass immunizer or the pharmacy. You just need one of those two.

Operator: We have a follow up question from the line of Robert Mosby.

Robert Mosby: Yes. On not having a mass immunizer in Part B form PTAN, I've heard conflicting stories on that, that sometimes is better to bill the mass immunizer possibly and therefore you'd want a mass immunizer PTAN and if you don't continue to do at any cost, you'd want a Part B PTAN. Any clarification on that?

Alisha Sanders: So, you can separately be enrolled as a mass immunizer where you're providing the vaccines and a DME provider where you're providing DME items and services. So, those are separate enrollments. You can't bill for the vaccine under your DME supplier enrollment, which is the reason for you then to create either a mass immunizer enrollment on the Part B side or a Part B pharmacy enrollment that would allow you to bill for the vaccine.

Robert Mosby: Yes. I guess it's probably two things if you wanted to bill for Tdap and bill the mass immunizer or bill for some of the other products that you can bill for with the Part B pharmacy. If you want to do that and the roster bill, should you have the two?

Hannah Fish: Yes, this is Hannah. My understanding is yes, you could have both, but you should be able to do all of your vaccine billing under the pharmacy provider type to which you wouldn't need that roster biller, but if you preferred to roster bill, then yes you can have both.

Robert Mosby: So, as far as you all understanding there's no benefit to roster billing compared to pharmacy? I'm putting you on the spot.

Joe Schultz: So, hi guys this is Joe again, so I'd like to just make the point that you guys are in a unique situation because you're all pharmacies from what I understand. That's why it's a little bit confusing that the mass immunizer enrollment is being presented to you all. You guys are pharmacies, that makes most sense that you would enroll as Part B pharmacies to do the vaccine, and to the gentleman's comment about what you are, are not able to bill. You are able to bill for the Tdap and anything else that you would be able to bill for as a mass immunizer. You can bill for those as pharmacy. So, your primary enrollment to do this should be targeted towards enrolling as a pharmacy. Now, we offer the mass immunizer option as the option that providers that are not pharmacies would choose. They wouldn't qualify to enroll as pharmacy. So, they would enroll as mass immunizers and that's why more than two options exist, but for the purpose of this conversation, you guys are pharmacies, you should enroll as Part B pharmacy. You're not gaining anything by enrolling as mass immunizers.

Hannah Fish: Thanks Joe, and I think Joe if this is correct. The pharmacy category was created after most pharmacies were able to start providing vaccine services and at the time the mass immunizer category was the way that pharmacies had to enroll. So, there might be some legacy enrollment as a mass immunizer that happened before the pharmacy category was created.

Robert Mosby: Thanks for clarifying, because there's a lot of conflicting information. Thank you.

Operator: Great. We are showing no further audio questions at this time.

Hannah Fish: Great. Thank you so much. I really appreciate all the commentary Zabeen, Alisha, Joe and Tricia. We will get all that information out to everyone. You know there was a lot of resources that were provided verbally, and we will provide the audio recording as well as the transcript once it becomes available. So, just want to thank our CMS colleagues once again for this opportunity to answer questions. Thank you for clarifying some of the confusion that I know has existed in our space. So, really appreciate this opportunity and look forward to future collaborations with everyone. So, if anyone has additional follow up questions, please email [covid@ncpa.org](mailto:covid@ncpa.org) and I can direct any of your questions that you might have to our team of colleagues or

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we will provide the email that they provided us as far as questions regarding provider enrollment and you can email them directly. Thank you so much.

Operator: Thank you for participating in today's conference call. You may now disconnect. Presenters, please hold.