Internet-based **Provider Enrollment, Chain and Ownership System (PECOS)** is an electronic Medicare enrollment system through which providers and suppliers can:

- Submit Medicare enrollment applications
- View and print enrollment information
- Update enrollment information
- Complete the revalidations process
- Voluntarily withdraw from the Medicare Program and
- Track the status of a submitted Medicare enrollment application

**BEFORE YOU BEGIN THE ENROLLMENT PROCESS!**

You need to gather the following information:

1. Your NPI User ID and Password. If you have misplaced these or don’t remember your log in information [click here](#) to initiate username and password recovery. **NOTE:** It is very important that your NPI Taxonomy reflect your current program. For a listing of Provider Taxonomies, [click here](#).
2. Your Alabama medical license number and issue date. To locate this information, you may go to the Alabama Board of Medical Examiners website: [http://albme.org](http://albme.org/)
   Your Federal DEA number and issue date. To locate this information, you may go to [http://www.deadiversion.usdoj.gov/](http://www.deadiversion.usdoj.gov/)
3. Then go to [https://pecos.cms.hhs.gov/pecos/login.do#headingLv1](https://pecos.cms.hhs.gov/pecos/login.do#headingLv1) to begin the enrollment process
Click on "My Associates" to enroll as a Medicare Provider for the first time

Click on “Create New Application”
Verify that you are the applicant then select “Next Page”

Answer “Yes” to the order and refer question, then select “Next Page”

Verify your information then select “Next Page”

Select “Alabama” from the drop down menu then select “Next Page”
Select your program specialty from the Part B Physician Specialties dropdown menu. Then, review enrollment information, select "Start Application".
This lists the steps in the enrollment process and indicates which steps have been completed. Select “Next Page” to continue.

Click “Add Information” to add information to the Personal Information Topic

Verify Personal Information. Make any changes and add missing data. Then select “Next Page”
STEP 13
List any previous names (if applicable), then select “Next Page”

STEP 14
Leave this field blank, then select “Next Page”

STEP 15
Enter your Medical School from the dropdown menu. Enter Year of Graduation, then select “Save”

STEP 16
Confirm Personal Information entered correctly then proceed on to the next topic
STEP 17
Enter Secondary Physician Specialty if any, then select “Next Topic”

STEP 18
Select “Add Information” to enter Correspondence Address

STEP 19
Enter Business Location Name and Address as indicated.

Please note: you may receive a message stating that this address is invalid. Simply click "Next", and move on to the next step. If you need to enter a reason as to why you chose this address, please say "this is the address given by the GME office" and click "Next".
Enter your **personal phone number** and your UAB email address (leave Fax blank), then select “Save.”

**STEP 21**
Confirm information entered then proceed to the next topic

**STEP 22**
Click “yes” for state license, then click “Add Information” to enter license information.
**STEP 23**
Verify that license information entered is correct, then select “Next Topic”

**STEP 24**
Review instructions for disclosing Adverse Legal Actions. Answer “yes” or “no” then move on to the next topic.

**STEP 25**
Select “Add Information” to enter Ordering and Referring Reason
Select “Licensed Intern Resident or Fellow Not Employed at Any of the Above” from the dropdown menu, then select “Save”.

If you are a PGY1, please select "Unlicensed Intern Resident or Fellow Not Employed at Any of the Above” from the dropdown menu, then select “Save”.

Confirm information then select “Next Topic”.

Select “Add Information”.

Enter your name as the Contact Name, then select “Next Page”.
Enter your personal address, your personal phone number, and your personal email address then select “Save”

Select “No” for supporting documents then select “Return to Topics”

You’re ALMOST done!
Check to make sure all the topics have been completed, then select “Begin Submission”.

Select “Electronic” signature option then select “SIGN NOW”.

MAKE SURE THIS BOX IS CHECKED!!!
Review the terms of the Certification Statement, then select “Yes” and then “Next Page”

Select “Cahaba GBA, Inc.” from the dropdown menu then select “Apply”

Then scroll down to the bottom of the screen and select “Complete Submission”
CONGRATULATIONS ON COMPLETING YOUR ENROLLMENT!