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REPORTING A CHANGE OF ADDRESS FOR MEDICARE, MEDICAID, AND THE STATE

- The Owner will be required to sign the required forms for Medicare, Medicaid, as well as the State, unless a different person is listed as the Authorized Official with Medicare. ORIGINAL signatures MUST be submitted with any changes being reported.
- If changing your Physical Address/Practice Location, please provide proof of the new address, such as a lease agreement or bill that clearly reflects the new address. The lease agreement/bill MUST be in the Company's name.
- Medicare requires that any changes of address(es) must be reported either 60 days prior to or 30 days after the changes take place.
- The Texas Department of State Health Services requires any address changes to be reported as soon as the Provider is aware of the changes will occur.
- Any report of changes to your Practice Location made to Medicare will result in an On-Site Visit as part of Medicare's verification process. These Visits are random and unannounced. Your office will need to be staffed during the office hours that are required to be clearly displayed outside your office. No "Out To Lunch" signs can be posted, nor are they accepted by Medicare at any time.