

(b) *Independent Diagnostic Testing Facilities*. The effective date for billing privileges for IDTFs is specified in § 410.33(i) of this chapter.

(c) *DMEPOS suppliers*. The effective date for billing privileges for DMEPOS suppliers is specified in § 424.57(b) of this subpart and section 1834(j)(1)(A) of the Act.

(d) *Additional provider and supplier types*. (1) The effective date of billing privileges for the provider and supplier types identified in paragraph (d)(2) of this section is the later of—

(i) The date of filing of a Medicare enrollment application that was subsequently approved by a Medicare contractor; or

(ii) The date that the provider or supplier first began furnishing services at a new practice location.

(2) The provider and supplier types to which paragraph (d)(1) of this section applies are as follows:

- (i) Physicians.
- (ii) Non-physician practitioners.
- (iii) Physician organizations.
- (iv) Non-physician practitioner organizations.
- (v) Ambulance suppliers.
- (vi) Opioid treatment programs.
- (vii) Part B hospital departments.
- (viii) Clinical Laboratory Improvement Amendment labs.
- (ix) Intensive cardiac rehabilitation facilities.
- (x) Mammography centers.
- (xi) Mass immunizers/pharmacies.
- (xii) Radiation therapy centers.
- (xiii) Home infusion therapy suppliers.
- (xiv) Physical therapists.
- (xv) Occupational therapists.
- (xvi) Speech language pathologists.

[73 FR 69940, Nov. 19, 2008, as amended at 75 FR 50418, Aug. 16, 2010; 79 FR 72531, Dec. 5, 2014; 84 FR 63203, Nov. 15, 2019; 85 FR 70355, Nov. 4, 2020; 86 FR 62419, Nov. 9, 2021]

**§ 424.521 Request for payment by certain provider and supplier types.**

(a) *Request for payment by certain provider and supplier types*. (1) The providers and suppliers identified in paragraph (a)(2) of this section may retrospectively bill for services when the provider or supplier has met all program requirements (including State licensure requirements), and services

were provided at the enrolled practice location for up to—

(i) Thirty days prior to their effective date if circumstances precluded enrollment in advance of providing services to Medicare beneficiaries; or

(ii) Ninety days prior to their effective date if a Presidentially-declared disaster under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121–5206 (Stafford Act) precluded enrollment in advance of providing services to Medicare beneficiaries.

(2) The provider and supplier types to which paragraph (a)(1) of this section applies are as follows:

- (i) Physicians.
- (ii) Non-physician practitioners.
- (iii) Physician organizations.
- (iv) Non-physician practitioner organizations.
- (v) Ambulance suppliers.
- (vi) Opioid treatment programs.
- (vii) Part B hospital departments.
- (viii) Clinical Laboratory Improvement Amendment labs.
- (ix) Intensive cardiac rehabilitation facilities.
- (x) Mammography centers.
- (xi) Mass immunizers/pharmacies.
- (xii) Radiation therapy centers.
- (xiii) Home infusion therapy suppliers.
- (xiv) Physical therapists.
- (xv) Occupational therapists.
- (xvi) Speech language pathologists.
- (b) [Reserved]

[79 FR 72531, Dec. 5, 2014, as amended at 84 FR 63203, Nov. 15, 2019; 85 FR 70355, Nov. 4, 2020; 86 FR 62419, Nov. 9, 2021]

**§ 424.522 Additional effective dates.**

(a) *Reassignments*. A reassignment of benefits under § 424.80 is effective beginning 30 days before the Form CMS–855R is submitted if all applicable requirements during that period were otherwise met.

(b) *Form CMS–855O enrollment*. The effective date of a Form CMS–855O enrollment is the date on which the Medicare contractor received the Form CMS–855O application if all other requirements are met.

[86 FR 62419, Nov. 9, 2021]