

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10945	Date: August 12, 2021
	Change Request 12391

SUBJECT: Removal of Provider Enrollment Policy from Chapter 15 in Publication (Pub.) 100-08

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to remove all remaining policy from Chapter 15 in Pub. 100-08 as the provider enrollment policy has been moved to Chapter 10 of Pub. 100-08.

EFFECTIVE DATE: September 13, 2021

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: September 13, 2021

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	15/Reserved for Future Use
R	15/Table of Contents
D	15/15.1/Introduction to Provider Enrollment
D	15/15.1/15.1.2/Medicare Enrollment Application (Form CMS-855)
D	15/15.10/15.10.2/Special Instructions for Certified Providers, ASCs, and Portable X-ray Suppliers
D	15/15.7/15.7.1.3/Verification of Data/Processing Alternatives
D	15/15.7/15.7.5.2/Special Procedures for MDPP Suppliers
D	15/15.7/15.7.6/Special Processing Guidelines for Form CMS-855A, Form CMS855B, and Form CMS-855I, and Form CMS-20134 Applications
D	15/15.7/15.7.7.7/Contractor Jurisdictional Issues
D	15/15.13/Delinquent or Existing Overpayments
D	15/15.14/15.14.2/Contractor Communications
D	15/15.21/15.21.7.1.1/Model Letters for Claims Against Surety Bonds
D	15/15.24/15.24.3/Model Rejection Letter
D	15/15.24/15.24.4/Model Returned Application Letter
D	15/15.24/15.24.16.3.4/Opt-Out Return Letter – Withdraw of Affidavit During Processing
D	15/15.25/15.25.1.1/Corrective Action Plans (CAPs)
D	15/15.25/15.25.1.2/Reconsideration Requests – Non-Certified Providers/Suppliers
D	15/15.25/15.25.1.3/Additional Appeal Levels
D	15/15.25/15.25.2.1/Corrective Action Plans (CAPs)
D	15/15.25/15.25.2.2/Reconsideration Requests – Certified Providers and Certified Suppliers
D	15/15.25/15.25.2.3/Additional Appeal Levels
D	15/15.26/15.26.2/Capitalization
D	15/15.27/15.27/Deactivations and Revocations
D	15/15.27/15.27.1.2/Reactivations
D	15/15.27/15.27.1.2.3/Reactivations/ Miscellaneous Policies
D	15/15.27/15.27.2/Revocations
D	15/15.27/15.27.5/Rebuttal Process
D	15/15.27/15.27.5.1/Rebuttal Submissions

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
D	15/15.27/15.27.5.2/Rebuttal Model Letters
D	15/15.27/15.27.5.3/Rebuttal Reporting Requirements
D	15/15.29/15.29.11/Revalidation Extension Requests

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

Attachment - Business Requirements

Pub. 100-08	Transmittal: 10945	Date: August 12, 2021	Change Request: 12391
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IMPLEMENTATION DATE: September 13, 2021

I. GENERAL INFORMATION

A. Background: The provider enrollment policy was moved to Chapter 10 in Pub. 100-08, from Chapter 15 in Pub. 100-08. No provider enrollment policy should exist in Chapter 15.

B. Policy: This CR does not contain any legislative or regulatory policies.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
12391.1	Contractors shall refer to Chapter 10 in Pub. 100-08 for Provider Enrollment policy.	X	X	X						NSC

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Andrew Stouder, 410-786-0222 or Andrew.stouder@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0

Medicare Program Integrity Manual

Chapter 15 – *Reserved for Future Use*

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(Rev. 10945; Issued: 08-12-21)

[Transmittals for Chapter 15](#)

Transmittals Issued for this Chapter

Rev #	Issue Date	Subject	Impl Date	CR#
R10723PI	04/08/2021	Implementation of Provider Enrollment Provisions in CMS-6058-FC – Phase 1 – Continued Removal/Moving of Instructions from Chapter 15 of Publication (Pub.) 100-08 to Chapter 10 of Pub. 100-08	08/10/2020	11551
R10383PI	10/09/2020	Updates to Chapters 4, 5, 8, 15, and Exhibits of Publication (Pub.) 100-08	11/10/2020	11999
R10353PI	09/11/2020	Chapter 15 of Publication (Pub.) 100-08 Manual Redesign – Additional Release of Chapter 10 of Pub. 100-08, Modification of the Timeliness Standards	02/01/2021	11865
R10345PI	09/11/2020	Chapter 15 of Publication (Pub.) 100-08 Manual Redesign – Additional Release of Chapter 10	11/13/2020	11700
R10239PI	07/28/2020	Implementation of Provider Enrollment Provisions in CMS-6058-FC – Phase 1 – Continued Removal/Moving of Instructions from Chapter 15 of Publication (Pub.) 100-08 to Chapter 10 of Pub. 100-08- Rescinded and replaced by Transmittal 10723	08/10/2020	11551
R10182PI	06/15/2020	Update to Chapter 10 of Publication (Pub.) 100-08 - Model Letter Templates	09/16/2020	11375
R10146PI	05/22/2020	Implementation of Provider Enrollment Provisions in CMS-6058-FC – Phase 1 – Continued Removal/Moving of Instructions from Chapter 15 of Publication (Pub.) 100-08 to Chapter 10 of Pub. 100-08- Rescinded and replaced by Transmittal 10239	07/24/2020	11551
R10138PI	05/15/2020	Moving Chapter 15 (Medicare Enrollment) Manual Instructions in Publication (Pub.) 100-08 to Chapter 10 (Medicare Enrollment)	06/16/2020	11546
	11/22/2019	Additional Guidance on Private Contracting/Opting-out of Medicare and Entering Opt-out Affidavit Records in the Provider Enrollment, Chain and Ownership System (PECOS)	12/24/2019	10939
R904PI	09/27/2019	Provider Enrollment Rebuttal Process	12/31/2019	10978
R902PI	09/27/2019	Updates to Chapters 3, 4, 8, 15, and Exhibits of Publication (Pub.) 100-08	10/28/2019	11425

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R898PI	09/06/2019	Updates to Provider Enrollment Processing Instructions in Chapter 15 of Publication (Pub.) 100-08, Program Integrity Manual, and to the CMS-855R Processing Guide	10/07/2019	11371
R896PI	08/30/2019	Updates to Provider Enrollment Processing Instructions in Chapter 15 of Publication (Pub.) 100-08	10/01/2019	11325
R882PI	05/24/2019	Additional Processing Procedure for Adding a New Provider-Based Location for Critical Access Hospitals (CAHs)	06/25/2019	11246
R865PI	02/21/2019	Update to Chapter 15 of Publication (Pub.) 100-08	03/12/2019	10954
R862PI	02/08/2019	Update to Chapter 15 of Publication (Pub.) 100-08- Rescinded and replaced by Transmittal 865	03/12/2019	10954
R824PI	09/05/2018	Update to Chapter 15 of Publication (Pub.) 100-08, Certification Statement Policies	10/01/2018	10845
R822PI	08/24/2018	Update to Chapter 15 of Publication (Pub.) 100-08, Certification Statement Policies- Rescinded and replaced by Transmittal 824	10/01/2018	10845
R797PI	06/01/2018	Reviewing for Adverse Legal Actions (ALA)	04/30/2018	10558
R762PI	04/30/2017	Update to Chapter 15 of Pub. 100-08	01/29/2018	10386
R782PI	03/30/2018	Update to Chapter 15 of Publication 100-08 - Medicare Enrollment Deactivation Policies	04/30/2018	10443
R784PI	03/30/2018	Reviewing for Adverse Legal Actions (ALA)	04/30/2018	10558
R773PI	02/23/2018	Form CMS-855O Processing Guide	03/23/2018	10355
R765PI	01/08/2018	Medicare Diabetes Prevention Program (MDPP) Enrollment Process	01/19/2018	10356
R734PI	07/28/2017	Update to Reporting Requirements	06/27/2017	9924
R719PI	05/26/2017	Update to Reporting Requirements	06/27/2017	9924
R718PI	05/19/2017	Reviewing for Adverse Legal Actions (ALA)	06/20/2017	9879
R717PI	05/12/2017	Update to Pub. 100-08, Chapter 15	05/15/2017	9953
R715PI	05/11/2017	Update to Pub. 100-08, Chapter 15	06/13/2017	9953
R711PI	04/25/2017	Update to Pub. 100-08, Chapter 15	05/15/2017	9953
R710PI	04/14/2017	Update to Pub. 100-08, Chapter 15	05/15/2017	9953
R689PI	12/09/2016	Clarification of Certification Statement Signature and Contact Person Requirements	01/09/2017	9776
R688PI	11/18/2016	Update to Pub. 100-08, Chapter 15	07/26/2016	9635
R685PI	11/03/2016	Incorporation of Cycle 2 Revalidation Policies	09/06/2016	9628
R684PI	11/01/2016	Incorporation of Cycle 2 Revalidation Policies – Rescinded and replaced by Transmittal 685	12/02/2016	9628

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R681PI	10/27/2016	Revision to Surety Bond Collection Procedures	01/30/2017	9755
R676PI	09/16/2016	Clarification of Certain Policies in Pub. 100-08, Chapter 15 Regarding the Processing of Form CMS-855R Applications	12/19/2016	9552
R666PI	08/05/2016	Incorporation of Cycle 2 Revalidation Policies - Rescinded and replaced by Transmittal 684	09/06/2016	9628
R659PI	06/24/2016	Update to Pub. 100-08, Chapter 15 - Rescinded and replaced by Transmittal 688	07/26/2016	9635
R636PI	02/04/2016	Update to Pub. 100-08, Chapter 15	03/04/2016	9390
R626PI	11/13/2015	Update to Surety Bond Collection Requirements	12/14/2015	9296
R609PI	08/14/2015	Clarification Regarding the Processing of Certain Provider Enrollment-Related Transactions	11/02/2015	9174
R605PI	07/31/2015	Clarification Regarding the Processing of Certain Provider Enrollment-Related Transactions – Rescinded and replaced by Transmittal 609	11/02/2015	9174
R592PI	05/08/2015	Update of Provider Enrollment Instructions in Chapter 15 of Pub. 100-08	06/08/2015	9139
R591PI	05/08/2015	Revisions to Surety Bond Collection Policies	06/08/2015	9123
R590PI	04/24/2015	Update of CMS-855A, Physician-Owned Hospital Reporting Via the CMS-855POH and Indirect Payment Procedure Registration Via the CMS-855C in Chapter 15 of Pub. 100-08	05/25/2015	9120
R587PI	04/17/2015	Clarification of Ordering and Certifying Documentation Maintenance Requirements	07/20/2015	9112
R582PI	03/04/2015	Incorporation of Certain Provider Enrollment Policies in CMS-6045-F into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15	05/28/2015	9065
R581PI	02/27/2015	Incorporation of Certain Provider Enrollment Policies in CMS-6045-F into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15 – Rescinded and replaced by Transmittal 582	05/28/2015	9065
R578PI	02/25/2015	Incorporation of Revalidation Policies into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15	05/15/2015	9011
R575PI	02/13/2015	Incorporation of Revalidation Policies into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15 – Rescinded and replaced by Transmittal 578	05/15/2015	9011
R561PI	12/12/2014	Incorporation of Certain Provider Enrollment Policies in CMS-4159-F into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15	04/18/2015	8901
R556PI	11/26/2014	Revisions to Pub. 100-08, Program Integrity Manual (PIM), Chapter 15	12/29/2014	8810
R539PI	08/29/2014	Cardiac Rehabilitation Programs for Chronic Heart Failure – Rescinded and replaced with	08/18/2014	8758

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		Transmittal 539		
R532PI	08/01/2014	Incorporation of Various Form CMS-855 Processing Activities into Pub. 100-08, Program Integrity Manual (PIM), Chapter 15	09/02/2014	8842
R530PI	07/18/2014	Cardiac Rehabilitation Programs for Chronic Heart Failure – Rescinded and replaced with Transmittal 539	08/18/2014	8758
R525PI	06/27/2014	Update to Form CMS-855 Application Processing Sections of CMS Pub. 100-08, Chapter 15	07/29/2014	8637
R521PI	06/13/2014	Submission of Community Mental Health Center (CMHC) Certifications of Compliance with Section 485.918(b)(1)	07/15/2014	8784
R519PI	05/30/2014	Revision to CMS Publication 100-08, Chapter 15	07/31/2014	8512
R517PI	05/16/2014	Update to Surety Bond Collection Procedures	06/17/2014	8636
R514PI	05/02/2014	Update to CMS Publication 100-08, Chapter 15	06/03/2014	8682
R509PI	03/27/2014	Change in Provider Enrollment Timeliness Standards	06/02/2014	8551
R507PI	02/28/2014	Change in Provider Enrollment Timeliness Standards – Rescinded and replaced by Transmittal 509	05/29/2014	8551
R503PI	01/24/2014	Inter-Jurisdictional Reassignments	02/25/2014	8545
R502PI	01/17/2014	Registration of Entities Using the Indirect Payment Procedure (IPP)	01/06/14	8284
R499PI	12/27/2013	Update to Chapter 15 of the Program Integrity Manual	01/28/2014	8544
R494PI	12/06/2013	Registration of Entities Using the Indirect Payment Procedure (IPP)	01/06/14	8284
R492PI	12/06/2013	Additional Updates to Chapter 15 of the Program Integrity Manual (PIM)	01/07/2014	8393
R490PI	11/06/2013	Reassignment to Part A Critical Access Hospitals Billing Under Method II (CAH II)	01/06/2014	8387
R483PI	08/16/2013	Reassignment to Part A Critical Access Hospitals (CAHs), Federally Qualified Health Centers (FQHCs), and Rural Health Clinics (RHCs) – Rescinded and replaced by Transmittal 490	01/06/2014	8387
R479PI	08/01/2013	Enrollment Denials When an Existing or Delinquent Overpayment Exists	10/07/2013	8039
R478PI	08/02/2013	Registration of Entities Using the Indirect Payment Procedure (IPP) – Rescinded and replaced by Transmittal 494	01/06/2014	8284
R474PI	07/05/2013	Update to Chapter 15 of the Program Integrity Manual (PIM)	10/08/2013	8341
R471PI	06/11/2013	Update to Chapter 15 of the Program Integrity	05/28/2013	8222

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		Manual (PIM)		
R470PI	05/31/2013	Revision to Surety Bond Collection Process	07/01/2013	8283
R469PI	05/31/2013	Enrollment Denials When an Existing or Delinquent Overpayment Exists – Rescinded and replaced by Transmittal 479	10/07/2013	8039
R463PI	05/17/2013	Model Letter Revisions	06/07/2013	8117
R462PI	05/16/2013	Update to Chapter 15 of the Program Integrity Manual (PIM)	03/18/2013	8155
R461PI	04/26/2013	Update to Chapter 15 of the Program Integrity Manual (PIM) – Rescinded and replaced by Transmittal 471	05/28/2013	8222
R459PI	04/12/2013	Tax Identification Numbers of Foreign Owning and Managing Entities and Individuals	05/13/2013	8258
R457PI	04/02/2013	Model Letter Revisions – Rescinded and replaced by Transmittal 463	04/22/2013	8117
R456PI	03/22/2013	Model Letter Revisions – Rescinded and replaced by Transmittal 457	04/22/2013	8117
R450PI	02/15/2013	Update to Chapter 15 of the Program Integrity Manual (PIM) – Rescinded and replaced by Transmittal 462	03/18/2013	8155
R445PI	12/14/2012	Revision to Section 15.5.20 of Chapter 15 of the Program Integrity Manual (PIM)	01/01/2014	7864
R440PI	11/23/2012	Revisions to Appeals Section of Chapter 15 of the Program Integrity Manual (PIM)	12/24/2012	8110
R437PI	11/02/2012	Revision to Section 15.5.20 of Chapter 15 of the Program Integrity Manual (PIM) – Rescinded and replaced by Transmittal 445	02/01/2013	7864
R435PI	10/19/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part IX	11/20/2012	8019
R433PI	09/07/2012	Review of Debarment List and Processing of Tie-in Notices	10/09/2012	8020
R431PI	08/31/2012	Ordering and Certifying Documentation-Maintenance Requirements	10/01/2012	7890
R430PI	09/28/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part VIII	10/29/2012	7889
R424PI	06/13/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part VI	06/19/2012	7827
R423PI	06/01/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part VII	07/02/2012	7839
R421PI	05/18/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part VI – Rescinded and replaced by Transmittal 424	06/19/2012	7827
R416PI	04/13/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part III	02/27/2012	7698
R415PI	04/13/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part V	05/14/2012	7797

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R414PI	04/06/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part IV	05/07/2012	7763
R412PI	03/30/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part II	04/30/2012	7646
R410PI	03/02/2012	Instructions for Processing Form CMS-8550 Submissions	06/04/2012	7723
R408PI	02/22/2012	Additional Provider and Supplier Enrollment Requirements for Fixed Wing and Helicopter Air Ambulance Operators	02/03/2012	7363
R407PI	02/09/2012	Advanced Diagnostic Imaging (ADI) Accreditation Enrollment Procedures(This CR Fully Rescinds and Replaces CR 7177)	01/27/2012	7681
R405PI	01/26/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM) –Part III – Rescinded and replaced by Transmittal 416	02/27/2012	7698
R404PI	01/20/2012	General Update to Chapter 15 of the Program Integrity Manual (PIM)-Part I	04/22/2012	7579
R403PI	01/20/2012	Claims Against Surety Bonds for Suppliers of Durable Medicare Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)	02/21/2012	7167
R402PI	01/13/2012	Advanced Diagnostic Imaging (ADI) Accreditation Enrollment Procedures(This CR Fully Rescinds and Replaces CR 7177) – Rescinded and replaced by Transmittal 407	01/27/2012	7681
R400PI	11/21/2011	Additional Provider and Supplier Enrollment Requirements for Fixed Wing and Helicopter Air Ambulance Operators – Rescinded and replaced by Transmittal 408	02/03/2012	7363
R394PI	10/27/2011	Additional Provider and Supplier Enrollment Requirements for Fixed Wing and Helicopter Air Ambulance Operators – Rescinded and replaced by Transmittal 400	02/03/2012	7363
R392PI	10/14/2011	Update to Notifications Sent to State Medicaid Agencies and Child Health Plans of Medicare Terminations for Certified Providers and Suppliers and Medicare Revocations for Providers and Suppliers. This CR rescinds and fully replaces CR 7017, 7074 and 7334	11/15/2011	7532
R388PI	09/16/2011	Additional Review Activities for Home Health Agencies (HHAs)	12/17/2011	7525
R387PI	09/01/2011	Eligible Physicians and Practitioners Who Need to Enroll in the Medicare Program for the Sole Purpose of Ordering and Referring Services for Medicare Beneficiaries	10/18/2010	7097
R380PI	08/03/2011	Advanced Diagnostic Imaging Accreditation Enrollment Procedures	07/05/2011	7177
R374PI	05/06/2011	Update to Notifications Sent to State Medicaid Agencies and Child Health Plans of Medicare Terminations for Certified Providers and	06/06/2011	7334

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		Suppliers and Medicare Revocations for Providers and Suppliers		
R373PI	04/07/2011	Advanced Diagnostic Imaging Accreditation Enrollment Procedures – Rescinded and replaced by Transmittal 380	07/05/2011	7177
R372PI	03/25/2011	Effective Date of Certified Provider or Supplier Agreement or Approval	04/25/2011	7232
R371PI	03/23/2011	Implementation of Provider Enrollment Provisions in CMS-6028-FC	03/25/2011	7350
R369PI	03/11/2011	Advanced Diagnostic Imaging Accreditation Enrollment Procedures – Rescinded and replaced by Transmittal 373	06/12/2011	7177
R365PI	01/28/2011	Diabetes Self-Management Training (DSMT)	04/29/2011	7236
R363PI	01/14/2011	Clarification for Part A Contractors Including Audit and Claims Intermediaries Notifying Each Other via E-mail Upon Processing of the Initial Enrollment Application, Change of Information, Voluntary Termination, or Any Other CMS-855 Transaction	02/15/2011	7221
R358PI	10/29/2010	Indian Health Service (IHS) Facilities and Tribal Provider’s Use of Internet-based Provider Enrollment, Chain and Ownership System (PECOS)	11/29/2010	7174
R357PI	10/01/2010	Durable Medical Equipment (DME MAC) and the National Supplier Clearinghouse (NSC MAC) Procedures for Third Party Notification of Deceased Durable Medical Equipment, Prosthetic, Orthotic and Supplies (DMEPOS) Supplier Associates	10/04/2010	6714
R356PI	09/24/2010	Manual Redesign	10/26/2010	7083
R355PI	09/17/2010	Eligible Physicians and Practitioners Who Need to Enroll in the Medicare Program for the Sole Purpose of Ordering and Referring Services for Medicare Beneficiaries	10/18/2010	7097
R354PI	08/27/2010	Manual Redesign	09/28/2010	7016
R353PI	08/27/2010	Notification to State Medicaid Agencies and Child Health Plans of Medicare Terminations for Certified Providers and Suppliers	09/28/2010	7074
R350PI	08/20/2010	Notification to State Medicaid Agencies and Child Health plans of Medicare Revocation	09/21/2010	7017
R347PI	07/15/2010	Chapter 10 Manual Redesign - Initial release of Chapter 15	07/30/2010	6938
R346PI	06/25/2010	Guidance on Implementing Section 3109 of the Patient Protection and Affordable Care Act (PPACA)	01/03/2011	7021
R344PI	06/18/2010	Chapter 10 Manual Redesign - Initial release of Chapter 15 - Rescinded and replaced by Transmittal 347	07/05/2011	6938

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