Dear Applicant:

This letter outlines the requirements and procedures through which your institution may be approved to participate in Medicare as a supplier of services. The Agency for Health Care Administration (AHCA), under the auspices of the federal Centers for Medicare and Medicaid Services (CMS), assists in determining whether suppliers of portable x-ray services meet the conditions for coverage. Such approval, when required, is prerequisite to qualifying to participate in the State Medicaid program as well.

To initiate the application process it will be necessary for you to submit CMS Form 855B “Medicare Federal Health Care Provider Application” to the Medicare Administrative Contractor (MAC) for processing. This form may be obtained by calling the carrier at (866) 454-9007, or by downloading it from the following CMS website: [http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms855b.pdf](http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms855b.pdf)

In addition, promptly complete and forward the following forms in order to avoid unnecessarily delaying approval. You should retain copies of these forms for your records.

- Request for Certification as Supplier of Portable X-Ray Services Under the Medicare Program – CMS Form 1880
- Health Insurance Benefit Agreement – CMS Form 1561 (submit 2 originals please)
- Medicare Administrative Contractor (MAC) Form

Please send these forms to:

Agency for Health Care Administration  
2727 Mahan Dr, MS # 31  
Tallahassee, FL 32308

These forms may be downloaded from the following web site:

[http://ahca.myflorida.com/MCHQ/Health_Facility_Regulation/Hospital_Outpatient/x_ray.shtml](http://ahca.myflorida.com/MCHQ/Health_Facility_Regulation/Hospital_Outpatient/x_ray.shtml)

Also available on the web site is a copy of Title 42, Code of Federal Regulations, Part 486, Subpart C, “Conditions for Coverage: Portable X-ray Services”, the Medicare regulations.

Before you can be approved to participate in the Medicare program, your facility must be surveyed by AHCA. The local surveyor will inspect your equipment, interview you and members of your staff, and review documents to evaluate to what extent your facility meets the conditions for coverage. X-ray equipment made after August 1, 1974, should bear a factory label showing that it meets FDA requirements. You will be required to provide documentation that any unlabeled equipment meets applicable FDA requirements.
Portable x-ray services are provided under the supervision of a licensed doctor of medicine or licensed doctor of osteopathy who is qualified by advanced training and experience in the use of x-rays for diagnostic purposes, per 42 CFR, Sec. 486.102(b).

If you are a non-physician owner of the portable x-ray equipment, you must have a supervising physician’s certification of the kind described in Title 42, CFR Part 486, Section 486.102(a)(2) of the enclosed “Conditions for Coverage of Portable X-ray services.” This certification must be prepared by a physician who meets one of the criteria outlined in Section 486.102(b). If this certification is available before or at the time of the survey, it will expedite coverage of your services under Medicare.

Following the completion of the survey by the local AHCA office, your qualifications will be evaluated and a recommendation to approve or deny the application will be submitted to the Agency for Health Care Administration, Tallahassee, Florida. This office reviews the application, the local office’s survey, and the recommendation and notifies you whether your application has been approved or forwarded to the Centers for Medicare and Medicaid Services for denial. An applicant that is denied certification in the program is notified of the reasons for denial and provided information about their rights to appeal the decision.

**LICENSURE**

On November 14, 2003, Senate Bill 32A, known as the “Motor Vehicle Insurance Reform Act,” became law, requiring the licensure of health care clinics by the Agency for Health Care Administration (Agency). This law, known as the “Health Care Clinic Act,” was codified as part XIII, chapter 400, F.S. (2003). The Agency’s health care clinic licensure and exemption process became effective March 1, 2004. Health care clinic application forms are available on the Agency website at:


As a licensed clinic your facility will have surveyors from our field offices visit you as a part of the evaluation of your initial license application. They will also visit when you apply for a renewal license and/or when we must investigate a complaint. This visit is separate from the initial certification survey used for Medicare certification.

Should you have any questions concerning this material, please use the following contacts:

- Medicare Administrative Contractor, at (866) 454-9007, for CMS Form 855B
- AHCA, Hospital & Outpatient Services Unit, at (850) 412-4549, for certification inquiries
- AHCA, Health Care Clinic Unit, at (850) 412-4404, for licensure inquiries