

## Eligibility Determination Request

### APPELLANT ELIGIBILITY

Use Tab 1 to state your reason for appellant eligibility review. Please include any documentation to help CMS review your dispute rationale.

### APPEALS INCLUDED ON SPREADSHEET - IF YOU DISAGREE

Use Tab 2 to list appeals included on the spreadsheet, that you believe are not eligible for settlement.

### POTENTIALLY ELIGIBLE APPEALS NOT INCLUDED ON SPREADSHEET

Use Tab 3 to provide any appeals missing from the spreadsheet that you believe are eligible for settlement. Please include any supporting documentation that may help CMS identify the appeals and associated claims.

**DO NOT INCLUDE ANY PHI INFORMATION**

**Please make sure this Eligibility Determination Request includes ALL claim appeals that you wish to remove and add. Each appellant NPI may only submit one EDR.**

<b>Appellant Name</b>	
<b>NPI</b>	
<b>Appellants POC Name</b>	
<b>POC Telephone Number</b>	
<b>POC Email</b>	

<b>Appellant TIN</b>	<b>Corrected TIN (if applicable)</b>	<b>Dispute Reason</b>
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**PART 1: APPEALS INCLUDED ON SPREADSHEET-DISAGREE (claim appeals provider believes should be potentially deleted from settlement)**

<b>Appellant Name</b>	
<b>NPI</b>	
<b>Appellant POC Name</b>	
<b>POC Telephone Number</b>	
<b>POC Email</b>	

Please populate claim and appeal numbers as they appear on eligible appeal spreadsheet provided by CMS.

<b>Active Appeal Number</b>	<b>Currently Pending at Level of Appeal (ALJ or Council)</b>	<b>Associated ALJ Appeal Number (if applicable)</b>	<b>QIC Appeal Number</b>	<b>DCN Claim Number</b>	<b>Date of Service</b>	<b>MAC/Jurisdiction</b>	<b>Disagreement Reason</b>
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**PART 2: POTENTIALLY ELIGIBLE APPEALS NOT INCLUDED ON SPREADSHEET (claim appeals appellant believes should be potentially included with the settlement)**

<b>Appellant Name</b>	
<b>NPI</b>	
<b>Appellant POC Name</b>	
<b>POC Telephone Number</b>	
<b>POC Email</b>	

<b>Active Appeal Number</b>	<b>Currently Pending at Level of Appeal (ALJ or Council)</b>	<b>Associated ALJ Appeal Number (if applicable)</b>	<b>QIC Appeal Number</b>	<b>DCN Claim Number</b>	<b>Date of Service</b>	<b>MAC/Jurisdiction</b>	<b>Comment</b>
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