



# MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

Related Change Request (CR) #: 3942

MLN Matters Number: MM3942

Related CR Release Date: October 7, 2005

Related CR Transmittal #: 697

Effective Date: May 1, 2005

Implementation Date: January 9, 2006

## *MMA - Changes to Chapter 29 - Appeals of Claims Decisions: Redeterminations and Reconsiderations (Implementation Date May 1, 2005)*

**Note:** This article was updated on February 12, 2013, to reflect current Web addresses. All other information remains unchanged.

### Provider Types Affected

Physicians, providers, and suppliers who submit claims to Medicare for services

### Provider Action Needed

The new second level in the administrative appeals process is called a “reconsideration.” Reconsiderations are processed by Qualified Independent Contractors (QICs).

### Background

The Medicare claim appeals process was amended by the Medicare, Medicaid and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA). Section 1869(c) of the Social Security Act (the Act), as amended by BIPA, now requires a new second level in the administrative appeals process called a reconsideration.

Requests for reconsideration of appeal decisions (redeterminations) should go either to the Qualified Independent Contractor (QIC), or the Hearing Officer (HO), when the redetermination was issued by a carrier prior to January 1, 2006.

### *Time Limit for Filing a Request for Reconsideration*

A request for reconsideration must be filed within 180 days of the date of receipt of the notice of redetermination. For requests filed in writing - the date received is defined as the date received by the QIC in the corporate mailroom.

Please refer to the following table for clarification.

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

**Appeal Rights for Requests for Reconsideration  
The Second Level of Appeal**

Medicare Claims	Medicare Contractor Issuing Redetermination	Date Redetermination Issued and Mailed	Where to Appeal the Redetermination*
Part A/Part B	FI	On or after May 1, 2005	QIC
Part B	Carrier	On or after January 1, 2006	QIC
Part A	FI	Before May 1, 2005	ALJ
Part B	FI	Before May 1, 2005	HO
Part B	Carrier	Before January 1, 2006	HO

\*Qualified Independent Contractor (QIC); Administrative Law Judge (ALJ); Hearing Officer (HO)

**Additional Information**

Medicare Claims Processing Manual, Chapter 29 - Appeals of Claims Decisions, 310.2, 310.3, can be found at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c29.pdf> on the CMS website.

MLN Matters article MM3530 - "MMA - Revisions to Medicare Appeals Process for Fiscal Intermediaries Revised: 4/12/2005" (CR Title - Appeals Transition - BIPA 521 Appeals), can be found at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/MM3530.pdf> on the CMS website.

Change Request CR3530 "Revisions to Medicare Appeals Process for Fiscal Intermediaries Revised: 4/12/2005" (CR Title-Appeals Transition – BIPA 521 Appeals), can be found at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R146OTN.pdf> on the CMS website.

The official instruction issued to your FI, DMERC, or carrier regarding this change may be found by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R697CP.pdf> on the CMS website. The new sections of Chapter 29 of the Medicare Claims Processing Manual are attached to CR3942.

Please refer to your local carrier/DMERC/FI for more information about this issue. To find the toll free phone number, go to <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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