



U.S. Department of Health & Human Services
Office of Medicare Hearings and Appeals

National Medicare Education Program Meeting Office of Medicare Hearings and Appeals

Jason Green

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U.S. Department of Health & Human Services Office of Medicare Hearings and Appeals

- ✎ The Office of Medicare Hearings and Appeals (OMHA) is an agency within the Office of the Secretary of the U.S. Department of Health and Human Services.
- ✎ OMHA is organizationally and functionally separate from the Centers for Medicare & Medicaid Services (CMS).
- ✎ OMHA administers the nationwide Administrative Law Judge (ALJ) hearing program for Medicare benefit and claim appeals (generally the third of four levels of administrative appeal).



OMHA Jurisdiction

- ✎ Part A and B Claim Appeals
 - Pre- and post-payment denials or items / services
 - Medicare Secondary Payer (MSP) recoveries
- ✎ Part C Medicare Advantage Organization determinations
- ✎ Part D prescription drug coverage determinations
- ✎ Provider service termination and hospital discharges (QIO)
- ✎ Medicare eligibility & entitlement determinations made by SSA
- ✎ Part B and D Income Related Monthly Adjustment Amount (IRMAA) determinations made by SSA



OMHA Workload



General Appeals:

- Approximately 700,000 pending
- FY 2016 average processing at end of 3rd quarter = 935 days



Beneficiary-initiated appeals (through August 31, 2016):

- Approximately 6000 filed in FY 2016
 - Approximately 3.5% of total appeals filed in FY 2016
- Average wait time for a decision for FY 2016 appeals = 71.4 days
 - Approximately 71.4% of FY 2016 appeals have been decided
 - Average wait time for a decision for FY 2015 appeals = 86.0 days



Beneficiary Prioritization

- ✎ Policy to prioritize beneficiary-initiated appeals began in 2013.
- ✎ Policy revised in 2015.
 - Appeal is not prioritized if beneficiary is not financially responsible and:
 - Represented by a party with independent appeal rights; or
 - Represented by an individual who also represents a party with independent appeal rights.
- ✎ Modification being made per 2016 agreement:
 - The 2015 exception for appeals in which the beneficiary is represented by a provider or supplier, or a common representative will not apply if:
 - The beneficiary is financially responsible for related items or services that have been denied and are being appealed; or
 - The denied item or service is preventing the beneficiary from receiving additional related items or services.



Other Program Enhancements for Beneficiaries

- ✎ **New dedicated beneficiary help line: (844) 419-3358 (toll free)**
 - Staffed 8:00 a.m. to 4:30 p.m. Eastern Time (voicemail activated)
 - Overseen by OMHA Director of Field Operations (Anne Lloyd)
 - Questions about filing appeals, the status of appeals, troubleshooting issues with pending appeals, etc.

- ✎ **Increasing transparency on beneficiary appeals data**
 - Average wait time for decisions.
 - Numbers of pending appeals.
 - Where pending appeals are in the process if they are over 90 days old.



Other Program Enhancements for Beneficiaries

- ✎ Revising 1-800-Medicare scripts so operators can tell beneficiary callers about OMHA's prioritization program and refer them to the OMHA beneficiary help line
- ✎ Revising the form for requesting an ALJ hearing or review of a QIC dismissal, and appeal instructions that contractors provide.
 - Help beneficiaries self-identify
 - Provider clearer, more complete instructions on where to send request
 - Who to call for large print version



Beneficiary Prioritization

- ✎ Help us identify beneficiary appeals and process them as quickly as possible!
- ✎ Send requests to:
 - OMHA Central Operations
 - Attn: Beneficiary Mail-Stop
 - 200 Public Square, Suite 1260
 - Cleveland, OH 44114-2316
- ✎ If a notice of assignment is not received within 2 weeks, check the ALJ Appeal Status Information System or call the OMHA beneficiary help line at (844) 419-3358 (toll free)



ALJ Appeal Status Information System (AASIS)

- ✎ Online appeal status lookup tool available on OMHA website
 - www.hhs.gov/omha/Appeal_Status_Lookup/index.html
- ✎ Updated weekly (active cases and 180 days after close)
- ✎ Can use QIC reconsideration or ALJ appeal numbers
 - Search up to 10 at a time
 - Answer a simple arithmetic problem (to prevent automated programs)
- ✎ Information returned by system includes:
 - Appeal status
 - ALJ team assigned to hear the appeal, including team contact information
 - Date of any scheduled hearing
 - Date decision letter was mailed



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AASIS

Field marked with an asterisk (*) is required.

Enter Appeal Number(s) *

Enter up to 10 ALJ Appeal Numbers and/or Medicare Appeal Numbers (Reconsideration).

Please enter one per line pressing the enter key.

1-1000638791R1

Please validate the following expression:

Question: What is seven - four ?

3

Submit Inquiry

ALJ Appeal Status Information System Results Page

SEARCH RESULTS

Medicare Appeal Number (Reconsideration)	1-895134209
ALJ Appeal Status	Assigned
ALJ Appeal Number	1-1000638791R1
Request for ALJ Hearing Received Date	05/18/2013
ALJ Hearing Date	
ALJ Decision Mailed Date	
ALJ Hearing Office	Miami
Administrative Law Judge	Lauren Heard
ALJ Team Phone Number/Extension	305-415-7449
New ALJ Appeal Number	
Notes	This appeal has been assigned, and will be reviewed by the Administrative Law Judge indicated above.

HEARING OFFICE(S)

Miami

OMHA Miami Field Office
100 SE 2nd St., Suite 1660
Miami, FL 33131-2100
Phone: 866-622-0382



Contacting OMHA

- ✎ Cases assigned to an ALJ, can contact the ALJ team
 - <http://www.hhs.gov/about/agencies/omha/contact/index.html>
- ✎ Cases not assigned to an ALJ / or other issues
 - Beneficiaries: (844) 419-3358 (toll free)
 - Other appellants: (855) 556-8475 (toll free)
 - Medicare.Appeals@hhs.gov (ALJ-level appeals only)
- ✎ Helping beneficiaries file appeals:
 - Send requests for hearing to: OMHA Central Operations
Attn: Beneficiary Mail Stop
200 Public Sq., Suite 1260
Cleveland, OH 44114-2316
 - Part D expedited appeals (ONLY): (866) 941-7012



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QUESTIONS?

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