

Department of Health & Human Services  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244-1850



## **CENTER FOR DRUG AND HEALTH PLAN CHOICE**

---

**DATE:** January 2, 2009

**TO:** All Medicare Advantage Private Fee-for-Service Organizations

**FROM:** Louis Polise  
Acting Director, Medicare Drug and Health Plan Contract Administration Group

**SUBJECT:** Instructions for Submitting Payment Disputes to the Independent Review Entity for Private Fee-for-Service Plans

On November 25, 2008, the Centers for Medicare & Medicaid Services released an HPMS memorandum announcing First Coast Service Options Inc. (FCSO) as an Independent Review Entity to adjudicate payment disputes between deemed and non-contracted Private Fee-For-Service (PFFS) providers and Medicare Advantage (MA) organizations offering PFFS plans.

### **Submission of Payment Dispute Decision Requests**

Deemed and non-contracted PFFS Plan providers can begin submitting payment dispute decision requests directly to First Coast Service Options, Inc. on January 1, 2009, after they have exhausted the appeals process with the PFFS plan. FCSO has established the following options for receipt of payment dispute decision requests.

1. **Email.** If the submission and associated documents do not contain any personally identifiable health information (PHI) (or any PHI has been redacted), the payment dispute decision request can be submitted to a dedicated email box at [IREPFFS@FCSO.com](mailto:IREPFFS@FCSO.com).

Otherwise, First Coast can receive payment dispute decision requests (including associated documents such as claims forms that may contain PHI) via the following:

2. **Fax.** A fax number, (904) 361-0551, has been established to receive electronic requests for payment dispute decisions.

3. **Mail.** Providers can also mail hard copy requests for payment dispute adjudication to the following address:

First Coast Service Options, Inc.  
PFFS Payment Disputes  
P.O. Box 44017  
Jacksonville, Florida 32231-4017

MA organizations and providers with questions regarding the adjudication process or individual disputes being reviewed by the IRE can contact FCSO at 904-791-6430. Providers and MA organizations will be able to leave messages and should expect a return call within 48 hours of receipt. Hard copy correspondence associated with a dispute request may be mailed to:

First Coast Service Options, Inc.  
PFFS Payment Disputes  
P.O. Box 44035  
Jacksonville, Florida 32231-4035

Beneficiary and provider appeals of coverage determinations will continue to be handled by the Part C qualified independent contract, MAXIMUS, and will not be adjudicated under the contract with FCSO.

We are attaching two documents to this memorandum. The first document is the Payment Dispute Decision Request Form (PDD) providers should use to submit request for payment dispute decisions. The second document is a summary of the major elements of the Payment Dispute Program.

#### PFFS Model Terms and Conditions

September 12, 2008, CMS released a memorandum via HPMS entitled “Instructions for Model Private Fee-For-Service Terms and Conditions of Payment.” This memorandum provided PFFS plans with model terms and conditions of payment and instructions for the submission and review of this document. **Upon the release of this memo, PFFS plans must update their terms and conditions using the instructions for contacting FCSO.**

In the November 25<sup>th</sup> HPMS memo, we instructed plans using the model terms and conditions to submit their terms and conditions to their regional office account manager for a 10-day review without the following sentence since the contact information was not released at that time. (The following sentence is part of the model, in Section 8 (Provider payment dispute resolution process): “To file a request for review of a payment dispute with the independent entity, you may contact the entity directly at [*insert instructions for contacting the independent review entity*].”) Plans do not need to resubmit their terms and conditions to their account manager for review and approval. However, plans are required to inform their account manager about the update to their terms and conditions and provide the account manager with a copy of the updated terms and conditions.

In early 2009, First Coast will make available on their company web-page a copy of the policies and procedures to be used for the adjudication process. If you have questions concerning this notification, please contact Paul Foster at [Paul.Foster@cms.hhs.gov](mailto:Paul.Foster@cms.hhs.gov).

Attachments (2)