

Medicare Claims Processing Manual

Chapter 29 - Appeals of Claim Decisions

Crosswalk

Note: QIO appeals instructions are to remain in the QIO Manual. Some background material is repeated here to enhance understanding.

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	01										Foreword
29	10	3790	12000	600	287	256	380	408	628	QIO-740	CMS Decisions Subject to the Administrative Appeals Process
29	20	3780	12000	600	287.4	256	383	408	628	QIO-740	Who may Appeal
29	30			600	287		383		628		Where to Appeal
29	30.1			600B							Social Security Office (SSO)
29	30.2										Part A Intermediary (FI)
29	30.2.1										FI Initial Determinations with Respect to Beneficiaries
29	30.2.2										Provider's Right to Appeal Certain Initial Determinations
29	30.2.3										Appeals That Involve an Adverse Utilization Review Committee (URC) Decision
29	30.3		12000								Part B Carrier
29	30.4									QIO-7400	Quality Improvement Organization (QIO)
29	30.4.1									QIO-7400	QIO Reconsiderations and Appeals

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	30.5									HMO-2403	Health Maintenance Organizations (HMO) and Managed Care + Choice Organizations
29	30.6									RO-3600	CMS Regional Office Responsibility
29	30.6.1									RO-3600	Assisting FIs to Obtain Documentation
29	30.6.2									RO-3610	Congressional Requests for Part A Reconsideration
29	30.7									PM-AB-02-111	Time Limits for Filing Appeals
29	30.8									PM-AB-02-111	Amount In Controversy Requirements
29	40	3781			287.4	257	383A		628A	PM-AB-00-122	Part A Appeals Procedures
29	40.1	3781									Initial Determinations
29	40.1.1	3781.1									Initial Determinations With Respect to Beneficiaries
29	40.1.2	3781.2			287.2		381				Provider's Right to Appeal Certain Initial Determinations
29	40.1.3	3781.3			287.3		382				Situations Where Provider May Initiate Appeal
29	40.1.4	3781.4									Appeals That Involve an Adverse Utilization Review Committee (URC) Decision
29	40.1.5	3781.6									Finding Good Cause for the Late Filing of Appeal Requests
29	40.1.5.1	3781.6A									General
29	40.1.5.2	3781.6B									Establishment of Time Limit for Filing
29	40.1.5.3	3781.6C									Conditions Which Establish Good Cause
29	40.1.5.4	3781.6D									Procedure to Establish Good Cause
29	40.1.5.5	3781.6E									Examples of Situations Where Good Cause Exists
29	40.1.5.6	3781.6F									Where Good Cause Is Not Found

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29	40.1.6	3781.7									Assisting Handicapped Beneficiaries
29	40.2	3782									Reconsideration of a Part A Payment Determination
29	40.2.1	3782.1									Place and Manner of Filing Requests for Reconsideration
29	40.2.2	3782.2									Completing Form CMS-2649, Request for Reconsideration of Part A Health Insurance Benefits
29	40.2.3	3782.3									Routing the Reconsideration Request
29	40.2.4	3782.4									Acknowledging Receipt
29	40.2.5	3782.5									Transferring and Dismissing Requests Which Involve Partial or No Jurisdiction, More Than One Component, Stay, or Issue
29	40.2.6	3782.7									Handling of Request--Beneficiary Appeals Before Initial Determination Is Made or After Initial Favorable Determination Is Made, But Before They Are Notified
29	40.2.7	3782.8									Withdrawal of Request
29	40.2.8	3782.9									Notifying Provider or Beneficiary Where There Is a Withdrawal
29	40.3	3783									Documenting Part A Reconsideration Requests
29	40.3.1	3783.1									Documentation Sources
29	40.3.2	3783.2									Assembling the File
29	40.3.3	3783.3								PM-AB-00-122	Development
29	40.4	3784									Evaluating the Evidence and Making the Reconsideration Determination
29	40.4.1	3784.1									Evaluating the Evidence

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	40.4.2	3784.2									Review Prior to Reversal of Initial Payment Determination
29	40.4.3	3784.3								AB-90-12	Preparing the Determination
29	40.4.4	3784.4									Completing the Determination
29	40.4.5	3784.5									Notice of Further Appeal Rights
29	40.4.6	3784.6									Preventing Duplicate Payment in Reversal Cases
29	40.4.7	3784.7									Effect of a Reconsideration Determination and Effectuation
29	40.4.7.1									PM-A-00-32	Effectuating Favorable Final Appellate Decisions That a Beneficiary is “Confined to Home” – Regional Home Health Intermediaries (RHHIs) Only
29	40.4.8	3784.9									Reconsideration Guide Language
29	40.4.8.1									PM-A-01-21	Sample Paragraphs to Be Used by FIs in Sequence as Shown below
29	40.5	3785									Request for Hearing under Part A
29	40.5.1	3785.1									Determining The Amount In Controversy
29	40.5.2	3785.2									Request Filed With SSO
29	40.5.3	3785.3									Request For Hearing Filed With The FI
29	40.5.4	3785.4									Request For Hearings FIs Receive Pertaining To QIO or HMO
29	40.5.4.1	3785.4									Request For Hearings FIs Receive Pertaining To QIO
29	40.5.4.2	3785.4									Request For Hearings FIs Receive Pertaining To HMO
29	40.5.5	3785.5									Action On Incoming Requests

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29	40.5.6	3785.6									Request For Claim File (Sent By Hearing Office)
29	40.5.7	3785.7									Examination Of Claim File
29	40.5.8	3785.8									Prehearing Case Review
29	40.5.9	3785.9									Routing The Hearing Claim File
29	40.5.10	3785.10									Standard Exhibits Referred To In §§40.50-40.50.9
29	40.6	3786									Scope and Effect of OHA, SSA Administrative Law Judge (ALJ) Decisions under Part A
29	40.7	3787									Effectuation of Reversal of Decision Where There Was Subsequent Utilization of Benefits in the Same Benefit Period
29	40.8	3788									Effect of Court Decisions
29	40.9		12019								Right to Representation Under Part A
29	40.10	3790									Reconsiderations, Hearings, and Appeals Where a QIO Has Review Responsibility
29	40.10.1	3790.1									Reconsiderations
29	40.10.2	3790.3									Hearings
29	40.10.3										Appeals of Institutional Supplementary Medical Insurance (Part B) Claim Decisions
29	40.11	3798			287.5						Appeals by Hospitals of Diagnosis-related Group (DRG) Assignments under PPS
29	50										Part B Appeals Procedures - FIs
29	50.1	3791									FI - Review, And Fair Hearing - Supplemental Medical Insurance
29	50.2	3792									Extension Of Time Limit For Filing An Appeal

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	50.3	3793									Review
29	50.3.1	3793.1									What Constitutes a Request for Review - Handling Beneficiary Inquiries
29	50.3.2	3793.2									Elements of a Review
29	50.3.3	3793.3									Actions Prior to Reversal of Initial Payment Decision
29	50.4	3794									The Hearing
29	50.4.1	3794.1									Types of Hearings
29	50.4.2	3794.2									Issues Determined at the Hearing
29	50.4.3	3794.3									Request for Hearing
29	50.4.4	3794.4									Hearing Officer (HO)
29	50.4.5	3794.5									Preparation for the Hearing
29	50.4.6	3794.6									Conduct of an In-Person or Telephone Hearing
29	50.4.7	3794.7									Parties to the Hearing
29	50.4.8	3794.8									In-Person and Telephone Hearing Procedures
29	50.4.9	3794.9									On The Record Decision
29	50.4.10	3794.10									Hearing Decision
29	50.4.11	3794.11									Content of Hearing Decision
29	50.4.12	3794.12									Style of Hearing Decision
29	50.4.13	3794.13									Effectuation of HO Decision
29	50.5	3795									RO Examination Of Hearing Decisions
29	50.6	3796									Fraud And Abuse

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	50.6.1	3796.1									Disclosure of Information
29	50.7	3797									Requests For Hearing Before An ALJ
29	60		12000				383B		628B		Part B Appeals Procedures
29	60.1		12000.1								Initial Determination
29	60.2		12000.2							PM-AB-00-122	Steps in the Appeals Process: Overview
29	60.3		12001								FI and Carrier Correspondence With Beneficiaries Or Other Parties Regarding Appeals
29	60.4		12002								Parties To An Appeal
29	60.5		12004								Appointment Of Representative
29	60.5.1		12004.1	600	287.4B	257B	383B		628		Appointment of Representative - Introduction
29	60.5.2		12004.2								Who May Be A Representative
29	60.5.3		12004.3								How to Make and Revoke an Appointment
29	60.5.4		12004.4								When to Submit the Appointment
29	60.5.5		12004.5								Where to Submit the Appointment
29	60.5.6		12004.6							PM-B-02-074	Rights and Responsibilities of a Representative
29	60.5.7		12004.7								Validity of an Appointment Over Time
29	60.5.8		12004.8								Timeliness of an Appeal Request and Completeness of Appointment
29	60.5.9		12004.9								Powers of Attorney
29	60.5.10		12004.1								Incapacitation or Death of Beneficiary
29	60.5.11		12004.11								Disclosure of Individually Identifiable Beneficiary Information to Representative

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	60.6		12006								Amount In Controversy
29	60.6.1		12006.1								Amount in Controversy Defined
29	60.6.2		12006.2								Amount in Controversy General Requirements
29	60.6.3		12006.3								Calculating the Amount in Controversy
29	60.6.4		12006.4								Additional Considerations for Calculation of the Amount in Controversy
29	60.6.5		12006.5								Aggregation of Claims to Meet the Amount in Controversy
29	60.7		12008								Extension Of Time Limit For Filing A Request For Review Or Fair Hearing
29	60.7.1		12008.1								Good Cause
29	60.7.2		12008.2								General Procedure to Establish Good Cause
29	60.7.3		12008.3								Conditions that May Establish Good Cause for Late Filing by Beneficiaries
29	60.7.4		12008.4								Examples of Situations Where Good Cause for Late Filing Exists for Beneficiaries
29	60.7.5		12008.5								Conditions that May Establish Good Cause for Late Filing by Physicians or Other Suppliers
29	60.7.6		12008.6								Examples of Situations Where Good Cause for Late Filing Exists for Physician or Other Suppliers
29	60.7.7		12008.7								Good Cause Not Found for Beneficiary, or for Provider, Physician or Other Supplier
29	60.8		12009								Fraud And Abuse
29	60.8.1		12009.1								Fraud and Abuse - Authority

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29	60.8.2		12009.2								Inclusion and Consideration of Evidence of Fraud and/or Abuse
29	60.8.3		12009.3							QIO-7560	Claims Where There Is Evidence That Items or Services Were Not Furnished, or Were Not Furnished as Billed
29	60.8.4		12009.4								Responsibilities of Reviewers and Hearing Officers
29	60.8.5		12009.5								Requests to Suspend the Appeals Process
29	60.8.6		12009.6								Continuing Appeals of Providers, Physicians or Other Suppliers Who are Under Fraud or Abuse Investigations
29	60.8.7		12009.7								Appeals of Claims Involving Excluded Providers, Physicians or Other Suppliers
29	60.9		12010								Guidelines For Writing Appeals Correspondence
29	60.9.1		12010.1								General Guidelines
29	60.9.2		12010.2								Letter Format
29	60.9.3		12010.3								Required Elements in Appeals Correspondence
29	60.10		12011								Disclosure Of Information
29	60.10.1		12011.1								General Information
29	60.10.2		12011.2								Fraud and Abuse Investigations
29	60.10.3		12011.3								Medical Consultants Used
29	60.10.4		12011.4								Multiple Beneficiaries
29	60.11		12012								Review - The First Level Of Appeal
29	60.11.1		12012.1								Filing a Request for Review
29	60.11.2		12012.2								Time Limit for Filing a Request for Review

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	60.11.3		12012.3								Recording of Inquiries and Other Actions on the Carrier Appeal Report (FI - Form CMS-2591, Carrier - Form CMS-2590)
29	60.11.4		12012.4								The Review
29	60.11.5		12012.5								The Review Determination
29	60.11.6		12012.6								Review Determination Letter
29	60.11.7		12012.7								Effect of the Review Determination
29	60.12		12013								Telephone Review Procedures
29	60.12.1	3795	12013.1							RO-9005.3	Informing the Beneficiary and Provider Communities about The Telephone Review Process
29	60.12.2	3796	12013.2								Issues for Telephone Reviews
29	60.12.3	3796.1	12013.3								Issues During the Telephone Review
29	60.12.4	3797	12013.4								Time Limit for Requesting a Telephone Review
29	60.12.5		12013.5								Review Requests Made on Behalf of the Party on the Telephone
29	60.12.6	3790	12013.6							QIO-7400	Conducting the Telephone Review
29	60.12.7	3790.1	12013.7								Documenting the Call
29	60.12.8	3790.2	12013.8								Timely Processing Requirements
29	60.12.9	3799	12013.9	620	288		384		630		Review Determination Letters
29	60.12.10		12013.10								Education
29	60.12.11		12013.11								Monitoring Telephone Reviews
29	60.13		12014								Fair Hearing - The Second Level Of Appeal
29	60.13.1		12014.1								Filing a Request for Fair hearing

Chap.	Sect	Int. Pub.13-3	Carrier Pub.14-3	OPT Pub. 09	HO Pub. 10	HH Pub. 11	SNF Pub. 12	HSP Pub. 21	RHC Pub. 27	OTHER	Description
29	60.13.2		12014.2								Time Limit for Filing A Request for Fair Hearing
29	60.13.3		12014.3								Request for HO hearing Filed Prior to a Review Determination
29	60.13.4		12014.4								Exceptions to Filing Requirements
29	60.14		12016								Request For HO Hearing
29	60.14.1		12016.1								Timely Processing Requirements
29	60.14.2		12016.2								Contractor Responsibilities – General
29	60.14.3		12016.3								Requests for Transfer of In-Person Hearings
29	60.14.4		12016.4								Acknowledgment of Request for HO hearing
29	60.14.5		12016.5								Case File Development
29	60.14.6		12016.6								Case File Preparation
29	60.15		12017								Types Of Fair Hearings
29	60.15.1		12017.1								In-Person Hearing
29	60.15.2		12017.2								Telephone Hearing
29	60.15.3		12017.3								On-the-Record (OTR) Hearing and Decision
29	60.15.4		12017.4								Preliminary On-The-Record (POTR) Hearing and Decision
29	60.16		12018								Hearing Officer (HO) Authority And Responsibilities
29	60.16.1		12018.1								Hearing Officer (HO) Authority
29	60.16.2		12018.2								Qualifications and General Responsibilities
29	60.16.3		12018.3								Disqualification of HO

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29	60.17		12019								Fair Hearing Procedures
29	60.17.1		12019.1								Preparation for the Fair Hearing
29	60.17.2		12019.2								Scheduling the Date, Time and Place of Hearing
29	60.17.3		12019.3								Adjournment and/or Postponement of Telephone or In-person Hearing
29	60.17.4		12019.4								Pre-Hearing Review of the Evidence
29	60.17.5		12019.5								Forwarding Copy of Case File Prior to Telephone Hearing
29	60.17.6		12019.6								In-Person and Telephone HO hearing Procedures
29	60.17.7		12019.7								The Fair Decision Timeliness
29	60.18		12020								Effectuation Of Fair Hearing Decisions
29	60.18.1		12020.1								General Rule
29	60.18.2		12020.2								Delaying Effectuation
29	60.18.3		12020.3								Elements of Written Request for Reopening
29	60.18.4		12020.4								Notice to Parties of Reopening Request
29	60.18.5		12020.5								HO Reply to Reopening Request
29	60.18.6		12020.6								Notice to Parties of HO Determination
29	60.19		12026								Requests For Part B Administrative Law Judge (ALJ) Hearing
29	60.19.1		12026.1								Right to Part B ALJ Hearing
29	60.19.2		12026.2								Forwarding Requests to SSA/OHA
29	60.19.3		12026.3								Case File Preparation

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29	60.19.4		12026.4								Acknowledgment of Request for Part B ALJ Hearing
29	60.19.5		12026.5								Model Format for Acknowledgment of ALJ Hearing Request
29	60.20		12028								Effectuation Of Part B Administrative Law Judge (ALJ) Decisions/Dismissals
29	60.20.1		12028.1								Review and Effectuation of ALJ Decisions - General
29	60.20.2		12028.2								Effectuation Time Limits
29	60.20.3		12028.3								ALJ Data Extraction Form
29	60.20.4		12028.4								Misrouted ALJ Case Files
29	60.20.5		12028.5								Duplicate ALJ Decisions
29	60.21		12029								Recommending Agency Referral Of Part B ALJ Decisions Or Dismissals To The CMS RO
29	60.21.1		12029.1								Time Limits for Forwarding Agency Referral Memorandum to CMS RO
29	60.21.2		12029.2								Guidelines for Reviewing ALJ Decisions/Dismissals
29	60.21.3		12029.3								Draft Agency Referral Memorandum Content
29	60.21.4		12029.4								Draft Memorandum Format
29	60.21.5		12029.5								Submission of Draft Agency Referral Memorandum to CMS RO
29	60.22		12032								Effectuation Of DAB Orders And Decisions
29	60.22.1		12032.1								Background
29	60.22.2		12032.2							PM-AB-01-62	Requests for Case Files
29	60.22.3		12032.3								Contractor Effectuation Responsibilities

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29	60.22.4										Payment of Interest on DAB Decisions
29	60.23		12033								Request For U.S. District Court Review By A Party
29	60.24		12034								Effectuation Of U.S. District Court Decisions
29	60.24.1										Payment of Interest on U.S. District Court Decisions
29	60.25		12040								Review And Analysis o Initial Determinations And Appeal
29	60.27		12100								Reopening and Revision of Claims Determinations and Decisions
29	60.27.1		12100.1								Development of Appeals
29	60.27.2		12100.2								How Issues May Arise
29	60.27..3		12100.3								Summary of Conditions Under Which a Determination or Decision May Be Reopened
29	60.27.4		12100.4								Determining Date of Initial or Reviewed Determination, or HO's Decision
29	60.27.5		12100.5								Who May Reopen an Initial or Reviewed Determination or HO's Decision
29	60.27.6		12100.6								Actions to Permit Reopening Within the 1-Year or 4-Year Period
29	60.27.7		12100.7								Good Cause for Reopening
29	60.27.8		12100.8								Definitions
29	60.27.9		12100.9								Unrestricted Reopening
29	60.27.10		12100.10								Reopening an Initial Decision
29	60.27.11		12100.11								Reopening a Review Determination

