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REDETERMINATION	RECONSIDERATION	ALJ HEARING	MAC APPEAL	JUDICIAL REVIEW
120 DAYS	180 DAYS	60 DAYS	60 DAYS	60 DAYS

- First level appeals, referred to as redeterminations, are made to the Medicare Fiscal Intermediary (FI) or carrier that initially processed the claim.
- Redeterminations must be filed within 120 days after receipt of the determination by the RAC contractor
- No monetary threshold is applied to first level appeals. In other words, any claim can be appealed no matter what amount of money is at issue.
- Redeterminations are filed on Form CMS 20027. The form requires providers to list basic identifying information, as well as include a copy of the RAC determination letter. The provider must also provide an explanation of the reason for disagreement with the RAC determination.
- The FI has **60 days** from the date of receipt to issue a redetermination decision.
- If a provider disagrees with the FI's redetermination the provider may seek the second level of appeal.

- Second level appeals, referred to as reconsiderations, are made to a Qualified Independent Contractor (QIC). Again, no monetary threshold is applied.
- Reconsiderations must be filed by the provider within 180 days of receipt of the FI's redetermination.
- Reconsiderations are filed using Form CMS-20033. It is very important to ensure that all relevant documentation and evidence accompany an appeal at the reconsideration level. Additional evidence or documentation may only be admitted in subsequent levels of appeal upon a showing of "good cause."
- QIC reconsiderations are conducted on-the-record and there is no hearing. A QIC is required to have an independent panel of appropriate healthcare professionals review the claim if the appeal concerns medical necessity.
- The QIC typically has 60 days from the date of receipt to issue a reconsideration. If the QIC does not finish their reconsideration during the 60-day timeframe, the provider has the option to accelerate to the next level of appeal by filing directly with the Administrative Law Judge.
- If a provider disagrees with the QIC's reconsideration, the provider may seek the third level of appeal.

- Third level appeals, a hearing before an administrative law judge are available if the amount in controversy totals at least \$120.12.
- A request for an ALJ Hearing must be filed within 60 days after receipt of the QIC reconsideration decision, and form CMS-20034 A/B may be used. The request must also be forwarded to the individuals who participated in the OIC panel.
- An ALJ Hearing can be conducted by video-conference or telephone, or can occur off-the-record at the request of the provider. An in-person hearing is also available if the technology is not available or special circumstances exist.
- ALJ Hearing decisions are required by the regulations to be issued within 90 days after receipt of the hearing request, but the timeframe may be extended due a variety of circumstances.
- If the ALJ hearing decision is not issued within the applicable timeframe, the provider may request to the ALJ that their appeal move forward to the fourth level of appeal.
- If a provider disagrees with the result of the ALJ Hearing, the provider may seek the fourth level of appeal.

- Fourth level appeals are made to the Medicare Appeals Council ("MAC") and there is no monetary threshold, although all claims will be at least \$120
- A request for a MAC review must be filed within 60 days of receipt of the ALJ Hearing decision, and can be filed on form DAB-10. The request must delineate why the ALJ Hearing decision is being appealed.
- A MAC decision is required by the regulations to be issued within 90 days of receipt of the request for review, but the timeframe may be extended due to a variety of circumstances.
- If a MAC decision is not issued within the applicable timeframe, a provider may request that their appeal move forward to the fifth level of appeal.
- If a provider disagrees with the result of the MAC the provider may seek the fifth level of appeal.

- Judicial review in U.S. District Court is only available if the amount remaining in controversy totals at least \$1,220,20.
- The request for judicial review must be filed within 60 days of receipt of the MAC decision
- There is **no timeframe** for the judicial decision.