



Part B Insider (Multispecialty) Coding Alert

Physician Notes: MAC Sees Rise in Appeals Mistakes

CMS paperwork can be confusing, but one Medicare Administrative Contractor is reporting an uptick in problems with appeals processing.

"CGS [Medicare] has noticed an influx in receiving misrouted appeal requests from providers," said the MAC in a notice last month. "In some cases, providers are using the correct contractor appeal form; however, mailing to the incorrect contractor address." The MAC, which processes Jurisdiction 15 claims, encourages providers to review thoroughly their Medicare Remittance Advice (RA) before sending appeals out. Both the name of the contractor and the correct address on where to forward appeals can be found on the RA, CGS noted in its advice.

Reminder: Reconsiderations, the second level of the appeals process, are not processed by MACs. Those need to be sent directly to the Qualified Independent Contractor (QIC) named on your appeals letter.

Resource: For more information about CGS Medicare redeterminations issues, visit cgsmedicare.com/partb/pubs/news/2017/11/cope5230.html.
