Reopening Request Form Checklist

- [ ] Review the Standard Paper Remittance (SPR) or Medicare Electronic Remittance Advice (ERA) for the claim(s) you are requesting a Reopening on. Is the ERA or SPR from **CGS**?

  If not, please submit the request for Reopening to the appropriate Durable Medical Equipment Medicare Administrative Contractor (DME MAC) identified on the ERA or SPR.

- [ ] Were the claim(s) in question denied as unprocessable? If so, you must correct and resubmit the claim(s).

- [ ] Is the denial due to a minor clerical error or ommission (i.e., units of service, service dates, HCPS coding, diagnosis codes, etc.)? If the denial was not due to a minor clerical error or omission you will need to request a Redetermination. Requests for Redeterminations must be submitted in writing either by fax or mail. A Medicare DME Redeterminations request form is available at: http://www.cgsmedicare.com/jc/forms/pdf/JC_redetermination_form.pdf.

- [ ] What was the date of the initial determination indicated on the ERA or SPR? Has more than 1 year lapsed since the initial determination? If so you will need to provide "good cause" documentation to explain the late filing of your request for reopening.

- [ ] Have you reviewed all of the information listed above? If so, you are now ready to file a Reopening request. Please submit the request to:

  Address: CGS
  DME MAC Jurisdiction C Reopenings
  PO Box 20010
  Nashville, TN 37202

  Fax: 1.615.782.4649

  Telephone Reopening Line: 1.866.813.7878

Reminder: The Medicare DME Reopening Request form is not required but is recommended. If you decide not to utilize the suggested form you must submit at minimum the following elements:

- Beneficiary's Name
- Beneficiary's Medicare HICN
- Specific service(s) and/or item(s), specific date(s) of service, and specific reason for the reopening request (i.e., correct units of service, add a modifier, etc.)
- First and last name of the person filing the request
- Telephone number of the person requesting the reopening

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