

Submitting Redeterminations Through myCGS Ask the Contractor Teleconference (ACT)

February 20, 2014
Questions and Answers

Question: Slide 9 says to enter the claims information and the “denied CPT/HCPCS and Modifiers.” What if we have a hospital (Part A) claim?

Answer: This slide is specific to Part B requests. For Part A requests, we will need the document control number (DCN).

The screenshot shows a web form titled "PART A: COMPLETING THE REDETERMINATIONS REQUEST FORM". The form is for a "Redetermination: 1st Level Appeal- J15 Part A". It includes fields for "Beneficiary Information" (Name of Medicare Beneficiary, Medicare Number, Date of Service From, Date of Service To) and "Claim Numbers (DCN)". A callout points to the "Claim Numbers (DCN)" field, stating: "Enter the Document Control Number (DCN) of the original claim being appealed. Click ADD Claim." Another callout points to the "Please Explain why you want to appeal this claim" field, stating: "Enter reason for request (in 1200 characters or less, then click VALIDATE)." A third callout points to the "Name of Medicare Beneficiary" field, stating: "Complete the Beneficiary Information section in its entirety." The form also has a "ADD CLAIM" button and a "VALIDATE" button. At the bottom, there is a copyright notice: "CPT only copyright 2014 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association. Applicable FAR/DFARS Restrictions Apply to Government Use. February 20, 2014. © 2013 Copyright, CGS Administrators, LLC."

Question: We received a medically unlikely edit (MUE) denial but we misreported the total units. Can we request a Reopening or do we need to submit a Redetermination request?

Answer: If you need to correct the units, you can ask for a Reopening. Issues that may be corrected by Reopening are available here.

Question: Is there any consideration of having the Reopenings form available through myCGS?

Answer: Yes, there are plans to allow providers to request Reopenings through myCGS. Please watch your ListServ once this future enhancement is available.

Question: If I received a medically unlikely edit (MUE) denial and I disagree with the denial, do I send that in as a Reopening as well?

Answer: No. MUE denials must be submitted as a Redetermination. If you disagree with an MUE value, please contact a national healthcare organization whose members often perform the procedure. If a national healthcare organization, provider, or other party wants to submit a request for reconsideration of an MUE value, follow the procedure described in the MUE Frequently Asked Questions (FAQs). Such requests should be addressed to:

National Correct Coding Initiative
Correct Coding Solutions, LLC
PO Box 907
Carmel, IN 46082-0907

Fax #: 1.317.571.1745

Please refer to the CMS MUE Web page for additional details:

<http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/MUE.html>