



THE RIGHT CARE FOR EVERY PERSON EVERY TIME

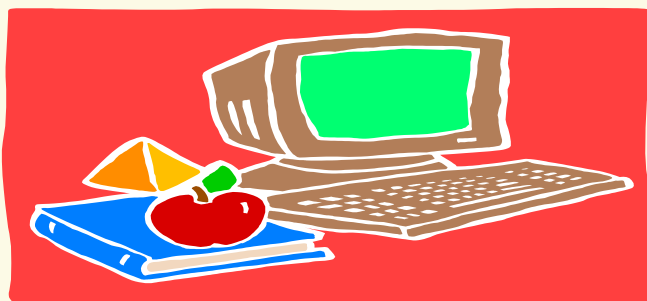
Expedited Appeal Connection

The Medicare Quality Improvement Organization for Florida

Print

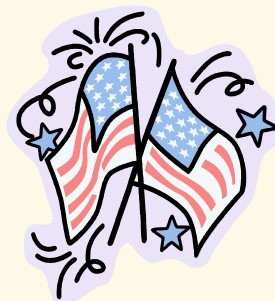
Introduction

FMQAI will continue to offer educational opportunities related to the Expedited Determination process. We just completed our workshops in June and appreciate all of you who were able to attend. For those who were not able to attend, we are working on an online course using the same materials. We will provide more information when the course is available.



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Ask Ed and Edna

Just a reminder that if you have any questions for Ed and Edna, please send an e-mail to edandedna@flqio.sdps.org.

? - What happens if the generic notice I received is found to be invalid when I appeal my discharge to the QIO?

Edna - The provider (or the Medicare Advantage plan if you have an HMO) must issue you a new generic notice according to the instructions provided by CMS (Medicare) and monitored by the QIO. Also, a new detail notice must be issued with a date to correspond with the new generic notice.

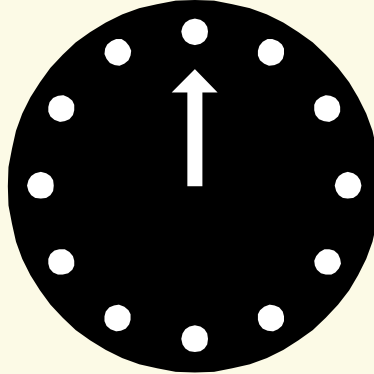
? - Does that mean the QIO will proceed with the appeal from my first call after the new notice is issued?

Ed - No, you must follow the instructions in your new generic notice and again call the QIO if you still wish to appeal your discharge. Remember to tell the QIO representative you have recently appealed before and the QIO will update your initial information.



Late Request Calls for MA Beneficiaries

A reminder that the QIO is not permitted by law to accept late expedited appeal requests from Medicare Advantage beneficiaries. Please assure that the beneficiary or representative is aware they must contact the QIO by 12:00 noon the day before the effective date listed on their generic notice. If the call is received after this time, the beneficiary/representative will be referred to the Medicare Advantage organization to process their appeal.



Posters

We still have posters available for those facilities who have not requested them. The poster explains the discharge appeal process to your patients. If you would like some for your facility, please send an email request to mmunsch@flqio.sdps.org.

**Your Medicare Rights.
Know Them. Use Them.**



YOU HAVE THE RIGHT TO APPEAL A NOTICE OF MEDICARE PROVIDER NON-COVERAGE

If you have Medicare, and payment for your

- skilled nursing facility care,
- home health care,
- hospice care, or
- comprehensive outpatient rehabilitation facility care

is being discontinued, you have the right to appeal.

Call FMQAI, the Medicare Quality Improvement Organization for Florida, under contract with the Centers for Medicare & Medicaid Services, an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. FL-000030P-13A141210002

Call toll free **1-866-800-8768**
(TTY: 1-866-800-8753)



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New Hospital Expedited Appeal Process

As of July 2, 2007, the new hospital discharge appeal process is in effect. All Medicare patients (original), Medicare Advantage (MA) plan enrollees, dual-eligible patients and all situations where Medicare is listed as the secondary payer will be impacted by this regulation. Hospitals impacted include any inpatient facility with the exception of religious non-medical health care institutions. Potential effect on post acute appeals may be that all Medicare patient appeal rights and education will begin with hospital admission and discharge. This will lead to a more educated Medicare consumer. You can read more about this new appeal process at <http://www.cms.gov/BNI>.



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