

## **CMS Medicare Advantage Non-Par Provider Payment Dispute Resolution Process**

Effective January 1, 2010, the Centers for Medicare & Medicaid Services (CMS) expanded its current provider payment dispute resolution process (PDR) for disputes between non-contracted and deemed providers and Private Fee for Service Plans (FFS) to include disputes between non-contracted providers and all

- Medicare Advantage Organizations (HMO, PPO, RPPO and PFFS)
- 1876 Cost Plans
- Medi-Medi Plans
- Program of All-Inclusive Care for the Elderly (PACE) organizations

This new regulation 1852 (a) (2) (A) the Act for Medicare Advantage plans relates to the claim dispute resolution practice.

For this regulation, a PDR is an independent review process where a Non-Participating (Non-Par) provider contends that the amount paid by the payer (Hill Physicians) for a covered service is less than the amount that would have been paid under original (traditional) Medicare.

Hill Physicians along with all the major health plans implemented this new regulation for all Medicare Advantage plans effective 2011.

### **Process**

How does this new regulation work when a non-participating (contracted) provider contends that they have a case covered by this new regulation?

#### **Examples of decisions that can be appealed as a CMS Provider Dispute:**

1. Provider payment disputes subject to CMS' independent review process include any decisions where a non-contracted provider contends that the amount paid by the organization for a covered service is less than the amount that would have been paid under original Medicare.
2. Provider payment disputes may also include instances where there is a disagreement between a non-contracted provider and the organization about the plan's decision to pay for a different service than billed, often referred to as down-coding of a claim.

#### **Examples of decisions that cannot be appealed as a CMS Provider Dispute:**

1. Non-par requests payment in full
2. Timely Filing appeal
3. Not Authorized Denials
4. Services that are payable by the Health Plan versus Hill Physicians



**The timelines and process information is detailed below reflecting the new regulatory requirements.**

### **Filing a Request for a CMS Non-Par Provider Dispute-**

The CMS PDR deadline for submitting a provider dispute (first level) must be submitted within 120 days after Hill Physicians has processed and notified you of our final response via a remittance advice statement (RA).

CMS Provider disputes may be submitted via phone call or in writing. Providers may contact Hill Physicians Customer Service Department at (800) 445-5747 or (925) 820-8300. CMS Provider Disputes may also be submitted in writing to the following address:

**Hill Physicians Medical Group  
2409 Camino Ramon  
San Ramon, CA 94583  
Attention: CRRU Department**

**The following information must be on the written letter:**

1. The providers name
2. The providers Tax ID #
3. The providers contact information (address, phone number)
4. A clear explanation of the claim dispute

### **Incomplete PDRs**

When the non-participating provider submits an incomplete PDR, Hill Physicians will request additional information (in writing or by telephone) to resolve the PDR. Providers have 14-calendar days to submit the requested information. Hill Physicians has a total of 30-calendar days to resolve the PDR that includes the timeline for requesting additional information. If the requested information is not received within the required timeframe, Hill Physicians will conduct the review based on the information in the file. If the requested information is received after we finalize the appeal, Hill Physicians will re-open the provider dispute.

### **Timeline for processing a PDR**

Hill Physicians has 30-calendar days to process a CMS Non-Participating Provider dispute. As stated above, the 30-day period includes the time to process requested missing information to finalize the provider dispute.

### **Demonstrating Good Cause for Late Filing**

When a non-participating provider fails to meet the 120-day deadline for filing a PDR, the provider may re-submit the PDR with a "good cause" reason for late filing. When the provider fails to establish "good cause" for late filing, Hill Physicians may dismiss the dispute as untimely filed. Hill Physician will issue a resolution letter that explains the reason for dismissal and inform the non-participating provider that they have up to 180-calendar days from the date of the dismissal letter to provide additional documentation for "good cause". If a non-participating provider submits evidence within 180- calendar days of dismissal that supports a findings of 'good cause' for late submission, Hill Physicians can make a favorable "good cause" determination, and issue a redetermination.



If Hill Physicians does not find “good cause”, the dismissal remains in effect and Hill Physicians will issue a letter or RA explaining that good cause has not been established.

### **Independent Payment Dispute- Second Level Review**

Following Hill Physicians final decision, the non-par provider may submit a second level written request for an **Independent Payment Dispute Decision (PDD)** to C2C Solutions, Inc. by e-mail, fax or mail within 180 calendar days of written notice from Hill Physicians. ([www.C2Cinc.com](http://www.C2Cinc.com)).

#### **The PDD request may only be filed in the following two situations:**

1. The provider received an initial dispute decision from Hill Physician’s internal dispute process and the provider disagrees with our decision.
2. Hill Physicians did not finalize the dispute in 30 calendar days.

Once the Non-Par provider submits a (PDD), C2C may request additional information from Hill Physicians. Hill Physicians will send all requested information to C2C within 7 calendar days via overnight mail to the following address:

**Payment Dispute Resolution Contractor (PDRC)  
P.O. Box 44035  
Jacksonville, FL 32231-4035**

C2C will issue a decision within 60 calendar days. When a PDD results in additional payment to the provider, C2C will notify Hill Physicians and request payment. Hill Physicians will submit payment to the provider within 30 calendar days from the date of the PDD decision. Hill Physicians will also send the Payment Dispute confirmation form to C2C within 7 calendar days of payment. The form must be faxed to C2C at (904) 361-0551.

### **Summary of Key Timelines**

#### **Time Frames for Payment Disputes:**

Submission of a first level CMS-PDR must be filed within 120 calendar days after the notice of initial determination (processed date).

#### **Good Cause for Late Filing:**

CMS-PDRs that were previously upheld for late submission, can be resubmitted (with good cause) within 180 calendar days following the date of the initial dismissal or upheld letter. Instances in which good cause has not been established will be upheld.

#### **Late Submission-180 days:**

Late submission CMS-PDRs received after 180 days following the dismissal or upheld letter will be upheld. A claim determination letter will be issued to the Non-Par provider.

#### **Documentation Request:**

Appeals where information is missing or incomplete, Hill Physicians will submit a request for additional information letter to the Non-Par provider. The Non-Par provider has 14 calendar days from the requested



letter date to submit the requested documentation to Hill Physicians. In the event the documentation is not received within 14 calendar days, Hill Physicians will conduct the review with the information in the file.

**Hill Physicians CMS-PDR Letter Documentation including (C2C) documents. You can access this information on the Hill Physicians website at [www.HillPhysicians.com/CMS-PDR](http://www.HillPhysicians.com/CMS-PDR)**