

# CMS Manual System

## Pub 100-08 Medicare Program Integrity

Transmittal 179

Department of Health & Human  
Services (DHHS)

Centers for Medicare &  
Medicaid Services (CMS)

Date: DECEMBER 15, 2006

Change Request 5252

**Subject: Revised Medical Review Timeliness and Reopening Requirements for Medical Review**

**I. SUMMARY OF CHANGES:** Changes MR timeliness requirement to say that the MR department has 60 days to review a claim, make a decision, and either enter the decision into the claims processing system (prepay review) OR mail notification of decision to the provider (postpay review). Also instructs on MR reopening of claims denied due to no response to ADR request when forwarded by appeals.

### **New / Revised Material**

**Effective Date: November 29, 2006**

**Implementation Date: On or before January 16, 2007**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

| R/N/D | Chapter / Section / Subsection / Title                                                                                                     |
|-------|--------------------------------------------------------------------------------------------------------------------------------------------|
| R     | Ch. 3/3.6.2/Location of Postpayment Review                                                                                                 |
| R     | Ch. 3/3.4.1.4/Handling Late Documentation                                                                                                  |
| R     | Ch. 3/3.4.1.3/Completing Complex Reviews                                                                                                   |
| R     | Ch. 3/3.4.1.2/Additional Documentation Requests (ADR) During Prepayment of Postpayment Review                                              |
| N     | Ch. 3/3.4.1.5/Re-openings of claims Denied Due to Failure to Submit Necessary Medical Documentation (remittance advice code N102 or 56900) |
| R     | Ch. 3/Table of contents                                                                                                                    |

### **III. FUNDING:**

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2007 operating budgets.

### **IV. ATTACHMENTS:**

**Business Requirements  
Manual Instruction**

*\*Unless otherwise specified, the effective date is the date of service.*

# Medicare Pim Chapter 3

**M Woodhall**



## **Medicare Pim Chapter 3:**

The book delves into Medicare Pim Chapter 3. Medicare Pim Chapter 3 is a crucial topic that must be grasped by everyone, from students and scholars to the general public. This book will furnish comprehensive and in-depth insights into Medicare Pim Chapter 3, encompassing both the fundamentals and more intricate discussions.

1. The book is structured into several chapters, namely:

- Chapter 1: Introduction to Medicare Pim Chapter 3
- Chapter 2: Essential Elements of Medicare Pim Chapter 3
- Chapter 3: Medicare Pim Chapter 3 in Everyday Life
- Chapter 4: Medicare Pim Chapter 3 in Specific Contexts
- Chapter 5: Conclusion

2. In chapter 1, the author will provide an overview of Medicare Pim Chapter 3. This chapter will explore what Medicare Pim Chapter 3 is, why Medicare Pim Chapter 3 is vital, and how to effectively learn about Medicare Pim Chapter 3.

3. In chapter 2, the author will delve into the foundational concepts of Medicare Pim Chapter 3. The second chapter will elucidate the essential principles that must be understood to grasp Medicare Pim Chapter 3 in its entirety.

4. In chapter 3, this book will examine the practical applications of Medicare Pim Chapter 3 in daily life. The third chapter will showcase real-world examples of how Medicare Pim Chapter 3 can be effectively utilized in everyday scenarios.

5. In chapter 4, this book will scrutinize the relevance of Medicare Pim Chapter 3 in specific contexts. This chapter will explore how Medicare Pim Chapter 3 is applied in specialized fields, such as education, business, and technology.

6. In chapter 5, this book will draw a conclusion about Medicare Pim Chapter 3. This chapter will summarize the key points that have been discussed throughout the book.

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