

§ 422.594 Notice of reconsidered determination by the independent entity.

(a) *Responsibility for the notice.* When the independent entity makes the reconsidered determination, it is responsible for mailing a notice of its reconsidered determination to the parties and for sending a copy to HCFA.

(b) *Content of the notice.* The notice must—

(1) State the specific reasons for the entity's decisions;

(2) If the reconsidered determination is adverse (that is, does not completely reverse the M+C organization's adverse organization determination), inform the parties of their right to an ALJ hearing if the amount in controversy is \$100 or more;

(3) Describe the procedures that a party must follow to obtain an ALJ hearing; and

(4) Comply with any other requirements specified by HCFA.

§ 422.596 Effect of a reconsidered determination.

A reconsidered determination is final and binding on all parties unless a party files a request for a hearing under the provisions of § 422.602, or unless the reconsidered determination is revised under § 422.616.

§ 422.600 Right to a hearing.

(a) If the amount remaining in controversy is \$100 or more, any party to the reconsideration (except the M+C organization) who is dissatisfied with the reconsidered determination has a right to a hearing before an ALJ. The M+C organization does not have the right to request a hearing before an ALJ.

(b) The amount remaining in controversy, which can include any combination of Part A and Part B services, is computed in accordance with § 405.740 of this chapter for Part A services and § 405.817 of this chapter for Part B services.

(c) If the basis for the appeal is the M+C organization's refusal to provide services, HCFA uses the projected value of those services to compute the amount remaining in controversy.

§ 422.602 Request for an ALJ hearing.

(a) *How and where to file a request.* A party must file a written request for a hearing at one of the places listed in § 422.582(a) or with the independent, outside entity. The organizations listed in § 422.582(a) forward the request to the independent, outside entity, which is responsible for transferring the case to the appropriate ALJ hearing office.

(b) *When to file a request.* Except when an ALJ extends the timeframe as provided in 20 CFR 404.933(c), a party must file a request for a hearing within 60 days of the date of the notice of a reconsidered determination.

(c) *Parties to a hearing.* The parties to a hearing are the parties to the reconsideration, the M+C organization, and any other person or entity whose rights with respect to the reconsideration may be affected by the hearing, as determined by the ALJ.

(d) *When the amount in controversy is less than \$100.* (1) If a request for a hearing clearly shows that the amount in controversy is less than \$100, the ALJ dismisses the request.

(2) If, after a hearing is initiated, the ALJ finds that the amount in controversy is less than \$100, he or she discontinues the hearing and does not rule on the substantive issues raised in the appeal.

§ 422.608 Departmental Appeals Board (the Board) review.

Any party to the hearing, including the M+C organization, who is dissatisfied with the ALJ hearing decision, may request that the Board review the ALJ's decision or dismissal. Regulations located at 20 CFR 404.967 through 404.984 regarding SSA Appeals Council Review apply to Board review for matters addressed by this subpart.

[63 FR 35107, June 26, 1998; 63 FR 52614, Oct. 1, 1998]

§ 422.612 Judicial review.

(a) *Review of ALJ's decision.* Any party, including the M+C organization, may request judicial review (upon notifying the other parties) of an ALJ's decision if—

(1) The Board denied the party's request for review; and

§ 422.616

42 CFR Ch. IV (10–1–99 Edition)

(2) The amount in controversy is \$1,000 or more.

(b) *Review of Board decision.* Any party, including the M+C organization, may request judicial review (upon notifying the other parties) of the Board decision if—

(1) It is the final decision of HCFA; and

(2) The amount in controversy is \$1,000 or more.

(c) *How to request judicial review.* A party must file a civil action in a district court of the United States in accordance with section 205(g) of the Act (see 20 CFR 422.210 for a description of the procedures to follow in requesting judicial review).

[63 FR 35107, June 26, 1998; 63 FR 52614, Oct. 1, 1998]

§ 422.616 Reopening and revising determinations and decisions.

(a) An organization or reconsidered determination made by an M+C organization, a reconsidered determination made by the independent entity described in § 422.592, or the decision of an ALJ or the Board that is otherwise final and binding may be reopened and revised by the entity that made the determination or decision, under the rules in § 405.750 of this chapter.

(b) Reopening may be at the instigation of any party.

(c) The filing of a request for reopening does not relieve the M+C organization of its obligation to make payment or provide services as specified in § 422.618.

(d) Once an entity issues a revised determination or decision, any party may file an appeal.

[63 FR 35107, June 26, 1998; 63 FR 52614, Oct. 1, 1998]

§ 422.618 How an M+C organization must effectuate reconsidered determinations or decisions.

(a) *Reversals by the M+C organization—(1) Requests for service.* If, on reconsideration of a request for service, the M+C organization completely reverses its organization determination, the organization must authorize or provide the service under dispute as expeditiously as the enrollee's health condition requires, but no later than 30 calendar days after the date the M+C

organization receives the request for reconsideration (or no later than upon expiration of an extension described in § 422.590(a)(1)).

(2) *Requests for payment.* If, on reconsideration of a request for payment, the M+C organization completely reverses its organization determination, the organization must pay for the service no later than 60 calendar days after the date the M+C organization receives the request for reconsideration.

(b) *Reversals other than by the M+C organization.* If the M+C organization's organization determination is reversed in whole or in part by the independent outside entity or at a higher level of appeal, the M+C organization must pay for, authorize, or provide the service under dispute as expeditiously as the enrollee's health condition requires, but no later than 60 calendar days from the date it receives notice reversing the organization determination. The M+C organization must also inform the independent, outside entity that the organization has effectuated the decision.

§ 422.620 How M+C organizations must notify enrollees of noncoverage of inpatient hospital care.

(a) *Enrollee's entitlement.* Where an M+C organization has authorized coverage of the inpatient admission of an enrollee, either directly or by delegation (or the admission constitutes emergency or urgently needed care, as described in §§ 422.2 and 422.112(c)), the enrollee remains entitled to inpatient hospital care until he or she receives notice of noncoverage of that care.

(b) *Physician concurrence required.* Before the M+C organization gives notice of noncoverage as described in paragraph (c) of this section, the physician who is responsible for the enrollee's hospital care must concur.

(c) *Notice to the enrollee.* The M+C organization must give the enrollee written notice that includes the following:

(1) The reason why inpatient hospital care is no longer needed.

(2) The effective date of the enrollee's liability for continued inpatient care.

(3) The enrollee's appeal rights.

(4) Comply with any other requirements specified by HCFA.