



Medicare Appeals for Care that is Ending

If you are receiving care in a hospital or non-hospital setting and learn that your care is going to end, you have the right to a fast appeal to request that Medicare cover continued care. This is known as an expedited review.

Non-hospital settings include skilled nursing facilities (SNFs), comprehensive outpatient rehabilitation facilities (CORFs), hospice settings, and home health settings.

Step 1: Read your appeal notices.

The notices you receive in a hospital or non-hospital setting provide information about how to appeal if you think your care is ending too soon.



Important Message from Medicare notice. You get this notice when you are a **hospital inpatient**.

Your provider should give you this notice within two days of entering the hospital. This notice should be given to you again no later than four hours before you are discharged. This notice includes instructions for how to appeal.



Notice of Medicare Non-Coverage. You get this notice when you are **receiving care in a non-hospital setting**.

You should receive this notice no later than two days before your care is set to end. If you receive home health care, you should receive the notice on your second-to-last care visit. This notice tells you when your care is ending and explains how to appeal.



Medicare Appeals for Care that is Ending

Step 2: Start your appeal.

If you disagree with your facility's or your provider's decision to end your care, **start an appeal** by contacting your Beneficiary and Family Centered Quality Improvement Organization (QIO), **KEPRO at 1.844.430.9504**.

Deadline to appeal if your inpatient hospital care is ending:



File an appeal with QIO by **midnight** of the day of your discharge.

The QIO should call you with its decision within **24 hours** of receiving all the information it needs. If the QIO decides your care should end, you will be responsible for paying for any care you receive after noon of the day after the QIO makes its decision.

Deadline to appeal if your care in a non-hospital setting is ending:



File an appeal with QIO by **noon** of the day **before** your care is set to end.

If you have **Original Medicare**, the QIO should make a decision no later than two days after your care was set to end.

If you have a **Medicare Advantage Plan**, the QIO should make a decision no later than the day your care is set to end.

NOTE: If the QIO decides your care should end, you will be responsible for paying for any care you receive after the end date on the Notice of Medicare Non-Coverage, unless you are successful at a higher level of appeal.

SHIP National Technical Assistance Center: 877-839-2675 | www.shiptacenter.org | info@shiptacenter.org

SMP National Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org

© 2017 Medicare Rights Center | www.medicareinteractive.org | *The Medicare Rights Center is the author of portions of the content in these materials, but is not responsible for any content not authored by the Medicare Rights Center.*



Medicare Appeals for Care that is Ending

Step 3: If you are denied, continue your appeal.

If the QIO appeal is successful, your care will continue to be covered, including for the time you were appealing. If the QIO decides that your care should end, **you can file a second appeal within the timeframe on your QIO denial notice.**

The instructions for the next step will vary depending on which type of care is ending and whether you have Original Medicare or a Medicare Advantage Plan

Step 4: Ask for help if you need it.

Contact SHIINE if you or your representative needs help with your appeal. SHIINE counselors can help you understand and navigate the process. SHIINE can also help if you were billed for services you think should have been covered by Medicare because of your appeal. SHIINE helps you prevent, detect, and report health care fraud, errors, and abuse.

SHIINE's contact information :



Eastern South Dakota

3801 S Western Ave
Suite 105
Sioux Falls, SD 57105
1-800-536-8197

EasternOffice@SHIINE.net

Central South Dakota

2520 E Franklin Street
Pierre, SD 57501
1-877-331-4834

CentralOffice@SHIINE.net

Western South Dakota

2200 N Maple Suite 104
Rushmore Mall
Rapid City, SD 57701
1-877-286-9072

WesternOffice@SHIINE.net

www.SHIINE.net

The production of this document was supported by Grant Numbers 90SATC0001 and 90MPRC0001 from the Administration for Community Living (ACL). Its contents are solely the responsibility of the SHIP National Technical Assistance Center (SHIP TA Center) and Senior Medicare Patrol National Resource Center and do not necessarily represent the official views of ACL.

SHIP National Technical Assistance Center: 877-839-2675 | www.shiptacenter.org | info@shiptacenter.org

SMP National Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org

© 2017 Medicare Rights Center | www.medicareinteractive.org | *The Medicare Rights Center is the author of portions of the content in these materials, but is not responsible for any content not authored by the Medicare Rights Center.*