

What other helpful tools are available to me?

Timeliness Calculator

Reopening Timeliness Calculator

This timeliness calculator determines the date a Reopening request must be received by Noridian in order to meet timeliness guidelines.

Enter the initial Remittance Advice (RA) date. mm/dd/yyyy

A Reopening request must be submitted one year from initial determination date or after one year from date of receipt due to overpayment via clerical error omissions.

Redetermination Timeliness Calculator

This timeliness calculator determines the date a Redetermination request must be received by Noridian in order to meet Medicare appeal timeliness guidelines.

Enter Remittance Advice (RA) date. mm/dd/yyyy

A Redetermination must be submitted within 120 days of the original Remittance Advice (RA) or Medicare Summary Notice (MSN).

Adjustments to the initial claim or resubmissions for the same item or service will not extend or change the appeal rights on the initial determination.

If the deadline date falls on a Saturday, Sunday or holiday, the request must be received by the next business day. Redetermination requests received after this date will be dismissed.

Hours of availability for the required services identified below are:

- General IVR inquiries available 24/7
 - Reference telephone numbers
 - Medicare Part B addresses
 - General redetermination and reconsideration information
 - Website referrals
 - HIPAA Eligibility Transaction System (HETS) Eligibility
- Claim specific inquiries available Monday – Friday 6 a.m. - 8 p.m. CT and Saturday 7 a.m. - 5 p.m. CT
 - Part A/B patient eligibility
 - Claim status
 - Deductible status
 - Check status
 - Check history
 - Remittance Information



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How to Expedite Appeals Payment JF Part B



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How to Expedite Appeal Payment

In order to expedite the appeals process, ensure the request is complete and accurate. The following criteria are required on the Redetermination Request Form:

- Beneficiary's full name
- Medicare Number
- Date of service
- Signed Redetermination Request
- HCPCS/Procedure Code

Ensure all supporting documentation is submitted with your request. Refer to <https://med.noridianmedicare.com/web/jfb/topics/documentation-requirements> to determine the necessary medical documentation. If all necessary documentation is not included in the request it could potentially delay your request an additional 14 days or longer.

Ensure supporting medical documentation contains the following prior to submitting the request:

- Submit the request to the correct contractor
- Request is legible
- Correct date of service
- Valid medical documentation signature

What is considered a Reopening? (Not an inclusive listing)

- Diagnosis changes/additions
- Date of service changes
- Procedure code changes
- Unit changes
- Certain modifier changes/additions

For a listing of proper reopening requests refer to <https://med.noridianmedicare.com/web/jfb/topics/appeals/reopening>

How do I submit my Reopening?

Submit reopenings by one of the following:

Noridian Medicare Portal (FREE and efficient):

<https://med.noridianmedicare.com/web/jfb/topics/nmp>

Telephone: 877-908-8431

Fax: 701-277-7852

Mail: Noridian Administrative Services
Attn: Part B Reopenings
PO Box (select from table on form)
 Fargo ND 58108-(select from table on form)

What is considered a Redetermination?

If a provider disagrees with Medicare's decision on how a claim was initially processed, an appeal may be requested. Prior to submitting an appeal, consider if a Telephone or Written Reopening could be requested.

How do I submit my Redetermination?

Submit redeterminations by one of the following:

Noridian Medicare Portal:

<https://med.noridianmedicare.com/web/jfb/topics/nmp>

Fax: 1-701-277-7852

Mail: Noridian JF Part B
Attn: Redeterminations
PO Box (select from table on form)
 Fargo ND 58108-(select from table on form)

Select the proper Type of Request such as CERT, Redetermination, Redetermination Due to Overpayment, RA or UPIC on the Redetermination Form

Where can I find additional information?

Noridian offers a variety of resources to assist you in submitting your appeals. Please visit the following:

- <https://med.noridianmedicare.com>
- *Medicare Claims Processing Manual*, Chapter 29 <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c29.pdf>

Refer to the Medical Documentation Signature Requirements located on our website at: <https://med.noridianmedicare.com/web/jfb/cert-reviews/signature-requirements>

How can the website satisfaction survey help me?

The survey is the result of the Centers for Medicare & Medicaid Services contract with Foresee Results, an independent third party survey company, to assess the effectiveness of Medicare contractor websites.

The feedback you provide will help us improve and enhance our website and help us serve you better in the future.

How can I contact someone for help?

Our toll-free numbers unifies customer service areas and simplifies provider contact. Below is a listing of contacts:

- **1-877-908-8431** (Provider Contact Center, Provider Enrollment, Phone Appeals/Reopenings or IVR)
- **1-800-MEDICARE** Noridian is unable to assist Medicare beneficiary's via phone.
- **Email Customer Service**
<https://med.noridianmedicare.com/web/jfb/contact/email-customer-service>
- **Noridian Management**
<https://med.noridianmedicare.com/web/jfb/contact/management>
- **Contractor Medical Directors (CMD)**
<https://med.noridianmedicare.com/web/jfb/contact/cmd>
- **Congressional Inquiries**
<https://med.noridianmedicare.com/web/jfb/contact/congressional>
- **Freedom of Information ACT (FOIA)**
<https://med.noridianmedicare.com/web/jfb/contact/foia>