Qualified Independent Contractor (QIC) Portal User Guide

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Controlled electronic version prevails over printed copy of this document.
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Introduction

The QIC Portal User Guide describes the portal environment and registration process. It includes the specific steps to submit Medicare Part A and Part B (DME) appeals, and Part C case files. This guide is intended to be used by healthcare providers, suppliers, office staff, billing entities and Medicare health plans.

After reviewing the portal environment and registration overview information on the next few pages, go to the portal registration page that applies to your type of organization for help getting started.

About the QIC Portal

The QIC Portal is a web application that enables users to electronically submit reconsideration appeal requests, case files and additional information to Maximus, eliminating the need to fax or mail them.

Additional benefits of submitting an appeal or case file via the portal include:

- Quick submission of appeal information and related documentation
- Immediate on-screen acknowledgement that the documentation has been received by Maximus
- Follow-up email confirmation

QIC Portal users can submit the following types of appeal documentation directly to Maximus:

- **Medicare Part A**: Medicare providers, their representatives and State Medicaid agencies can submit reconsideration appeal requests and additional information for services that have been denied coverage at the redetermination level.

- **Medicare Part B (DME)**: Medicare suppliers and their representatives can submit reconsideration appeal requests and additional information for DME items/services that have been denied coverage at the redetermination level.

- **Medicare Part C**: Health plans can submit case files, additional information, requests to dismiss an ongoing reconsideration appeal and compliance notices.
Registration Procedures for Health Plans

Registration Process Overview

QIC Portal Administrators

Health plans must designate an individual within their organization to become a QIC Portal Administrator. The role of the QIC Portal Administrator is to manage their organization’s QIC Portal users and to create and associate contract numbers belonging to their organization.

Once the health plan designates a QIC Portal Administrator, this individual registers for an account, requesting approval from Maximus to become a QIC Portal Administrator for their group. Maximus will review the individual’s registration details and approve or deny the request. If denied, Maximus will provide a denial reason via email. Denied registrants are welcome to submit a new registration request correcting the denial reason.

When the registration request is approved, the QIC Portal Administrator will receive an account activation email containing login credentials to access their new QIC Portal account.

Additional Users

After the QIC Portal Administrator account is activated, the health plan’s staff members may register additional user accounts which will be administered by the organization’s designated QIC Portal Administrator. The QIC Portal Administrator will receive email notification of additional user registrants and will approve or deny them. Once the designated administrator has approved an additional user’s account, the additional user will receive an account activation email containing login credentials to access their new QIC Portal account.
Multi-Factor Authentication (MFA)

We don't have to tell you that data security is important, especially in the health care industry. In fact, it is critical for every individual and business, and essential to Maximus, to stay ahead of potential threats to data security.

MFA provides an additional layer of security. It requires that users have two unique elements that identify them to our systems. When accessing the QIC Portal, in addition to your password you will enter a unique authentication code provided by a security token. The token is in the form of a six-digit number, called a soft token, which is provided in a text message sent to your mobile device.

Every QIC Portal registrant is therefore required to register a mobile device number during their account registration.

Each time you enter your username and password to access the QIC Portal, a text message containing your authentication code (“PIN”) is sent to your registered mobile device.

You will be prompted to enter the authentication code you received within the below dialog box on the QIC Portal website.
Registering as a QIC Portal Administrator

Request Portal Registration – QIC Portal Administrator

Important: This registration procedure only applies to the health plan’s QIC Portal Administrator.

1. In your browser, access https://qicappeals.cms.gov.
2. On the left side of the page, click Register.
3. Read the Registration Request policy and if you agree, select the I understand and agree to the above policy checkbox.
4. Click in the Organization Type list and select Health Plan.
5. In the **E-mail** field, type the email address to which you would like to receive portal correspondence and click **Enter**.

6. For the question **Are you registering as a QIC Portal Administrator?** select **Yes**.
7. Complete the following fields (all fields are required except where indicated):

- **First Name, Last Name, Title**
- **Address Line 1 and Address Line 2** (if applicable), **City, State and Zip Code**
  - **Note:** List the address where all appeals correspondence should be sent to. Include an 'Attention:', 'Suite', 'Department', etc. as applicable. Correspondence includes, but is not limited to, the appeal acknowledgement notice, requests for additional information, and the appeal decision.
- **Work Phone** – enter the phone number by which Maximus may contact you when necessary; this number appears on each appeal submitted.
- **Cell Phone** – enter the mobile phone number to which you would like to receive your authentication text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.
- **Request for Information Fax** – enter the fax number where Maximus should send requests for additional information.
- **Decision Letter Fax** – enter the fax number where Maximus should send the decision letter.

8. Click **Submit**. Confirmation of your registration request is displayed.
You will receive a confirmation email shortly after submitting your registration request.

From: MAXIMUS - QIC PORTAL STAFF <DoNotReply@maximus.com>
Date: Thu, May 16, 2018, 11:23 AM
Subject: Confirmation of QICAppeals Portal Registration Request
To: 

Dear

Thank you for submitting your Request for Registration on the QICAppeals portal.

Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information.

You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,
Maximus

CONFIDENTIALITY NOTICE: This e-mail, including attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information or otherwise be protected by law. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender and destroy all copies and the original message.

Administer Additional User Accounts – QIC Portal Administrator

The health plan's QIC Portal Administrator is responsible for administering the health plan's additional user accounts. After a staff member submits a user registration request. The QIC Portal Administrator receives a notification email and proceeds to approve or deny the request.

1. Log in to the portal.

2. On the portal menu bar, click User Management.

3. Locate the desired user in the Pending Registration section and select Approve or Deny from the Approve/Deny column.

   • If Deny is selected, enter the reason for denial in the Denial Reason field; this is required.

4. Click Submit. Approved registration requests are listed in the Approved Users section.

5. Click Log out in the top-right corner of the page when you are finished working in the portal.

Add an Associated Plan – QIC Portal Administrator

Before a health plan’s QIC Portal Administrator can perform tasks related to a particular plan, the QIC Portal Administrator needs to add the plan to his/her account.

1. Click My Account on the menu bar.

2. Click Add a Plan in the Associated Plans section.

   NOTE: Once an additional account user is created, the QIC Portal Administrator cannot edit the additional user’s information. However, the QIC Portal Administrator can deactivate an additional user or deactivate the user’s access to a specific plan contract.

   IMPORTANT: A plan’s contract number is case sensitive. E.g., H0028 is not the same as h0028.
3. Type the plan’s contract number in the **Plan Contract Number** field.

4. Click **Enter**.

5. If the plan does not currently exist in the system, you are given the opportunity to add the plan. For the question **Do you want to add this plan contract?** select **Yes** or **No**. If you select **Yes**, go to step 6. If you select **No**, you can repeat steps 2 through 5 using a different contract number.

6. If you selected **Yes**, enter the plan’s:
   - Legal Entity Name
   - Address
   - City, State, Zip Code
   - Phone (optional)
   - Fax (optional)

7. Click **Add Plan** at the bottom of the form. The plan is now added to your **Associated Plans** list.

Perform steps 2 through 7 above for each associated plan you would like to add.

**Add an Existing Plan – QIC Portal Administrator**

When entering a plan contract number for a plan that is administered by another QIC Portal Administrator, the system displays the plan name and the name of the QIC Portal Administrator. You have the option of adding the plan to your account. You cannot be the administrator for this plan.
Navigating the Website

Menu Bar
The menu bar items enable you to access the main pages in the portal. The items available are based on your type of organization (i.e., plan, provider/supplier or representative). The graphic below shows the provider/supplier menu bar.

My Dashboard
The dashboard displays the QIC Appeals Portal homepage. This page explains the criteria for using the portal and lists the requirements for requesting a reconsideration appeal or submitting a case file.

Working with Portal Forms
Portal users submit appeals and case files by completing applicable forms on the QIC Appeals Portal.

Sections of the form can be expanded or collapsed as needed by clicking the arrow next to the section name. In the example below, the Reconsideration Background Data Form section is expanded while the Enrollee and Requestor sections are collapsed.

Click the arrow next to the section to expand or collapse that section’s fields.
How to Submit a Plan Dismissal Request

Use the Plan Dismissal Request form to submit a request for Maximus to dismiss an ongoing reconsideration appeal on the basis of approval or payment for the services or charges at issue by the health plan.

Plan Dismissal Request Form Screenshot

This form is to be used by Medicare Health Plans that have decided to approve the item or service in dispute after the case file has been sent to Maximus for processing. Plans should complete the information below and send to Maximus as soon as the decision to approve the item or service has occurred to avoid a substantive Maximus decision being rendered. Please attach any pertinent documentation showing the Plan's approval. These may include but are not limited to authorization documentation, screen prints showing authorization issued, documentation showing that the claim at issue was paid (i.e., EOB, check number, etc.).

Plan Dismissal Request
All fields are required except as noted.

- **Enrollee Information**
  - First Name
  - Last Name
  - Middle Initial (optional)

- **QIC Appeal number and QIC Portal Confirmation Number**
  - QIC Appeal number (example: 153048678901)
  - QIC Portal Confirmation number (example: Q18-00001234)

- **Date(s) of Service or Item/Service at appeal**
  - Date(s) of Service or Item/Service at appeal

- **Medicare Health Plan (MHP) Data**
  - Plan Contract Number
  - Plan Name

- **Medicare Health Plan (MHP) Contact Person**
  - First Name
  - Last Name
  - Email

- **Work Phone**
  - Work Phone: 91332537031

- **Date of Request**
  - Date of Request: 06-01-2021

- **Explain briefly**

- **Document Upload**
  - Note: If multiple files are attached, they will all be combined and associated with the number above. If you need to submit documents for multiple appeals please submit them separately.

  Acceptable file types include: .PDF only

  Drop files here OR click to choose files.

  Submit  Reset  Cancel
How to Complete the Plan Dismissal Request Form

1. Complete the Enrollee Information section with at least the first and last name of the beneficiary associated with the appeal.

2. If you have received an acknowledgement letter from Maximus already containing an appeal number, enter that appeal number in the QIC Appeal number field. If you have not received an acknowledgement letter from Maximus, provide the QIC Portal Confirmation number (i.e., Q23-00001234). The confirmation number can be found in the QIC Portal confirmation email you would have received after submitting your appeal through the QIC Portal website.

3. In the Date(s) of Service or Item/Service at appeal section, if requesting a dismissal of a Standard Claim (Reimbursement), provide the date(s) of service. If requesting a dismissal of an appeal of any other Case Priority, provide the item/service at issue.

4. In the Medicare Health Plan (MHP) Data section, select the contract number associated with the appeal from the Plan Contract Number field drop-down. This will populate the Plan Name field. The Medicare Health Plan (MHP) Contact Person fields should already be populated.

5. In the Explain briefly field, provide reasoning for the request to dismiss the reconsideration appeal.

6. If additional documentation is necessary, upload additional documentation in PDF format by dropping files onto or clicking on and then browsing from the file drop platform under Document Upload.

7. Click the Submit button to send the dismissal request to Maximus. If any data is incorrect, click the Reset or Cancel buttons to clear all fields.
How to Submit a Compliance Notice

Use the Compliance Notice form to submit proof of compliance with a favorable or partially favorable reconsideration decision. The QIC Portal Compliance Notice form can be used whether the appeal was submitted through the QIC Portal website or not.

### Compliance Notice Form Screenshot

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Case Priority</strong></td>
<td>Standard Service (Pre-authorization)</td>
</tr>
<tr>
<td><strong>QIC Appeal Data</strong></td>
<td>QIC Appeal number (example: 1-12345678901)</td>
</tr>
<tr>
<td><strong>Enrollee Information</strong></td>
<td>First Name</td>
</tr>
<tr>
<td><strong>Medicare Health Plan (MHP) Data</strong></td>
<td>Plan Contract Number</td>
</tr>
<tr>
<td><strong>Medicare Health Plan (MHP) Contact Person</strong></td>
<td>First Name</td>
</tr>
<tr>
<td>Work Phone</td>
<td>5053537031</td>
</tr>
<tr>
<td><strong>Compliance Data</strong></td>
<td>Authorization Number</td>
</tr>
</tbody>
</table>

Note: If multiple files are attached, they will all be combined and associated with the number above. If you need to submit documents for multiple appeals please submit them separately.

Acceptable file types include: .PDF only
How to Complete the Compliance Notice Form

1. In the **Case Priority** field drop-down, select the priority of the appeal you are submitting for as it was processed by Maximus.

2. Enter the **QIC Appeal Number** from the decision letter you received from Maximus.

3. Complete the **Enrollee Information** section with at least the first and last name of the beneficiary.

4. In the **Medicare Health Plan (MHP) Data** section, select the contract number associated with the appeal from the **Plan Contract Number** field drop-down. This will populate the **Plan Name** field. The **Medicare Health Plan (MHP) Contact Person** fields should already be populated.

5. In the **Compliance Data** section, fields will display based on the **Case Priority** selected. If **Case Priority** is set to Expedited, Standard Service (Pre-authorization) or Standard Service – Part B Drug request (Pre-authorization), the fields will display as follows:

   ![Compliance Data](image)

   **If Case Priority** is set to **Standard Claim (Reimbursement)**, the field names will change.

   ![Compliance Data](image)

   Click the calendar icon next to the **Authorization Date** or **Check/EFT Date** fields to select the date, or manually enter the date in the provided format. Both of these fields are required to submit the form.

6. If additional documentation is necessary, upload additional documentation in PDF format by dropping files onto or clicking on and then browsing from the file drop platform under **Document Upload**.

7. Click the **Submit** button to send the compliance data to Maximus. If any data is incorrect, click the **Reset** or **Cancel** buttons to clear all fields.
Registering as an Additional User

Request Portal Registration – Additional User

Each individual who desires portal access must submit a request for portal registration. The health plan’s QIC Portal Administrator is responsible for approving or denying the request.

1. In your browser, access https://qicappeals.cms.gov.

2. On the left side of the page, click Register.

3. Read the Registration Request policy and if you agree, select the I understand and agree to the above policy checkbox.

4. Click in the Organization Type list and select Health Plan.
5. In the **Email** field, type the email address to which you would like to receive portal correspondence and click **Enter**.

NOTE: The email address you enter must be unique (one that has not already been registered with the portal).

6. For the question **Are you registering as a QIC Portal Administrator?** select **No**.

7. In the **Please enter the e-mail address of the QIC Portal Administrator that will approve your registration** field, enter your QIC Portal Administrator's email address.

8. Click **Enter**. The system displays the name of the administrator based on the email address you entered in step 8.

9. Confirm the administrator is correct by selecting **Yes** or **No**. If you select **Yes**, proceed to step 11. If you select **No**, you are given the opportunity to enter a different email address (see step 8).

10. Complete the following fields (all fields are required except where indicated):

    - **First Name, Last Name, Title**
    - **Address Line 1** and **Address Line 2** (if applicable), **City, State and Zip Code**
      - **Note**: List the address where all appeals correspondence should be sent to. Include an 'Attention:', 'Suite', 'Department', etc. as applicable. Correspondence includes, but is not limited
to, the appeal acknowledgement notice, requests for additional information, and the appeal decision.

- **Cell Phone** – enter the **mobile phone number** to which you would like to receive your authentication token text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.

- **Work Phone** – enter the phone number by which Maximus may contact you, if necessary. This number appears on each appeal submitted.

- **Request for Information Fax** – enter the fax number where Maximus should send requests for additional information.

- **Decision Letter Fax** – enter the fax number where Maximus should send the decision letter.

11. Click **Submit**. Confirmation of your registration request is displayed.

You will receive a confirmation email shortly after submitting your registration request.

From: MAXIMUS - QIC PORTAL STAFF <DoNotReply@maximus.com>
Date: Thu, May 16, 2024, 11:21 AM
Subject: Confirmation of QICAppeals Portal Registration Request
To:

Dear

Thank you for submitting your Request for Registration on the QICAppeals portal.

Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information.

You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,
Maximus

CONFIDENTIALITY NOTICE: This e-mail, including attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information or otherwise be protected by law. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender and destroy all copies and the original message.
Add an Associated Plan – Additional User

Before an additional user can perform tasks related to a particular plan, the additional user needs to add the specific plan to his/her account. An additional user can add any plans that exist in the system, even plans that are not administered by his/her own QIC Portal Administrator.

In the following illustration, Humana Health plan is registered with the QIC Portal. The plan’s QIC Portal Administrator has added the Humana Health plan contract numbers (S2874, H0028, H0248) for which the administrator is responsible to his/her account. Also, the QIC Portal Administrator has approved two additional portal users, both of whom have added plan contract numbers to their accounts based on the plans administered by their QIC Portal Administrator.

Also, Additional Portal User #2 has added plan H0248 to his/her account. This plan is administered by the QIC Portal Administrator for Humana Health. Because the user has added a plan that is administered by someone other than his/her own plan administrator, the user is an “associated” portal user for that contract number.

1. Click My Account on the menu bar.
2. Click Add a Plan in the Associated Plans section.
3. Enter the plan’s contract number in the Plan Contract Number field.
4. Click Enter. The plan name and the name of the plan’s QIC Portal Administrator are displayed.
5. For the question Would you like to add this plan to your account? select Yes or No.
   - If you select Yes, the plan is added to your Associated Plans list.
   - If you select No, you can repeat steps 2 through 5 using a different contract number.

NOTE: The plan’s QIC Portal Administrator has authority over his/her own additional users only. Therefore, if the administrator of the “associated” contract does not want a user to be an “associated user,” the additional user’s QIC Portal Administrator needs to deactivate the contract from the user’s account.

IMPORTANT: A plan’s contract number is case sensitive. E.g., H0028 is not the same as h0028.

NOTE: If a plan contract number does not exist in the QIC Appeals Portal, you are prompted to enter a different contract number.
Medicare Provider/Supplier/Employee Portal Registration Procedures

Portal Registration Process

Each Medicare provider or supplier must submit a request for registration before being granted access to the portal. The first individual who submits a registration request for the provider/supplier is designated as created for each provider/supplier. The QIC Portal Administrator account is created for each provider/supplier. The QIC Portal Administrator is responsible for approving and administering additional portal accounts requested by staff members. Therefore, prior to completing the portal registration process, each provider/supplier should determine the individual who will be the QIC Portal Administrator.

Upon receiving the registration request, Maximus approves (or disapproves) the request.

When the request is approved, a QIC Portal Administrator account is created for the person indicated in the registration request. The QIC Portal Administrator receives an account activation email containing portal login credentials.

Additional Users

After the QIC Portal Administrator account is activated, the plan’s staff members are able to request additional user accounts that are administered by the plan’s QIC Portal Administrator.

For example, “ABC Hospital” submits a registration request with “Jane Doe” listed as the QIC Portal Administrator. After “Jane Doe” receives the activation email, staff members (e.g., “John Smith”, “Ruth McFarland”) can request to be added as additional account users. Jane Doe is responsible for approving or denying each additional user registration request. The portal registration process is illustrated below.

Note: Wherever provider is indicated, supplier applies as well.

NOTE: Reasons Maximus may disapprove a request include:
The organization sends a registration request multiple times.
The request is not completed correctly (e.g., misspelling).
QIC Portal Administrator Procedures

Request Portal Registration – QIC Portal Administrator

**Important:** This registration procedure **only** applies to the provider's/supplier's QIC Portal Administrator.


2. Click **Register** on the left side of the page.

3. Read the **Registration Request** policy and select the **I understand and agree to the above policy** checkbox, if you agree.

4. Select **Medicare Provider or Employee** from the **Organization type** list.
5. Enter your organization’s National Provider Identifier (NPI) in the NPI field and click Enter. Note: While you may only register one NPI to your account, you may submit cases for any other NPI by noting the change in the free text fields on the appeal submission form.

6. For the question **No record of this unique identifier exists in our system, would you like to register this number?** select **Yes** or **No**.
   - If you select **Yes**, proceed to step 7. If you select **No**, you are given the opportunity to enter a different NPI (see step 5).
7. Complete the following fields (all fields are required except where indicated):

- **Organization**
- **Address Line 1** and **Address Line 2** (if applicable), **City**, **State** and **Zip Code**
  - **Note:** List the address where all appeals correspondence should be sent to. Include an ‘Attention:’, ‘Suite’, ‘Department’, etc. as applicable. Correspondence includes, but is not limited to, the appeal acknowledgement notice, requests for additional information, and the appeal decision.
- **First Name**, **Last Name**, **Title**
- **E-mail address**
- **Cell Phone** – enter the mobile phone number to which you would like to receive your authentication token text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.
- **Work Phone** – enter the phone number by which Maximus may contact you, if necessary. This number appears on each appeal submitted.
- **Fax (optional)** – enter the fax number where Maximus can send a faxed request, if necessary.
8. **Click Submit.** Confirmation of your registration request is displayed.

![Confirmation of QIC Appeals Portal Registration Request](image)

Shortly after submitting your registration request, you will receive a confirmation email.

```
From: MAXIMUS - QIC PORTAL STAFF <DoNotReply@maximus.com>
Date: Thu, May 16, 2024, 12:21 AM
Subject: Confirmation of QIC Appeals Portal Registration Request

To:

Dear

Thank you for submitting your Request for Registration on the QICAppeals portal.

Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information.

You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,
Maximus

CONFIDENTIALITY NOTICE: This e-mail, including attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information or otherwise be protected by law. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender and destroy all copies and the original message.
```

**Administer Additional User Accounts – QIC Portal Administrator**

The health plan’s QIC Portal Administrator is responsible for administering the health plan’s additional user accounts. After a staff member submits a user registration request, the QIC Portal Administrator receives a notification email, and proceeds to approve or deny the request.

1. Log in to the portal.
2. **Click User Management** on the portal menu bar.
3. Select **Approve** or **Deny** from the **Approve/Deny** column under the **Pending Registration** section.
   - If **Deny** is selected, explain the reason for denying the registration request in the **Denial Reason** field; this is required.
4. Click **Submit**. Approved registration requests are listed in the **Approved Users** section.

5. When you are done working in the portal, click **Log out** located in the top-right corner of the page.

**NOTE:** Once an additional account user is created, the QIC Portal Administrator cannot edit the additional user's information. However, the QIC Portal Administrator can deactivate an additional user.

---

**Additional User Procedures**

**Request Portal Registration – Additional User**

Each individual within an organization who desires portal access must submit a request for portal registration. The provider’s/supplier’s QIC Portal Administrator is responsible for approving or denying the request.

2. Click **Register** on the left side of the page.

3. Read the **Registration Request** policy and if you agree, select the **I understand and agree to the above policy** check box.
4. Select Medicare Provider or Employee from the Organization type list.

5. Enter your organization's National Provider Identifier (NPI) in the NPI field and click Enter. **Note:** While you may only register one NPI to your account, you may submit cases for any other NPI by noting the change in the free text fields on the appeal submission form.

6. The system displays the name of the organization/provider based on the NPI you entered in step 5.

7. For the question Is the organization below correct? select Yes or No.
   - If you select Yes, proceed to step 8. If you select No, you are given the opportunity to enter a different NPI (see step 5).

8. In the Associated User section, complete the following fields (all fields are required except where indicated):
   - **First Name, Last Name**
   - **Email**
   - **Cell Phone** – enter the mobile phone number to which you would like to receive your authentication token text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.
   - **Work Phone** – enter the phone number by which Maximus may contact you, if necessary. This number appears on each appeal submitted.
   - **Fax**
9. Click **Submit**. Confirmation of your registration request is displayed.

Shortly after submitting your registration request, you will receive a confirmation email.

From: MAXIMUS - QIC PORTAL STAFF <OnNextReply@maximus.com>
Date: Thu, May 16, 2024, 11:21 AM
Subject: Confirmation of QIC Appeals Portal Registration Request

To:

Dear [Recipient],

Thank you for submitting your Request for Registration on the QIC Appeals portal.

Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information.

You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,
Maximus

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Portal Registration Procedures for Other Organization Types

This section applies to organizations, such as appeal representative organizations, that submit appeals on behalf of health plans or health care providers/suppliers.

Portal Registration Process

Each organization must submit a request for registration before being granted access to the portal. The first individual who submits a registration request for the organization is designated as the QIC Portal Administrator for that organization. Only one QIC Portal Administrator account is created for each organization. The QIC Portal Administrator is responsible for approving and administering additional portal accounts requested by staff members. Therefore, prior to completing the portal registration process, each organization should determine the individual who will be the organization’s QIC Portal Administrator.

Upon receiving the registration request, Maximus approves (or disapproves) the request.

When the request is approved, a QIC Portal Administrator account is created for the person indicated in the registration request. The QIC Portal Administrator receives an account activation email containing portal login credentials.

Additional Users

After the QIC Portal Administrator account is activated, the organization’s staff members are able to request additional user accounts that are administered by the organization’s QIC Portal Administrator.

For example, “MJ Law Firm” submits a registration request with “Mary Jones” listed as the QIC Portal Administrator. After Mary Jones receives the activation email, staff members (e.g., “Tom Smith”, “Ruth McFarland”) can request to be added as additional account users. Mary Jones is responsible for approving or denying each additional user registration request.

The portal registration process is illustrated below.

NOTE: Reasons Maximus may disapprove a request include:
The organization sends a registration request multiple times.
The request is not completed correctly (e.g., misspelling).
Requestor/Submitter Designation

As part of the registration procedure only, each of the organization’s QIC Portal users must indicate whether they will be requesting appeals and/or submitting appeals.

Requestor

A requestor is a person legally authorized to request an appeal on behalf of another person or entity. The requestor is formally named in representation documentation and proof of representation is required. A requestor may also submit appeals.

For example, “General Hospital” authorizes “Mary Jones” of “MJ Law Firm” to file an appeal on the hospital’s behalf. “Mary Jones” submits the appeal along with the proper representation documents.

Submitter

A submitter is a person who has been granted the authority to submit an appeal on behalf of a requestor within their own organization.

Continuing with the previous example, “Mary Jones” would like to allow another person on her staff to submit appeals for her. Therefore, “Mary Jones” designates “Tom Smith” as an appeal submitter on her behalf.

QIC Portal Administrator Procedures

Request Portal Registration – QIC Portal Administrator

Important: This registration procedure only applies to the organization’s QIC Portal Administrator.

1. In your browser, access https://qicappeals.cms.gov.
2. Click Register on the left side of the page.
3. Read the Registration Request policy and if you agree, select the I understand and agree to the above policy checkbox.
4. Select Other from the Organization type drop-down list.

5. Enter your organization’s Employer Identification Number (EIN) in the EIN field and click Enter.

6. For the question No record of this unique identifier exists in our system, would you like to register this number? select Yes or No.
   - If you select Yes, proceed to step 7. If you select No, you are given the opportunity to enter a different EIN (see step 5).
7. Complete the following fields (all fields are required except where indicated):

- **Organization**
- **Address Line 1 and Address Line 2** (if applicable), **City, State** and **Zip Code**
  - **Note**: List the address where all appeals correspondence should be sent to. Include an ‘Attention:’, ‘Suite’, ‘Department’, etc. as applicable. Correspondence includes, but is not limited to, the appeal acknowledgement notice, requests for additional information, and the appeal decision.
- **First Name, Last Name, Title**
- **E-mail**
- **Cell Phone** – enter the **mobile phone number** to which you would like to receive your authentication token text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.
- **Work Phone** – enter the phone number by which Maximus may contact you, if necessary. This number appears on each appeal submitted.
- **Fax (optional)** – enter the phone number Maximus should send a fax to, if necessary.

8. For the question **Will you as the Primary Contact be requesting appeals through this portal?** select **Yes** or **No**.
   - If **Yes** is selected, **Yes** is automatically selected for the question **Will you as the Primary Contact be submitting appeals on behalf of someone else?** Also, the statement authorizing the organization’s registered submitters to submit appeals on your behalf is displayed.
   - If **No** is selected, for the question **Will you as the Primary Contact be submitting appeals on behalf of someone else?** select **Yes** or **No**.
9. Click **Submit**. Confirmation of your registration request is displayed.

Shortly after submitting your registration request, you will receive a confirmation email.

```
From: MAXIMUS - QIC PORTAL STAFF <DoNotReply@maximus.com>
Date: Thu, May 16, 2024, 11:21 AM
Subject: Confirmation of QIC Appeals Portal Registration Request
To:

Dear

Thank you for submitting your Request for Registration on the QIC Appeals portal.

Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information.

You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,

Maximus

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```
Administer Additional User Accounts – QIC Portal Administrator

The organization’s QIC Portal Administrator is responsible for administering the organization’s additional user accounts. When a staff member submits a user registration request, the QIC Portal Administrator receives a notification email and proceeds to approve or deny the request.

1. Log in to the portal.
2. Click User Management on the portal menu bar.

3. In the Pending Registration section, for the desired user registration request, select Approve or Deny from the Approve/Deny column.
   - If Deny is selected, explain the reason for denying the registration request in the Denial Reason field (required).

4. Click Submit.
5. Approved registration requests are listed in the Approved Users section.
6. When you are done working in the portal, click Log out in the top-right corner of the page.

**NOTE:** Once an additional account user is created, the QIC Portal Administrator cannot edit the additional user’s information. However, the QIC Portal Administrator can deactivate an additional user’s account.
Additional User Procedures

Request Portal Registration – Additional User

Each individual within an organization who desires portal access must submit a request for portal registration. The organization’s QIC Portal Administrator is responsible for approving or denying the request.

1. In your browser, access https://qicappeals.cms.gov.
2. Click Register on the left side of the page.

3. Read the Registration Request policy and if you agree, select the I understand and agree to the above policy check box.

4. Select Other from the Organization type drop-down.
5. Enter your organization’s Employer Identification Number (EIN) in the **EIN** field and click **Enter**.

6. The system displays the name of the organization/provider based on the EIN you entered in step 5.
   • For the question **Is the organization below correct?** select **Yes** or **No**.
     o If you select **Yes**, proceed to step 7. If you select **No**, you are given the opportunity to enter a different EIN (see step 5).

7. Complete the following fields (all fields are required except where indicated):
   • **Address Line 1** and **Address Line 2** (if applicable), **City**, **State** and **Zip Code**
     o **Note**: List the address where all appeals correspondence should be sent to. Include an ‘Attention:’, ‘Suite’, ‘Department’, etc. as applicable. Correspondence includes, but is not limited to, the appeal acknowledgement notice, requests for additional information, and the appeal decision.
   • **First Name, Last Name, Title**
   • **E-mail**
• **Cell Phone** – enter the **mobile phone number** to which you would like to receive your authentication token text message. Maximus will not contact you at this number regarding your appeal/documentation submissions.

• **Work Phone** – enter the phone number by which Maximus may contact you, if necessary. This number appears on each appeal submitted.

• **Fax (optional)** – enter the phone number Maximus should send a fax to, if necessary.

8. For the question **Will you as the Associated User be requesting appeals through this portal?** select **Yes** or **No**.

   • If **Yes** is selected, **Yes** is automatically selected for the question **Will you as the Associated User be submitting appeals on behalf of someone else?** Also, the statement authorizing the organization’s registered submitters to submit appeals on your behalf is displayed.

   • If **No** is selected, select **Yes** or **No** for the question **Will you as the Associated User be submitting appeals on behalf of someone else?**

9. Click **Submit**. Confirmation of your registration request is displayed.

Shortly after submitting your registration request, you will receive a confirmation email.

**From:** MAXIMUS - QIC PORTAL STAFF <DefNotreply@maximus.com>

**Date:** Thu, May 16, 2024, 11:23 AM

**Subject:** Confirmation of QIC Appeals Portal Registration Request

**To:**

Dear

Thank you for submitting your Request for Registration on the QIC Appeals portal. Your registration request will be processed shortly, and you will receive an email confirming your account with login and password information. You may not login to submit appeal requests until you receive these login details from Maximus.

Thank you,
Maximus

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First Time Login Instructions

When you log in to the portal for the first time, you are prompted to change your password and answer one password security question.

1. In your email application, open the email with the subject **Your QICAppeals Portal Account has been established**. The email includes your **User ID** and **Temporary Password**.

   From: <qicportalsupport@maximus.com>
   Date: Wed, May 22, 2024, 10:54 PM
   Subject: Your QICAppeals Portal Account has been established
   To: 

   Welcome and thank you for registering for an account on the QICAppeals Portal.
   
   Your User ID is
   
   Your Temporary Password is QICjs#
   
   You will be prompted to change your password when you log in for the first time.
   
   Please click here to access the QICAppeals Portal and Log In.
   
   Thank you,
   Maximus

2. In your browser, access **https://qicappeals.cms.gov** (or click the click here link within the email you received establishing your account).

3. Click **Sign in** on the homepage.

4. Enter your **User ID** in the **Email Address** field.

5. Enter the **temporary password** indicated in the email you received establishing your account, in the **Password** field.

6. Click **Sign in**.
7. Enter the Maximus pin you received on your mobile device in the **Token** field.

8. Click **Sign in**.

9. Type your new password (must meet the password policy requirements) in the **New Password** and **Enter New Password Again** fields.

10. Click **Send**.

11. You will receive another authentication code SMS message. Enter the authentication code and click **Sign in**.

12. Read the **Terms and Conditions of Use** information.
13. Click I Agree at the bottom of the Terms and Conditions of Use page.

**Appeal Request/Case File Submission Procedures**

**Request an Appeal – Medicare Part A, Part B (DME) Appeals**

A user may request a reconsideration appeal via the portal for Part A or Part B (DME) services that have been denied coverage at the redetermination level.

1. Log in to the portal.
2. If submitting a:
   - Part A appeal, click **Part A – Reconsideration Appeal Request**
   - Part B (DME) appeal, click **DME – Request Appeal**
3. In the Redetermination section, complete the following fields (all fields are required except where indicated):
   - MAC That Issued Redetermination (required)
   - Reason for Appeal
   - Redetermination Number (optional)
   - Redetermination Date (optional)
   - Overpayment Involved (optional)
   - Did the appeal involve the following: RAC or PSC/ZPIC? (optional)
   - Does the appeal involve an extrapolation issue? (optional)
4. In the Beneficiary section, complete the following fields:
   - First Name
   - Last Name
   - *Medicare Number (MBI) or
   - *Medicare Insurance Number (HIC)
   - *Must be between 10 and 20 characters
5. The Requestor information is pre-populated with the active portal user’s information. In the Party Appealing list, select the applicable party. If you are a provider/supplier or provider/supplier employee, go to step 7.
6. If you are a member of an appeal representative organization or a State Medicaid Agency:
   - If the active portal user is registered as a requestor, the user has the option of submitting the appeal on his/her own behalf or submitting the appeal on behalf of another requestor. If doing the latter, select the check box and select the name of the requestor from the Requestor Name list.
• If the active portal user is registered as a submitter only, in the Requestor Name list, the user must select the name of the requestor.

7. Enter the provider’s name in the Provider section.
8. Complete the following fields in the Claim Details section:
   • Claim Number (optional)
   • Item/Service Type
   • Date(s) of Service (From, To)
9. Click Save.
10. For each additional claim, click Add Another Claim and repeat steps 8 and 9.
    • To delete an added claim, click the x at the end of the row.
11. In the Upload Supporting Documents section:
    • Click the Choose files icon.
    • Navigate to and select the document to upload.
    • Click Open.
    • Repeat the steps above to upload another document. Click the x at the end of the row to delete an uploaded document.
12. Click Submit. Your appeal request receipt is displayed. The receipt includes your temporary ID that you will need to reference should you contact Maximus prior to receiving an acknowledgement letter.
13. When you are finished working in the portal, click Log Out in the top-right corner of the page. You will then receive an email confirming the successful receipt of your submission.
Submit a Part C Case

To submit a Part C case, Medicare Advantage plans complete and submit the Part C – Medicare Reconsideration Request form. The form is essentially the electronic version of the Reconsideration Background Data Form. The steps that are unique for completing the electronic form are detailed below. All fields are required except for where indicated in the form.

1. Log in to the portal.
2. Click Part C Submit Case on the menu bar.
3. Complete the Part C – Medicare Reconsideration Request form.
4. Completing the Provider Identification Data section is optional. However, all of the following steps are required if you choose to do so.
   - Complete: Provider or Facility Name, Specialty, Records Requested/Provided?, Contract Provider?
   - Click Save.
5. For each additional provider:
   - Click Add Another Provider and repeat step 4.
   - To delete an added provider, click the x at the end of the row.
6. In the Case File Upload section:
   - Click the Choose Files icon.
   - Navigate to and select the document to upload.
   - Click Open.
   - Repeat the steps above to upload another document. Click x at the end of the row to delete an uploaded document.
7. In the Plan Contract Documents section:
   - Click the Choose Files icon.
   - Navigate to and select the document to upload.
   - Click Open.
   - Repeat the steps above to upload another document.
8. Click Submit. Your appeal request receipt is displayed. The receipt includes your temporary ID that you will need to reference should you contact Maximus prior to receiving an acknowledgement letter.
9. Click **Log out** in the top-right corner of the page when you are finished working in the portal. You will then receive an email confirming the successful receipt of your submission.

**Upload Additional Documentation**

Health plans and providers/suppliers can submit additional information via the portal. Additional information may be submitted **only** for appeals which Maximus has already received.

1. Click **Upload Additional Information** on the menu bar.
2. Select the project for which you are submitting additional information in the **Project** field.
3. Complete the **QIC Appeal Number** or **QIC Portal Temp ID** field.
4. If desired, describe the information you are uploading in the **Additional Information Document Details** section.
5. Attach the necessary files in the **Document Upload** section.
6. Click **Submit**.

**Appendices**

**Appendix A: Deactivate a Contract – Health Plan QIC Portal Administrator**

Health plan QIC Portal Administrators can deactivate plan contract numbers of additional user accounts. Additional users cannot deactivate plan contract numbers.

1. Click **User Management** on the menu bar.
2. To deactivate a contract number, click **Expire Contract** for the approved user for whom the contract number is assigned, from the **Approved Users** section.
3. Click **Confirm** in the **Expire Contract** dialog box.
Appendix B: Deactivate an Additional User – All QIC Portal Administrators

QIC Portal Administrators have the ability to deactivate additional user accounts for which they administer.

1. Click **User Management** on the menu bar.
2. Click **Expire User** for the desired user in the **Approved Users** section.
3. Click **Confirm** in the **Expire User** dialog box.
## Appendix C: Part C – Medicare Reconsideration Request Form

The table below provides a general description of the form’s sections and the information requested in each.

<table>
<thead>
<tr>
<th>Section</th>
<th>Information Requested</th>
</tr>
</thead>
</table>
| Medicare Managed Care Reconsideration Background Data Form | • Case priority  
  • Issue Category  
  o When selecting **Appellant Dismissal Case File**, complete the QIC Appeal Number and Plan’s Dismissal Reason fields.  
  o When selecting **Other**, complete the Please Provide Category field.  
  • Is this case an Auto-Forward?  
  • Did the case involve a medical necessity review? |
| Enrollee Information | • Name, address, phone, Medicare Number (MBI) or HIC # (10 characters min., 20 max.)  
  • Is/Was the enrollee in Hospice?  
  • Language/communication requirements |
| Appeal Requestor Data | • Appeal requestor party type  
  o If Representative, enrollee’s estate, or non-contract provider, indicate if required documentation is in the case file.  
  • Requestor’s name, address, phone |
| Medicare Health Plan (MHP) Data | • CMS Contract #, name, type  
  • Pre-populated: Address |
| Medicare Health Plan (MHP) Contact Person for this Reconsideration | • Pre-populated: Name, e-mail, phone, fax  
  • Alternate contact (optional) |
| MHP Organization Determination | • Initial authorization request or claim submission date  
  • Plan’s initial denial date  
  • Expedited request made/granted?  
  • Plan extension taken? |
| MHP Reconsideration | • Reconsideration request date  
  • Reconsideration determination date  
  • Expedited request made/granted?  
  • Plan extension taken? |
| Provider Identification Data (Optional) | • Provider name  
  • Specialty  
  • Records requested/provided?  
  • Contract provider?  
  • Services requested/received outside of MHP’s service area/network? |
| Definition of Denied Services or Claims | • Items/services in dispute  
  • Diagnosis (optional), item/service codes, (optional) |
Appendix D: My Account Page

On the **My Account** page (accessed from the menu bar), you can change your password by clicking **Go to change password page** and completing the **Update Password** form.

```
| Update | Do Not Save Changes | Go to change password page |
```

```
My Account
Update Password

<table>
<thead>
<tr>
<th>Current Password</th>
<th>New Password</th>
<th>Verify New Password</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PASSWORD POLICY:**
- Password must contain a lower case letter
- Password must contain an upper case letter
- Password must contain a special character
- Password must contain a number
- Password must contain at least 8 characters
```

```
<table>
<thead>
<tr>
<th>Update</th>
<th>Do Not Save Changes</th>
</tr>
</thead>
</table>
```
## Revision History

<table>
<thead>
<tr>
<th>Revision Date</th>
<th>Version</th>
<th>Author</th>
<th>Summary of Change</th>
<th>Project Rep.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/15/2017</td>
<td>1.0</td>
<td>E. Heller</td>
<td>Base version.</td>
<td>S. Geng</td>
</tr>
<tr>
<td>8/1/2017</td>
<td>1.1</td>
<td>E. Heller</td>
<td>Interface update for all registration procedures. Changed Cell Phone to Mobile Phone, added Appeal Contact Phone field.</td>
<td>S. Geng</td>
</tr>
<tr>
<td>3/21/2019</td>
<td>1.3</td>
<td>E. Heller</td>
<td>Pg 33: Added Upload Additional Information procedure</td>
<td>S. Geng</td>
</tr>
<tr>
<td>9/16/2019</td>
<td>1.4</td>
<td>E. Heller</td>
<td>Pgs. 2-6, 16-19, 29, 33: Updated to include Part B DME</td>
<td>S. Geng</td>
</tr>
<tr>
<td>1/29/2021</td>
<td>1.5</td>
<td>I. Caspersson</td>
<td>MAXIMUS to Maximus, removed references to Part D</td>
<td>C. Snelling</td>
</tr>
<tr>
<td>2/18/2021</td>
<td>1.5</td>
<td>I. Caspersson</td>
<td>Converted to MS Word</td>
<td>n/a</td>
</tr>
<tr>
<td>6/15/2021</td>
<td>1.6</td>
<td>C. Snelling</td>
<td>Updated registration, login and other procedures to reflect new under AWS. Incorporated new screenshots to reflect updated homepage and login/registration functionality.</td>
<td>S. Krieger</td>
</tr>
<tr>
<td>12/7/2022</td>
<td>1.7</td>
<td>C. Snelling</td>
<td>Template update. Added new drug pre-authorization question for health plan users; updated branding</td>
<td>K. Werdein</td>
</tr>
<tr>
<td>6/3/2024</td>
<td>1.8</td>
<td>C. Snelling</td>
<td>Update to health plan compliance notice submission process. Updated screenshots to align with current system pages and email examples.</td>
<td>K. Werdein</td>
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