

# PUBLICATION

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## HHS Reveals New Settlement Options to Address Medicare Appeals Backlog

December 14, 2017

**The Department of Health and Human Services (HHS) announced in a press release on November 3, 2017, additional settlement options for providers and suppliers in an effort to improve the Medicare appeals process. Specifically, HHS will expand the Settlement Conference Facilitation Process, which is an alternative dispute resolution process at the Office of Medicare Hearings and Appeals (OMHA). Neither HHS nor OMHA have provided details on this expansion in time for this publication, and HHS suggests industry participants monitor this website for further information in the coming weeks.**

Additionally, HHS announced in its press release the creation of a new Low Volume Appeals Settlement Options (LVA). The LVA is for providers or suppliers with "fewer than 500 Medicare Part A or Part B claim appeals pending at OMHA and the [Medicare Appeals] Council, combined, as of November 3, 2017, with a total billed amount of \$9,000 or less per appeal." HHS mentioned that providers and suppliers also must meet "certain other conditions" to remain eligible for the LVA but does not provide those details. For those who qualify for the LVA, HHS will settle appeals for "62% of the net allowed amount."

This latest announcement of new settlement options comes in the wake of a court order mandating HHS to take steps to reduce the Medicare appeals backlog along with new regulatory changes finalized earlier this year. As to the latter, HHS published a [Final Rule](#) revamping the appeals process and included significant changes, such as making select decisions by the Medicare Appeals Council precedential and allowing senior attorneys to act as "Attorney Adjudicators" when handling certain appeals.

The expansion of the Settlement Conference Facilitation Process and the addition of the LVA are only the most recent changes to the Medicare appeals process. Because some estimates project it would take ten years or more to resolve the already-filed appeals, providers and suppliers should stay tuned for additional reforms from HHS to address the backlog of appeals.

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