

# CMS/OSORA FOIA Portal Project



**Screenshots for PRA  
Submission**

# FOIA Intake Portal - 1

Prior to entering the FOIA portal to request claims data, CMS wants to ensure that the user is requesting Medicare claims and not Medicaid claims. If the user selects Medicaid, they will be directed elsewhere (see Appendix A – Medicaid claims request redirects).

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**Freedom of Information Act (FOIA)**

File a CMS FOIA Request

Welcome to CMS FOIA Knowledge Center!

In order to process your request as timely as possible, please select one of the following.

I am requesting claims records related to:

Next

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# FOIA Intake Portal - 2

Prior to entering the FOIA portal to request claims data, CMS wants to determine if the user is requesting data for themselves. If yes, they would be asked additional questions to determine if there are more efficient and faster methods to obtain their data, like using Blue Button. (see Appendix B – person with Medicare redirects).

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Medicare Request > Requestor

Great! Let's get some more information about your Medicare claims records request.

I am requesting Medicare claims records for:

Myself Someone Else

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# FOIA Intake Portal - 3

Prior to entering the FOIA portal to request claims data, CMS is re-verifying that the individual is actually enrolled in Medicare. See Appendix C for not enrolled redirects.

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Freedom of Information Act (FOIA)

Medicare Request > 3rd Party > Medicare Status

Great! Let's make sure you're in the right place to get the records you are requesting on behalf of someone else.

The individual is enrolled in Medicare:

Yes

No

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# FOIA Intake Portal - 4

Finally, prior to entering the FOIA portal to request claims data, CMS wants to ensure it is only fee for service claims data, and not other types of Medicare data which CMS does not store. (see Appendix D – non FFS claims data redirects).

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Medicare Request > 3rd Party > Medicare Status > Records Type

Let's make sure we can provide you the records you are requesting. Please select from the following:

I am requesting Medicare beneficiary claims records.

I am requesting Medicare Advantage claims records.

I am requesting Prescription Drug claims records.

I am requesting Social Security Administration documents.

I am requesting Medicare Secondary Payer lien information.

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# FOIA Intake Portal – 5

Now that all of the assurances and redirects have been established, it is time to collect the information about the FOIA case! The first step (Part A) is to obtain information about the person with Medicare, including their Medicare number (only the new MBI format will be accepted).

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## Freedom of Information Act (FOIA)

Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary

Great! We can help you get the Medicare records. Please tell us about the individual with Medicare:

First Name Middle Name Last Name

\* john   \* smith

Date of Birth

Month Day Year

\* 04 / 01 / 1950

Medicare Number [Where can I find the Medicare Number?](#)

\* 1EG4-TE5-MKL2

Address Line 1 Address Line 2

\* 123 Main St

City State Zip Code

\* Woodlawn \* MD \* 21244

\* Required Field

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# FOIA Intake Portal - 6

The next step (Part B) is to place parameters around the records request. Should the user select options where they have to specify dates and/or events, once the option is selected, additional field(s) will display for the user to fill in the required information.

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## Freedom of Information Act (FOIA)

Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary > Records Details

Now tell us about the records you need. Medicare will only disclose the claim information identified below for the individual in Section A.

Release all records to date

Release records between specific dates

Tell us when to release your records.

One time disclosure

Expiration upon a specified date

Expiration upon specified event

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# FOIA Intake Portal - 7

The third step (Part C) is to collect information about the entity requesting the claims records.

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## Freedom of Information Act (FOIA)

Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary > Records Details > Requestor

Please enter information for the individual and/or organization who will be receiving the Medicare claims records.

First Name	Middle Name	Last Name
* Record		* Retriever

Organization Name

\* Please Send Me Records

Address Line 2	Address Line 2
* 987 Litigation St	

City	State	Zip Code
* Woodlawn	* MD	* 21244

Phone Number

\* 1-800-555-5555

Email Address

\* record.retriever@psmr.net ×

\* Required Field

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# FOIA Intake Portal - 8

The fourth step is to collect delivery preferences. Should express delivery be an option, the user would be required to provide an express delivery account.

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**Freedom of Information Act (FOIA)**

Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary > Records Details > Requestor > Delivery

Please indicate your desired delivery preferences.

\* Select one:

Paper Records

Electronic Records

\* Electronic Records Delivery Method:

Regular Mail

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# FOIA Intake Portal - 9

The fifth step, Part E, is to determine fee collections. Should the user request a waiver to the fees (not likely in a 3<sup>rd</sup> party situation but still possible), the user would select the second bullet and a memo field would display providing ample space to explain the reason for the waiver.

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## Freedom of Information Act (FOIA)

Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary > Records Details > Requestor > Delivery > Fees


The FOIA permits CMS to charge fees to FOIA requesters. For noncommercial requesters, CMS may charge only for the actual cost of searching for records and the cost of making copies.

CMS will not charge if the total processing cost is less than \$25.

For more information on processing fees, please read our FAQs by [clicking here](#).

I am willing to pay fees for this request up to a maximum of \$

If you estimate that fees will exceed this amount, please inform me first at:

Phone: 202-525-5555 

Email: jane.doe@email.com

I request a waiver or reduction of all fees for this request.

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# FOIA Intake Portal - 10

At all times, the user is provided information (i.e., bread crumbs) as to where they are in the process. The screen shot below provides the user an opportunity to review all of the information provided prior to going to the 6<sup>th</sup> step, the attestations and submissions.

<a href="#">How to File a CMS FOIA Request</a>	Please review the information you have entered before submitting.
<a href="#">How We Process Your Request</a>	
<a href="#">Non-FOIA Records</a>	<b>Beneficiary Information</b> <a href="#">Edit</a>
<a href="#">FOIA Reading Room</a>	Jane Doe 1 Main Street Woodlawn, MD 21244
<a href="#">Annual Reports</a>	Date of Birth: 10/1/1950 Medicare Number: 1EG4-TE5-MK73
<a href="#">Hospital Appeals Settlements</a>	<b>Requestor Information</b> <a href="#">Edit</a>
	John Doe Lawyers at Law, LLP 1 Main Street Baltimore, MD 21201
	<b>Records Type</b> <a href="#">Edit</a>
	Medicare Beneficiary Claims Records
	<b>Records Release</b> <a href="#">Edit</a>
	One Time Disclosure Release all records to date
	<b>Delivery Preferences</b> <a href="#">Edit</a>
	Electronic Records Regular Mail

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# FOIA Intake Portal - 11

The final step, Part F, requires the user to upload beneficiary authorization documents which includes attestation language. The authorization document MUST be signed by the beneficiary. The user is provided a link to the form generally used by third parties to obtain proper authorization, as failure to have all of these components in the request will cause the request to be denied.

<b>Freedom of Information Act (FOIA)</b>	<b>Freedom of Information Act (FOIA)</b>
<a href="#">Freedom of Information Act (FOIA)</a>	Medicare Request > 3rd Party > Medicare Status > Records Type > Beneficiary > Records Details > Requestor > Delivery > Fees > Authorization
<a href="#">How to File a CMS FOIA Request</a>	
<a href="#">How We Process Your Request</a>	Please read and confirm the following before submitting.
<a href="#">Non-FOIA Records</a>	* The purpose of this request is:
<a href="#">FOIA Reading Room</a>	<input type="radio"/> At the request of the individual
<a href="#">Annual Reports</a>	<input checked="" type="checkbox"/> Litigation
<a href="#">Hospital Appeals Settlements</a>	

[Upload Documentation](#)

\*  I certify that this request includes all [required documentation](#) which authorizes me/my organization to obtain these records.

[Digital Signature](#)

[Back](#) [Submit](#)

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# FOIA Intake Portal - 12

Once the request is submitted, the user is provided with general confirmation information. The user is advised against submitting duplicates as it would delay CMS' ability to fulfill the request. The online portal also offers CMS an option to email the requester with their confirmation number so that they may track the progress of their request.

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## Freedom of Information Act (FOIA)

Request Confirmation

Thank you, your request for Medicare claims records has been successfully submitted to CMS for **Jane Doe**.

Please note that you do NOT have to submit this same request again via US postal mail, fax, or email. Doing so may cause a delay in the time it takes to fully process your request.

**Next Steps:** You will receive an acknowledgement letter from CMS with a specific PIN# to track your request.

If you would like to receive your letter via email (preferred method), please provide your email address below, otherwise your letter will be sent via US postal mail.

Email Address

Send Letter  
via Email

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# Appendix A – Medicaid Redirect

## Medicaid Records

Please note that the Centers for Medicare and Medicaid Services does not hold any records related to Medicaid claims.

Those records are available through the state office where the Medicaid beneficiary resides. You can access each state's website by [clicking here](#).

Close

<https://medicaiddirectors.org/about/medicaid-directors>

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# Appendix B – Beneficiary Redirect - 1

If the beneficiary is requesting Medicare claim records within the past 4 years, the portal will encourage the beneficiary to use Blue Button. However, if the beneficiary needs older claims, the portal will continue with a series of fillable fields and allow the user to submit the request through the FOIA process.

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Medicare Request > Individual > Date Range

Great! Let's make sure you're in the right place to get the records you are requesting for yourself.

I am requesting Medicare claims for:

Records from within the past 4 years

Records from more than 4 years ago

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# Appendix B – Beneficiary Redirect - 2

## MyMedicare.gov Blue Button

Please note that you can access your Medicare claims information *within the past four years* online by using Medicare's secure Blue Button website.

Please [click here](#) to access Blue Button.



<https://www.medicare.gov/manage-your-health/medicares-blue-button-blue-button-20>

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# Appendix C – Not Enrolled Redirects

## Medicare Enrollment

Uh-oh! If you are not enrolled in Medicare, this is not the correct online request submission form for you. Let's get you back to the Centers for Medicare and Medicaid Services' main [FOIA website](#).

This online request form is strictly for obtaining claims records for a person currently enrolled in Medicare.

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# Appendix D – Non FFS Claims Redirect - 1



I am requesting Medicare Advantage claims records.

## Medicare Advantage Claims Records

Please note that the Centers for Medicare and Medicaid Services does not hold or have access to Medicare Advantage Plans claim records. Please contact your plan directly for that information.

Additional information on Medicare Advantage Plan claims can be found by [clicking here](#).

Close

<https://www.medicare.gov/claims-appeals/check-the-status-of-a-claim>

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# Appendix D – Non FFS Claims Redirect - 2



I am requesting Social Security Administration documents.

## Social Security Administration

### Documents

Please note that the Centers for Medicare and Medicaid Services does not hold or have access to documents related to the Social Security Administration.

Additional information on the Social Security Administration can be found by [clicking here](#).

<https://www.ssa.gov/>

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# Appendix D – Non FFS Claims Redirect - 3



I am requesting Medicare Secondary Payer lien information.

## Secondary Payer Lien Information

Please note that Medicare Secondary Payer (MSP) lien and subrogation information cannot be obtained through a FOIA request or a Medicare beneficiary claims request.

Please click [this link](#) to be redirected to the proper CMS.gov website for more information on MSP.

<https://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Attorney-Services/Attorney-Services>

Close

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