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| Commenter | Summary of Comment | Proposed Response |
| UCARE | 1. UCARE requested adding language to align with NCQA that the appeal timeframe apples to both standard and expedited request. 2. UCARE noted that the document references a 60-day timeframe for filing appeals when the timeframe is 65 calendar days. | 1. We thank the commenter for their suggestion and have made modifications in line with this suggestion. Page two paragraph four of the Coverage Decision Letter now reads “This date applies if you request a standard or a fast appeal”. 2. We thank the commenter for their comment but there is no change required. The timeframe is already 65 calendar days. |
| Centene | 1. Centene requested having the option to use both medical service/item “and” Part B drug in their responses as they feel that both may apply to a coverage decision. | 1. We thank the commenter for their suggestion and have made modifications in line with this suggestion. Throughout the Coverage Decision Letter in relevant sections, we have modified the language to read “and/or” where referencing medical service/items and Part B Drugs. |