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# 42 C.F.R. § 405.902

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## Definitions.

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For the purposes of this subpart, the term—

*Additional documentation* means any information requested by a contractor when conducting a prepayment review or post-payment review.

*Additional documentation request (ADR)* means a contractor's initial documentation request in reviewing claims selected for prepayment review or post-payment review.

*ALJ* means an Administrative Law Judge of the Department of Health and Human Services.

*Appellant* means the beneficiary, assignee or other person or entity that has filed and pursued an appeal concerning a particular initial determination. Designation as an appellant does not in itself convey standing to appeal the determination in question.

*Applicable plan* means liability insurance (including self-insurance), no-fault insurance, or a workers' compensation law or plan.

*Appointed representative* means an individual appointed by a party to represent the party in a Medicare claim or claim appeal.

*Assignee* means:

- (1) A supplier that furnishes items or services to a beneficiary and has accepted a valid assignment of a claim  
or
- (2) A provider or supplier that furnishes items or services to a beneficiary, who is not already a party, and has accepted a valid assignment of the right to appeal a claim executed by the beneficiary.

*Assignment of a claim* means the transfer by a beneficiary of his or her claim for payment to the supplier in return for the latter's promise not to charge more for his or her services than what the carrier finds to be the Medicare-approved amount, as provided in §§ 424.55 and 424.56 of this chapter.

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