

42 C.F.R. § 423.1980

Reopening of coverage determinations, redeterminations, reconsiderations, decisions, and reviews.

- (a) *General rules*. (1) A reopening is a remedial action taken to change a binding determination or decision, even though the binding determination or decision may have been correct at the time it was made based on the evidence of record. Consistent with § 423.1978(a), that action may be taken by—
- (i) A Part D plan sponsor to revise the coverage determination or redetermination;
- (ii) An IRE to revise the reconsideration;
- (iii) An ALJ or attorney adjudicator to revise his or her decision; or
- (iv) The Council to revise the ALJ or attorney adjudicator decision, or its review decision.
- (2) When an enrollee has filed a valid request for an appeal of a coverage determination, redetermination, reconsideration, ALJ or attorney adjudicator decision, or Council review, no adjudicator has jurisdiction to reopen an issue that is under appeal until all appeal rights for that issue are exhausted. Once the appeal rights for the issue have been exhausted, the Part D plan sponsor, IRE, ALJ or attorney adjudicator, or Council may reopen as set forth in this section.

This document is only available to subscribers. Please log in or purchase access.

<u>Purchase</u> <u>Login</u>