

McLaren Print System Order

Order No: 70229

Order Date: 2022-06-03 User: Raynette K. Gaines Phone: 586-255-4165

Ship Location: McLaren Oakland

50 North Perry St Pontiac, MI 48342

Forms Quantity: 100

Paragon Dept No: 12300-1175 Dept Name: Case Management

Company Number: 310

Order Total Price: 27.92

Item Number: CMS-10065-IM (Oakland)

Item Description: Important Message from Medicare

Revision Date: 4/2020

Print: 2 sided black and white Paper: 2 Part (White, Yellow)

Size: 8.5 x 11 Fold: Finish: None Drill: None

Misc Info: ds; 2 part; black

How to Ask For an Appeal of your Hospital Discharge You must make your request to the QIO listed above Your request for an appeal should be made as soon as possible, but no later than
your planned discharge date and before you leave the hospital. The QIO will notify you of its decision as soon as possible, generally no later than 1 day after it receives all necessary information. Call the QIO listed on Page 1 to appeal, or if you have questions. If You Miss The Deadline to Request An Appeal, You May Have Other Appeal Rights: If you have Original Medicare: Call the QIO listed on Page 1. If you belong to a Medicare health plan: Call your plan at: Medicare Plus Blue 1'877'241'2583 | HAP Senior Plan 1'800'801'1770 For more information, cell 1-800-MEDICARE (1-800-633-422%, or TTV: 1-875-80-2008. CMS does not discriminate in its programs and activities. To request this publication in an alternate format, please cell: 1-800-MEDICARE or omail: http://www.blo.gov. Additional Information (Optional): Please sign below to indicate you received and understood this notice. I have been notified of my rights as a hospital inpatient and that I may appeal my decharge by contacting my GRO. Signature of Patient or Representative Date / Time

Spec Info: Please deliver to Case Management on 1st floor west tower. Please contact Raye, CM Tech at 586 255-4165 with any question