



Provider Peer Grouping Report Review and Appeals Process

Following the confidential release of individual provider peer grouping reports, providers have 30 days in which to review their reports for accuracy. As part of their review, providers may ask questions or request additional information about the data used to calculate their results, submit comments about their results, or appeal their results if they are concerned about the accuracy of the data.

Providers who wish to ask questions about provider peer grouping, request additional information about the data used to calculate their results, or to submit comments about their results should direct their inquiries and comments to the Minnesota Department of Health's (MDH) contractor at MNPeerGrouping@mathematica-mpr.com and to MDH staff at health.peergrouping@state.mn.us.

Providers who wish to submit an appeal request must do so within 30 days of receiving their confidential results. Minnesota Statutes 62U.04, Subd. 3(d) requires the Commissioner of Health to establish an appeals process regarding the accuracy of data used to calculate provider peer grouping results. The statute also requires providers to substantiate appeal requests and cooperate in resolving concerns they have raised.

This document establishes the appeals process; it describes the steps a provider must take in order to file an appeal and MDH's response to appeal requests. The appeal may take a one- or two-stage process as described below:

I. Stage One:

- A provider filing an appeal must do so in writing within 30 days of receiving an individual confidential provider peer grouping report from MDH. At the time a report is distributed, MDH will specify the date by which appeals must be submitted; this date will be no less than 30 days from the date of distribution of the report to the provider. Consistent with Minnesota Statutes 62U.04, Subd. 3(d), the provider filing an appeal must:
 - (1) clearly indicate the reason the provider believes the data used to calculate the peer group system results are not accurate; and
 - (2) provide evidence and documentation to support the reason the data are not accurate; and
 - (3) cooperate with the Commissioner, including allowing the Commissioner access to data necessary and relevant to resolving the dispute.

- This written appeal must be sent to the following email address: Stefan.Gildemeister@state.mn.us. MDH will send an acknowledgement of the appeal request within four days of its receipt.
- If a provider's written appeal request does not clearly articulate a reason for concern about the accuracy of the data or lacks reasonable evidence and documentation, MDH will notify the provider of this deficiency in writing via email within five days of receiving the appeal request. If a provider fails to subsequently provide this information in writing via email within five days of receiving MDH's written communication alerting the provider about the deficiency, MDH will deny that provider's appeal and will notify the provider in writing via email to that effect.
- MDH staff will investigate appeals that meet criteria (1) and (2) noted above. MDH staff will provide a written response to a provider's appeal in as timely a manner as possible, depending on the nature and scope of the issues raised in the appeal.
- While MDH will work promptly to resolve any appeals request, the speed of the resolution process will depend on the nature of the issues raised in an appeal. A provider must cooperate with the Commissioner in resolving its appeal request, including allowing MDH program staff access to data necessary and relevant to resolving the appeal. If MDH determines that a provider does not cooperate with the appeal investigation and resolution process, MDH will deny that provider's appeal and will notify the provider in writing via email to that effect.

II. Stage Two:

- MDH program staff will work in good faith with a provider filing an appeal to resolve concerns related to the accuracy of the data. If a provider's appeal has met the standards outlined under criteria (1) and (2) above, the provider has cooperated in the investigation of its appeal request, and the provider is not satisfied with the response provided by MDH program staff to its appeal filing, that provider may appeal the MDH program staff response in writing.
- The Commissioner will appoint an MDH staff person to review Stage Two appeals (the reviewer). The reviewer must not have had prior involvement with the provider peer grouping project.
- No provider may file a Stage Two appeal without first fully following the process for Stage One. A Stage Two appeal must be submitted in writing to the following email address: health.peergroupingappeals@state.mn.us and filed within seven days of receiving a written denial via email from MDH program staff about a Stage One appeal. A Stage Two appeal that does not meet these criteria will not be considered. The 30 day deadline for filing an appeal refers only to Stage One appeals.
- A Stage Two appeal filing must include the provider's Stage One appeal filing and all supporting documentation and written communications between the provider and MDH

program staff, as well as an explanation as to why the provider contests the denial of its Stage One appeal.

- The reviewer will review the provider's Stage Two appeal and all documents submitted. The reviewer may ask either MDH program staff or the appealing provider for additional information. The reviewer may also seek technical assistance from an external expert who has not had prior involvement with the provider peer grouping program.
- The reviewer will provide a written recommendation to the Commissioner of Health about how to resolve the appeal. The recommendation shall be completed within 30 days of the date the Stage Two appeal is filed, unless the Commissioner, upon written request, permits an extension.
- After receiving the reviewer's written recommendation, the Commissioner of Health shall make a final decision about the appeal filing. That final decision will be communicated in writing to the hospital filing the appeal.
- While a provider has an active appeal pending, whether in Stage One or in Stage Two, MDH will not publicly report results for that provider. Denied appeals are not considered active pending appeals.