§ 478.14  
(1) A Medicare beneficiary, a provider, or an attending practitioner who is dissatisfied with an initial denial determination under paragraph (a) of this section is entitled to a reconsideration by the QIO that made that determination.  
(2) The beneficiary is also entitled to the following:  
(i) A hearing by an administrative law judge if $200 or more is still in controversy after a reconsidered determination.  
(ii) Judicial review if $2000 or more is still in controversy after a final determination by the Department.  
(c) Under section 1866(a)(1)(F) of the Act, a hospital that is reimbursed by the Medicare program must maintain an agreement with a QIO under which the QIO reviews the validity of diagnostic information furnished by the hospital.  
§ 478.15 QIO review of changes resulting from DRG validation.  
(a) General rules. (1) A provider or practitioner dissatisfied with a change to the diagnostic or procedural coding information made by a QIO as a result of DRG validation under section 1866(a)(1)(F) of the Act is entitled to a review of that change if—  
(i) The change caused an assignment of a different DRG; and  
(ii) Resulted in a lower payment.  
(2) A beneficiary may obtain a review of a QIO DRG coding change only if that change results in noncoverage of a furnished service.  
(b) Procedures. Procedures described in §§473.18 through 473.36, and 473.48 (a) and (c) for a QIO reconsideration or reopening also apply to QIO review of a DRG coding change.  
(c) Finality of review. No additional review or appeal for matters governed by paragraph (a) of this section is available.  
§ 478.16 Right to reconsideration.  
A beneficiary, provider or practitioner who is dissatisfied with a QIO initial denial determination on one of the issues specified in §473.14(a) has a right to a reconsideration of that determination by the QIO that made the initial denial determination.  
§ 478.18 Location for submitting requests for reconsideration.  
(a) Beneficiaries. Except as provided in paragraph (c) of this section concerning requests for expedited reconsideration, a beneficiary who wishes to