



April 6, 2021

Centers for Medicare and Medicaid Services
Attn: CMS-1696
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Submitted Electronically: www.regulations.gov

Re: Appointment of Representative and Supporting Regulations in 42 CFR

Dear Sir/Madam:

UnitedHealthcare (UHC) is pleased to respond to the Centers for Medicare and Medicaid Services (CMS) request for comments regarding the *Appointment of Representative and Supporting Regulations in 42 CFR* published by CMS in the Federal Register on 02/05/2021.

UHC is dedicated to helping people live healthier lives and making the health system work better for everyone by simplifying the health care experience, meeting consumer health and wellness needs, and sustaining trusted relationships with care providers. In the United States, UHC offers the full spectrum of health benefit programs for individuals, employers, and Medicare and Medicaid beneficiaries, and contracts directly with more than 1.3 million physicians and care professionals, and 6,500 hospitals and other care facilities nationwide. The company also provides health benefits and delivers care to people through owned and operated health care facilities in South America.

The Appointment of Representative (AOR) form is designed to be completed by any party who wishes to appoint a representative to assist them with filing their grievance, requesting an initial determination, or in dealing with any of the levels of the appeals process. The proposed changes reflect CMS's commitment to increasing clarity and improving the functionality of this form for beneficiaries and providers.

One suggested change outlined in the crosswalk is to add instructions under header "Instructions and Regulation Requirements" to clarify what information is required and what information is optional (as shown below).

Medicare Number or National Provider Identifier (required): This must be completed when the person or entity appointing a representative has a Medicare number or National Provider Identifier. If not applicable, fill in, "not applicable".

To avoid potential confusion, UHC recommends that CMS update the last sentence to read, “If the person or entity appointing a representative does not have a Medicare Beneficiary Number (MBI) or National Provider Identifier (NPI), fill in, “not applicable”. This helps clarify that the only instance where “not applicable” is acceptable is when there is not a MBI or NPI.

UHC appreciates CMS’s improvements to this form and their commitment to beneficiaries and providers. Thank you for your thoughtful consideration of our comments. Should you have any questions, please do not hesitate to contact me at 952-931-5681.

Respectfully,

Jennifer McKenna

Jennifer McKenna
Director, Regulatory Affairs
UnitedHealthcare
9800 Healthcare Lane
Minnetonka, MN 55343
952-931-5681