Medicare
Peer Review Organization Manual

Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS)

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HEADER SECTION NUMBERS	PAGES TO INSERT	PAGES TO DELETE
Manual Table of Contents	(2 pp.)	All
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Part 11 **is deleted**. This material has been moved to corresponding Internet-Only Manual chapters in Pub. 100-10, Medicare Quality Improvement Organizations Manual, which can be found at http://www.cms.hhs.gov/manuals.

PEER REVIEW ORGANIZATION MANUAL

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PART TWO Eligibility

Part 2 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 2, which can be found at http://www.cms.hhs.gov/manuals.

PART THREE

Part 3 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 3, which can be found at http://www.cms.hhs.gov/manuals.

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<u>Denials, Reconsiderations and Appeals</u>
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PART NINE Sanction and Abuse Issues

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Part 10 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 10, which can be found at http://www.cms.hhs.gov/manuals.

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Payment Error Prevention Program (PEPP)
Part 11 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 11, which can be found at http://www.cms.hhs.gov/manuals.

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Part 15 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 15, which can be found at http://www.cms.hhs.gov/manuals.

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Part 16 has been moved to the Pub. 100-10, Medicare Quality Improvement Organizations Manual, Chapter 16, which can be found at http://www.cms.hhs.gov/manuals.

PART 11

PAYMENT ERROR PREVENTION PROGRAM (PEPP)

NOTE: All of Part 11 has been moved to the new CMS Manual System, in the Medicare Quality Improvement Organizations Manual (CMS Pub. 100-10). The new manual can be found at http://www.cms.hhs.gov/manuals

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