



### PRE-SERVICE REQUESTS ONLY

#### IMPORTANT NOTE FOR MEDICARE ADVANTAGE PATIENTS:

**If the plan’s decision is unfavorable (adverse), you may request to appeal the decision or request that VIVA Health re-open its decision by marking the appropriate box below:**

#### **I AM REQUESTING A:**

- Re-Opening** (cannot be selected if the only reason for the request is dissatisfaction of the plan’s decision). My re-opening request is due to the following reason (*you must choose one of the following*):
  - To correct a human and/or mechanical clerical error (choose the clerical error that applies):
    - Mathematical or computational mistakes; or
    - Inaccurate coding and computer/data entry errors; or
    - Other (describe):
  - For good cause (choose the good cause reason that applies):
    - There is new and material evidence that was not considered previously or was not available or known at the time of the determination or decision, which may result in a different conclusion.
    - The evidence that was considered in making the determination or decision clearly shows an obvious error at the time of the determination or decision (e.g., evidence submitted previously was overlooked or misinterpreted by VIVA, etc.).

**Please fax re-opening requests to 205-449-7049.**

#### **I AM REQUESTING A:**

- Standard Appeal** (attach information supporting the reason you believe the plan should cover the requested item/service). *If waiting the standard time frame could seriously jeopardize the life or health of the patient or the patient’s ability to regain maximum function, you may request an Expedited Appeal. If you believe an Expedited Appeal is required, please indicate this by stating the reason below:*

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**Please fax appeal requests to 205-933-1239.**