UMR
A UnitedHealthcare Company

FAQs

Post-service appeals inquiry submission

The post-service appeals inquiry submission tool is designed to allow providers to electronically submit requests for review of claims that have been denied and are eligible for appeal.

Using the post-service appeals tool helps providers to:

- Eliminate postal costs
- Get live status updates on their requests
- Receive a transaction ID for easy tracking
- Request multiple claim reviews for a patient
- Upload supporting documents for appeals

How can I access claims I'd like to appeal/review?

You can access claims by signing into **umr.com**, searching for member/patient, and selecting them from the **Select patient** drop-down. Then, choose **Claim/Claims appeals** from the **View** drop-down. Once the claim is found, you can select **Appeal/ review this claim**, which will be visible only after the claim has been processed.

What is the difference between an appeal, an inquiry and an authorization request?

Appeal

An appeal is a request to review a processed claim. Only the member/patient can submit an appeal, but they can authorize you to do so on their behalf.

Inquiry

An inquiry is a request for UMR to review a claim without formally appealing it. Inquiries do not require member/patient authorization. After selecting the claim you'd like to review, select **Request inquiry** to submit review request.

Authorization request

An authorization request allows you to ask a member/ patient for approval to submit an appeal on their behalf. The member/patient must sign into their member portal to approve or deny the request within 72 hours. After 72 hours, the request will expire, and you must submit another authorization request. If you prefer not to request approval, you can submit a provider inquiry, which does not require member authorization

What steps do I need to take to request authorization from a member to submit an appeal?

1. Call the member/patient and inform them of the appeal request.
2. Direct the member/patient to sign into their UMR portal.
3. Have the member/patient approve or deny the authorization request.
4. If approved, the request will automatically finalize and be sent to the UMR appeals department. No further action is required.

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What if I don't see the Appeal/review this claim link?

The **Appeal/review this claim** link is only available after a claim has been processed. If the link is missing, the claim may not be eligible for appeal, may still be in progress or the member/patient's group may not have access to the portal.

What if my supporting documents are too large to upload?

Each document must be 20MB or smaller. If your file is too large or you have multiple documents, try combining them into one PDF using a PDF tool. The ability to upload multiple files will be available in a future update.

What should I do if I receive a message stating a claim is not appealable?

If a claim is not appealable, you must call the number on the member/patient's ID card for further information.

Can multiple employees in an office see all submitted appeals and inquiries?

No, the dashboard only allows individual users to see what they have personally submitted. If an office wants to share access and view all submissions made by employees, they must create a shared office login.

What information does the dashboard display?

The Claim appeal status dashboard provides a summary of appeal and/or inquiry cases that the Post-Service Appeals Department has received. It displays columns relating to the case type, patient, a case number that was assigned while being worked and real-time status updates from our department as the case is being reviewed. Once the case has been completed, there will also be a Decision field that provides the outcome of the review.

How can a provider check the status of an appeal/inquiry?

You can check the status by signing into **umr.com**, selecting the **Claims** menu, and choosing **Claim appeal status dashboard** from the drop-down options.

What is the Provider-initiated requests section, and how do I use it?

This section allows you to see if a member has approved or denied your request to submit an appeal on their behalf. You can access this by navigating to the **Claim appeal status dashboard**.

How can I view my history of submitted appeals?

You can view past appeal transactions by going to the **Submitted appeal history** section in the **Claim appeal status dashboard**.

Learn more about how to use the post-service appeals submission tool.

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