

**Quick Start Filing Instructions #3**  
**Filing a Payment Error Calculation (or “PEC”) Appeal of a**  
**Revised Audit Report or Reissued Original Audit Report**

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These abbreviated instructions address filing a Level II Payment Error Calculation appeal request within the Office of Hearings Case and Document Management System (“OH CDMS”). For more complete instructions on filing a PEC appeal (upon completion of your Medical Record Appeal pursuant to 42 C.F.R. § 422.311(c)(5)(iii)), please refer to the OH CDMS MA RADV External User Manual. For registration instructions, please refer to the OH CDMS External Registration Manual.

**Note:** If you did **not** pursue an appeal of your Medical Record Review Reconsideration Determination (*i.e.*, did not file a Level II appeal of that reconsideration determination), please follow the directions for “**Filing a Payment Error Calculation Appeal from an Original RADV Audit Report,**” in the **Quick Start Filing Instructions #2** document.

1. After logging in and launching OH CDMS, select the **MA RADV** tile.
2. Scroll down on the MA RADV Appeals page to the **Search for Closed Cases** prompt. In the search box, enter the exact docket number that was issued when your contract number/contract year filed its Medical Record Review Reconsideration Determination (*i.e.*, Medical Record Appeal or MRA). The docket number will begin with a “V.” Select the **Submit Search** button.
3. Once your docket number appears, select the hyperlink to go to the case.
4. Select the **Case Actions** tab at the top of the page.
5. Under the **Case Filings and Submissions** drop down list, select **File PEC Appeal** and select the **Proceed** button.
6. The **Payment Error Calculation Case Action** page is displayed. For each document you plan to submit, you must do the following:
  - Select the **Upload** button.
  - Select the type of document for upload from the drop-down list (Written Reconsideration Decision (required); MA Organization Payment Error Calculation (required); and Cover Letter (optional)).
  - Select the **Choose File** button to select the document from your computer’s files.
  - Select the **Save** button.
  - Repeat for each document that you choose to submit.
7. Once all documents have been uploaded, check the box to accept the following statement: “I confirm that I have reviewed the materials entered on behalf of the MA Organization in this appeal and the appeal is complete and ready for submission.”
8. You will see a message that “The request has been submitted to the CMS Hearing Officer.” Select the **Close** button.
9. Upon submitting your request, OH CDMS will send an email confirmation of receipt for the new appeal that includes the docket number assigned to the appeal. Your appeal has now been filed with the Office of Hearings.

If you have any system questions, please contact the OH CDMS Help Desk at 1-833-783-8255 or [Helpdesk\\_OHCDMS@cms.hhs.gov](mailto:Helpdesk_OHCDMS@cms.hhs.gov).