DEPARTMENT OF HEALTH AND FAMILY SERVICES **STATE OF WISCONSIN**
Division of Quality Assurance
OQA-2514 (Rev. 04/08)

INFORMAL DISPUTE RESOLUTION (IDR) REQUEST

The information collected on this form is used for the informal dispute resolution (IDR) process. Completion of this form is not required by statute; however, the following information must be provided, as described below, if you wish to request informal dispute resolution. If you have questions about completion of this form or the informal dispute resolution process, see Division of Quality Assurance (DQA) memo number 08-008 or contact the **IDR Intake Coordinator at (608) 266-2966**.

1. Complete and FAX this form to: **IDR Intake**
   DQA FAX (608) 267-7119

2. **Supporting Documentation** must be forwarded to Michigan Peer Review Organization (MPRO)**, within ten (10) days of receipt of the Statement of Deficiencies.** Materials received after day 10 will **NOT** be considered and the IDR review will not proceed.

TO BE COMPLETED BY DQA STAFF

Name – Facility	Facility License Number	Telephone Number

Mailing Address - Facility	City	Zip Code

Event ID Number	Federal SOD Number(s)	State SOD Number(s)	Was IJ, SQC, Condition, or Repeat Standard cited? ☐ Yes ☐ No If "Yes," list tag number(s) below.

Location of DQA Regional Office

☐ Eau Claire ☐ Green Bay ☐ Madison ☐ Milwaukee ☐ Rhinelander

TO BE COMPLETED BY PROVIDER

Contact Person	Date SOD Received	Date Request Submitted	Type of Review Requested ☐ Telephonic ☐ Desk Review

The Service Agreement is included. ☐ Yes ☐ No	The provider's legal counsel will be involved in the IDR process. ☐ Yes ☐ No

Enter the disputed federal and state tags or codes and the **primary** reason for requesting IDR (from the following list) in the space below. Enter only **one** reason for each tag / code. Facilities may not use the IDR process to challenge scope and severity assessments of deficiencies unless the scope and severity assessment constitutes Immediate Jeopardy (IJ) or Substandard Quality of Care (SQC).

01 Errors in Citation Details
02 Incorrect Scope *(only if IJ or SQC)*
03 Incorrect Severity *(only if IJ or SQC)*
04 Wrong Tag / Code
05 New Information Available
06 Code Interpretation
07 Other *(Explain.)*

Tag / Code Scope and Severity	Reason for IDR	Tag / Code Scope and Severity	Reason for IDR