



**MAOT APPROVED PROVIDER PROGRAM
APPEAL FORM**

APPEAL PROCEDURE FOR A DENIAL:

- Fill out this Appeal Form
- Pay a fee (25% of original fee)
- Submit additional documents or clarification to support your appeal
- Appeal process may take 2-3 weeks
- Appeal process can be expedited within 5 business days with an additional fee (additional 25% of original fee)
- MAOT will process your appeal request once it has received the appeal form, fee, and all the relevant documentation for review

APPEAL FORM

Course Name:

Provider(s) email:

Phone:

MAOT Reference Number:

Date denial notice was received from MAOT: (MM/DD/YYYY)

Reason for denial:

Please provide Reason for Appeal:

**Submit Additional
documentation (if applicable):**

Kindly send all the documents to support your Appeal to info@maot.org with subject line:
APP_APPEAL_Name of Organization_Course Name

Appeal Fee (Non-refundable): **25% of original fee**

[Click here to pay MAOT Approved Provider Appeal Fee \(via Affinipay\)](#)

FOR MAOT APPROVED PROVIDER PROGRAM COMMITTEE USE ONLY

Date Appeal Received:
(MM/DD/YYYY)

Date Appeal Reviewed:
(MM/DD/YYYY)

Reviewers Initials: 1. 2. 3.

Approved for :
(Contact Hours)

Approval Date :
MM/DD/YYYY

Approval Expires (12 months from initial approval date):

Not Approved
Reason :

Conditional Approval,
Pending additional
requirements from
the provider :

Date-Decision Letter
emailed to the provider
(MM/DD/YYYY)

Massachusetts Association for
Occupational Therapy P.O. Box 850543
Braintree, MA 02185

info@maot.org
<http://www.maot.org>