

**Expedited Reinstatement Case
Priority Handling**

From DO/FO# _____ **Date:** _____ **RE SSN#** _____

DO/FO Contact Name: _____ **Phone:** _____

T0 (check one):

- DDS** _____
 PC _____ **Mod#** _____

DDS Instructions (check one):

- EXR Only – Case will be read in as CDR using CDT code 05
 EXR and Initial Claim – Decision needed on both
 New EXR; Initial Claim already at DDS – Associate both actions
 EXR Reconsideration

Other Instructions: _____

PC Instructions (For ODO/PC Use Only):

TOEL 1: DIPROV – TOEL 2: RESUME

Special Instructions (check all that apply):

- Process Provisional POS Input Completed on _____
Process Web 101 CPS Input On _____
Currently Receiving CPS for Provisional
Provisional Payments Erroneously Input On _____

Other Instructions: _____

PC FAX Numbers

NEPC – (718) 557-5777

SEPC – (205) 801-3000

MAMPC – (816) 936-5470

OCO, Baltimore – (877) 385-0643

MATPC – (215) 597-5111

GLPC – (312) 596-0950

WNPC – (510) 236-8947

OIO, International – (877) 385-0643

Total # of Pages (including this cover): _____