



# Live Well, Work Well

Health and wellness tips for your work, home and life—brought to you by the insurance specialists at SIG

**Read your policy and make sure you know what is covered and what is not.**

## YOUR HEALTH PLAN: DISPUTING A CLAIM

It's possible that one day you may have to dispute a claim that has been denied by your health insurance company. These tips will assist you in appealing denial of coverage.

Some issues are minor and can be easily resolved with a call to the health plan's member services department. Other issues, however, may not be so simple.

If talking with the member services department doesn't solve the problem, talk to your employer's HR department if your insurance is provided through your employer. You can also seek help from your state's insurance department, attorney general's office or consumer affairs department.

You have the right to appeal a claim denial or the way a health insurance claim was paid. Most states have laws requiring appeals to be processed within a certain amount of time after the claim occurred. Your state's appeal policy should be detailed in your benefit summary. Once you have filed an appeal, your insurance company is required to respond within a specified period of time.

### Handling Complex Claims Disputes

- Any claim dispute of a claim or benefit denial should clearly indicate that service is a benefit under your medical plan and that it was medically necessary. Provide any documentation, including copies of your benefit summary or a letter from your provider stating that it was a medically necessary service.
- If you have been denied service due to medical necessity, you must supply proof that the procedure was medically necessary in order to have a denial overturned. This includes information about your condition, symptoms, previous treatments and your provider's

recommendation for the treatment in dispute.

- Clearly state the reason for your appeal. Be aware that another person is going to read it. Evaluate your written argument and supporting information. Ask yourself if your evidence supports reversing the denial. A well-written appeal with supporting evidence will increase your chances for a reversal.
- If the carrier still denies your claim, you have the right to an external appeal. To learn more about external appeals, visit [www.healthcare.gov/news/factsheets/2012/06/appeals06152012a.html](http://www.healthcare.gov/news/factsheets/2012/06/appeals06152012a.html).

