

## Health Insurance Appeals

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## What is the CLRC?

**Our mission:** To provide information & resources on cancer-related legal issues to cancer patients, survivors, caregivers, health care professionals, employers, and others coping with cancer.



## CLRC services are



**FREE!**

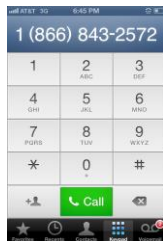
## Webinars and Online Materials

- Online Presentations
- Educational Materials: National, State, and County-Specific Guides
- Spanish Language Materials
- Manuals: Legal Resource Guides for People with Cancer in California and Illinois
- The HCP Manual: A Legal Resource Guide for Oncology Health Care Professionals – **3<sup>rd</sup> Edition**



[www.CancerLegalResourceCenter.org](http://www.CancerLegalResourceCenter.org)

## National Telephone Assistance Line



1. Phone Calls
2. Emails
3. Letters
4. Faxes
5. Online Intake Form

[www.clrcintake.org](http://www.clrcintake.org)

## What If My Insurance Company Refuses to Pay?



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# Alphabet Soup



- HMOs & IPAs
- PPOs
- POS
- EPOs

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# Whose Policy Is It?



- Individual Plan**
- Group Health Plans**
- Self-Funded Employer Plans**

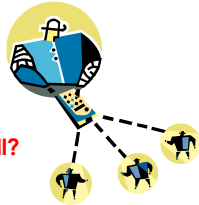
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# What is a self-funded plan?

Insured plan

Self-funded plan

How can I tell?



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# Where Do I Find My Policy?

- Summary Plan Description
- Evidence of Coverage Booklet
- Health Plan Contract



- HR Department
- State & Federal Law

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# Who Denied My Care?



- Physician?
- Health insurance company?
- Self-funded health plan?
- Medical group?

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# Why Did They Deny Your Care?



- Covered benefit?
- Refusal to pay?
- Calculation of co-payment?
- Cancellation of policy?
- Experimental treatment?

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## Dealing with Insurance Companies

- Keep your own records
- Phone or In Writing?



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## Other Tips



- Don't assume your doctor understands your insurance
- Be persistent
- Find the insurance company ombudsman

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## Informal Resolution



- Try resolving the issue over the phone first
- Keep track of who you spoke to and what was said
- If no resolution, follow-up in writing to formally begin the internal appeals process

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## Insurance Appeals

You don't always have to take "NO" for an answer

Two types of appeals

**Internal**

**External**



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## Who can appeal?



- The internal and external appeal rules only apply to private insurances
- Medicaid, Medicare, and other state, federal, or local programs may have different appeals systems
- Contact the CLRC for questions

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## Timelines



**Regular**

**Expedited or Urgent**

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## The Appeals Process



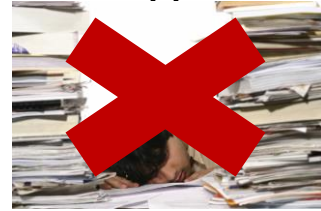
### Internal Appeal:

- Exhausted
- In Writing
- Exception for Urgent Care



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## Effective Appeals Letter



<http://disabilityrightslegalcenter.org/sites/disabilityrightslegalcenter.org/files/about/documents/AStepbyStepConsumerGuidetoHealthInsuranceAppealsFinal.pdf>

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## External Medical Review

- After ACA – health plans in every state must have an external review process
- Types
  - State run
  - HHS run
  - Accredited Independent



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## When is External Review Available?

- Final decision from insurance company
- 60 days to request
- Some states may allow for more time



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## What is an External Review?

- Sometimes called an Independent Medical Review (IMR)
- Must be qualified individuals without connection to insurance company

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## HHS Administered

States/Territories Participating In The HHS-Administered Federal External Review Process



[www.externalappeal.com](http://www.externalappeal.com)

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## Accredited Independent

- Health plan must tell you how to request an external appeal
- Some states require you go through Department of Insurance first, but not all

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## State Run External Appeals

- Check State Department of Insurance website
- Does not have to be long and extensive
- Can add doctor's note, but is not required
- High success rates!!



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## Who is NOT Eligible for External Review?



- Government Programs
- Appeal rights
- Federal Employee Plans
- Some "grandfathered" "self-insured" plans

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## Grandfathered Plans



- Some of the internal and external appeal rules will not apply to grandfathered plans
- If you have this plan, contact the CLRC or your state Dept. of Ins. for more info

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## Employee Retirement Income Security Act (ERISA)

Applies to self-funded plans\*



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## ERISA Appeals



- 1 year to appeal
- 30 days for decision OR 72 hours for expedited appeal

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### What If My Insurance Company Still Refuses to Pay?



- Possible right to sue/arbitrate
- If your treatment wasn't covered
  - Financial Assistance
  - Payment Plans
  - Prioritize Debt

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### Medical billing errors



- Review your bills
- Speak to billing department
- Procedure codes
- Medical dispute letter
- Organizations that can help!

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### Getting Medical Records (including billing)

- Right to access your medical records
- Governed by state law
- Provider can often charge reasonable rates



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### Can My Insurance Be Cancelled?

Medical Record?  
Failure to Pay?  
Loss of Job?



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### Some things that insurance companies are mandated to cover...



...but might not.

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### Women's Health & Cancer Rights Act (WHCRA)



Requires insurance coverage for **reconstructive surgery** for plans covering mastectomies/lumpectomies.

## Preventive Services under ACA



<https://www.healthcare.gov/preventive-care-benefits/>

## Mandated Insurance Benefits



- Cancer Screenings
- Oral Chemotherapy (in most states)
- Clinical Trials
- Other State Specific Rules
- Medically necessary care

## Questions?



[www.cancerlegalresourcecenter.org](http://www.cancerlegalresourcecenter.org)

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