EmblemHealth®

Medicare Appeal Information: Important Information About Your Appeal Rights

You Have the Right to Appeal Our Decision

You have the right to ask EmblemHealth to review our decision by asking us for an appeal if we deny coverage for an item or service. An appeal is a formal way of asking us to review and change a decision we have made.

Plan Appeal: Ask EmblemHealth for an appeal within **60 calendar** days from the date of the notice of the organization determination. We can give you more time if you have a good reason for missing the deadline. See section titled "How to Ask for an Appeal with EmblemHealth" for information on how to ask for a plan level appeal.

If You Want Someone Else to Act for You

You can name a relative, friend, attorney, doctor, or someone else to act as your representative. If you want someone else to act for you, call us at **877-344-7364 (TTY: 711)** to learn how to name your representative. Both you and the person you want to act for you must sign and date a statement confirming this is what you want. You'll need to mail or fax this statement to us. Keep a copy for your records.

Important Information About Your Appeal Rights

There are two kinds of appeals

Standard Appeal: We'll give you a written decision on a standard appeal within **30 days** after we get your appeal. Our decision might take longer if you ask for an extension, or if we need more information about your case. We'll tell you if we're taking extra time and will explain why more time is needed. If your appeal is for payment of a service you've already received, we'll give you a written decision within **60 days**.

Fast Appeal: We'll give you a decision on a fast appeal within **72 hours** after we get your appeal. You can ask for a fast appeal if you or your doctor believe your health could be seriously harmed by waiting up to 30 days for a decision.

- **We'll automatically give you a fast appeal if a doctor asks for one for you or if your doctor supports your request.** If you ask for a fast appeal without support from a doctor, we'll decide if your request requires a fast appeal. If we don't give you a fast appeal, we'll give you a decision within 30 days.
- You can get a fast decision only if you are asking for coverage for medical care you have not yet received. (You cannot get a fast decision if your request is about payment for medical care you have already received.)

How to Ask for an Appeal with EmblemHealth

Step 1: You, your representative, or your doctor must ask us for an appeal. Your request must include:

- Your name
- Your address
- Your member ID number
- Reason(s) for appealing
- Which type of appeal you are requesting (Standard or Fast Appeal.) If you are asking for a Fast Appeal, explain why you need one.
- Any evidence you want us to review, such as medical records, doctors' letters, or other information that explains why you need the item or service. Call your doctor if you need this information.

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We recommend keeping a copy of everything you send us for your records. You can ask to see the medical records and other documents we used to make our decision before or during the appeal. At no cost to you, you can also ask for a copy of the guidelines we used to make our decision.

Step 2: Mail or fax, your appeal, or call us.

- For a Standard Appeal:
  Mailing address: PO Box 2807, New York, NY 10116-2807
  Phone: **877-344-7364 (TTY: 711)**
  Fax: **212-510-5320**

Or, drop off your appeal at any of our Neighborhood Care locations.

What Happens Next?

If you ask for an appeal and we continue to deny your request for payment of a service, we'll send you a written decision and automatically send your case to an independent reviewer. If the independent reviewer denies your request, the written decision will explain if you have additional appeal rights.

Get Help and More Information

EmblemHealth: Call EmblemHealth Customer Service at **877-344-7364 (TTY: 711)**. Our hours are 8 am to 8 pm, Monday through Sunday. A Customer Service representative will be happy to help. Or visit **emblemhealth.com**.

Medicare: Call **1-800-MEDICARE** (1-800-633-4227), 24 hours, 7 days a week. TTY users call: **1-877-486-2048**
Medicare Rights Center: 888-HMO-9050
Elder Care Locator: 800-677-1116 or **eldercare.gov** to find help in your community.

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