



**Final Level Grievance Appeal Rights**  
**IMPORTANT INFORMATION ABOUT YOUR FINAL GRIEVANCE APPEAL RIGHTS**

We processed your request for benefits based on the terms of your contract. Coverage decisions are based on your benefits package and the information sent with your request. If all or part of the items or services were not covered, you or your representative have the right to reasonable access to, and copies of all, documents, records and other information, such as the written rule, guideline, or criteria we used to decide about your request. The information is free if you write to us and ask for it.

**You have completed your final level of internal review.**

**Other resources to help you**

If you have any questions or need help reading or understanding this notice, please call EmblemHealth at **1-877-842-3625** or TTY/TDD 711 if you have a hearing or speech impairment, Monday through Friday from 8 am to 8 pm (EST).

If you have questions or need help with your appeal rights, contact the Community Service Society of New York. To reach a Community Health Advocate, call **1-888-614-5400**. You may also go online at [www.communityhealthadvocates.org/](http://www.communityhealthadvocates.org/), or write to Community Service Society of New York, 105 East 22nd Street, 8th floor, New York, NY 10010.

You can be assured that we will not retaliate or take any discriminatory action against you for filing a grievance or other complaint.

**ERISA Plan Information**

If you are a participant or beneficiary of an ERISA plan, you may also have the right to bring a civil action under section 502(a) of the Employment Retirement Income Security Act of 1974 (“ERISA”) following this decision. You and your plan may have other voluntary alternative dispute resolution choices, such as mediation. You can find out what is available to you by contacting your local U.S. Department of Labor Office and your State insurance regulatory agency. If you are not sure whether your health benefit plan is an ERISA plan, please contact your employer and/or plan sponsor. Please do not contact EmblemHealth for this information.

If you have questions or need help reading or understanding this notice or if you would like a copy of it in another language, please call EmblemHealth at **1-877-842-3625**.