## **How to Appeal a Claim Decision**



As a member of a BCBSD health benefits plan, you have the right to a fair review of all claim decisions. To appeal, you or your authorized representative must contact BCBSD Customer Service *within 180 days* from the date you received the claim decision. You may download the *Appeal Form*, available at **bcbsde.com/downloads/AppealForm.pdf**, and return it to us by mail, or call us. BCBSD will provide copies of records relevant to your appeal, upon written request, at no cost.

Members should use the *Designation of Personal Representative for Appeal Purposes* form (available at **bcbsde.com/downloads/PersonalRepDesignationAppeal.pdf**) to designate a personal representative for purposes of an appeal.

There is no cost to file an appeal. Please explain why you are appealing and provide all relevant information. Please note: If you do not submit your appeal within the 180-day timeframe, your appeal will not be considered.

- Pre-service decision: If your appeal relates to a BCBSD denial of authorization and you have not
  received the service or treatment, you will be notified of the appeal decision within 30 days. You may
  request an *expedited* appeal for a denial relating to urgent care; we will notify you and your provider
  within 72 hours of our decision.
- **Post-service decision**: For appeals relating to a BCBSD denial of coverage for a service you have already received, you will be notified of the decision within 30 to 60 days.

**Please note:** If your health benefits plan is subject to ERISA (Employee Retirement Income Security Act), you may have the right to file a civil action under section 502(a) of ERISA when you have completed the BCBSD appeal process.

## **Mediation Services Available**

The Delaware Department of Insurance (DOI) may be available to provide mediation services or assist you with filing your appeal. For information, call the DOI Consumer Services Division at **302.674.7300** or **800.282.8611**, email them at **consumer@state.de.us** or visit the DOI office Monday through Friday, 8:00 AM–4:30 PM at: 841 Silver Lake Boulevard, Dover, Delaware, 19904.

Please note that the 180-day appeal deadline will still apply if you choose mediation services.

\*This process applies to BCBSD members only. If you are a provider and would like to file a provider appeal, please contact your local Blue Cross and Blue Shield (BCBS) Plan or call 800.676.BLUE to be connected to the appropriate BCBS Plan.

## **BCBSD Customer Service Contact Information**

**Phone:** 302.429.0260 (northern Delaware), 800.633.2563 (all other locations)

Mail (for member appeals only): BCBSD, P.O. Box 8832, Wilmington, DE 19899-8832

Online Customer Self-Service: bcbsde.com

**Important Note:** Upon written request, BCBSD will provide the diagnosis and procedure codes submitted for the service(s) referenced in this mailing, as well as explanations of those codes. Please send your request to BCBSD, PO Box 8799, Wilmington, DE 19899-8799.

Para obtener asistencia en Español, llame al 800.633.2563.	Kung kailangan niyo ang tulong sa Tagalog tumawag sa 800.633.2563.
如果需要中文的帮助,请拨打这个号码 800.633.2563。	Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 800.633.2563.

(10/2011)