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Insurance Claims Denied by Health Carriers Subject to Review

External Review Process Now Available for Consumers

BOISE ID (December 28, 2009) – The Idaho Department of Insurance announces a new process to aid consumers in appealing health insurance claims denied by their insurance carriers. The Idaho Health Carrier External Review Act becomes effective January 1, 2010.

Department Director Bill Deal says, "Consumers should know that if their health claim is denied for 'medical necessity' or as an 'investigational' service or supply, they may have the right to have an independent review of that decision."

Information about the review process, including the application for external review, is available on the Department's Web site, www.doi.idaho.gov. The appeal process is available for denied claims on policies written or renewed on or after January 1.

Consumers wishing to use the review process must complete their health carrier's internal appeal process before submitting a request to the Department. The carrier's appeal process is explained in the insurance policy or coverage booklet. After the insurer's final denial, the external review will be performed at no cost to the consumer by an independent review organization that is separate from the insurer.

Consumers with questions about the provisions of the new law or the appeal process are encouraged to call the Department at 334-4250 in Boise or 800-721-3272 toll-free statewide.

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