



## D. IMPORTANT INFORMATION ABOUT YOUR APPEAL RIGHTS

### What if I need help understanding a denial?

Call BAC at 1.800.521.2654 if you need help understanding your Explanation of Benefits (EOB), or BAC's decision to deny coverage.

### What if I don't agree with this decision?

You have a right to appeal any decision not to pay for an item or service (in whole or in part).

### How do I file an appeal?

Complete the form on the opposite side of this page, or submit a written request for appeal within 180 days of receiving the initial determination or the adverse determination on appeal. Be sure to include the following information and anything else you think we should know.

- Member Name
- ID Number
- Patient Name
- Claim Number (or Batch & Claim Number)
- Name of the Person filing the appeal,
- and whether the person filing the appeal is the covered person, patient, or authorized representative.

### Mail your request for appeal to:

BAC

P.O. Box 107

Reynoldsburg, OH 43068-0107

### What if my situation is urgent?

If your situation meets the definition of urgent under the law, we will conduct your review on an expedited, or faster, basis. Generally, an urgent situation is one in which your health may be in serious jeopardy or, in the opinion of your physician, you may experience pain that cannot be adequately controlled while you wait for a decision or appeal. If you believe your situation is urgent, you may request an expedited appeal when you contact us.

### Who may file an appeal?

You or someone you name to act for you (your authorized representative) may file an appeal. If you designate someone to act on your behalf, you must complete a HIPAA Authorization form which you can get by visiting our website or by calling BAC at 1.800.521.2654

### Can I provide additional information about my claim?

Yes.

### Can I request copies of information relevant to my claim?

Yes, you may request copies (free of charge) by contacting us at 1.800.521.2654.

### What happens Next?

If the denial of claim or coverage is upheld you can file a second level appeal and we will respond in writing. If we still deny the claim or you do not receive a timely decision you may be able to ask for an external review. In this case, an independent third party will review the denial and make a final decision.

### Other resources to help you?

For questions about your appeal rights or this notice, or for more help, you can call the Employee Benefits Security Administration at 1.866.444.EBSA(3272). You may also receive help through an applicable state consumer assistance program. Contact information by state is available at [www.stateconsumerassistance.com](http://www.stateconsumerassistance.com).