

Health Advocate
Independent Appeals Administration™





Sound advice

Unbiased reviews. Expert analysis. Full support for HR.

Making decisions about health appeals and meeting ERISA-compliant deadlines can tie up valuable time and resources and overburden Human Resources staff. A well-designed plan for self-funded companies who retain fiduciary responsibility for the appeals process includes the ongoing management of the appeals function. Health Advocate can ease the burden. As the nation's leading independent healthcare advocacy and assistance company, our Independent Appeals Administration program, available as a stand-alone solution, provides the expertise and specific advice to support your HR staff in this important and sensitive area. You can now turn with confidence to our team of seasoned experts who have many years of experience managing the appeals process. We research and analyze employee benefits and medical records. Our service offers an objective, independent analysis, compliance with government regulations and timelines, and full support for your HR staff.

We know the rules and have the tools to properly manage appeals



HEALTH
Advocate[™]

Expert oversight

Objective advice to support HR staff

The Independent Appeals Administration program, offered as a stand-alone solution, is dedicated to making certain that your organization receives the very best advice and support to manage the appeals process.

Our Independent Appeals Administration team is staffed by experts with many years of experience working with self-funded health plans and complex claims and medical issues, as well as appeals administration and review.

We have the expertise to properly review your appeals so your company has the foundation to make proper determinations.

For expedited appeals, we have the resources to manage this process on a timely basis.

Our appeals team is well-informed about medical, benefit and regulatory issues, and fully understands the details of the appropriate application of medical policy so we can make the very best recommendations.

Our unbiased reviews ensure fair and consistent treatment, and that your organization is properly protected to avoid costly mistakes. We make sure that the appeals administration adheres to all ERISA regulations and timelines.



Proper **checks and balances**

Independence is our strength

We take responsibility for reviewing appeals presented by those members covered under your plan. We then research and analyze the information submitted and provide the plan fiduciary with recommendations.

Our team researches issues for you, enabling Human Resources to keep a distance from sensitive issues, if desired.

We can also prepare the final ERISA-compliant written communication notifying the employee of the plan's decision for your approval.

In addition, we can identify benefit definitions and offer suggestions on how to clarify coverage issues that may be unclear or uncommon. Our team can advise if benefits are consistent with the industry.

We have a solid understanding of the carriers, the appeals process, benefits and medical policy. This ensures that our program supports your objectives.

We work closely with you and your Human Resources staff for a seamless transfer of information for review.



Expert management for **peace of mind**

The Independent Appeals Administration program lifts the burden from the Human Resources department by providing an unbiased evaluation, ensuring that member appeals are properly reviewed and that your organization is properly protected. Here are a few ways our Health Advocate team can help you administer appeals:

Thorough preparation. Our appeals team is well-informed about medical, benefit, and state and federal regulatory issues, offering you expert research, analysis and recommendations.

In-depth research. We understand the details of the appropriate application of medical policy.

Effective installation and transition. We work closely with you and your HR department to ensure a smooth and seamless transfer of information for review.

Compliance with strict timelines. We make sure that the appeals administration adheres to all ERISA regulations and timelines.

We research issues for you. This allows Human Resources to keep a distance from sensitive issues, if desired.

Competitive pricing. Our pricing is based on a per-employee-per-month (PEPM) model.

Extensive working relationships. Our team has a track record working with insurance companies and third-party administrators.

Written communication. We can draft a final determination letter, written in your voice, notifying members of the decision, for your approval.

Quality improvement. We can identify benefit definitions and offer suggestions on how to clarify coverage issues that may be unclear or uncommon. Our team can advise if benefits are consistent with the industry.

Benefits to employees

- Unbiased appeal review ensures fair and consistent treatment
- Complete protection of health information
- Unlimited access to a Core Advocacy Personal Health Advocate to help resolve healthcare and insurance-related issues

Benefits to employers

- Unbiased, independent service
- Eases burden on Human Resources staff
- Clear communication about coverage and benefit decisions
- Expert appeals team
- Compare coverage guidelines as needed
- ERISA compliance
- Medical policy review and clarification
- Advise if covered benefits are consistent with the industry
- Avoid costly mistakes
- Expedient installation

Get started today

Maximize the value of your benefits with Health Advocate

If you already offer Health Advocate, we would be happy to tell you more about adding our Independent Appeals Administration program. Or, if you do not currently offer Health Advocate, we would like an opportunity to introduce you to both our Core Advocacy service and our add-on Independent Appeals Administration program, plus our full spectrum of other solutions.

Contact us at:

Health Advocate

866.385.8033, prompt #2

Or, send an email to:

info@HealthAdvocate.com





The Total **Solution**

Core Advocacy

- Personal Health Advocates handle a range of clinical and healthcare insurance issues
- Interacts with providers and insurance
- Gets the right answers at the right time



Complementary Solutions

- Benefits Gateway™ and Health Information Dashboard™
- Wellness Advocate™
- EAP+Work/Life™
- Personalized Health Messaging™
- Tobacco Cessation™
- NurseLine™
- Medical Bill Saver™
- MedChoice Support™
- Enrollment Advocate™
- FMLA Support™
- Independent Appeals Administration™
- External Appeals Administration™

About Health Advocate

Health Advocate™, Inc., the nation's leading independent healthcare advocacy and assistance company, serves more than 8,000 clients including the nation's leading companies—providing more than 22 million Americans with expert, personalized help to resolve healthcare and insurance-related issues. The company offers a spectrum of add-on time- and money-saving solutions designed for both employers and employees.

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