

Suggestions for Appealing UHC's Medicare Advantage Network Termination

The below suggestions are meant to assist members to file an appeal of UHC network termination. MSNJ does not render individual legal advice to members and these suggestions should not be relied upon as legal advice. Members are urged to carefully consider whether to hire an experienced and qualified healthcare lawyer to assist in the appeal. If you have a large number of UHC Medicare Advantage patients and the impact on your practice will be significant you should consider retaining counsel to assist you.

1. Follow all the directions carefully.
2. You must appeal within 30 calendar days from receipt of the notice letter or you will waive all of your rights to appeal. You should count from the date of the notice letter to be conservative.
3. You should use certified mail or a mail service that will allow you to track and receive a receipt of service indicating receipt within 30 days. The appeal must be received within 30 calendar days.
4. You should provide all pertinent information 10 days prior to the appeal.
5. Pertinent information includes, but is not limited to, information on the number and type of patients you are serving who are in need of continued services; the length of time during which there have been established relationships; letters from patients who may wish to continue to be treated by you; evidence that your termination may result in an access to care issue for your patients; the importance of participation to your practice; your desire to continue to treat patients in network. You should continue to send information relevant to the appeal as it becomes available to you. You should reserve your right to supplement the information before the appeal is considered.
6. You may request a hearing. It may be telephonic. If you don't appear or participate by phone the decision will be made only on the information that you submit. Often physicians feel that a hearing can make a difference. You don't have to be represented by counsel, but you should carefully consider whether you wish to have legal advice from a qualified, experienced healthcare lawyer.
7. UHC should review your appeal within 45 days of receipt.
8. UHC should render a decision within 15 days of its consideration.
9. If you are unsuccessful on appeal, you may exercise your dispute resolution rights under your contract.