
FEHB Program Carrier Letter

All Carriers

U.S. Office of Personnel Management
Insurance Operations

Letter No. 2010-17

Date: July 15, 2010

Fee-for-service [13] Experience-rated HMO [13] Community-rated HMO [13]

SUBJECT: Disputed Claims and the Carriers' Reconsideration Files

The Office of Personnel Management (OPM) regulations provide that an enrollee may ask a Carrier to reconsider its denial of a medical or dental claim (5 CFR 890.105). On July 23, 1997, we sent FEHBP Letter No. 97-30 concerning the Carrier Disputed Claims and the Carriers' Reconsideration File. The Carrier Letter listed records that, depending on the nature of the case, are to be included in a Reconsideration File to ensure that a thorough review has been completed prior to issuing your reconsideration decision. You are responsible for ensuring that adequate documentation to support the rationale for your decision, appropriate to the nature of services received and type of claim filed, is considered before upholding your denial on reconsideration. You are also responsible for maintaining this documentation for forwarding to OPM in the event the insured requests our review of your decision. Adequate documentation includes all information submitted by the claimant and his provider(s) in support of the claim, and all other documentation considered by the plan in making its decision. A Reconsideration File includes but is not limited to the following documentation:

- Carrier's explanation of why a particular claim or service has been denied
- Pertinent provision in the brochure that supports that denial
- Carrier's reconsideration decision document
- All letters and documents from the enrollee
- Explanations of benefits
- Medical records
- Operative reports
- Statements of physicians
- Itemized bills
- Patient's date of birth
- Translations of foreign claims
- Applicable discounts
- Medical and scientific studies supporting the decision (if applicable)

Effective September 30, 2010 carriers must submit a copy of their complete Reconsideration File to OPM electronically.

1. The reconsideration file must be in PDF format with optical character recognition (OCR) enabled.
2. The electronic reconsideration file must be a single document and not divided into multiple parts.
3. The electronic reconsideration file must be named as follows: enrollee last name, separated by a comma, first name, and Y number. **Example:** Smith, Joe Y10001001.

4. The carrier must use the OPM File Manager to receive the electronic enrollee appeal from OPM and when providing the electronic reconsideration file to OPM.
5. The carrier will communicate with OPM staff on the status of the electronic appeal and reconsideration file.

Overview

These technical requirements do not alter the stipulations stated in FEHBP Letter No. 97-30 dated July 23, 1997. The electronic appeal and reconsideration file replaces the current method of transferring (i.e., via fax, mail, overnight mail, courier) a hardcopy file. These requirements enhance the current procedure by eliminating the cost and time when transferring a paper file between OPM, the carrier, and OPM's external medical review vendor.

Procedure

OPM will submit to the carrier via OPM File Manager an electronic version of the enrollee's appeal. The carrier will retrieve the enrollee appeal and provide to OPM an electronic reconsideration file. This file will replace the current hardcopy sent to OPM via mail, overnight mail, and fax.

In the case of exceptionally large files, OPM may choose to submit the file via current procedures such as overnight delivery. The carrier may return the file via current delivery or may provide to OPM the complete file electronically, as stated above. Electronic file size is limited to 10MB. Large files, greater than 10MB, may be split into multiple files and labeled (e.g., 1 of 3, 2 of 3) to indicate multiple files.

In the case of items (e.g., dental molds, x-rays) that cannot be scanned, OPM will provide these to the carrier via current method of transfer. The carrier should return to OPM via current transfer method.

System Management

OPM will create and maintain a File Manager for each carrier to use in the transfer of electronic files. The carrier will provide to OPM, and update as needed, the list of carrier staff members who will access OPM File Manager. The list should include the following information: first and last name, email address, Plan code, and telephone number. The list should be sorted by Plan code. The carrier and OPM staffs that access the OPM File Manager will comprise the User Group. OPM's Health Insurance group will delete the electronic appeal and electronic reconsideration files from the File Manager.

If you have any questions, please contact your Contracting Officer. Thank you in advance for your cooperation in this matter.

Sincerely,

William Zielinski
Associate Director
for Retirement and Benefits