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TO: MEMBERS OF THE LONG ISLAND JEWISH ORGANIZED MEDICAL STAFF

New York State has gone to great efforts to ease the transition of patients from one health insurer to another when a physician leaves a network for reasons unrelated to fraud or loss of license. At that point the consumer-patient, if engaged in a continuous course of treatment can receive 90 days of transitional care, and, if a female patient in at least in the second trimester of pregnancy, her care will extend through birth and post-partum care related to the pregnancy.

If the patient has changed carriers for other reasons transitional care is still authorized if the disease is life-threatening or degenerative and, again, if a woman is in the second trimester – HOWEVER, the State Insurance Law protects the physician by providing that the transitional care must be agreed to by the physician. (The transitional care other than the pregnancy exception is limited to 60 days and must involve a degenerative or disabling condition.)

If you agree to participate during the periods described you must do so as if you were a participating physician in the plan. This includes quality assurance requirements, pre-authorizations etc etc etc.

We thought you would find the following statistics to be of interest. They are findings of the annual study done by the State Department of Financial Services (DFS).

DSF reviewed appeals of insurance appeals filed by consumers of health care. 52% of appeals handled internally by the carriers resulted in initial denials being overturned.

Approximately 1800 appeals were handled externally and of these 40% resulted in either full or partial success for the consumers. Obviously – benefit to be gained by pursuing an appeal.

Claim denials fall into two broad categories – treatment not medically necessary or procedural, i.e. – out of network provider or not covered service. If the issue is medically related appeals are available both internally and ultimately to an outside neutral observer. The third party reviewer will consult the treating physician's notes and practice guidelines from different sources before reaching a determination.

Respectfully submitted,

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