

**ADVANTAGE BY BRIDGEWAY HEALTH SOLUTIONS (HMO SNP)
APPEAL SUBMISSION INSTRUCTIONS**

Advantage by Bridgeway Health Solutions (HMO SNP) (Bridgeway) is a Medicare Advantage Special Needs Plan with a Medicare Contract. As a member of Bridgeway you have the right to file an appeal for any denials related to medical services or Part D prescription drug coverage.

This information is available in a different format, including other *languages, large print, and audio tapes*. Please call Member Services at the number listed below if you need plan information in another format or language.

Este documento está disponible en formatos e idiomas diferentes, incluso en español. Comuníquese con Servicios para los Miembros para solicitar información en otros formatos o idiomas.

All **standard** requests must be filed in writing. You may file an **expedited** appeal request in writing, or by calling our Member Services Department.

How do I file a Standard Appeal?

To file a Standard appeal, forward the completed “Appeal Request Form” or other written request to:

Advantage by Bridgeway Health Solutions (HMO SNP)
Attention: Member Services
1501 W. Fountainhead Pkwy Suite 295
Tempe, AZ 85282

What are the timeframes for Reviewing a Standard Appeal?

Bridgeway will give you a Standard appeal decision for medical pre-service issues within 30 calendar days of receiving your request for an appeal.

For standard appeals related to prescription drugs, Bridgeway will give you a decision within 7 calendar days of receiving your request for a standard appeal.

How do I file an Expedited Appeal?

You can choose to file an expedited appeal in writing or over the telephone. If you want to file an expedited appeal request in writing, please forward to the address listed above.

You may also request an expedited appeal by calling our Member Services Department at 1-866-475-3129 from 8:00 a.m. to 8:00 p.m., 7 days a week. TTY users can call 1-877-613-2076.

Appeals related to payment issues cannot be expedited.

What are the timeframes for Reviewing an Expedited Appeal?

Bridgeway gives you an expedited decision for medical pre-service appeal within 72 hours of receiving your request for a standard appeal.

For expedited appeals related to prescription drugs, Bridgeway will give you a decision within 24 hours of receiving your request for an expedited appeal.

APPEAL REQUEST FORM

Please select the type of appeal you are requesting:

- Standard Pre-Service (Medical Appeal)
(30 Day Review)
- expedited Pre-Service (Medical) Appeal *
(72 Hour Review)
- Standard Part D (Prescription Drug) Appeal
(7 Day Review)
- Expedited Part D (Prescription Drug) Appeal *
(24 Hour Review)
- Standard Payment Issues Appeal
(30 Day Review)

** Expedited appeals mean you feel that using the Standard timeframes would jeopardize your life, health or your ability to regain maximum function. If your request does not meet these guidelines, your appeal will be reviewed using the standard process. Bridgeway will automatically expedite an appeal request when your doctor submits a supporting statement for you.*

Please print or type the following information:

Member Last Name: _____ Member First Name: _____

Member ID #: _____ Date of Birth: _____

Member Address: _____

Home Phone Number: _____ Alt. Phone Number: _____

What was denied? _____

Why do you think you should have this medical service/prescription or payment?

Provider Name: _____ Provider Phone Number: _____

Primary Care Provider (If Different than Requesting Provider): _____

Signature: _____ Date: _____

Name of Person Submitting the Appeal: _____ Date: _____

If a representative is completing the form for the member, please complete an Appointment of Representative (AOR) form located on our website: <http://medicare.bridgewayhs.com/home/problems-or-complaints/>. The AOR will need to be submitted to Bridgeway before we can begin the appeal process.