

**Blue Cross Blue Shield FEP Dental
Section 8 Claims Filing and Disputed Claims Process**

Disputed Claims Process

**Step
Description**

1
Ask us in writing to reconsider our initial decision. You must include any pertinent information omitted from the initial claim filing and send your additional proof to us within 60 days from the date of receipt of our decision.

2
You may mail your request for reconsideration to:

BCBS FEP Dental Claims Appeals
P.O. Box 551
Minneapolis, MN 55440-0551

Or go to www.bcbsfedental.com and select "contact us"

We will review your request and provide you with a written or electronic explanation of benefit determination within 30 days of the receipt of your request.

3
If you disagree with the decision regarding your request for reconsideration, you may request a second review of the denial. You must submit your request to us in writing to the address shown above along with any additional information you or your dentist can provide to substantiate your claim so that we can reconsider our decision. Failure to do so will disqualify the appeal of your claim.

4
If you do not agree with our final decision, under certain circumstances you may request an independent third party, mutually agreed upon by BCBS FEP Dental and OPM, review the decision. To qualify for this independent third party review, the reason for denial must be based on our determination that the rationale for the procedure did not meet our dental necessity criteria or our administration of the plans Alternate Benefit provision, for example, a bridge being given an alternate benefit of a partial denture.

The decision of the independent third party is binding and is the final review of your claim.

Follow this disputed claims process if you disagree with our decision on your claim or request for services. **FEDVIP legislation does not provide a role for OPM to review disputed claims.**

Members may appeal any claims decision by submitting a written notice via U.S. Mail or email.

