

{Current Date}

Attn: Director of Claims

{Primary Carrier}

{Primary Address 1}

{Primary City}, {Primary State} {Primary Zip}

Re: Patient: {Patient Full Name}
Policy: {Primary Member ID}
Insured: {Primary Insured First Name}
Treatment Dates: {Visit Admit Date} - {Visit Discharge Date}
Amount: {Charge Total}

Dear Director of Claims,

We request immediate payment of the above referenced claim. According to our records this claim was filed on {Billed Date}; however, payment has not been received. We believe failure to release payment may be a violation of Title 29 of the United States Code of Federal Regulations.

Section 2560.503-1(f)(2)(iii), "Other Claims," requires certain group employer-sponsored plans to issue an initial benefit determination on post-service claims within 30 days. Section 2560.503-1(f)(4), "Calculating time periods," states the following regarding calculating the 30-day claim review time frame:

For purposes of paragraph (f) of this section, the period of time within which a benefit determination is required to be made shall begin at the time a claim is filed in accordance with the reasonable procedures of a plan, **without regard to whether all the information necessary to make a benefit determination accompanies the filing.** In the event that a period of time is extended as permitted pursuant to paragraph (f)(2)(iii) or (f)(3) of this section due to a claimant's failure to submit information necessary to decide a claim, the period for making the benefit determination shall be tolled from the date on which the notification of the extension is set to the claimant until the date on which the claimant responds to the request for additional information

The above ERISA claims procedure regulation does not allow claims to remain pending or unacknowledged beyond the determination period because of claim deficiencies. Because an initial determination does not appear to have been issued, we ask that this claim be paid to this office immediately. We appreciate your prompt attention to this matter.

Sincerely,

Claims Analyst

{User Full Name}

{User Email}

Direct Line: {User Phone}