Aetna or OptumRx made a mistake and I want to appeal.

**PHARMACY** claim or pre-authorization denied by OptumRx or Briova?
- Yes: Submit a Level 1 appeal to OptumRx. Use the HCA-100 form packet. (Must be received by OptumRx within 180 days of denial date.)

**HEALTH SERVICE** claim or pre-certification denied by Aetna?
- Yes: Submit a Level 1 appeal to Aetna. Use HCA-100 form packet. (Must be received by Aetna within 180 days of EOB* statement or pre-cert letter date.)

OptumRx deny your Level 1 appeal?
- No: End
- Yes: Submit Level 2 appeal to OptumRx. Use HCA-200 form packet. (Must be received by OptumRx within 180 days of the date of the Level 1 denial letter.)

Aetna denied Level 1 appeal?
- No: End
- Yes: Aetna’s Level 1 denial say the health service was not “medically necessary”?**
  - Yes: Submit a Request for External Review to Aetna. Use HCA-200 form packet. (Must be received by Aetna no later than 4 months after you receive the Level 1 denial letter.)
  - No: Submit Level 2 appeal to Aetna. Use HCA-200 form packet. (Must be received by Aetna within 180 days of the date of the Level 1 denial letter.)

Level 2 appeal denied?
- No: End
- Yes: External review upheld the denial? (Did the external company agree with Aetna’s Level 1 denial?)
  - Yes: Level 3 denied by DRB?
    - No: Submit Level 4 to superior court. Use HCA-400 form packet. (Must be filed within 30 days of the date you received notice of the Level 3 denial.)
    - Yes: End

*What is an EOB? EOB stands for “explanation of benefits.” This is a statement explaining what Aetna did with your claim (covered, denied, etc.). You can find these online. For more information, see the HCA-100 packet.

**“What does “medically necessary” mean? These involve Aetna’s or OptumRx’s “medical opinion.” Here are some examples:
- The procedure or drug is experimental or investigational
- Other drugs should be tried before this drug will be approved
Examples of non-medical opinion denials may include:
- Doctor’s charge is above the “recognized charge”
- Used a non-network imaging center in Anchorage
- Insufficient information from the provider
- Plan does not cover the procedure

Whenever you talk to an Aetna or OptumRx employee, ask for the CALL REFERENCE NUMBER for that particular call. If they say there is none, then ask for their first name and employee ID number. Also, remember that everybody has a boss and do not hesitate to ask for a supervisor if you need better help.