

Disputed Claims Process

Blue Cross Blue Shield FEP Vision Section 8 Claims Filing and Disputed Claims Process

Disputed Claims Process

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

Disputed Claim Steps:

1. Ask us in writing to reconsider our initial decision. You must:
 - a. Write to us within 6 months from the date of our decision;
 - b. Send your request to us at the address shown below;
 - c. Include a statement about why you believe our initial decision was wrong, based on specific benefit provisions in this brochure; and
 - d. Include copies of documents that support your claim, such as doctor's letters, and explanation of benefits (EOB) forms.

Blue Cross Blue Shield FEP Vision
P.O. Box 2010
Latham, New York 12110-2010
FAX: 1-800-403-1783
Email: fepmemberhelp@davisvision.com

2. We have 30 days from the date we receive your request to:
 - a. Pay the claim or
 - b. Write to you and maintain our denial or
 - c. Ask you or your provider for more information.

You or your provider must send the information so that we receive it within 60 days of our request. We will then decide within 30 more days. If we do not receive the information within 60 days, we will decide within 30 days of the date the information was due. We will base our decision on the information we already have. We will write to you with our decision.

3. If the dispute is not resolved through the reconsideration process, you may request a review of the denial. We will make a decision within 35 days of the date we receive your request in writing.
4. If you do not agree with our final decision, you may request an independent third party, mutually agreed upon by us and OPM, review the decision. The decision of the independent third party is binding on us and is the final administrative review of your claim. This decision is not subject to judicial review.