

June 10, 2019

To: Participating Prestige Health Choice Providers

**Subject:** Change to Provider Appeal Timeframe

Effective September 1, 2019, providers submitting an appeal will have 90 calendar days from the clinical decision or claims payment date to do so. The date used to determine the appeal timeframe will be the date of the Notice of Adverse Benefit Determination (NABD), or the claim Remittance Advice (RA) date as applicable.

You can find additional information on the Prestige Health Choice provider appeal process by visiting www.prestigehealthchoice.com.

If you have questions about this communication, please contact your Provider Account Executive or the Provider Services department at **1-800-617-5727.**