

## Appeal Process

### To Appeal a Denied Claim

If you feel your claim was denied in error, you have the right to file an appeal by writing a letter that explains why you believe the claim should be approved:

1. The appeal must be submitted in writing and mailed to:

WageWorks Claims Appeal Board  
P.O. Box 991  
Mequon, WI 53092-0991

2. The appeal must be received within 180 days of the date you receive notice that your claim was denied.
3. If your claim was never received, your appeal, with evidence of timely claims submission, must be received by the “claim-it by” date (03-31-14) for the plan; or 90 days after your termination of the benefit if you leave mid-plan year.
4. Please submit additional information related to your claim along with your appeal, such as: written comments, documents, records, a letter from your health care provider indicating medical necessity of the denied product or service, any other information you feel will support your claim.
5. It is possible to request copies of all documents and information related to your denied claim. These will be provided at no charge.