

Provider Dispute Resolution

Sometimes Providers may not agree with benefit decisions. You may dispute them.

For reconsideration of a previous determination, you must submit a Provider Dispute Resolution Request form to Keenan. Submission of the form constitutes your agreement **not to bill the patient** during the dispute resolution process.

How to Submit Your Dispute

1. The Provider Dispute Resolution Request form is available online at www.primehealthcare.com/EHP.
2. Download it. Follow the directions and fill it out completely. Be specific about your dispute and requested outcome.
3. Provide supporting information, including applicable bills and explanations of payment, such as an initial denial letter.
4. Mail or fax the completed form and all supporting information to the address below.
5. Your request will be reviewed, and a written response will be completed within 45 days.
6. If you still disagree, you may submit a Second Appeal. It will be processed within 45 days.
7. Contact Keenan Customer Service at 310-773-7218 if you have any questions or concerns.

