



Memorial Hermann Health Plan, Inc.  
Memorial Hermann Health Solutions, Inc.  
Memorial Hermann Health Insurance Company  
Memorial Hermann Commercial Health Plan, Inc.

# Appeal Form

## APPEAL RESPONSE

Check box if this is an URGENT request

## Step 1: CLEARLY PRINT AND COMPLETE – ALL FIELDS REQUIRED FOR APPEAL PROCESSING

Date:	Prescriber First & Last Name:
Member First & Last Name:	Prescriber NPI:
Member Date of Birth:	Prescriber Specialty:
Member Phone Number:	Prescriber Phone Number:
Member Insurance ID Number:	Prescriber Fax:

## Step 2: COMPLETE REQUEST INFORMATION

Drug/Dose:	Diagnosis:
<input type="checkbox"/> Continuation Therapy <input type="checkbox"/> Initial Therapy	
Drugs/ Therapies previously tried/failed for this diagnosis:	

### Step 3: APPEAL

Use the space provided below to appeal the initial denial of this request

- Refer to the initial request denial letter and address each denial reason within this appeal.
- If denied due to formulary alternatives, address each drug listed within the initial request denial.
- Use clinical reason(s)/rationale to explain your disagreement with the initial denial of this request.
- Provide chart notes, medical studies/journals and/or any other information relevant to this request.

### Step 4: SIGN AND FAX TO: APPEAL COORDINATOR AT: 855-673-6507

Prescriber Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Appeal Department business hours are M-F 8am-6pm CST, decision turnaround times are adjusted accordingly.

For questions, please call Navitus Customer Care at 1-844-268-9789.

Memorial Hermann Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

All Commercial HMO products are underwritten by Memorial Hermann Commercial Health Plan, Inc. All Commercial PPO products are underwritten by Memorial Hermann Health Insurance Company. All Hybrid products are administered by Memorial Hermann Health Solutions, Inc.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855.645.8448 (TTY 711).