

Federal Standards for External Review

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Practices
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Self-insured group health plans subject to ERISA are required to comply with the federal standards for external review. The new regulations contain a general description of what the standards will entail:

- The federal external review process will largely follow the process set forth under the NAIC Uniform Model Act;
 - Generally, all adverse benefit determinations will be eligible for federal review under the federal external review process – except decisions based on worker classification and eligibility. Those will not be eligible for external review;
 - External reviews will be randomly assigned to independent review organizations approved by the DOL;
 - An expedited process will be in place for claims that could seriously jeopardize the life or health of the claimant;
 - Consumer protections will be added for claims involving experimental or investigational treatments;
 - External reviews will be binding on all parties, unless other remedies are available under state or federal law;
 - Additional notices will be required to explain the federal external review procedures; and
- Plans and issuers will be required to provide information relevant to the processing of the external review.
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