0RGHO 1RWLFH RI)LQDO ([WHUQDO 5HYLHZ 'HFLVLRQ

'DWH RI 1RWLFH

1DPH RI 3ODQ 7HOHSKRQH)D[

$GGUHVV :HEVLWH (PDLO $GGUHVV

7KLV GRFXPHQW FRQWDLQV LPSRUWDQW LQIRUPDWLRQ WK

7KLV GRFXPHQW VHUYHV DV QRWLFH :H KDYH LQ H[WHUQDO

>XSKHOG RYHUWXUQHG GHFLVLRQ@ \RXU UHTXHVW IRU WKH S

KHDOWK FDUH VHUYLFH RU FRXUVH RI WUHDWPHQW

+LVWRULFDO 'HWDLOV

3DWLHQW 1DPH	,' 1XPEHU
$GGUHVV FRQWLQXH]LS	
&ODLP	'DWH RI 6HUYLFH
3URYLGHU	
5HDVRQ IRU 'HQLDO LQ ZKROH RU LQ SDUW	

$PW &KDUJH	$OORZH	2WKHU ,QVXUD	'HGXFW	&RSD\	&RLQVX	2WKHU 1RW &R	$PW 3D

<7' &UHGLW WRZDUG 'HG	<7' &UHGLW RZDUG 2XW1HW 0D[LPXP
'HVFULSWLRQ RI 6HUYLFH	'HQLDO &RGHV

[If denial is not related to a specific claim, only name and ID number need to be included in the box. The reason for the denial would need to be clear in the narrative below.]

%DFNJURXQG ,QIRUPDWLRQ Describe facts of the case including type of appeal, d filed, date appeal was received by IRO and date IRO decision was made.

)LQDO ([WHUQDO 5HYLHZ 'HFLVLRQ State decision in this section. List all documents and statements that we reviewed to make this final external review decision.

)LQGLQJV Discuss the principal reason or reasons for IRO decision, including the rationale and any evidence-based standards or coverage provisions that were relied on in making this decision.

20% &RQWURO 1XPEHU