

## Maverick Behavioral Health Releases New Article, 'Can I Get a Second Opinion or Appeal a Denial from My Insurance Company for Rehab Treatment?'

Euless, Texas – Maverick Behavioral Health, a premier outpatient rehab center, is thrilled to announce the release of its new article, 'Can I Get a Second Opinion or Appeal a Denial from My Insurance Company for Rehab Treatment?'

Utilising the addiction and mental health treatment center's experienced teams' extensive expertise, the new article highlights the key federal and state laws that are crucial to challenge insurance decisions to help empower prospective patients to commit to the appeals process and attain peace of mind for their rehabilitation treatment.

Under the Affordable Care Act and other federal regulations, insurance companies must provide clear appeals processes for coverage denials. Individuals typically have 180 days from the date of a coverage denial to file an appeal, though specific timeframes may vary by state and insurance plan type.

Maverick Behavioral Health's article explains that most insurance plans have multiple levels of appeals, starting with internal reviews by the insurance company and potentially progressing to external reviews by independent medical professionals. Each level provides opportunities to present additional evidence and challenge the initial denial decision.

Individuals have the right to receive written explanations of denial decisions, including specific reasons for the denial and information about their appeal rights. This documentation is important for understanding the basis of the denial and developing an effective appeal strategy. Internal appeals are reviewed by different personnel than those who made the initial denial decision, providing a fresh perspective on a case. Individuals can submit additional medical documentation, provider recommendations, and other evidence supporting the medical necessity of their treatment to strengthen their case.

A healthcare provider, such as Maverick Behavioral Health, can assist with internal appeals by providing additional clinical documentation, treatment recommendations, and expert opinions about the appropriateness of proposed treatment. Provider involvement often strengthens appeal cases significantly.

Internal appeals typically must be decided within 30 days for standard appeals or 72 hours for urgent appeals involving immediate medical needs. Insurance companies must provide written decisions explaining their reasoning and any additional appeal options available.

If an internal appeal is denied, individuals also typically have the right to request an external review by independent medical professionals who are not employed by their insurance

company. External reviewers evaluate whether the denied treatment meets generally accepted medical standards and must be completed within specific timeframes, typically 45 days for standard reviews or 72 hours for urgent reviews.

Maverick Behavioral Health encourages individuals with any more questions regarding its new article, 'Can I Get a Second Opinion or Appeal a Denial from My Insurance Company for Rehab Treatment?' to contact its specialist team today.

## About Maverick Behavioral Health

Maverick Behavioral Health is a premier addiction and mental health treatment center dedicated to transforming lives through bold, individualized, and compassionate care. With a skilled team of addiction specialists committed to providing personalized treatment plans and compassionate support, Maverick Behavioral Health empowers clients to take control of their recovery, break free from limitations, and build a strong foundation for lifelong success.

## More Information

To learn more about Maverick Behavioral Health and the release of its new article, 'Can I Get a Second Opinion or Appeal a Denial from My Insurance Company for Rehab Treatment?', please visit the website at <a href="https://mavericktreatment.com/">https://mavericktreatment.com/</a>.

https://thenewsfront.com/maverick-behavioral-health-releases-new-article-can-i-get-a-second-opinion-or-appeal-a-denial-from-my-insurance-company-for-rehab-treatment/

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