

# How to Submit a Formal Appeal to Defense Health Agency Great Lakes DHA-GL

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**Who this is for:** National Guard and Reservist

**Purpose:** This explains how an eligible member submits a formal appeal to the Defense Health Agency Great Lakes (DHA-GL) to request:

- Payment of a denied authorized medical care claim
- Approval of a pre-authorization for medical care previously denied

**Eligibility:** To be eligible to submit a formal appeal to DHA-GL, you must have been either denied a payment of medical care claim(s), or denied pre- authorization request(s) for authorized medical care, and meet the following criteria:

If ...	Then on date of care, <b>MUST</b> ...
<b>National Guard or Reservist</b>	Have an approved Line of Duty (LOD) on file at DHA-GL for the illness or injury.

Definition: Authorized health care: A medical treatment or procedure which is medically necessary.

**\*\*\*Appeals are not a guarantee of Claim Payment or Pre-Authorization Approval \*\*\***

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**Appeal Process:** Follow these steps to submit a formal appeal to DHA-GL

1	Member	Contacts Medical/Unit Representative for clarification, guidance, and assistance with denial of claim or pre-authorization request.
2	Member/Unit Representative	<p>Contacts appropriate DHA-GL point of contact below via telephone for further information regarding the reason for denial.</p> <p style="text-align: center;">*Assists member in developing appeal.</p> <p><b>Note:</b> If the member lives <u>within</u> 50 miles/one hour drive time to a military treatment facility (MTF) then all of their care is managed by that MTF; contact that MTF for appeal process.</p>
3	Member/Unit Representative	<p>Completes the formal appeal worksheet and includes:</p> <ul style="list-style-type: none"> <li>Copy of the Explanation of Benefits (EOB), if applicable</li> <li>Eligibility: to include certified orders/drill attendance sheet, or Service approved LOD (if not on file at DHA-GL)</li> <li>Additional clinical documents if required.</li> </ul>
4	Member/Unit Representative	<p><b>EMAIL</b> appeal request package to DHA-GL at the below address:</p> <p><b>Denied Claim Appeal -</b></p> <ul style="list-style-type: none"> <li><a href="mailto:dha.great-lakes.j-10.mbx.mmso-lod-misc@health.mil">dha.great-lakes.j-10.mbx.mmso-lod-misc@health.mil</a></li> </ul> <p><b>Denied Pre-Authorization Appeal –</b></p> <ul style="list-style-type: none"> <li><a href="mailto:dha.great-lakes.j-10.mbx.mmso-initial-lod-mma@health.mil">dha.great-lakes.j-10.mbx.mmso-initial-lod-mma@health.mil</a></li> </ul>

Examples of when appeals do not apply:	
Non-covered services, non-certified provider, expired authorization, no service approved LOD, SM no longer in military (not limited to this list).	

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**Results and Follow-up** If the appeal is denied, the reason for the denial will be provided via phone call or email.

**Link** **DHA-GL Formal Appeal Request** - DHA-GL Formal Appeal Worksheet 03:  
Click on link to retrieve document [DHA-GL Worksheet-03](#)

**Point of Contact** If you have questions or need additional assistance beyond the information provided here, contact:

Branch	Military Medical Support Office
Position	Customer Service Representative
Phone	888-647-6676
	<b>For questions about:</b>
Billing/Claims	Dial option 2
Pre-authorizations	Dial option 1
Fax	224-447-0152 or 224-447-0153
<b>Email (preferred)</b>	
Billing/Claims	dha.great-lakes.j-10.mbx.mmso-lod-misc@health.mil
Pre-authorizations	dha.great-lakes.j-10.mbx.mmso-initial-lod-mma@health.mil

**Privacy Act Statement:** This statement serves to inform you of the purpose for collecting information required by the Defense Health Agency Great Lakes (DHA-GL) and how it will be used. **AUTHORITY:** 10 U.S.C. Chapter 55, Medical and Dental Care; 32 CFR 199.17, TRICARE program; and E.O. 9397 (SSN), as amended. **PURPOSE:** To collect information from Military Health System beneficiaries in order to determine their eligibility for coverage under the TRICARE Program. **ROUTINE USES:** Use and disclosure of your records outside of DoD may occur in accordance with 5 U.S.C. 522a (b) of the Privacy Act of 1974, as amended, which incorporates the DoD Blanket Routine Uses published at: [http://dpclo.defense.gov/privacy/SORNs/blanket\\_routine\\_uses.html](http://dpclo.defense.gov/privacy/SORNs/blanket_routine_uses.html). Any protected health information (PHI) in your records may be used and disclosed generally as permitted by the HIPPA Privacy Rule (45 CFR Parts 160 and 164), as implemented within DoD by 6025.18-R. Permitted uses and discloses of PHI include, but are not limited to, treatment, payment, and healthcare operations. **DISCLOSURE:** Voluntary; however, failure to provide information may result in the denial of coverage.