Where to Get Help After an Insurance Denial

Receiving a denial letter can feel like reaching a dead end. But your insurance company's decision may not be the final word.

While navigating more than 200 denied claims after my brain surgeries, I learned how important it is to know where to turn beyond the insurance company itself. Below are official agencies and nonprofit organizations that may help families understand their rights, challenge denials, or resolve medical billing disputes.

For Families in Pennsylvania

1. Pennsylvania Insurance Department — File a Complaint

If you believe your insurer has handled a claim unfairly, you can submit a complaint or ask the state insurance department for assistance.

File a Complaint or Ask a Question

Phone: 1-877-881-6388

2. Pennsylvania Independent External Review — Challenge an Eligible Denial

If your insurer denies an internal appeal involving medical necessity or another eligible coverage issue, you may qualify for a free review by independent healthcare professionals.

Request an Independent External Review

Most standard requests must be submitted within four months of the final denial. Eligibility depends on your insurance plan and the reason for denial.

3. Pennsylvania Attorney General — Healthcare Complaints

The Attorney General's Health Care Section accepts complaints involving health insurers, healthcare providers, and medical billing problems.

Submit a Healthcare Complaint

Phone: 1-877-888-4877

4. Pennsylvania Health Law Project — Free Legal Help for Public Insurance

For eligible Pennsylvanians facing Medicaid coverage or service problems, the Pennsylvania Health Law Project provides free legal assistance.

Get Legal Help

Phone: 1-800-274-3258

Note: This organization does not handle private or employer-based insurance disputes.

For Families in Other States

Find Your State Insurance Department

Every state has an insurance regulatory agency. Use the National Association of Insurance Commissioners directory to locate your state's department and complaint process.

NAIC State Insurance Department Directory

Find Consumer Assistance in Your State

The Centers for Medicare & Medicaid Services provides a state-by-state directory of health insurance consumer assistance resources.

CMS Consumer Assistance Programs

Federal Resources

Employer-Sponsored Health Insurance

The U.S. Department of Labor's Employee Benefits Security Administration can help with questions about many private-sector employer health plans.

Request Assistance from EBSA

Phone: 1-866-444-3272

Unexpected Out-of-Network Medical Bills

The federal No Surprises Act provides protections against certain unexpected medical bills, including many emergency-care bills.

CMS No Surprises Help Desk

Phone: 1-800-985-3059

Before You Contact an Agency

Have your denial notice, insurance card, relevant medical bills, and any previous appeal decisions available. Pay attention to appeal deadlines: filing a complaint with a government agency does not necessarily extend or preserve the deadline for appealing directly to your insurer.

These resources are provided for educational purposes. The appropriate agency and appeal process depend on your insurance plan, the reason for denial, and applicable laws. Listing an organization does not imply that it has reviewed or endorsed this website.