



SJHIA and Triple Divide Lodge: What to Expect

We recognize that the nuances of managed healthcare and the claims submission process can often be difficult to navigate and understand. Below are *Frequently Asked Questions (FAQ)* regarding the process of working with your insurance company in order to minimize confusion and maximize reimbursement.

Who is SJ Health Insurance Advocates?

SJ Health Insurance Advocates, LLC (SJHIA) is a New Jersey based company that specializes in behavioral health insurance authorization and claims management. Triple Divide Lodge provides the option of utilizing insurance services through SJHIA to help patients obtain reimbursement for treatment. You may visit their website at www.sjhia.com.

Triple Divide Lodge will provide all required information to SJHIA in-order to utilize insurance benefits. In turn, SJHIA will verify and communicate to Patient such information as whether Patient has coverage for treatment, whether such coverage includes out-of-network providers, plan deductible and out of pocket limits.

Will SJHIA answer my questions about insurance benefits and authorizations?

We strongly encourage you to contact SJHIA prior to enrollment to discuss your specific insurance coverage. A consultation with SJHIA will provide answers to the many questions that arise regarding insurance benefits, along with advice on what approach will best serve the Patient. To contact SJHIA, please email info@sjhealthinsuranceadvocates.com. Tell them that you are emailing about Triple Divide Lodge.

What happens if services are approved?

SJHIA will contact the Patient's insurance carrier within the first 24-48 hours of admission for authorization for Residential Treatment (RTC). If Residential Treatment (RTC) services are approved, SJHIA will provide that information to Patient. SJHIA will also continue to work with Triple Divide Lodge and the Patient's insurance company to complete ongoing reviews (typically every 3-7 days for Residential Treatment). SJHIA will continue to complete the authorization process until: a) services are denied; or b) the Patient is discharged.

In addition to obtaining insurance authorization, SJHIA manages the claim submission for services rendered. Specifically, SJHIA will submit claims for authorized services to the Patient's insurance carrier. Please note that it may take a minimum of thirty (30) days for the Patient's insurance carrier to process each claim received, with a slightly longer turnaround for the first claim submitted.



What happens if services are denied?

If/when services are denied, SJHIA will complete a Provider appeal, which is called a “doc-to-doc” or “peer review.” This process entails SJHIA reviewing information about the Patient with the insurance carrier’s doctor to further advocate for authorization of services. At that time, treatment will either be approved and reviews will continue; or treatment will be denied, and no further reviews will take place. SJHIA will communicate with Patient regarding any denial.

Will SJHIA continue to appeal for coverage and reimbursement?

SJHIA will not continue to appeal for services following a denial on a “doc-to-doc” review. If you are interested in discussing your member appeal options, you can feel free to contact SJHIA for additional information or guidance. SJHIA will however submit for the therapeutic portion of treatment with the appropriate approvals in place.

When can I expect to receive payment for services?

Triple Divide Lodge is an out-of-network provider, thus claims often take longer to be processed. As mentioned above, claims can take approximately thirty (30) days to process, with often longer turnaround time for the first set of claims submitted.

It is also important to note that insurance companies can request additional information from SJHIA and Triple Divide Lodge before processing claims. This may include requesting medical records for review. This process may result in a delayed processing time and/or a decision to not pay out the claim. If this is the case, SJHIA will communicate that information to Patient.

Is there a way to determine how much money I will receive back if claims are approved?

SJHIA can provide some guidance around your reimbursement based upon your specific policy and the typical allowed amounts. Please feel free to reach out to SJHIA to discuss your individual case.

Is there a fee for services rendered by SJ Health Insurance Advocates?

Yes, SJHIA charges a 10% contingency fee based on the claim payment. If treatment is not authorized and/or claims do not pay, then there is no fee.

