

ADVISORY CONCERNING PACIFIC COAST SURGICAL CENTER

Many members have received medical services at Pacific Coast Surgical Center (PCSC), an out of network outpatient surgery center. It appears that PCSC has recently retained a collection agency to pursue unpaid claims that had been denied by the ILWU-PMA Welfare Plan several years ago. At that time, PCSC told members not to worry about the denied claims, as PCSC would not balance bill them; some members also received Explanation of Benefits forms (EOBs) from the Plan stating that they had no 'patient responsibility' for the services in question. Members were therefore understandably angry when they received letters from PCSC, or its collection agency, threatening to bill them directly unless they filed appeals ("Full and Fair Reviews", or FFRs) with the Plan through the Southern California Area Welfare Director. The situation got worse when the Benefit Plans Office (BPO) began to deny those FFRs because they were filed more than 180 days after the members received EOBs from the Plan for the services in question.

Today, the Coast Benefits Specialist and Area Welfare Directors met with the BPO and CCO about this situation. It was agreed that members with collection notices from PCSC who contact the Local 13 Benefits Office, the Southern California Area Welfare Director's office or the Coast Benefits Specialist will be advised to file FFRs, and that the BPO will send those FFRs to the Coastwise Claims Office for review and reprocessing on an expedited basis, even if the original EOBs are more than 180 days old. ***Therefore, if you have received a collection notice for services rendered at PCSC, you should contact the Local, AWD Office or Coast Benefits Specialist immediately and work with them to file a Full and Fair Review with the Plan. Note that the reprocessing of your claim is not a guaranty that it will be paid, but filing the appeal will help to resolve the problem.***