

The United Services Automobile Association (USAA) Decision Point Review Plan delineates the procedures for evaluating treatments related to soft tissue injuries of the neck and back, termed Identified Injuries, as required by the New Jersey Department of Banking and Insurance. Treatment assessments occur at designated intervals known as Decision Points, where either the insured or the healthcare provider must provide information justifying the medical necessity of further treatment. These requirements exclude emergency care and treatments within the first ten days following an accident. Certain diagnostic tests, including MRIs and EEGs, necessitate Decision Point Review, while others, such as spinal diagnostic ultrasounds and reflexology, are not eligible for reimbursement.

Mandatory pre-certification is required for various non-emergency treatments and diagnostic tests not covered by Care Paths, including inpatient care, surgical procedures, and specific therapies. Pre-certification requests must include detailed information about prior treatments and proposed procedures, with the review process conducted by Insight Services Group (ISG) within three business days. Denials will be based on medical necessity as determined by a qualified physician. Failure to submit pre-certification requests or supporting documentation may incur a 50% penalty co-payment, in addition to any applicable deductibles. The policy also promotes voluntary pre-certification, allowing healthcare providers to submit treatment plans for both identified and other injuries, which, if approved, can facilitate the reimbursement process.

ISG has established networks of pre-approved vendors for diagnostic tests and durable medical equipment, ensuring full reimbursement for medically necessary services when utilized. If non-network providers are selected, reimbursement will be limited to 80% of the lesser of the charge or the usual and customary fee. The policy affirms that the choice of healthcare provider is at the discretion of the injured party, and the use of these networks is voluntary. For individuals without a preferred healthcare provider, the policy offers recommendations for potential providers.

The policy outlines an internal appeals process comprising two types: "pre-service appeals" for medical necessity related to future treatments or tests, and "post-service appeals" for adverse decisions after services have been rendered. For a valid pre-service appeal, the insured must notify ISG within 30 days of receiving a denial, submit a written appeal with supporting documentation, and utilize the State Mandated Pre-Service Appeal Form, ensuring all required fields are completed. Appeals must be sent via fax or mail to ISG, and only providers with a valid Assignment of Benefits can file an appeal. A decision on the pre-service appeal will be issued within 14 days of receipt. For post-service appeals, ISG must be notified at least 45 days before initiating alternative dispute resolution, and similar requirements for written appeals and forms apply. A decision will be issued within 30 days of receipt. Appeals concerning medical necessity related to decision point reviews cannot be made as post-service appeals, and any new issues must undergo the internal appeals process before alternative dispute resolution.

The policy permits USAA to accept an insured's assignment of payment for medical expenses to a healthcare provider, contingent upon following an approved assignment form. This assignment is limited to licensed providers who comply with the decision point review plan and complete the internal appeals process before seeking dispute resolution. Non-compliance may result in the insured being held harmless for penalty co-payments. Additionally, USAA may require an independent medical examination (IME) to evaluate the necessity of further treatment, with specific timelines for scheduling and notification of reimbursement decisions. Non-compliance with IME appointments may lead to denial of reimbursement for future treatments related to the diagnosis.