

# Insurance Appeal Deadline Quick Reference

Never miss a filing window

## Health Insurance (ACA / Individual / Small Group)

- Internal appeal: **180 days** from receiving the denial
- Insurer must decide: **30 days** (pre-service) / **60 days** (post-service)
- Expedited review (urgent): **72 hours**
- External review: **4 months** from final internal denial
- External review decision: **45 days** (standard) / **72 hours** (expedited)

## Health Insurance (ERISA / Employer-Sponsored)

- Internal appeal: **180 days** from receiving the denial
- Plan must decide: **30 days** (pre-service) / **60 days** (post-service)
- External review: **4 months** from final internal denial
- Also file with DOL EBSA if plan violates ERISA procedures

## Auto Insurance

- Appeal deadline: **Varies by state** — typically 30-90 days from denial
- Diminished value claim: File within **statute of limitations** (2-6 years by state)
- Appraisal clause: Invoke within timeframe specified in your policy
- UM/UIM: Check policy for **arbitration deadline**

## Homeowner's Insurance

- Proof of loss: Typically **60 days** from insurer's request
- Appeal deadline: **Varies by state** — check your state DOI website
- Appraisal clause: Invoke within policy timeframe
- Statute of limitations to sue: **1-6 years** depending on state

## Dental Insurance

- Internal appeal: Typically **180 days** (check your plan)
- External review: **Not always available** — check plan terms

## Life Insurance

- Claim filing: **No federal deadline** — but file ASAP
- Contestability period: First **2 years** — insurer can investigate application
- After 2 years: Incontestable — can only deny for non-payment or fraud
- State prompt payment: **30-60 days** after insurer receives proof of death

**CRITICAL RULE:** Set calendar reminders **2 weeks before** every deadline. Missing a deadline can permanently forfeit your right to appeal.

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