



Bureau of Insurance, 34 State House Station, Augusta ME 04333

Tel: 800-300-5000 (in state) or 207-624-8475

FAX: 207-624-8599

www.maine.gov/pfr/insurance

**HOW TO FILE A HEALTH, LIFE, ANNUITY, LONG TERM CARE, DISABILITY OR
MEDICARE SUPPLEMENT COMPLAINT WITH THE
MAINE BUREAU OF INSURANCE**

This form is for filing a health, life, disability, annuity, long-term care or Medicare supplement insurance or viatical complaint with the Maine Bureau of Insurance. If you have a complaint related to property and casualty insurance, you should contact the Bureau for the proper form. Please complete both sides of the last two pages of this form. The complaint form, signed by the insured, contract owner, or authorized representative (i.e. power of attorney, parent, legal guardian), authorizes the Bureau to investigate your complaint and provides basic information that we will use to investigate your complaint. If additional space is needed, please use a separate sheet of paper.

Once completed, detach the complaint form and mail to:

Bureau of Insurance
34 State House Station
Augusta ME 04333

You may also file a complaint electronically by visiting the website shown above.

INSTRUCTIONS FOR FILING A COMPLAINT

Please Provide Us With Details of Your Complaint:

- Tell us what happened, who was involved, and why you think the company or agent is wrong.
- Have you tried to resolve this problem? If so, please provide us with details of the efforts you have made to resolve this problem.
- What do you want the company to do?

When filing your complaint, please be sure to attach copies (not originals) of applicable documents, such as:

- Letters, e-mail and other communications, such as notices from the insurance company, explanations of benefits and appeal decisions, between you and the company or agent concerning your complaint;
- Records explaining how claim payments were calculated;

- A copy of your insurance policy or certificate of coverage;
- Any additional information you feel might be pertinent to the complaint.

How the Bureau of Insurance Handles Your Complaint

When we receive your completed complaint form, your complaint will be assigned to an investigator who will contact you by mail. We will write to the company summarizing your complaint. We will ask the company to send us a written response to the issues you raised and any supporting documentation.

By law, any person or company we license must respond to us within 14 days. (We allow the company an additional three days for mailing time.) If we don't receive a timely response, we send out a follow-up letter by certified mail. However, the company may ask for an extension if its response requires additional investigation.

The length of an investigation depends on how complicated the issues are. The investigation may require follow-up letters and phone calls. The investigator will advise you of our conclusions once the investigation has been completed.

We're proud of our track record and are committed to doing a thorough investigation on your behalf. Our duty is to enforce the insurance laws and regulations of this state. The Bureau is able to help in many but not all cases.

Consumer Tips:

- Read your policy. Make sure that you understand your coverage and call your insurer or agent if you have any questions.
- Keep a file with all your insurance records.
- If your health plan requires referrals, make sure to get a referral from your Primary Care Provider. Contact your insurance company before you receive the referred services to verify that the company has received the request and has approved the referral.
- Take notes when you talk to the company; write down the date, time, and name of the person you talk to whenever you call your insurance company with a question or a complaint about your policy or claim.

The Bureau of Insurance has many resources to help educate consumers about dealing with insurance companies, including tips about buying insurance and making claims. For more information, visit our web site at www.maine.gov/pfr/insurance or telephone us toll-free in Maine at 800-300-5000 or 207-624-8475.

We Cannot:

- Force the company to satisfy you if no laws have been broken.
- Act as your lawyer or give you legal advice.
- Make medical decisions.

INSURANCE COMPLAINT FORM

Type of Policy (Please check all that apply):

D ANNUITY

D LONG TERM CARE

D CREDIT

D MEDICARE SUPPLEMENT

D DISABILITY

D OTHER (please describe)

D LIFE

D HEALTH/MEDICAL

PLEASE WRITE CLEARLY

1. YOUR INFORMATION Mr. D Mrs. D Ms. D				
Your name: _				
	First	Middle	Last	
Mailing address: _				
	Street	City	State	Zip
E-mail address: _				
Telephone numbers: Home		Work:	Mobile: _	
Your employer: _ (if your insurance is through your or your partner's employer)				

2. INSURANCE COMPANY INFORMATION your complaint is against.				
Name: _				
Address: _				
	Street	City	State	Zip
Telephone number: _				
Policy, certificate, or ID number:			Claim number (if known): _	

3. AGENT INFORMATION (if applicable)				
Name: _				
Address: _				
	Street	City	State	Zip

Telephone number: _____				

CONSUMER AUTHORIZATION

I hereby authorize that any hospital, physician, osteopath, chiropractor or other health care provider, or any person, or company regulated by the Maine Bureau of Insurance, to provide the Bureau with any medical information or records needed by the Bureau to investigate my complaint. I specifically authorize release of information about mental health and substance abuse treatment as needed to investigate this complaint. This authorization remains in effect 12 months from the date the authorization is signed or until I revoke it in writing.

Date _

Signature of Complainant

(If signing as Power of Attorney or Guardian, please attach copy of appointment)

Printed Name of Complainant

Please detach and mail this completed form to:

Bureau of Insurance, 34 State House Station, Augusta ME 04333