

Subject: Third Party Liability

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Objective:

- I. To ensure that THA, in accordance with State and Federal Third Party Liability regulations, does not pay expenses that are to be covered by Third Party entities; THA is the payer of last resort and should only pay when all other coverages have been exhausted.
- II. To ensure that a process is in place to identify the Third Party resources of Health Share/Tuality Health Alliance (THA) enrollees/members.
- III. To ensure a process by which Third Party claims coverage is investigated and Third Party payments are recovered by THA.

Definition:

Third Party Liability (TPL) refers to the legal obligation of Third Party entities, such as commercial/private health insurers, Medicare, auto insurers, workers' compensation, and other liability insurers, to pay part or all of the expenditures for medical assistance furnished under the State Medicaid plan. The Oregon Health Plan (OHP) is the Medicaid plan for the state of Oregon; OHP/THA will pay only after the Third Party associate has met its legal obligation to pay.

Policy:

- I. Identification of Third Party Insurance/Coverage
 - a. *The Oregon Medicaid Management Information System (MMIS)*

When a member applies for OHP Medicaid benefits, the Department of Human Services (DHS) asks the member if he/she has other insurance coverage. If so, all available insurance information is obtained and updated in the member's file in the Oregon Medicaid Management Information System (MMIS) Web portal. MMIS may then be queried to verify TPL information, to determine whether another insurer is liable for all or part of a member's bill. DHS also electronically transfers OHP/THA member Third Party information to THA on a weekly basis.
 - b. *Providers*

During medical appointment, the provider must ask if the member has a Third Party resource available for payment. Providers are required to report Third Party insurance to THA and DHS.

 1. The provider or THA will complete the *Notification of Other Health Insurance* form (DHS 415H), and then fax or mail this form to the Health

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Insurance Group (HIG) within 30 days from the date of Third Party insurance acknowledgement.

- HIG Fax Number: 503-373-0358
- HIG Mailing Address: P.O. Box 14023, Salem, OR 97309

Providers should submit a copy of the DHS 415H form when billing other carriers.

2. For a vehicle- or work-related injury, the member/client must complete and send the Vehicle Related Personal Injury form (DHS 451) or the Non-Vehicle Related Personal Injury form (DHS 451NV) to DHS Personal Injury Liens (mailing address: P.O. Box 14512, Salem, Oregon 97309).

Related questions may be answered by the Personal Injury Liens department.

- Personal Injury Liens Phone Number: 503-378-4514
- Personal Injury Liens Email Address: personal.injury@state.or.us

II. Investigation and Recovery of Third Party Liability Payments

- a. THA will process all medical claims within 45 days of the date of receipt.
- b. THA will investigate any claim/billing situation wherein a Third Party may be responsible for payment. The THA Claims Analyst may use the following criteria for determining Third Party Liability:
 - Accident information as indicated in box 10a-c on HCFA 1500;
 - Other insurance as indicated in box 9a-d on HCFA 1500;
 - Chart notes as they relate to the claim;
 - Date of current condition or accident as indicated in box 14 on HCFA 1500;
 - Date of same or similar condition or accident as indicated in box 15 on HCFA 1500;
 - Billing provider's description of the condition or accident as indicated in box 19 of HCFA 1500;
 - Any other information pertaining to the condition or accident as printed on the HCFA 1500 or claim attachments;
 - Diagnosis codes related to the condition or accident;
 - Procedural codes (e.g. CPT codes) or any other information as documented on the UB-92 or HCFA 1500 forms.
- c. If any criteria for the possibility of TPL payment are established, the THA Claims Analyst will document the criteria in the Plexis Claims Manager system and will pend related claim(s) while a Pay and Chase investigation

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process is carried out. The THA Claims Analyst will provide the THA Third Party Administrator with all Pay and Chase information, including the member ID, member address, and claim detail.

- d. The THA Third Party Administrator will investigate and take action for possible TPL payment collection, documenting all related findings in the associated Plexis notes. The THA Third Party Administrator will also enter information for each Pay and Chase/TPL case on the secure THA network drive, *M:\Share\THA\Claims_Department\TPR_Claim_Lookup*: an individual case folder will be created using the associated member's last name.
- e. Any TPL recovery payments will be applied to the original payment of the claim(s). When recovery dollars are applied in Plexis, EOB Code TH-040 will be attached to document the claim allocation of funds.
- f. The THA Risk and Reimbursement Coordinator will run quarterly TPL recovery reports. These quarterly reports are submitted to OHP in *Report A-8 of Exhibit A*.

III. Confidentiality of Protected Health Information Related to Third Party Liability

All TPL-related Protected Health Information (PHI) will be handled in a confidential manner that is consistent with the Health Insurance Portability and Accountability Act (HIPAA) and THA privacy/confidentiality policies. No PHI data will be shared with any Third Party without a Release of Information form as signed by the member.

References: 42 CFR 433.139

Health Share RAE Participation Agreement
OHA-CCO Contract Exhibit B, Part 9; Exhibit L, Report L.8
OAR 410-120-1280
OAR 461-195-0301 to 461-195-0350

Formulated:	September 2003
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