

# ELDERPLAN PROVIDER NOTICE

**ISSUE:** Medicaid Balance Billing Re-education

**AUDIENCE:** Elderplan Providers

**DETAILS:** This notice serves as reminder to our provider community to ensure compliance of the standards of “**balance billing.**” providers and facilities may choose whether to participate in the Medicaid program, those who do must comply with all applicable guidelines, including “**BALANCE BILLING.**”

- It goes against the Medicaid guidelines to **BALANCE BILL** a Medicaid patient, their family or their power of attorney for any unpaid balance once Medicaid has paid what they allow under the Medicaid fee schedule.
- This simply means that the provider must adjust off the leftover balance once any applicable charges for a copayment, deductible or coinsurance is met.
- Providers **MAY NOT BILL** a member for a non-covered service unless:
  - You have informed the member in advance that the service is not a covered service; and The member has agreed in writing to pay for the non-covered service
- It’s also important for providers to understand that Medicaid is considered to be the payer of last resource, meaning that if the patient has other coverages, they should be billed prior to billing Medicaid.

**NOTE:** **A balance does not constitute, “coinsurance” due.**

Providers shall accept payment from Elderplan Homefirst for Covered Services provided to Elderplan Homefirst Members in accordance with the reimbursement terms outlined in the Agreement. Payment made to Providers constitutes payment in full by Elderplan Homefirst for covered benefits.

**Providers who inappropriately balance bill individuals are subject to sanctions.**

42 C.F.R. § 447.15 Acceptance of State payment as payment in full

**Questions? Contact Elderplan’s Provider Services Call Center at (718) 921-7979**