



Provider Newsflash

January 2016

Health Insurance Exchange Members - 90 Day Grace Period Reminder

Purpose of this communication

- To provide you with information on how you can identify Health Insurance Exchange members who receive an Advanced Premium Tax Credit (a federal subsidy) and are in a premium grace period (the “APTC Members”) and how CareCentrix will process claims for these members.

Why are we doing this?

- Under the Affordable Care Act (ACA), APTC Members who have paid at least one full month’s premium in the benefit year have a 90 day grace period to pay their outstanding premiums.
 - Insurers are required to reimburse providers for covered services provided during the first 30 days of the grace period.
 - For services provided during the remaining 60 days of the grace period, insurers may pend the claims and, if the member fails to timely pay the required premium, the insurer may deny the pended claims or, if payment was made on such claims, the insurer may recoup the payment.

What do I need to do?

- Please continue to check eligibility and benefits on all members serviced through CareCentrix and obtain grace period information for an APTC Member directly from the Member’s health plan using the same means by which the health plan provides that information to its network providers.

If a health plan provides this grace period information via an online tool, please obtain access to that online tool if you do not already have it. A health plan’s toll free phone number can be obtained from the Member’s health plan Member identification card.



- Claims for APTC Members in a grace period status and their covered dependent(s) will be handled as follows:
 - CareCentrix will process and pay provider claims for authorized covered services provided during the first month of the grace period in accordance with your Provider Agreement.
 - For services provided during months 2 and 3 of the grace period, CareCentrix may pend the claims until the health plan provides CareCentrix with the information necessary to verify eligibility.
 - For those APTC Members that fail to timely pay the required premium, any pended claims for services provided in months 2 and 3 will be denied on the basis of lack of eligibility. If CareCentrix paid a claim for services provided during months 2 and 3 of the grace period, CareCentrix will recoup that payment. For those members that timely paid the required premium, the pended claims for covered services will be processed for payment in accordance with your Provider Agreement.
- Just like any member, prior to rendering services, please ensure that you secure the APTC Member's written agreement to accept financial responsibility for non-covered services. This will enable you to bill the APTC Member in the event the member fails to timely pay the required premium and, as a result, services are not covered.

Is there anything else I need to know?

- Review the CareCentrix Provider Manual or visit our portal at www.CareCentrixPortal.com for additional information and frequently asked questions on Health Insurance Exchange members.

Thank you in advance for your cooperation and continued partnership.