

Prohibition on Improperly Balance Billing

Section 1902(n)(3)(B) of the Social Security Act, as modified by Section 4714 of the Balanced Budget Act of 1997, prohibits Medicare providers from improperly billing qualified Medicare beneficiaries for Medicare cost-sharing.

For AmeriHealth Caritas VIP Care Plus members, providers **may not bill and/or collect** any Medicare cost-sharing amounts, including deductibles, coinsurance, and copayments that may be represented on the remit, as they are not the member's responsibility.

This practice, known as “improper billing”, is prohibited by Federal Law and as stipulated under your AmeriHealth Caritas VIP Care Plus Provider Services Agreement.

Please be advised that it is unlawful for providers to “improperly bill” any patient who is a member of AmeriHealth Caritas VIP Care Plus for any covered services.

- No member may be improperly billed by any provider for services for any reason.
 - Members **cannot** be billed for the difference between the provider’s usual and customary charge and the provider’s contracted rate.
 - Members **cannot** be billed the difference between the amount billed by the provider and paid by AmeriHealth Caritas VIP Care Plus .
- This includes covered and non-covered services (unless a organizational determination has happened and a prior written agreement has been signed by both the provider and the AmeriHealth Caritas VIP Care Plus member for **non-covered** services).

Prohibition on Balance Billing

- AmeriHealth Caritas VIP Care Plus members cannot be billed, nor can deposits be collected from AmeriHealth Caritas VIP Care Plus members, for any amounts other than the members' allowable cost-sharing.
- **Members cannot be billed for missed appointments!**
- If a member does not keep a scheduled appointment, you are not permitted to bill AmeriHealth Caritas VIP Care Plus for the missed appointment.

AmeriHealth Caritas VIP Care Plus Members **can** be billed for:

- Medicaid participation in cost of care amounts for long-term services and supports, as determined by MDHHS.

- If a provider inappropriately balance bills a member, the member may:
 - File a grievance with AmeriHealth Caritas VIP Care Plus
 - File a complaint with the Michigan Department of Community Health Ombudsman
- If the member files a grievance with AmeriHealth Caritas VIP Care Plus, the plan will investigate the grievance.
- If the member files a complaint with the Ombudsman, AmeriHealth Caritas VIP Care Plus will work in conjunction with the Ombudsman to provide any requested information.

How the Plan Resolves Balance Billing Problems: Members

- If upon investigation of a grievance, AmeriHealth Caritas VIP Care Plus determines the member was inappropriately balance billed...
 - AmeriHealth Caritas VIP Care Plus informs the member of the outcome in writing, including an explanation that the member is not responsible for paying the balance billed amount.
 - If payment has been made to the provider, the written notice informs the member to submit a copy of the bill and documentation of payment to AmeriHealth Caritas VIP Care Plus and the Plan will reimburse the member for covered services.

- If you are not sure whether or not you may bill a member for services, contact AmeriHealth VIP Care Plus Provider Services at 1-888-667-0318.
- All providers are encouraged to utilize the AmeriHealth Caritas VIP Care Plus claims inquiry processes to resolve any outstanding claims payment issues.



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VIP Care Plus