

PROVIDER BULLETIN

PROVIDER INFORMATION



This Bulletin was revised on 11/1/16. See Bulletin P43R1-16 for the revision.

August 22, 2016

Updated: Third Party Payments of Premium and/or Cost-Sharing

The information in this Bulletin replaces Provider Bulletin P50-15, which was published on December 7, 2015.

As required by law and applicable regulatory guidance, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will accept premium and cost-sharing payments made on behalf of enrollees by the following persons/entities:

- (1) the Ryan White HIV/AIDS Program;
- (2) other Federal and State government programs (or grantees) that provide premium and cost-sharing support for specific individuals;
- (3) Indian tribes, tribal organizations, and urban Indian organizations;
- (4) family (related legally or by blood) and individual friends of the enrollee; and
- (5) religious institutions and other not-for-profit organizations, but only **when each of the following criteria has been demonstrated** (as such criteria may be modified in accordance with applicable law or regulatory guidance): (a) the assistance is provided on the basis of the enrollee's financial need; (b) the institution or organization is not a healthcare provider; and (c) the institution or organization is financially disinterested, e.g., the institution/organization does not receive funding from entities with a pecuniary interest in the payment of health insurance claims.

Blue Cross may, in its sole discretion and in accordance with applicable law and regulatory guidance, **decline to accept** premium and cost-sharing payments made directly or indirectly* by any third-party that is not listed above, and any other person or entity from which Blue Cross is not required by law to accept third-party premium and/or cost-sharing payments. "Payments" include those made by any means, for example: cash, check, money order, credit card payment, electronic fund transfer, etc. Third parties not listed above are referred to as "ineligible third parties." For purposes of clarity, but not limitation, commercial (or for-profit) entities, hospitals, and other healthcare providers (including, without limitation, suppliers) are ineligible third parties. Religious institutions and other not-for-profit organizations that do not meet the criteria set forth above are also ineligible third parties.

Any cost-sharing paid by ineligible third parties will not be counted toward an enrollee's deductible or out-of-pocket maximum. "Cost-sharing" includes payments such as deductibles, copayments and coinsurance. Blue Cross may make retroactive adjustments to account for any payments made by ineligible third parties.

You are required to immediately notify Blue Cross of any change in information provided with respect to any third-party payment.

Any person or entity that violates these restrictions and/or makes any ineligible third party payment described above will be held responsible for and will be required to reimburse Blue Cross for all costs associated with the relevant plan or policy related to the violation or ineligible payment.

Payments of premiums and/or cost-sharing by ineligible third parties have the potential to create conflicts of interest, skew the health coverage risk pool and increase the risk of adverse selection. This is detrimental to the long-term viability of the health coverage market overall and can result in increased rates for the entire market.

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Blue Cross maintains sole discretion with respect to its acceptance of third-party payments. Blue Cross may make changes to its administration of same at any time and as otherwise needed to support compliance with law and/or applicable regulatory guidance.

If you have questions about this third-party payment policy or whether Blue Cross will accept premium and/or cost-sharing payments made by a specific person or entity, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.

*Indirect payments include, for example, an ineligible third-party making a check out to or otherwise paying the enrollee to permit the enrollee to pay amounts due to Blue Cross.