PROVIDER QUICK POINTS PROVIDER INFORMATION



November 21, 2017

Protocol for MHCP Subscribers that do not Provide Other Insurance Coverage Information

Please follow the below process when unable to acquire primary insurance coverage information from a Blue Plus Minnesota Health Care Programs (MHCP) subscriber.

Providers must make three valid attempts, at least 30 days apart, to obtain other insurance coverage information from Blue Plus MHCP subscribers. Examples of attempts include sending letters or making phone calls. All attempts must be clearly documented.

If after three attempts providers are unable to obtain other insurance coverage information, the documentation of the provider's attempts should be faxed to (651) 662-6017 using a fax coversheet requesting the claim to be adjusted. The fax coversheet must include the requestor's contact information and be sent to the attention of 'Blue Plus 3 Attempt Adjustment Consideration'. It is not appropriate to send these requests on an AUC Appeal form.

The request will be reviewed and if the claim is adjusted to pay, the Special Service Unit will send the information to the Blue Advantage area. The Blue Advantage area will then forward the information to the Third-Party Recovery unit at the Minnesota Department of Human Services (DHS), who, in turn, sends a letter advising the subscriber that if they do not respond, they are in danger of losing their eligibility for coverage.

If Blue Plus determines that another carrier is primary, the claim will not be adjusted and the provider will receive communication with Blue Plus's findings.

Ouestions?

If you have questions, please contact provider services at (651) 662-5200 or 1-800-262-0820.