

HEALTH PLAN OF SAN JOAQUIN			
Subject: Providers Charging Members/ Balance Billing			
Department: Provider Services			Policy #:
Applies to: Medi-Cal, H/F, and Commercial Plans			Scope:
Effective Date: 08/13/08	Revised Date:	Approved by: <i>Signature on file</i> (Title of Sr. Exec.responsible)	

PURPOSE:

To ensure Health Plan of San Joaquin (HPSJ) providers do not charge and/or collect payment from HPSJ members for covered services. The following are possible scenarios where a member may receive a bill erroneously.

- A. Missed appointments
- B. Completion of forms related to medical care
- C. Non payment from HPSJ for covered services. (Pending claims)

POLICY:

- A. HPSJ prohibits contracted providers from charging and/or collecting Payment from a member for missed appointments.
- B. HPSJ prohibits contracted providers from charging and/or collecting payment for completing forms related to medical care.
- C. HPSJ prohibits contracted providers from charging and/or collecting payment from a member for pending claims.

PROCEDURES:

- A. HPSJ contracted providers cannot charge or bill a HPSJ member for a covered service, except to:
 1. Collect payments due under legal entitlement.

- B. HPSJ contracted providers cannot charge or bill a member for a missed appointment.
1. A missed appointment is not a co-payment or a service therefore, providers cannot charge members for missed appointments.
- C. Provider Services will do the following when a contracted provider attempts to charge a member for any missed appointments.
1. Provider Services will call the provider and educate regarding the inappropriate practice of charging members for a missed appointment.
 2. If the provider insists on billing the member Provider Services will reference Title 22 section 51002 of the California Administrative Code that prohibits providers for service from billing Medi-Cal Members.
 3. If the provider continues the practice or refuses again to refrain from charging for missed appointments Provider Services will then notify Quality Improvement (QI) and request provider be investigated for fraud.
 4. Under no circumstances can a provider deny service to a member for non payment of a missed appointment charge.
- D. Contracted providers cannot charge or collect payment at anytime for completing the following forms or medical documentation:
1. WIC referral forms
 2. PM 160 Well Child Visit form
 3. Lead Testing questionnaire
 4. Prescriptions
 5. Yellow Cards (Immunization cards)
 6. Other forms related to the delivery of medical care
- E. Contracted providers can charge members a nominal fee for completing any of the following forms:

1. GAIN form
 2. History and Physical form that is school specific that the PM160 does not meet the requirement
 3. Sports Physical
 4. Disability forms
- E. If the provider of service continues to charge a member in violation of this Ppolicy after being educated or sends the member to a collection agency, HPSJ reserves the right to inform Department of Managed Health Care (DMHC), Department of Health Services (DHS), or other regulatory agencies of the violation. In addition, this practice is a violation of the HPSJ policy and HPSJ contract and all necessary actions, up to and including offsetting the amount of charged to the member and termination of the provider’s contract with HPSJ.

REFERENCE:

- A. Primary Care Physician Medical Service Agreement
- B. Provider Manual

<i>Created by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>	<i>Revised by/Date</i>
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