

Balance billing

Based on a Healthy Blue review, we have noted several complaints regarding balance billing. Balance billing is sending a member a bill for an amount that Healthy Blue did not reimburse on the submitted claim. Your Healthy Blue contract states that providers *are not permitted to balance bill for any portion of the services the health plan does not pay*. The member shall be *held harmless* and not financially responsible for any amounts not paid for the contracted service unless otherwise specified in the *Explanation of Coverage*. Members may be responsible for a copayment depending on the benefit type and services rendered.

Per the requirements of S.C. Code Ann. § 38-33-130(b) (Supp. 2001, as amended), A condition of participation as a qualified Medicaid Provider, the Provider hereby agrees not to bill, charge, collect a deposit from, seek compensation, remuneration or reimbursement from, or have recourse against, Medicaid Managed Care Members, or persons acting on their behalf, for health care services which are rendered to such Medicaid Managed Care Members by the Provider, and which are covered benefits under the Medicaid Managed Care Member's evidence of coverage.

This provision applies to all covered health care services furnished to the member for which the department does not pay the MCO, or the MCO does not reimburse the provider.

www.HealthyBlueSC.com

BlueChoice HealthPlan is an independent licensee of the Blue Cross and Blue Shield Association. BlueChoice HealthPlan has contracted with Amerigroup Partnership Plan, LLC, an independent company, for services to support administration of Healthy Connections.

To report fraud, call our confidential Fraud Hotline at **877-725-2702**. You may also call the South Carolina Department of Health and Human Services Fraud Hotline at **888-364-3224** or email fraudres@scdhhs.gov.

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