

To: AmeriHealth Caritas Pennsylvania, AmeriHealth Caritas VIP Care Providers and AmeriHealth Caritas Pennsylvania (PA) Community HealthChoices (CHC)

Date: June 16, 2021

RE: Critical Reminder - Balance Billing Members/Participants is Prohibited

As outlined in your Provider agreement with the plan and as outlined in the Pennsylvania Department of Human Service (DHS) Medical Assistance bulletin 99-99-06 entitled "Payment in Full", AmeriHealth Caritas Pennsylvania and AmeriHealth Caritas PA CHC strongly reminds all providers of the following point from the bulletin:

The Pennsylvania Code, 55 Pa. Code § 1101.63 (a) statement of policy regarding full reimbursement for covered services rendered specifically mandates that:

- All payments made to providers under the MA program plus any copayment required to be paid by a recipient shall constitute full reimbursement to the provider for covered services rendered.
- A provider who seeks or accepts supplementary payment of another kind from DHS, the recipient or another person for a compensable service or item is required to return the supplementary payment.

To review the complete MA Bulletin 99-99-06, "Payment in Full", visit the Provider Center at www.amerihealthcaritaspa.com → Providers → Communications → DHS/Medical Assistance Bulletins or www.amerihealthcaritaschc.com → Resources → Department of Human Services (DHS) News and Bulletins.

Similarly, CMS clearly outlines the prohibition for AmeriHealth Caritas VIP Care providers to balance bill Members/Participants as follows:

- 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 balance billing qualified Medicare beneficiaries for Medicare cost-sharing.
- Under the requirements of the Social Security Act, all payments from AmeriHealth Caritas VIP Care to participating providers must be accepted as payment in full for services rendered. Members/Participants may not be balance billed for medically necessary covered services under any circumstances.

Providers may reference CMS MLN Matters number SE1128 for further details.

If you have questions regarding this notice, please contact your Provider Account Executive or Provider Services at 1-800-521-6007.