

THIRD PARTY LIABILITY & HMS

February 2023



DISCLAIMER

SoonerCare policy is subject to change. The information included in this presentation is current as of February 2023.

The most current information can be found on the OHCA public website at www.oklahoma.gov/ohca.

AGENDA

- Third Party Liability (TPL)
- TPL Claims
- HMS Information
- Resources

THIRD PARTY LIABILITY (TPL)

WHAT IS TPL

- Since Medicaid is payer of last resort, the TPL unit is responsible for pursuing third-party payers for both fee-for-service and SoonerCare program areas.
- TPL information is received from members, providers and health information systems, as well as other sources.

CHECKING FOR TPL

OKLAHOMA
Health Care Authority

Provider Portal

[My Home](#) [Eligibility](#) [Claims](#) [Prior Authorizations](#) [Referrals](#) [Files Exchange](#) [Financial](#) [Letters](#) [Reports](#) [Resources](#)

Eligibility Verification | Treatment History

[Contact Us](#) | [Logout](#)

[Eligibility](#) > [Eligibility Verification](#) > Coverage Details Friday 06/17/2022 10:31 AM CST

[Print Preview](#)

Coverage Details for Member ID [REDACTED] [Back to Eligibility Verification Request](#) ?

NOTICE: There is no copay due for this member.

Effective/End dates are shown only for the period of time requested.

Verification Number 221689B2HL - 6/17/2022 - Status: A [Expand All](#) | [Collapse All](#)

Eligibility		
Coverage	Effective Date	End Date
Mental Health and Substance Abuse	11/02/2020	11/02/2020
SoonerCare Choice	11/02/2020	11/02/2020
Non Emergency Transportation	11/02/2020	11/02/2020
Title 19	11/02/2020	11/02/2020

Managed Care Information

EPSDT

TPL

CHECKING FOR TPL

Managed Care Information			
Provider Name	Provider Phone	Health Plan Name	Health Plan Phone

EPSDT		
Service	Last Exam	Next Exam
Medical		01/04/2022

TPL									
Click '+' to add a row.									
Carrier Name (Carrier ID)	Policy Number	Group ID (Employer ID)	Policy Holder (Relationship)	Policy Type	Coverage Type	Rx-BIN	Rx-PCN	Effective	End
+ Click to expand									

TPL - HELPFUL HINTS

- TPL is unable to add more than one carrier to the file if they are the same type of coverage.
- Have all the necessary information when calling TPL to add or term a carrier.
- If claims were denied due to TPL and a provider calls in to term the TPL, the provider will need to resubmit those claims.
- If a carrier's website will not run eligibility, the provider needs to call the carrier to determine eligibility.

TPL CLAIMS

TPL CLAIMS - EDI

- If paid by primary:
 - Under Other Subscriber Information, in loop 2320, send the SBR segment, AMT segment and IO segment with the amount paid.
 - No attachment is required.
- If the primary denied the claim or applied to deductible:
 - The same procedure is followed, with 0.00 entered in the AMT segment.
 - Attach EOB from primary insurance.

TPL CLAIMS - PORTAL

- Institutional and Professional
 - If paid by primary:
 - Select **Include** in the box “Other Insurance.”
 - The amount the primary paid needs to be added into the “TPL Amount” box.
 - If the primary denied or applied to deductible:
 - Select **Denied** in the box “Other Insurance.”
 - Attach EOB from primary insurance.

TPL CLAIMS - PORTAL

Institutional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

*Covered Dates - *

*Admission Date/Hour - (hh:mm)

*Admission Type

*Admitting ICD Version

*Patient Status

Patient Account Number

HMO Copay

Covered Days

Discharge Hour (hh:mm)

*Admission Source

*Admitting Diagnosis

*Type of Bill

Other Insurance
Include
Denied

Total Charged Amount

Professional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

Date Type

Accident Related

Patient Account Number

From Date

CLIA Number

*Other Insurance
Include
Denied

Date of Current

Expected Delivery Date

To Date

HMO Copay

Total Charged Amount

TPL CLAIMS - PORTAL

- Crossovers
 - If SoonerCare is secondary:
 - Select **None** in the box “Other Insurance.”
 - If SoonerCare is tertiary:
 - It is dependent on what the **secondary payer** does ...
 - If the secondary paid, select **Include** in the box “Other Insurance.”
 - If the secondary denied or applied to deductible, select **Denied** in the box “Other Insurance,” and then attach the EOB from secondary payer.

TPL CLAIMS - PORTAL

Institutional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

*Covered Dates - *
*Admission Date/Hour (hh:mm) - (hh:mm)
*Admission Type
*Admitting ICD Version
Patient Status
Patient Account Number

Covered Days
Discharge Hour (hh:mm)
*Admission Source
*Admitting Diagnosis
*Type of Bill

Other Insurance
None
Include
Denied

Total Charged Amount

Medicare Crossover Details

Institutional Medicare Crossover Instructions

Deductible Amount
Blood Deductible Amount
Co-insurance Amount
*Medicare Payment Date

Professional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

Date Type
Accident Related
Date of Current

Patient Account Number
*From Date
*To Date

Expected Delivery Date
CLIA Number

***Other Insurance**
None
Include
Denied

Total Charged Amount

TPL CLAIMS - PORTAL

- HMO
 - In the “HMO Copay” box select **Yes**.
 - The primary EOB is required so it must be attached.

TPL CLAIMS - PORTAL

Institutional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

*Covered Dates	<input type="text"/> - <input type="text"/>	Covered Days	<input type="text"/>
*Admission Date/Hour	<input type="text"/> (hh:mm)	Discharge Hour	<input type="text"/> (hh:mm)
*Admission Type	<input type="text"/>	*Admission Source	<input type="text"/>
*Admitting ICD Version	ICD-10-CM	*Admitting Diagnosis	<input type="text"/>
*Patient Status	<input type="text"/>	*Type of Bill	<input type="text"/>
Patient Account Number	<input type="text"/>	Other Insurance	None
HMO Copy	No	Total Charged Amount	\$0.00

Professional

Claim Information

Enter information applicable to the claim. If Other Insurance information needs to be entered, then Include should be selected in the Other Insurance dropdown. The Other Insurance details can be entered on Submit Step 2.

Date Type	<input type="text"/>	Date of Current	<input type="text"/>
Accident Related	<input type="text"/>	Expected Delivery Date	<input type="text"/>
Patient Account Number	<input type="text"/>	From Date	<input type="text"/>
CLIA Number	<input type="text"/>	To Date	<input type="text"/>
*Other Insurance	None	HMO Copy	No
Total Charged Amount			No

HMS INFORMATION

HMS INFORMATION

- HMS is the TPL contractor for OHCA.
- HMS creates and oversees TPL projects from start to finish and reports the findings to OHCA.
- The overall goal:
 - To ensure that Medicaid remains the payer of last resort, allowing the State of Oklahoma to spend more of its health care dollars on the individuals entitled to them.

HMS PROCESS

- HMS notifies provider of claims which TPL is identified. Provider is instructed to bill claim to liable payer.
- Provider has 60 days to bill identified claim and provide results to HMS.
- Provider advises HMS if claim should not be recouped and supplies supporting documentation.
- HMS closes cycle at end of 60 days and sends OHCA claims to recoup.
- OHCA recoups identified claims.

HMS CONTACT INFORMATION

- HMS Third Party Liability Service Center
 - Phone: 877-253-5697
 - Fax: 214-905-2064
- Provider Portal
 - <https://ecenter.hmsy.com>

RESOURCES

OHCA PUBLIC WEBSITE

OHCA's public website is the best source for current SoonerCare information: www.oklahoma.gov/ohca.

- A [Provider Toolkit](#) is available to help providers locate helpful information online more efficiently.
- Find service-specific information such as rules, manuals, prior authorization, forms, and contracts for enrolling in the SoonerCare program and other important topics based on the services you provide on the [Provider Types page](#).
- [Policy and rules](#) are available to review online.

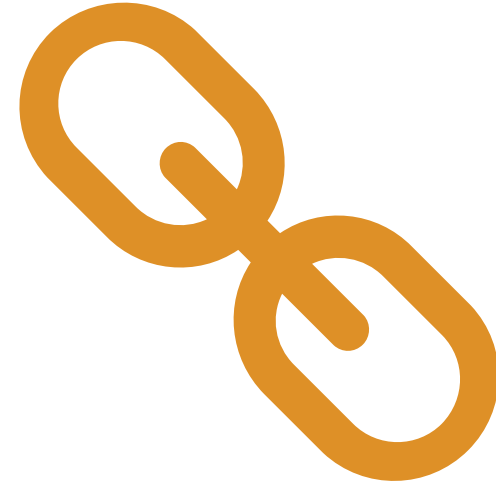
HELPFUL TELEPHONE NUMBERS

- OHCA Call Center
 - 800-522-0114 or 405-522-6205; option 1
- Internet Help Desk
 - 800-522-0114 or 405-522-6205; option 2, 1
- EDI Help Desk
 - 800-522-0114 or 405-522-6205; option 2, 2



HELPFUL LINKS

- Agency Website
 - www.oklahoma.gov/ohca
- OHCA Provider Portal
 - www.ohcaprovider.com
- Provider Training
 - www.oklahoma.gov/ohca/providers/provider-training
- [OHCA TPL Webpage](#)
- [Provider Quick Reference Guide](#)
- [OHCA Resource Guide](#)



TRAINING RESOURCES

- Provider education specialists:
 - Education specialists provide education and training as needed for providers either virtually or telephonically.
 - Requests for assistance should be emailed to: SoonerCareEducation@okhca.org. (Requests should include the provider's name and ID, contact information, and a brief description of what assistance is being sought.)
 - For immediate claims or policy assistance, please contact the OHCA provider helpline at 800-522-0114.
- Monthly webinars
- How-to videos





OKLAHOMA
Health Care Authority

GET IN TOUCH

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

oklahoma.gov/ohca
MySoonerCare.org

Agency: 405-522-7300
Helpline: 800-987-7767

