

Disallowance Project Overview:

MetroPlus has contracted with HMS to help identify other third-party coverage for our Medicaid members. Through the Disallowance process, HMS has identified where MetroPlus has paid a provider for a claim(s), but another payer is liable.

In this recovery project, HMS will notify the provider that the claim has been paid incorrectly and request that the provider bill the appropriate entity. HMS will supply the provider with a notification letter, claim audit details, as well as a window to bill the liable payer and receive the recovery. At the end of the notification period, MetroPlus will retract the Medicaid payments for the claim(s) that have been identified. In several instances, the provider may receive a higher reimbursement from the other carrier than they would have if Medicaid paid.

FAQ's

Why am I being asked to do this?

Federal law requires that Medicaid recover its payments when a liable third party is identified so HMS has been asked by MetroPlus as a valued partner to assist in this process. HMS is conducting this project to ensure MetroPlus has paid claims correctly on its Medicaid members.

What should the providers do when contacted by HMS?

Review the claims on the audit detail and use the information HMS supplied to bill the appropriate carrier. If there are any questions/concerns, HMS has a dedicated provider relations team to assist. Should the provider agree with the findings, they can take an active or passive approach to inform HMS. The providers can contact the provider relations department, or simply take no action and allow MetroPlus to recoup the original Medicaid payment amount.

How accurate is the information being provided by HMS?

HMS verifies 100% of all other coverage segments before sending to providers. Therefore, the providers will have the most accurate and up-to-date information to ensure that the provider will be armed with the information necessary to receive a reimbursement from the carrier.

How long is the provider notification period?

Providers will have 60 calendar days from the date HMS sends the initial provider notification letter. If additional time is needed the provider can contact the HMS Provider Relations Team for further assistance.

What if providers have questions or concerns regarding a claim?

Contact a member of the HMS Provider Relations Team. The Provider Relations Team is a dedicated team for handling questions, concerns and correspondence with providers throughout the disallowance process.

How do providers reach the HMS Provider Relations Team?

The Provider Relations Team can be contacted by calling 855-334-0069.