

UPHP Medicaid Coordination of Benefits Update

The Upper Peninsula Health Plan (UPHP) Medicaid program is the payer of last resort. If a UPHP beneficiary has both UPHP Medicaid coverage and some other health insurance coverage, the other health insurance coverage must be billed first before a claim can be submitted to UPHP.

UPHP also recoups claim payments that have been made to providers when UPHP learns, after making payment, that the Medicaid beneficiary had other health insurance coverage on the date of service.

UPHP has paid claims when UPHP Medicaid beneficiaries actually had Medicare coverage on the date of service. We recently started recouping these claim payments from providers and your remittance advice will reflect the recovery indicating other insurance.

If we recoup a claim because the Medicaid beneficiary actually had Medicare on the date of service, the provider has 6 months to submit the claim to Medicare for payment.

Please be mindful of this important opportunity to receive Medicare reimbursement! This opportunity exists regardless of how old the claim might be. Medicare does not limit providers to its standard timely filing deadline when the reason for the claim submission is due to a Medicaid recoupment.

Thank you for your continued commitment to providing quality service to UPHP members!

QUESTIONS? Contact the UPHP Claims Service Department at 1-800-835-2556.