Third-party liability

Summary of update: When submitting claims where third-party liability (TPL) exists, please review the following policy.

Medicare as primary/Summit Community Care as secondary
When a member has dual coverage through Medicare and Medicaid, Medicare will be primary. For eligible members with dual Medicare and Medicaid coverage, Summit Community Care maintains a *Medicare Third Party Bypass List** that identifies service codes for which no TPL information will be required. Providers may access the complete list of service codes included on the *Medicare Third Party Bypass List* via our [website](#) > Provider Education & Training.

Commercial insurance as primary/Summit Community Care as secondary
When a member has dual coverage through a Commercial insurance entity and Medicaid, the Commercial insurance will be primary. For eligible members with dual **Commercial insurance** and Medicaid coverage, Summit Community Care maintains a *Commercial Insurance Bypass List** that identifies service codes for which no TPL information will be required.

* For a summary of services included on the Medicare and Commercial insurance TPL bypass lists, see below.

TPL submission requirements
When submitting claims for services **not** included on the TPL bypass list, Summit Community Care requires TPL verification. Providers may submit any of the following as verification of the primary insurance adjudication decision:

- *Certificate of Benefits* from the primary insurer
- Denial letter or *Explanation of Payment (EOP)* showing no payment from the primary insurer
- *EOP* showing payment to the provider from the primary insurer

Documentation of the primary insurance denial via the *Certificate of Benefits* or *EOP* with no payment **will satisfy the TPL requirements for one year from the date of the denial or letter**.

Methods for submitting required TPL documentation
For **new claims submissions**, providers may forward the required TPL documentation as follows:

- Submit a *Claim Correspondence Form*, a copy of your *EOP* and the supporting documentation to:
  Claim Correspondence
  Summit Community Care
  P.O. Box 62429
  Virginia Beach, VA 23466-2429
- Submit an electronic claim through the [Availity Portal](#) and use the medical attachments functionality to attach a copy of your *EOP* and the supporting documentation.

For information on using the medical attachments functionality via the Availity Portal, select **Find Help** under the *Help & Trainings* link on the top right-hand side of the Availity home page. Then search for *Medical Attachments* and select any of the available instructional materials.

Note: For new claims submissions, the following is an example: The provider receives a *Certificate of Denial* dated January 1, 2019. The provider can use that *Certificate of Denial* through December 31, 2019. The provider would select *Yes*, indicating primary insurance was billed using the denial date of January 1, 2019, and enter a $0.00 payment amount (for this example).

For **previously submitted claims or future claims that deny and require TPL verification**, providers may follow the Summit Community Care claims dispute process. Providers using the Availity Portal may check *Claims Status*, then select **Dispute** on claims that denied. This *Dispute* option allows a provider to immediately attach documentation related to the claims dispute.

Previous claims denied for TPL
Summit Community Care implemented the TPL bypass lists effective June 28, 2019. Summit Community Care will adjust all prior claims that previously denied for services included on the TPL bypass lists. These adjustments should be completed by August 23, 2019. If a provider discovers a previously denied claim that did not adjust correctly, the provider should follow the claims dispute process. The easiest method to submit a claims dispute is electronically via the Availity Portal.

Prior authorizations
Please note that Summit Community Care does not require an authorization when billed as the secondary payer. We will apply our authorization rules when Summit Community Care becomes the primary payer for the services billed.

If a participating provider does **not** participate in the federal Medicare program, Summit Community Care would be considered primary and any required prior authorizations apply.

Summary of services
The following services are included on both the Medicare and Commercial insurance bypass lists. Please note that Summit Community Care may retroactively review these services and requires providers to maintain TPL information.

Revenue code	Description
Intermediate care facility (ICF)	
0180	LOA hospital less than 85% occupancy/traditional style bed of ICF/IID
0183	Home/traditional style bed or ICF/IID
0185	LOA hospital 85% or greater occupancy/traditional style bed or ICF/IID
0189	LOA no pay — traditional style bed or ICF/IID
0194	ICF/IID
0658	Hospice room and board/traditional style bed or ICF/IID

Revenue code	Description
Personal care	
T1019 or with modifiers U3, U4, U5	
T1020 or with modifiers U1, U2, U3, U4, U5, U6, U7, U8, U0 and UA	
Adult developmental day treatment (ADDT)/early intervention day treatment (EIDT)	
T1015 U6, UA	Adult habilitative services
99367 U6, UC, or UA	Treatment plan development
T1015 U6, UB	Habilitative services — ages 0-6
T1015 U6, UC	Habilitative services in the summer — ages 6-21
Waiver services	
H2023	Supported employment
H2016, no modifier, or TF	Supportive living
S5151, no modifier, or TF	Respite services
T2020 UA	Supplemental support services
T2025	Consultation services
Behavioral health services	
H0019 HQ UC U4 and HQ U4	Therapeutic communities — level 1 and 2
H0038 UC U4 or U4	Peer support
H2011 U4, U5, Z2	Crisis stabilization intervention — Qualified behavioral health professional (QBHP)
H2014 UC U4 or U4	Family support partners
H2015 UC U4 or U1 U4	Child and youth support services — QBHP
H2017 HQ U4 U6 Z5 or HQ UC U4 Z5	Group life skills development — QBHP (ages 16-20 only)
H2017 U3 U4 or U4 U5	Adult life skills development — QBHP
H2017 UB U4 or UA U4	Adult rehabilitative day service — QBHP
H2017 UC U4 Z4 or U4 U6 Z4	Individual life skills development — QBHP (age 16-20 only)
H2019 U4 or U4 UC	Behavioral assistance — QBHP
H2023 U4	Supportive employment
H0043 U4	Supportive housing
H2027 U4 or U7	Psychoeducation
S0220 U4	Treatment plan