



APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision #	020
Chapter / Section	Third Party Liability
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Summary of Revision

Update information to identify the role Managed Care Organizations will play to ensure that any third party resource is exhausted before the cost of health care services is paid by Medicaid.

Apple Health (Medicaid) Manual revision via track changes:

Third Party Liability

Revised January 1, 2017

Purpose: This category applies to all individuals receiving medical assistance benefits. ~~The Agency re-captures approximately \$355 million in tax funds every year through the TPL program (not including Medicare).~~ Federal law requires that Apple Health be the payer of last resort for the cost of medical care.

Clarifying Information

When another party (a third party) has been identified as responsible for payment of a health care expense, Apple Health does not pay the health care claim until after the third party has paid. When Apple Health has paid a claim for a health care expense prior to third party payment, the Health Care Authority or Managed Care Organization is entitled

to collect third party benefits.

The limit of the recoupment from the settlement, judgment or awards of monies is the amount of the health care expense paid by the Health Care Authority or Managed Care Organization. The method of determining what portion of a settlement represents past medical expenses is left to the state, the parties, and/or the court. Refer all such questions or challenges to Health Care Authority, ~~the Coordination of Benefits (COB) section~~ at **800-562-3022, ext. 16134**.

Assignment of rights is effective for all periods of eligibility certification, including any retroactive period of eligibility.