

Other Injury (Liability) Accident (OI) Claims

Information in this policy does not apply to members with the Choice or Choice Plus products offered through Passport ConnectSM. For UnitedHealthcare's related policies/procedures, please go to www.UnitedHealthcareOnline.com or call 800-708-4414.

General Guidelines

All claims related to other injury (OI) liability accidents are coordinated with the liability insurance carrier, which could include the homeowner's insurance or business liability insurance, etc.

- Notification (via explanation code on the Explanation of Payment [EOP]) will be sent to the provider informing them that the claim is denied — this illness/injury covered by the liability carrier.
- To expedite payment, the provider should bill the liability carrier first, if known.
- When the liability carrier sends notice that the applicable liability benefits have been denied or exhausted, the provider should submit the denial or exhaust letter with the claim(s) to ensure prompt payment and avoid a filing limit denial.
- Members should not be billed or required to pay before OI-related services are rendered.

Required Information When Filing an OI Claim

To expedite payment, include the following information, if available, when filing an OI claim:

- Accident claim number.
- Date of accident.
- Name and address of liability insurance carrier.
- Notice from the liability carrier stating that the benefit has been denied or exhausted.
- A copy of the EOP from the primary carrier must be submitted with every claim along with denial or exhaust letter, if Harvard Pilgrim is the secondary carrier.

OI Claim-Filing Limit

If a claim is submitted beyond the Harvard Pilgrim standard 90-day filing limit, it must be received within 90 days of the date posted on the liability insurer's notification that benefits have been denied or exhausted. (See exceptions below).

Claims will be denied if they are submitted beyond the 90-day filing limit and received:

- Beyond 90 days from the date on the liability insurer's notification that benefits have been denied or exhausted.
- With no date on the liability insurer's notification.
- With no notification from the liability insurer that benefits have been denied or exhausted with the claim.

Connecticut Retroactive Denial

In Connecticut, when coordinating benefits with a primary insurance carrier, the filing limit for claims submission to Harvard Pilgrim is 365 days from the date of the cancellation, denial, or partial payment by the primary insurer to resubmit a claim to Harvard Pilgrim as a secondary carrier. (This only applies when Harvard Pilgrim is the secondary carrier.)

New Hampshire Retroactive Denial

In New Hampshire, when coordinating benefits with a retroactively terminated policy, the filing limit for claims submission to Harvard Pilgrim is *180 days* from the date that the primary insurer retroactively denied a previously paid claim. The date is indicated on the insurer's Explanation of Benefits (EOB). (This only applies when Harvard Pilgrim is the secondary carrier and the primary carrier has retroactively terminated the policy. This does not apply if the primary carrier terminated under normal circumstances.)

Maine Suspension of Filing Deadlines

In Maine, when coordinating benefits with a primary insurance carrier, the filing limit for claim submission is 120 days from the date that the primary insurer processed the claim or retroactively denied a previously paid claim. The date is indicated on the insurer's Explanation of Benefits (EOB).

OI Addresses**Claims**

Send claims with appropriate documentation (i.e., liability insurer's exhaust, denial and/or breakdown) to the OI claims address:

Harvard Pilgrim Health Care
P. O. Box 699183
Quincy, MA 02269-9183

Correspondence

Send other *non-claim mail* that cannot be submitted with the claim due to electronic submissions (such as attorney letters, liability insurer's letters, certified mail receipt cards, etc.) to the OI correspondence address below. Include the member ID number and date of service that applies to the claim/member:

Harvard Pilgrim Health Care
P. O. Box 699187
Quincy, MA 02269-9187

Payment Policy

Harvard Pilgrim's policies and procedures related to referral, prior authorization and prior approval must be followed for Harvard Pilgrim to reimburse services as a secondary carrier.

- Claims are paid according to Harvard Pilgrim's payment policies and procedures.
- Non-covered benefits do not become covered benefits because of an accident.
- No balance bill can be submitted to Harvard Pilgrim or its members.

If Harvard Pilgrim pays or denies a claim and is later informed that it is related to an OI, an Insurance Liability Recovery (ILR) investigator will determine the primary payer and adjust the claim accordingly.

PUBLICATION HISTORY

07/01/04	original documentation
07/01/05	added ME retroactive denial information
07/31/07	clarified NH retroactive denial information
06/15/14	added CT retroactive denial information
03/15/17	reviewed document; administrative edits for clarity
10/01/21	annual review; no changes