Motor Vehicle Accident (MVA) Claims

Information in this policy does not apply to members with the Choice or Choice Plus products offered through Passport Connect℠. For UnitedHealthcare's related policies/procedures, please go to www.uhcprovider.com

General Guidelines

All claims, up to the appropriate auto benefit amount related to the motor vehicle accident (MVA), are coordinated with the auto insurance carrier, which includes Personal Injury Protection (PIP) and MedPay coverage.

- To expedite payment, the provider should bill the auto carrier first, if known.
- When the auto carrier sends notice that the applicable auto benefits have been exhausted, the provider should submit the PIP and/or MedPay exhaust letter with each claim form that is submitted to ensure prompt payment and avoid a filing limit denial.
- Members should not be billed or required to pay before MVA-related services are rendered.

State-Specific Guidelines

Massachusetts

The automobile insurance is primary until all benefits are exhausted up to $2,000 under Personal Injury Protection (PIP). MedPay is always secondary to and in excess of any health benefit or PIP plan. Medicaid members, Medicare members, and ERISA plans must exhaust their full $8,000 PIP benefit.

Maine

The automobile insurance is primary up to the MedPay benefits that are available under the member's automobile policy of insurance.

New Hampshire

If a person is injured in a motor vehicle accident in which medical payments coverage is available under a motor vehicle policy, the member has the right to submit a claim under either the medical payments coverage or member's health plan, or both. However, they are not entitled to duplicate payment for the same expense under the medical payments coverage and this plan.

Required Information When Filing an MVA Claim

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

- Accident claim number.
- Date of accident.
- Name and address of PIP/MedPay insurance carrier.
- Notice from the PIP/MedPay carrier stating that the benefit has been exhausted.
- A copy of the EOP from the primary carrier must be submitted with the claim and exhaust letters, if Harvard Pilgrim is the secondary health insurance carrier.

MVA Claim-Filing Limit

If a claim is submitted beyond Harvard Pilgrims standard 90-day filing limit, it must be received within 90 days of the date posted on the MVA insurer's notification that benefits have been exhausted.

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

- Beyond 90 days from the date on the MVA insurer's notification that benefits have been exhausted.
- With no date on the MVA insurer's notification.

- With no notification from the MVA insurer that benefits have been exhausted with the claim.

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 EOB.

New Hampshire Suspension of Filing Deadlines

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.)

MVA Addresses

Claims: Send claims with appropriate documentation (i.e., PIP exhaust, denial and/or breakdown) to the MVA claims address: Harvard Pilgrim Health Care, P. O. Box 699183, Quincy, MA 02269-9183

Correspondence: Send other non-claims mail that cannot be submitted with the claim due to electronic submissions (such as attorney letters, PIP letters, certified mail receipt cards, etc.) to the MVA 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 other insurance exists, once the responsible party is validated, an adjustment will be made to the claim accordingly.

PUBLICATION HISTORY

09/15/00	original documentation
01/01/02	filing limit changed to 90 days
07/01/03	added NH retroactive denial information
07/01/05	added ME retroactive denial information
07/31/07	clarified general guidelines and NH retroactive denial information
03/15/14	added CT retroactive denial information
06/15/14	added CT MVA information
03/15/17	reviewed document; administrative edits for clarity
10/01/21	annual review; no changes
01/01/23	reviewed; no changes
01/01/24	removed references to CT
11/01/26	updated Payment Policy section with current business process