



Message to Providers Regarding Grace Periods and the Possibility of Denied Claims

The Affordable Care Act requires a 90-day Grace Period for individual Members who receive Advanced Premium Tax Credits (APTC) from the government to pay a portion of their monthly premium. Community Health Options will take the following steps, in accordance with the law:

- Community Health Options will process claims for services received during the first 30-days of the Member's Grace Period.
- Claims received for services after the first 30-days of the Grace Period will be pended, until the full premium is received from the Member.
- If, after 90 days, the Member's premium is not received, the Member's policy will be terminated effective the 31st day of the Grace Period. Claims for services received on or after day 31 will be denied. The Member will be responsible for payment of services received during this period.

Grace Period Notification

Providers can check a Member's Grace Period status by calling Community Health Options at 1-855-624-6463. You may also contact Community Health Options' Provider Relations department at (207) 402-3347 or provider@healthoptions.org.

Providers will receive Explanation of Payments (EOP) with remark codes that reflect the claim is pended for Members in the second and third month of the Grace Period at the date of service.

- If the Member makes full payment prior to the expiration of the 90-day Grace Period, the claim will be reprocessed in accordance with the Member's policy. A new EOP will be sent to the Provider reflecting the processed claim.
- If the Member fails to make full payment prior to the expiration of the 90-day Grace Period, the claim will be denied. A new EOP will be sent to the Provider reflecting the denied claim based on Member's eligibility.

Prior Approvals

Prior Approvals are reviewed based on *Medical Necessity*. Community Health Options may verify if the Member is in the second or third month of the Grace Period for a Provider at the time of processing the Prior Approval. Grace Period status does not affect the Prior Approval. Prior Approvals are not a guarantee of payment or a Member's eligibility.

Providers are responsible for checking the Member's eligibility on the date of service.