

Other Source Code and Other Source Amount

“Third party liability (TPL)” means the payment obligations of the Third Party Payer (TPP) for health care services rendered to eligible Medicaid consumers when the consumer also has third party benefits.

- “Third party benefit” means any health care service(s) available to consumers through any medical insurance policy or through some other resource that covers medical benefits.
- The provider must always review the consumer’s Ohio Medicaid card for evidence of third party benefits. Whether there is or is not an indication of a TPP on the Medicaid card, the provider must always request from the consumer or his or her representative information about any third party benefit(s).
- Once per calendar year, prepare an invoice to be submitted to the TPP, and keep a copy of your letter, as well as any reply, in case of an audit.

Reporting TPL

Submit claims as you normally would; however, put an ‘S’ in the other source code. This indicates to MITS that you are aware of the TPL, but are not going to be paid through it.

Patient Liability is “the individuals financial obligation toward the Medicaid cost of care”.

- Patient Liability is determined by the county department of job and family services for the county in which the individual resides.
- The county board shall notify each individual and HCBS waiver service provider, in writing, if there is patient liability that needs to be reported.
- Upon submission of a claim for payment, the designated HCBS waiver service provider shall report the HCBS waiver service to which the patient liability was assigned and the applicable patient liability amount on the claim for payment using the format prescribed by the department.
- The county board will advise you as to how to collect the PL.

Reporting PL

EXAMPLE - The client has a \$200.00 per month PL. You start providing services on the 11th. You would normally bill for 32 units of Homemaker/Personal Care-1 staff (APC) at \$4.11 per unit for every day you worked. You would submit your billing as follows:

Day of Service	Service Code	Units of Service	UCR	Other source Code	Other source Amount
11	APC	32	4.11	1	131.52
12	APC	32	4.11	1	68.48
13	APC	32	4.11		

The MBS system will automatically pay you the difference. In this case, on the second day [the 12th] you will be paid \$63.04, which is what you billed for minus the \$68.48 that you entered as PL. The \$200.00 PL has been satisfied for the month.