

PIP Reimbursements Statutory Update November 2019

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No-Fault Electronic Billing New for 2019

No-Fault Electronic Billing New for 2019

N.J.S.A. 39:6A-5.4

Submission and acceptance of electronic bills for payment

- a. All healthcare providers or their billing representative shall submit electronic bills for payment which shall be completed on standardized forms following the guidelines established pursuant to this act.
- b. Insurance carriers, medical management companies, or their third-party administrators shall accept electronic bills and shall comply with the guidelines.
- c. Confidentiality of medical information submitted on electronic bills for payment of medical services pursuant to this act shall be maintained.
- d. Insurance carriers or their third-party administrators shall acknowledge receipt of a complete electronic medical bill to the party that sent the complete electronic medical bill in compliance with the guidelines.
- e. Payment for a complete electronic medical bill deemed compensable by the insurance carrier shall be made in accordance with subsection g. of section 5 of P.L.1972, c. 70 (C.39:6A-5), provided, however, that insurance carriers or their third party administrators may establish shorter payment deadlines through contracts or agreements with health care providers or their billing representatives in a non-prescribed format or timeline.

No-Fault Electronic Billing New for 2019

39:6A-5.3. Definitions relating to electronic bill transmission **Currentness**

As used in this act:

“Complete electronic medical bill” means a medical bill that meets all of the following criteria: (1) it is submitted in the correct uniform billing format, with the correct uniform billing code sets, transmitted in compliance with the guidelines; (2) the bill and electronic attachments provide all information required under the guidelines established by this act; and (3) the health care provider or its billing representative has provided all information that the insurance carrier or its third party administrator requested.

“Electronic bill” means a communication between computerized data exchange systems that complies with the guidelines enumerated; or a mutually agreed upon electronic data exchange plan established between health care providers or their billing representatives and insurance companies or their third party administrators.

“Guidelines” means the current version of the ASC X12 005010 format.

“Insurance carrier” means any company underwriting personal injury protection coverage benefits payable under a standard automobile insurance policy pursuant to section 4 of P.L.1972, c. 70 (C.34:6A-4); a basic automobile insurance policy pursuant to section 4 of P.L.1998, c. 21 (C.39:6A-3.1); or emergency care medical expense benefits payable under a special automobile insurance policy pursuant to section 45 of P.L.2003, c. 89 (C.39:6A-3.3), and shall include any managed care organization associated with the carrier.

No-Fault Electronic Billing New for 2019

39:6A-5.5. Inapplicability of act to certain providers **Currentness**

This act shall not apply to any provider that:

- a. submits less than 25 medical bills per month to insurance carriers or third-party administrators;
- b. furnishes services only outside of the United States;
- c. experiences a disruption in electricity and communication connections that are beyond its control; or
- d. demonstrates that a specific and unusual circumstance exists that precludes submission of electronic bills.

E-Billing Issues

- Impact of e-billing?
- Who is requiring it?
- What should I be doing?
- What forms do I need?
- What about clearinghouses?

PIP Provider re:
Lien Reimbursements
New for 2019

PIP Provider re: Lien Reimbursements New for 2019

N.J.S.A. 39:6A-4.6

is amended to read as follows:

10. a. The Commissioner of Banking and Insurance shall, within 90 days after the effective date of P.L.1990, c.8 (C.17:33B-1 et al.), promulgate medical fee schedules on a regional basis for the reimbursement of health care providers providing services or equipment for medical expense benefits for which payment is to be made by an automobile insurer under personal injury protection coverage pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.), [or] by an insurer under medical expense benefits coverage pursuant to section 2 of P.L.1991, c.154 (C.17:28-1.6), or for payment of unreimbursed medical expenses that are admissible as uncompensated economic loss pursuant to section 12 of P.L. 1972, c. 70 (C39:6A-12).

c. No health care provider may demand or request any payment from any person in excess of those permitted by the medical fee schedules established pursuant to this section, nor shall any person be liable to any health care provider for any amount of money which results from the charging of fees in excess of those permitted by the medical fee schedules established pursuant to this section. This subsection shall apply to unreimbursed medical expenses that are subject to the medical fee schedules and admissible as uncompensated economic loss pursuant to section 12 of P.L.1972, c.70 (C.39:6A-12).

N.J.S.A.39:6A-12 is amended to read as follows:

Nothing in this section shall be construed to limit the right of recovery, against the tortfeasor, of uncompensated economic loss as defined by subsection k. of section 2 of P.L.1972, c.70 (C.39:6A-2), including all unreimbursed medical expenses not covered by the personal injury protection limits applicable to the injured party and sustained by the injured party, including the value of any deductibles and copayments incurred through a driver's secondary insurance coverage and medical liens asserted by a health insurance company related to the treatment of injuries sustained in the accident. Medical expenses shall be subject to the current automobile medical fee schedules established pursuant to section 10 of P.L.1988, c.119 (C.39:6A-4.6). In any case in which the recovery is for medical expenses only, a prevailing claimant shall be entitled to reasonable and necessary attorneys' fees incurred by the prevailing claimant in the collection of such medical expenses.

Lien Reimbursement Issues

- How are providers impacted?
- What steps do I take?
- How do I protect my fees?
- What do I need to provide patient's counsel?
- How do I get paid?
- What happens if I do not get paid?

Questions?