

March 8, 2023

Protect HPSM Members From Being Sent to Collections

Dear providers,

This is a courtesy reminder that balance billing of the Health Plan of San Mateo (HPSM) members is strictly prohibited. **This effort is in response to members being sent to collections for medical bills that they should not have been sent in the first place.**

Review the balance billing policy in your contract with HPSM or in the Provider Manual here:

<https://www.hpsm.org/provider/resources/manual/claims#a14>

It is up to the contracted provider to ensure their staff also know that this practice is prohibited by state and federal law. “Balance billing” entails charging HPSM members for the remainder of a bill that HPSM does not cover and is strictly prohibited for all contracted HPSM providers.

Balance billing requirements, in brief:

- Medi-Cal beneficiaries should not pay for physician visits and other medical care when they receive covered services from a provider. This means beneficiaries cannot be charged for co-pays, co-insurance, or deductibles.
- HPSM payment constitutes payment in full, per your contract with HPSM.
- Any surcharge for covered services is specifically prohibited for Medi-Cal members, in accordance with California Code of Regulations (CCR) Title 22.
- As a contracted provider, you agree to not take action against a member to collect sums that are owed by HPSM to a provider under the terms of the contract agreement.
- Violation of billing practices may lead to enforcement actions, including sanctions.

Please direct questions to HPSM Provider Services at PSInquiries@hpsm.org.

Thank you for your continued commitment to our community,
The Health Plan of San Mateo