



Reminder: Medicaid Members Cannot Be Balance Billed

Parkland Community Health Plan (PCHP) is issuing this reminder to ensure all contracted providers remain compliant with Texas Medicaid, including STAR and CHIP program requirements. Providers are prohibited from balance billing Medicaid and CHIP members for any covered services.

Note: CHIP members may still be responsible for applicable copayments, coinsurance, and deductibles.

What Is Balance Billing?

Balance billing is the practice in which providers bill Medicaid and CHIP eligible members for covered services. A member cannot be billed for charges beyond reimbursement paid under Texas Medicaid for covered services.

Provider Responsibility:

- Verify eligibility before every service.
- Member eligibility can be confirmed directly through the PCHP Provider Portal.

Reminders:

- Medicaid and CHIP members must never receive a balance bill for covered services.
 - Exception: Providers may bill a member only if:
 - The service is non-covered and
 - The member signs a written agreement prior to service delivery.
- If a provider has inadvertently balance billed a Medicaid or CHIP member, the provider must:
 - Immediately stop all billing and collection processes
 - Correct any resulting credit reporting issues
- Providers must accept the health plan's payment as payment in full for covered services.
- Providers cannot require down payments for Medicaid allowable services.
- A written waiver must be obtained before providing non-covered services.

Additional Information

For more information regarding billing STAR and CHIP members, please visit the Texas Medicaid & Healthcare Partnership (TMHP) website at www.tmhp.com/HTMLmanuals/TMPPM.

Questions:

For assistance regarding PCHP Medicaid members or billing requirements, please contact:

PCHP Provider Services

STAR: 1-888-672-2277

CHIP: 1-888-814-2352

PCHP.ProviderRelations@phhs.org