



**The State of New Hampshire
Insurance Department**

21 South Fruit Street, Suite 14
Concord, NH 03301

**Roger A. Seigny
Commissioner**


**Alexander K. Feldvebel
Deputy Commissioner**

**GUIDANCE TO
BULLETIN**

**Regarding Ins 1904
Group Coordination of Benefits
dated March 9, 2004
Docket No.: INS NO. 03-051-AB**

DATE: December 20, 2005

TO: All Licensed Health and Private Passenger Automobile Insurance Carriers

FROM: Roger A. Seigny, Commissioner 

RE: Ins 1904 Group Coordination of Benefits

Pursuant to a March 9, 2004 bulletin (Docket No.: Ins No. 03-051-AB), the Department undertook a new rulemaking proceeding on Ins 1904 Group Coordination of Benefits. Ins 1904 was adopted by the Department on July 29, 2005 and became effective on August 1, 2005. Ins 1904 may be found on the Department's website at www.nh.gov/insurance. This memorandum is intended to provide additional interpretive guidance.

Coordinating the payment of medical services under automobile insurance MedPay coverage with accident and health insurance has been a difficult issue for a number of years. Ins 1904 reflects the Department's position that the MedPay benefit in an automobile insurance policy is not a "plan" and, therefore, is not necessarily primary in relation to group health coverage available to the insured. A beneficiary under an automobile policy and an accident and health policy has the option to choose which policy should pay the claim in the first instance. Once such election has been made and the claim has been paid no further claims for the same service may be submitted for reimbursement to the other carrier. Ins 1904 does not, however, preclude a policyholder or beneficiary from seeking reimbursement under MedPay coverage for actual incurred expenses such as a co-pay or a deductible, that are not reimbursed by the accident and health carrier.

Thus, if a beneficiary chooses to submit a claim for medical services under MedPay coverage, a claim for those same services cannot legally be submitted to the accident and health carrier. Similarly, if a beneficiary elects to submit the claim in the first instance to an accident and health carrier and that carrier pays the provider at the discounted rate, no further claim may be submitted under MedPay coverage, including, but not limited to a claim for the difference between the discounted rate paid by the accident and health carrier and the charge rate billed by the provider.

Under Ins 1904, accident and health carriers may not attempt to collect medical expense monies collected under MedPay by policyholders and beneficiaries. Similarly, policyholders or beneficiaries may not submit claims to an automobile insurer for reimbursement under MedPay coverage that an accident and health carrier has already paid. This includes contractual allowances resulting from a payment by an accident and health carrier at an amount less than the billed charge. Any duplicate or redundant claims for reimbursement made and paid to a policyholder or beneficiary by either an accident and health carrier or under MedPay coverage by an automobile insurer shall be returned to the carrier that paid the duplicate or previously adjudicated claim. Similarly, a provider that submits a claim under MedPay coverage to an automobile insurer or to an accident and health carrier shall not resubmit that claim to a different carrier once that claim has been adjudicated.