BULLETIN

Docket No.: INS NO.09-064-AB

DATE: October 23, 2009

TO: All Licensed Health and Private Passenger Automobile Insurance Carriers

FROM: Roger Sevigny

RE: Chapter 264, Accidents and Financial Responsibility – Motor Vehicles
Section 264:16 Medical Payments

The Department reminds all Health Insurance Carriers and Private Passenger Automobile Insurance Carriers that the Legislature has made clear in RSA 264:16, Medical Payments, that:

- A health carrier, as defined in RSA 420-G:2, VIII, shall not coordinate benefits against medical payments coverage;
- Medical payments coverage shall not be assignable to any health care provider;
- The insured shall have the exclusive right to submit a claim for medical expenses under either medical payments coverage or a health insurance policy or both, as the insured elects; provided, however, an insured shall not be entitled to duplicate payment from medical payments coverage and a health insurance policy for the same medical expense.

At recent hearings on a bill first considered during the 2009 Session related to medical payments coverage, it was reported that some health care providers have continued to collect information about a patient’s medical payments coverage under a private passenger automobile policy, and attempt to directly bill the automobile insurer providing medical payments coverage for some or all of their costs, in violation of RSA 264:16. Payment by an automobile insurer directly to a provider is a violation of RSA 264:16, III as medical payments coverage is not assignable by the insured.

Automobile insurers shall not pay health care providers directly for any bill from a health care provider presented under medical payments coverage. The insured must submit the claim to the automobile insurer, and the automobile insurer must send payment directly to the insured. Automobile insurers that pay medical payments benefits directly to a health care provider are in violation of RSA 264:16, III and are subject to enforcement action by the Department.