

TPL CHANGES AND UPDATES

RECENT UPDATES AND NOTICES REGARDING SUBMISSION OF
INSURANCE INFORMATION TO TPL.

LHD SHAREPOINT SITE

CSHCS INFO #13-2019 - TPL INFO

Insurance companies who currently report coverage directly to TPL


BCN	Physician's Health Plan
BCBSM	Medimpact
McLaren	Express Scripts
Priority Health	OptumRX
Administration Systems Research	Delta Dental


ADDITIONAL REPORTING ISSUES IDENTIFIED BY TPL

Online requests to Add, Terminate, or Change Other insurance for clients.

- Always verify on CHAMPS that insurance hasn't already been updated or added.
- Please include your email address in the [Requestor Information](#) section.

Requestor Information

 Reset Requestor Information

Remember Me 


First Name *

Requestor First Name

Last Name *

Requestor Last Name

Organization Type *

Select a Organization Type 

Organization Name

Requestor Organization Name

Phone Number *

Requestor Phone Number



Email Address

Requestor Email Address

- Include all information requested. TPL may need to contact you.

Member Information

Member #1

 Reset Member #1

First Name*

Beneficiary/Client First Name

Last Name*

Beneficiary/Client Last Name

Date of Birth*

mm/dd/yyyy




MiHealth ID*

Beneficiary/Client MiHealth ID Number, Format: Up to a 10 digit number

Case Number


Beneficiary/Client Case Number

 Add Another Member



Policy Information

Policy #1

 Reset Policy #1

Request Type *

Select a Request Type 

Check all policy types that apply *

- Medical**
- Pharmacy**
- Dental**
- Vision**
- Mental Health**
- Long-Term Care**
- MEDICARE**

Insurance Company Name *

Insurance Company Name

Policy Number

Policy Number/Contract Number 

Group Number

Group Number

First Name

Policy Holder First Name 

Last Name

Policy Holder Last Name 

Date of Birth


mm/dd/yyyy 

Social Security Number

Policy Holder Social Security Number, Format: 9 digit number

Employer Name

Policy Holder Employer Name

 Add Another Policy



Attach Document(s)

Please attach necessary documents relating to this particular request only. Unrelated attachments will not be reviewed. Relevant documents could include insurance card copies, letters on insurance company letterhead, and/or court documents. No documentation is required, 5 maximum.

Browse

Select 'Browse' to pick a file from your computer to upload,
or drag files here to upload them.
Accepted file types: .pdf, .png, .doc, .docx, .tiff, .tif, .jpeg, .jpg, .bmp



Additional Information

Comments

This request is in response to a Claim Void Letter

Submit

NEW STEPS TO AID TPL ACCURACY AND FACILITATE CLAIM PAYMENT

CURRENT PROCEDURE

FOR NEW ENROLLEES

- CSHCS ANALYST COMPLETES ENROLLMENT
- CSHCS ANALYST PREPARES AND SENDS NOTIFICATION TO TPL
- ANALYST RECEIVES AN AUTOMATIC MESSAGE WITH A CONFIRMATION NUMBER.

FOR EXISTING CLIENTS

- LOCAL HEALTH DEPARTMENT STAFF COMMUNICATES WITH FAMILY
 - ANNUAL REVIEW, ONGOING CASE MANAGEMENT, ETC
- LOCAL HEALTH DEPARTMENT COMPLETES THE TPL REQUEST FORM TO COMMUNICATE ANY CHANGES OR ADDITIONS TO THE CLIENT'S PRIVATE INSURANCE COVERAGE
- NOTE THE OPTION WITH THE ONLINE FORM TO ATTACH ANY COPIES. CARD COPIES CAN BE INCLUDED, BUT THIS DOES NOT MEAN YOU CAN SKIP ENTERING THE INFORMATION ON THE FORM

CURRENT PROCEDURE - TPL CONFIRMATION

Thank you

Thank you for contacting the Michigan Department of Health and Human Services (MDHHS) Third Party Liability (TPL) Division

THIS NUMBER IS IMPORTANT!

Your confirmation number is 171163. Please retain this confirmation number for your records.

If you provided an e-mail, you will receive a notification with the confirmation number providing you with the status of your request. Because the majority of requests require research, please allow up to 10 business days for the request to be completed.

Please do not contact the Provider Support Hotline or Beneficiary Helpline as the status of your request will only be provided through e-mail.

[+ Add Another Request](#)

[Print PDF Summary](#)

You can print a paper copy of what you submitted.

CURRENT PROCEDURE - TPL CONFIRMATION

INCLUDING **YOUR** EMAIL ADDRESS WILL ALSO TRIGGER AN AUTOMATIC EMAIL CONFIRMATION

- THE SAME CONFIRMATION NUMBER WILL BE IN THE EMAIL
- **NOTE THERE IS NO PHI INCLUDED IN THE SUBMISSION OR EMAIL CONFIRMATIONS**

- **IT'S ADVISABLE TO KEEP A SEPARATE RECORD OF THE CONFIRMATION NUMBER AND THE CLIENT IT IS FOR.** *(more to come on that)*

Procedural Changes needed

ADDITIONAL ACTION REQUIRED FROM LHD'S FOR NEW CSHCS ENROLLEES

- LHD'S MAKE A WELCOME CONTACT WITH FAMILIES OF ALL NEW ENROLLEES
 - THIS CONTACT PROVIDES OPPORTUNITY TO OBTAIN COMPLETE AND ACCURATE PRIVATE INSURANCE INFORMATION
 - LHD STAFF WILL NEED TO SUBMIT PRIVATE INSURANCE INFO TO TPL FOR ALL NEW ENROLLEES.

- **NOTE THERE IS NO PHI INCLUDED IN THE SUBMISSION OR EMAIL CONFIRMATIONS**

- **IT'S ADVISABLE TO KEEP A SEPARATE RECORD OF THE CONFIRMATION NUMBER AND THE CLIENT IT IS FOR.** *(more to come on that)*