

Submitting Claims to CMH When There is Other Third-party Coverage

- CMH providers are obligated to bill for all benefits available from other third parties (Ohio Administrative Code, Section 3701-43-09 (E)).
- CMH providers cannot charge families for services authorized by CMH (Ohio Revised Code, Section 3701.023 (C)). This means providers cannot bill families for balances on charges for services after CMH or a third party has paid an amount equal to the BCMH scheduled fee. Also, providers must not charge CMH families co-payments or deductibles for services authorized by CMH.
- Providers must reimburse CMH when they receive duplicate payments from CMH and a third party. The amount reimbursed must equal the CMH payment unless the third-party payment was less than the CMH payment. If the third-party payment was less, the reimbursement should equal the amount of the third-party payment. If CMH discovers that the child had Medicaid at the time services were rendered, the provider must reimburse CMH the full amount that was paid by CMH.

Reimbursement must be mailed to:

Ohio Department of Health
Revenue Processing Unit
P.O. Box 15278
Columbus, OH 43215

Checks are to be made payable to "Treasurer State of Ohio." Please include the child's name and case number on the reimbursement check.