



A Guide for Understanding APTC Grace Periods

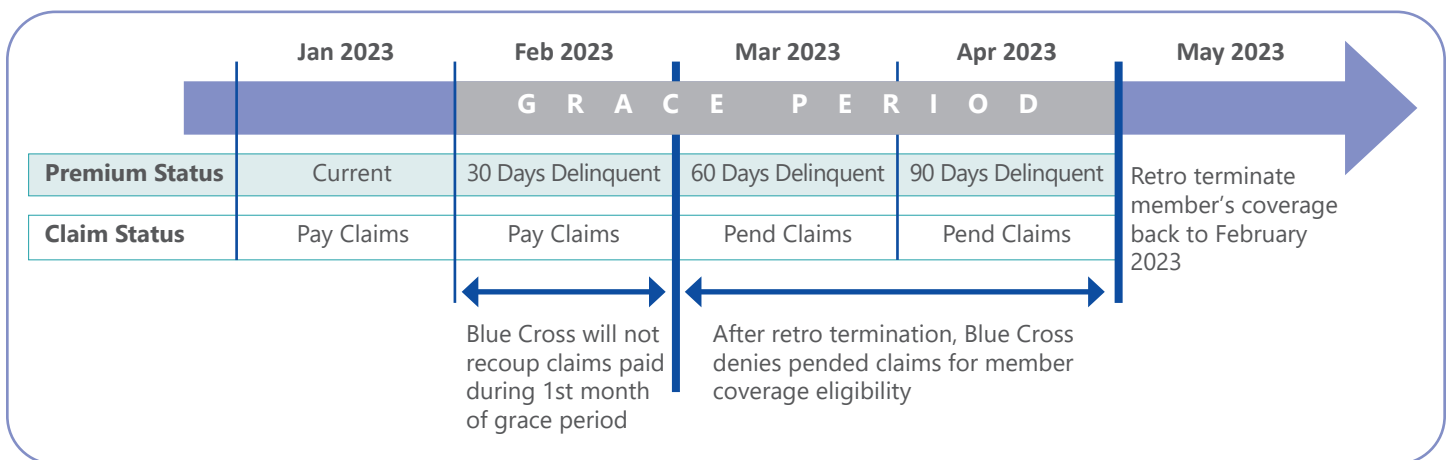
The Affordable Care Act (ACA) allows eligible customers to receive an advanced premium tax credit (APTC) to help with premium costs. To be eligible for the APTC subsidy, Louisianans must not have access to other types of coverage (from an employer, Medicare or Medicaid) and must apply for it, which is done through the health care “Marketplace” (also called “the exchange”). Open enrollment occurs each year for individuals, families and small businesses.

One feature of the APTC is that customers are given a three-month premium payment grace period to help when they have delinquent premium payments. This feature is a standard ACA requirement, regardless of the customer’s health care carrier.

After the three-month period of not paying the premium, the APTC member’s policy will terminate, effective to the 30-day delinquent date. Claims paid during the first month of delinquency will remain paid. Claims pending for months two and three will be denied for eligibility.

Once claims are denied for services rendered during the second and third months of the grace period, the provider may then seek reimbursement directly from the member up to the billed charge amount(s). If you have already collected the allowed amount(s) from the member, you may then collect the amounts still owed to you up to your billed charges.

Sample Grace Period Scenario

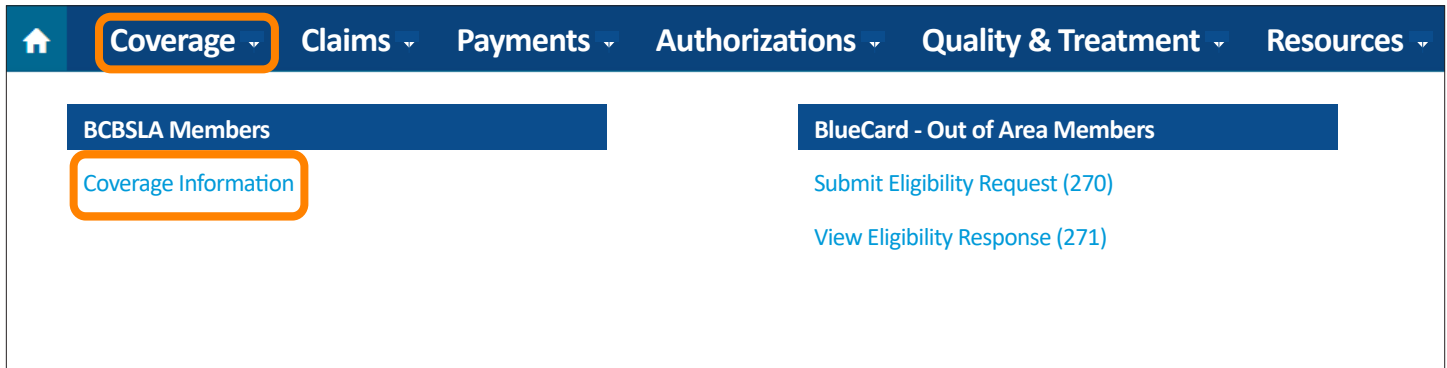


Providers can research APTC premium status information for Blue Cross and Blue Shield of Louisiana members in iLinkBlue (www.bcbsla.com/ilinkblue) or by electronic inquires submitted to the Blue Cross Clearinghouse. The ensuing pages of this tidbit have instructions for researching any APTC grace periods a member may have.

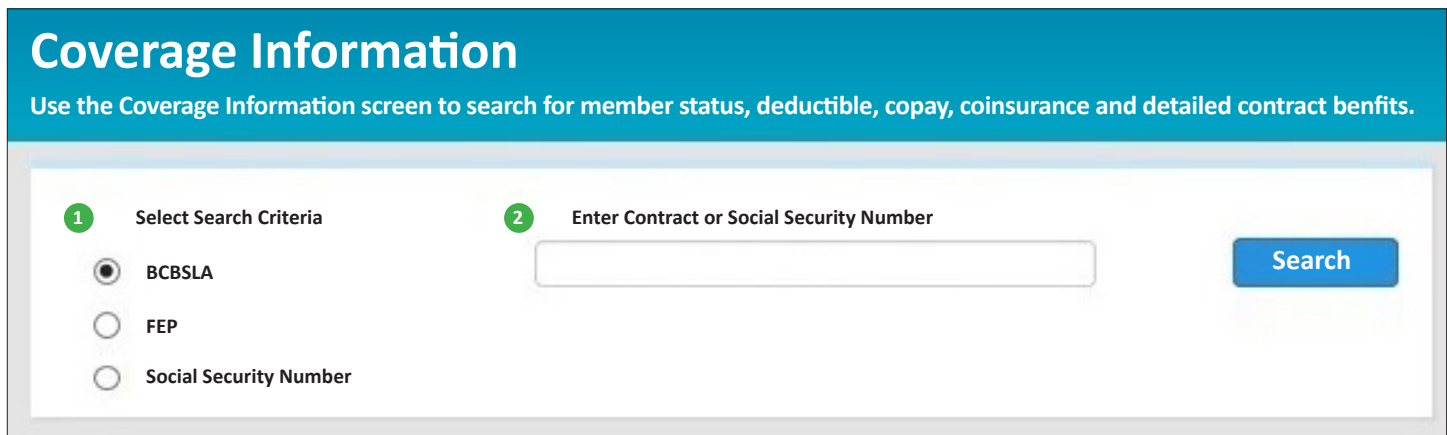
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1. Research an APTC Member's Coverage Status in iLinkBlue

Under the [Coverage](#) menu option in iLinkBlue, select the [Coverage Information](#) link for BCBSLA Members.



Enter the BCBSLA member's contract number, which is the member ID number, then press "Search." If you do not have the member ID number, you may also search using the subscriber's Social Security number.



The search results will display one of the following contract statuses when the member has an active APTC:

Active Coverage

— means the APTC member is NOT delinquent OR within the first month of being delinquent on their premium payment.

Active Pending Premium Payment

— means the APTC member is within the second or third months of being delinquent on their premium payments.

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When the **Coverage Information** search results indicate the “Active Pending Premium Payment” status, it will include the APTC member’s grace period begin and end dates, the **APTC Extended Grace Period Notice** link and the **APTC Grace Period Guide** link.

Coverage Information

Use the Coverage Information screen to search for member status, deductible, copay, coinsurance and detailed contract benefits.

BCBSLA

Enter BCBSLA contract number...

Search

Contract Number XUA123456789

Group/Non-Group	Group Name	Group Number	Group OED	Minor Dep. Age Max
Group Policy	TEST GROUP	123456789-0000	02/01/2000	26

Coverage Category	Coverage Type	Effective From	Effective To
Medical	Family	01/01/2023	---

ACTIVE PENDING PREMIUM PAYMENT

Grace Period Begin Date
01/01/2023

Grace Period End Date
03/31/2023

[APTC Extended Grace Period Notice](#)

[APTC Grace Period Guide](#)

John Doe Subscriber

Address	123 STREET ST. CITY, LA 70000	Sex	Male
		Marriage Status	Married
		Date of Birth	11/30/1900

Coverage	Effective Date	Cancel Date	Original Effective Date	ID Card	Coverage Views	Coordination of Benefits
Medical	01/01/2023	---	02/01/2000	ID Card	Summary Benefits	No COB on File

APTC Extended Grace Period Notice

This is a printable PDF of the member’s premium status notice. **The notice is generated in real time based on the member’s current premium status** and is only available when the policy premium status is delinquent.

Print a copy of the notice for your records. The notice is not stored in iLinkBlue and is subject to change based on the member’s policy premium status. This notice is not available if the APTC member’s status returns to “Active Coverage.”

The top of each report includes an APTC Extended Period Notice number. It identifies the following:

APTC Extended Period Notice Number Example

1234567890101202312345

- The member ID number
- The first day of the grace-period
- The provider’s 5-digit iLinkBlue identifier

Example Notice:

February 17, 2023

APTC Extended Grace Period Notice - 1234567890101202312345

Subscriber Name: John Doe
Subscriber Date of Birth: 11/30/1900
Contract Number: XUA123456789
Issuer Name: Blue Cross and Blue Shield of Louisiana
Health Plan ID: 123456789

Qualified Health Plan Name: HMOLA POS Copay 80/60 \$1000
Grace Period Begin Date: 01/01/2023
Grace Period End Date: 03/31/2023
Covered Dependents: Dependent Name Dependent DOB

The subscriber referenced above purchased one of our plans through the Marketplace and currently receives an advanced premium tax credit, or APTC, which are federal funds to help with his or her health plan premiums. Members who receive these tax credits are entitled by law to a three-month grace period during which they must pay their outstanding premiums. **We must inform you that the subscriber (and dependents, as applicable) is currently in the second month of this three-month grace period.**

What is the three-month premium grace period?
 Under the Affordable Care Act (ACA), individuals who buy health insurance through the Marketplace and receive this tax credit (also called a subsidy) will have a three-month grace period to pay their outstanding premiums.

According to the ACA law, we may not disenroll members for non-payment of premiums during this grace period. Claims incurred during the first month of this grace period are paid, but claims incurred during the second and third months of the grace period must pend until the members pay their premiums, as applicable.

What this means to you:

- **Claims which were paid in the first month:**
 If a claim was incurred during the first month of the member’s grace period and we processed and paid this claim, then we will not take this payment back at the end of the grace period.

APTC Grace Period Guide

The APTC Grace Period Guide is a printable PDF of this provider tidbit.

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On the Coverage Information screen is the **Summary** button, which allows you to view the member's **Medical Benefits Summary** (a detailed health benefit summary that includes deductible and out-of-pocket amounts) and coordination of benefits (COB). This screen also indicates the APTC status if the member is in a grace period.

The screenshot shows the 'Coverage Information' screen for contract XUA123456789. It displays details for 'John Doe', a subscriber, including his address, sex, and marriage status. A 'Summary' button is highlighted in an orange box. To the right, the 'Medical Benefits Summary' screen is shown, featuring a table of copays for various services.

Contract Number	XUA123456789	Copays	
		EPO Copays	OBPC Copays
Office Visit	\$30.00	---	\$15.00
Office Visit Specialist	\$45.00	---	---
Outpatient Surgical	\$500.00	---	---
Emergency Room	\$100.00	---	---
Inpatient Hospital (In-network)	\$500.00	---	---
Inpatient Hospital Maximum	\$1,300.00	---	---
Inpatient Hospital (Out-of-network)	---	---	---
Outpatient X-ray & Lab	---	---	---
Outpatient Physical Therapy	\$30.00	---	---
Outpatient Speech Therapy	\$30.00	---	---
Cardiac Rehab	\$30.00	---	---
Vision Services	\$30.00	---	---
Outpatient Professional	---	---	---

2. Research an APTC Member's Claims in iLinkBlue

Under the **Claims** menu option in iLinkBlue, select **Claims Status Search** to research claims based on either the member policy type or by claim number. iLinkBlue includes an option in the **Pended** claims search category for claims pended specifically for the "APTC Grace Period."

The screenshot shows the 'Claims Status' search interface. The 'Claims' menu is highlighted in an orange box. Under the 'Pended' tab, the 'Claim Number' sub-tab is selected. Step 1 shows a provider selection dropdown. Step 2 shows radio buttons for 'BCBSLA / FEP', 'BlueCard - Out of Area', 'APTC Grace Period' (highlighted in an orange box), and 'All'. Step 3 shows date selection for 'Date of Service' with 'From' and 'To' fields. A 'Search' button is at the bottom right.

Select the "APTC Grace Period" category then click the **Search** button. This will bring you to the **Pended Claims Result** screen to view all of the provider's pended claims for members in their APTC grace period.

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From the **Pended Claims Results** screen, click on the Pended Error Code **SL16** link to open a descriptive of the member's premium status.



Pended Claims Results							
Showing 10 records		Filter:					
Claim Number	Patient Account Number	Date of Service	Patient Name	Amount Charged	CPT/HCPCS Code	Pended Error Code	Action Request
14572368900-1	H400000001234567	04/11/2023	John Doe	\$513.00	29581PO	SL16	
18976543200-1	H400000007654321	04/11/2023	Peggy Public	\$544.38	11900PO	SL16	
16789854100-1	H400000003216547	04/07/2023	Jane Smith	\$167.00	99211	SL16	



When the pended error code is related to the member's grace period, the description will be a link that opens a PDF of the member's APTC Extended Grace Period Notice (same notice mentioned on Page 3 of this guide).

Pended Error Code Detail	
Code	Description
SL16	Claim pending premium due to APTC member extended grace period

Note: The Blue Cross reason code SL16 description will vary for APTC and non-APTC members. The SL16 message will state "Pending an update from the group/member," when the pended status is NOT related to the APTC grace period.

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3. Research an APTC Member's Coverage Status Through Electronic Transactions (27x)

To inquire about eligibility and benefits electronically, submit a [270 Eligibility Benefit Inquiry](#). For APTC members with a policy that is pending for premium payment, the [271 Response](#) will include the following:

premium paid to date end - (found on loop 2100C/D DTP) - This is the last day of coverage for which a premium payment has been received and applied. This is the last day of active coverage or the day before the beginning of the grace period. It is displayed in the 271 Response as code [343](#).

grace period start date - (found on loop 2110C/D DTP) - This is the first day of the grace period. It is displayed in the 271 Response as code [193](#).

grace period end date - (found on loop 2110C/D DTP) - This is the last day of the grace period. It is displayed in the 271 Response as code [194](#).

grace period informational message - (found on loop 2110C/D DTP below the grace period start and end dates) - This is an informational field on the 271 response that indicates the subject of the data in fields above. It is displayed in the 271 Response as [HIX GRACE PERIOD](#) (*HIX - health insurance exchange*).

The 271 Response also includes Blue Cross' [HPID](#) (unique health plan identification) number. Also included with the HPID is the product name. Blue Cross has two HPIDs as follows:

HPID 7598768720 - for HMO Louisiana, Inc. policies

HPID 7780687910 - for Blue Cross and Blue Shield of Louisiana policies

Below is a sample section of 271 Response codes:

DTP*291*RD8*20230101-20231231~

DTP*382*D8*20230101~

DTP*539*D8*20230101~

DTP*343*D8*20230731~

- **premium paid to date end** (*shows last day of active coverage as July 31, 2023*)

EB*1*EMP*30*PR*Individual Blue Max 7780687910~

- **HPID** (*shows a PPO product and Blue Cross HPID*)

DTP*193*D8*20230801~

- **grace period start date** (*shows first day of grace period as August 1, 2023*)

DTP*194*D8*20231031~

- **grace period end date** (*shows last day of grace period as October 31, 2023*)

MSG*HIX GRACE PERIOD~

- **grace period informational message**

4. Research an APTC Member's Claims Through Electronic Transactions (27x)

To inquire about claims, submit a [276 Claim Status Request](#). For APTC members with a policy that is pending for premium payment, the provider will receive a [277 Claim Status Response](#) that includes claim status code [766](#) (found on loop 2220D/E STC), which indicates:

services were performed during a Health Insurance Exchange (HIX) premium payment grace period

Below is an example of what a 277 Claims Status Response looks like:

STC*P5:766*20231103~

- **services were performed during a Health Insurance Exchange (HIX) premium payment grace period**

End →