



Overpayment Refund Notification Form

Highmark Blue Cross Blue Shield (Highmark BCBS) partners with Wellpoint companies to administer certain services to Medicaid Managed Care (MMC), Health and Recovery Plan (HARP), Child Health Plus (CHPlus), and Essential Plan (EP) members. Please note, this information is specific to the MMC, HARP, CHPlus, and EP programs only.

To have an overpayment refund processed in a timely manner, submit a completed form with all refund checks and supporting documentation. If the refund check you are submitting is a Highmark BCBS check, include a completed form listing the reason for the check return.

Physician name/contact	
Contact number	
Physician ID	
Physician tax ID	
Member ID	
Document control number (displayed on Cost Containment letter)	
Member name	
Member account number	
Date(s) of service	
Total billed charges	
Total check amount	

Claim number(s)

<https://providerpublic.mybcbswny.com>

Wellpoint Partnership Plan, LLC provides management services for Highmark Blue Cross Blue Shield's managed Medicaid. Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield is an independent licensee of the Blue Cross Blue Shield Association.

Reason for refund or check return

- Highmark BCBS letter
- Contract rate change
- Duplicate payment
- Wrong member
- Wrong physician
- Negative balance
- Other health insurance/third-party liability
- Payment error
- Billed in error/adjusted charge
- Other: _____

Instructions

Mail all refund checks and a copy of this form to:
Highmark Blue Cross Blue Shield
P.O. Box 933657
Atlanta, GA 31193-3657

Once the Cost Containment unit has reviewed the overpayment, you will receive a letter explaining the details of the reconciliation. Thank you for completing this *Overpayment Refund Notification Form*.

Important note: You are not permitted to use or disclose Protected Health Information about individuals who you are not treating or are not enrolled in your practice. This applies to Protected Health Information accessible in any online tool, sent in any medium including mail, email, fax or other electronic transmission.



Email is the quickest and most direct way to receive important information from us.

To start receiving email from us (including some sent in lieu of fax or mail), submit your information using the QR code to the left or via our online form: <https://bit.ly/signup-hm-ny>.