

Revising TPL Provider Information



Knowledge Base Article

Revising TPL Provider Information

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Revising TPL Provider Information

Overview

This article will review how to revise Third Party Liability information within the Ohio SACWIS system.

For eligible children, all insurance claims must first be submitted to their **Third Party Liability (TPL)** provider before being submitted to Medicaid for payment.

In some cases, a child's existing TPL information in Ohio SACWIS needs to be updated. For example, a policy's begin or end date needs to be changed, an insurance participant added, or a policy provider name updated.

You can make corrections to exiting TPL information by navigating to the **record of the person who holds the third party insurance coverage for the child** and then recording the applicable change. The steps to complete this are discussed below.

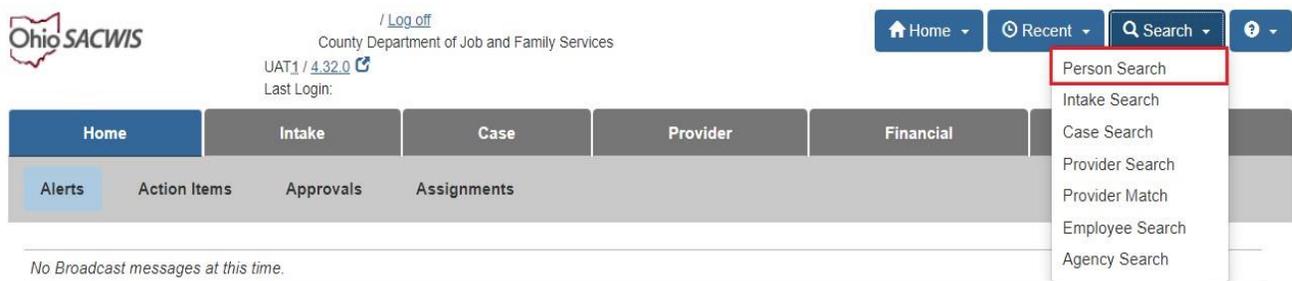
Important: Newly entered TPL information is sent directly to MITS for processing after being entered into Ohio SACWIS. The 3rd Party Legal Ruling must be entered before the TPL information will be sent to MITS.

If you have additional issues with third party insurers when providers submit their bills to Medicaid, report the TPL issue to: TPL@jfs.ohio.gov

Navigating to the Person Information Screen

1. On the Ohio SACWIS **Home** screen, navigate to the person record using the **Person Search** link.

Note: Or you can also use the **Person ID** link on the **Case Workload** screen.



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2. In the **Person ID** field, enter the appropriate number.
3. Or use the other fields to search for the person.
4. Click the **Search** button.

Person Search Intake Search Case Search Provider Search Provider Match Employee Search Agency Search

Search For Person

Person ID: ~ OR ~ SSN:

Note: If Person ID or SSN are entered, all other search criteria will be ignored

OR

Last Name: First Name: Gender:

Middle Name:

DOB:  ~ OR ~ Age Range: -
From Age To Age

[Reference, TCN, and Address Criteria](#) ▾

Name Match Precision Sort by:
Returns results matching entered names including AKA names/nicknames Relevance (Highest-Lowest) ▾

+ AKA/Nicknames
Fewer Results *More Results*

The results appear in the **Person Search Results** section.

5. Click the **Edit** link in the appropriate row.

Person Search Results

Result(s) 1 to 1 of 1 / Page 1 of 1

Include only active case members

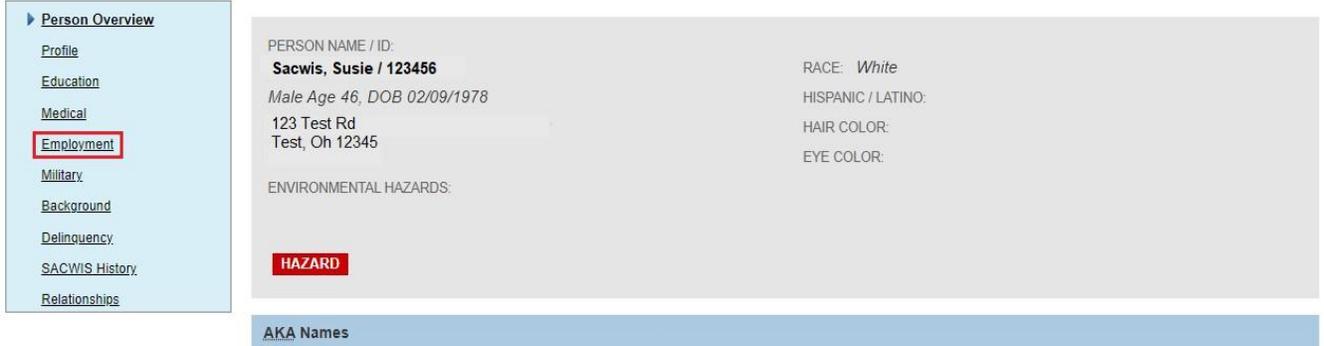
	Person Name / ID	Address	Gender	(Age) DOB	Active Case
view edit	Sacwis, Susie / 123456	123 Test Rd, Test Oh 12345	Female	(14) 07/03/2009	Yes

[Related Persons](#) ▾

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The **Person Information** screen appears.

6. Click the **Employment** link.

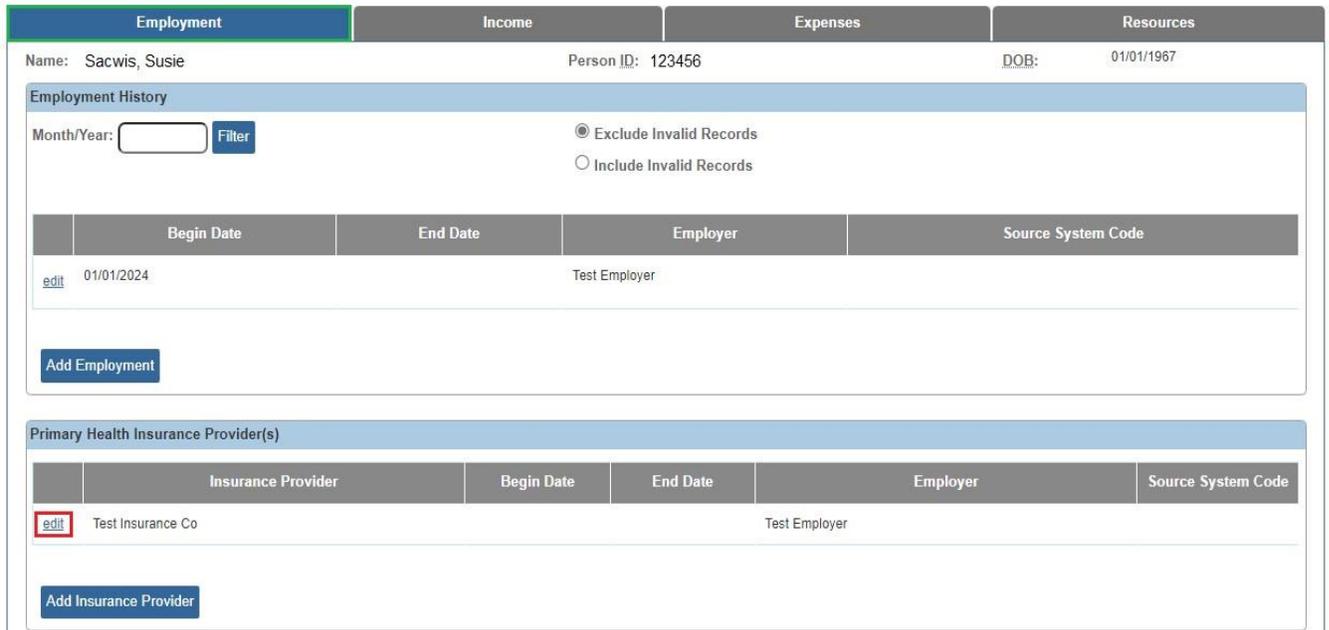


The screenshot shows the 'Person Overview' sidebar on the left with the 'Employment' link highlighted in a red box. The main content area displays personal information for 'Sacwis, Susie / 123456', including race (White), age (46), and address (123 Test Rd, Test, Oh 12345). A red 'HAZARD' label is visible under the 'ENVIRONMENTAL HAZARDS' section. Below the main content is a blue bar labeled 'AKA Names'.

The **Employment History** screen appears.

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7. In the **Primary Health Insurance Provider(s)** section, click the **Edit** link.



The screenshot shows the 'Employment History' and 'Primary Health Insurance Provider(s)' sections. The 'Employment History' section has a table with columns: Begin Date, End Date, Employer, and Source System Code. A row shows '01/01/2024' and 'Test Employer'. Below the table is an 'Add Employment' button. The 'Primary Health Insurance Provider(s)' section has a table with columns: Insurance Provider, Begin Date, End Date, Employer, and Source System Code. A row shows 'Test Insurance Co' and 'Test Employer'. Below the table is an 'Add Insurance Provider' button. The 'edit' link in the insurance provider row is highlighted with a red box.

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The **Primary Insurance Provider Details** screen appears.

8. Modify the screen fields, as needed. The fields marked by a red asterisk (*) are required.
9. If needed, click the **Add Individual** button to add a person included in third party insurance coverage (especially children who are eligible for IV-E Medicaid and covered under a TPL insurer).

Coverage through Employment? *

Employer:

Individual(s) Included in Coverage

Person ID	Name	DOB	
123456	Sacwis, Susie	01/01/1967	delete

The **Person Search Criteria** screen appears.

10. Enter the search data into the fields.
11. Click the **Search** button.

Person Search | Intake Search | Case Search | Provider Search | Provider Match | Employee Search | Agency Search

Search For Person

Person ID: ~ OR ~ SSN:

Note: If Person ID or SSN are entered, all other search criteria will be ignored

OR

Last Name: First Name: Gender:

Middle Name:

DOB: ~ OR ~ Age Range: -
From Age To Age

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[Reference, TCN, and Address Criteria](#) ▾

Name Match Precision

Returns results matching entered names including AKA names/nicknames

Sort by:

Relevance (Highest-Lowest) ▾

+ AKA/Nicknames

Fewer Results More Results

12. Select the check box in the appropriate person's row.

13. Click the **Select** button.

Person Search Results

Result(s) 1 to 1 of 1 / Page 1 of 1

Include only active case members

	Person Name / ID	Address	Gender	(Age) DOB	Active Case
<input type="checkbox"/>	Test, Adult / 123456	123 Test Rd, Test Oh 12345	Female		Yes

[Related Persons](#) ▾

The person's information appears in the **Individual(s) Included in Coverage** section as shown in green in the next screen shot.

Coverage through Employment? * ▾

Employer: ▾

Individual(s) Included in Coverage

Person ID	Name	DOB	
123456	Sacwis, Susie	01/01/1967	delete
123457	Test, Adult	07/03/2009	delete

14. When complete, click the **Save** button.

The **Employment History** screen appears with a message that your data has been saved.

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✔ Your data has been saved

Employment	Income	Expenses	Resources
Name: Sacwis, Susie	Person ID: 123456	DOB: 01/01/1967	
Employment History			
Month/Year: <input type="text"/> <input type="button" value="Filter"/>	<input checked="" type="radio"/> Exclude Invalid Records <input type="radio"/> Include Invalid Records		

15. Click the **Close** button at the bottom of the screen.

Primary Health Insurance Provider(s)						
	Insurance Provider	Begin Date	End Date	Employer	Source System Code	
edit	Test Insurance Co			Test Employer		
<input type="button" value="Add Insurance Provider"/>						
Insurance Coverage through Others						
	Policy Holder Name	Insurance Provider	Begin Date	End Date	Employer	Source System Code

The **Person Search Criteria** screen appears.

If you have additional questions pertaining to this Deployment Communication, please contact the [Customer Care Center](#).