



# BlueCross BlueShield of North Carolina

An Independent Licensee of the Blue Cross and Blue Shield Association

## Thomas Prompt Pay Interest Statement for Medicare Supplement Claims

Provider Name:

Blue Cross and Blue Shield of North Carolina (BCBSNC) strives to ensure all claims are processed accurately. Effective for claims paid on or after January 21, 2009, and as part of our obligation under the Thomas/Love Settlement, we are required to pay you 8% annual late payment interest for the claims listed on this statement. The interest amounts shown below includes all Thomas Prompt Pay interest owed to your health care practice for Medicare Supplement business as of (date). Please do not return this interest amount to BCBSNC.

Claim #	Patient Name	Patient ID	Service Date	Procedure Code	Interest

Total Member Claim Interest Payment=

If you have questions about your payment please contact Customer Services toll free at 1-877-218-3334. You may also send written inquiries to: BCBSNC Customer Services, PO Box 17509, Winston Salem, NC 27114-7509.

For more information regarding the Thomas/Love Settlement or Thomas Prompt Pay Interest please visit our website at [http://www.bcbsnc.com/content/pageviewer/thomas\\_love/index.cfm](http://www.bcbsnc.com/content/pageviewer/thomas_love/index.cfm).