

All Provider Types

Change to Medicaid Reimbursement of Medicare Part C Co-payment and Co-insurance Liabilities



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Effective April 1, 2016, an amendment to New York State Social Services Law changes Medicaid reimbursement of Medicare Part C (Medicare Advantage or Medicare managed care) co-payment and/or co-insurance liabilities for services provided to dually eligible Medicaid members. Dually eligible members are those individuals having both Medicare and Medicaid coverage.

Presently the Medicaid program pays the full co-payment or coinsurance amounts for Medicare Part C claims. **Retro-actively to April 1, 2016,** Medicaid will reimburse at the rate of eightyfive percent (85%) of the Medicare Part C co-payment or coinsurance amount.

The Department is in the process of making the necessary eMedNY system changes to enable the implementation of the new payment policy. Implementation will be applied retroactively pending system support. Paid claims will then be adjusted automatically to reflect the new cost-sharing limits.

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This change will affect institutional claims and professional claims when submitting claims for Medicaid reimbursement of a Medicare Part C co-payment or co-insurance. This change will also apply to Pharmacy Claims for drugs and supplies when submitted via a NCPDP transaction or as a professional claim.

There is no change to the current reimbursement methodology of Medicare Part C co-payment/co-insurance amounts for ambulance providers and psychologists Medicaid will continue to reimburse these providers the full Medicare Part C co-payment/co-insurance amounts.

Note: A provider of a Medicare Part C benefit cannot seek to recover any co-payment, or coinsurance amount from Medicare/Medicaid dually eligible individuals. The provider is required to accept the Medicare Part C health plan payment and any Medicaid payment as payment in full for the service. The member may not be billed for any Medicare Part C copayment/co-insurance amount that is not reimbursed by Medicaid.

Providers will be notified prior to claim adjustments being made through another Medicaid Update article.

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