

Solving your Medicare eligibility issues

Medicare Advantage Plans And New Medicare IDs

We have seen an increase in denials and rejections for Medicare patients. Two identified problem areas are new Medicare ID numbers and Medicare Advantage Plans.

<u>New Medicare ID cards</u> continue to roll out nationwide. Be sure your office is asking for new cards and the information is being accurately updated in your system. Click on the link below for a helpful fact sheet for your staff.

Medicare Advantage Plans- These are essentially Medicare replacement plans. Eligibility and benefits should be confirmed and information entered into the system as primary insurance. The claim goes directly to the payer (ie UHC, BCBS, etc) and not to Medicare. It is important to collect this information from the patient prior to or at the time of service to avoid denials. Additionally, some plans have shorter timely filing limits.



New Medicare Cards-Tips and Tricks

Railroad Medicare plans no longer have the A prefix as an easy identifier. Look for "Railroad Retirement Board" across the bottom of the card. These claims need to be submitted to RR Medicare.

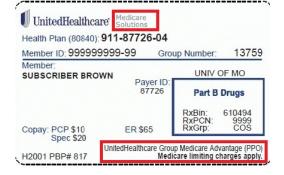
Did you know that the letters S, L, O, I, B and Z are not being used on the cards? This is to avoid confusion with numbers that look similar. If you see a 0, you can be confident it is a zero, not a letter O!

Link to CMS Printable Fact Sheet

MEDICARE HEALTH INSURANCE Name/Nombre JOHN L SMITH Medicare Number/Número de Medicare 1EG4-TE5-MK72 Entitled to/Con derecho a HOSPITAL (PART A) MEDICAL (PART B) RAIL ROAD RETIREMENT ROARD

RRB Issued Medicare Card

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Medicare Advantage Plans- Is this an Advantage plan or supplemental insurance? Check the card for clues. This UHC card clearly lists Medicare Advantage Plan. Claims for this plan go directly to United Healthcare.

As always, feel free to reach out to our CS EYE PEN Billing Department with any questions!

866-551-0232 ext. 2

www.cseye.biz/penbilling



This Horizon card states Medicare Advantage and also reminds providers that claims should be filed directly to them and not Medicare.

