Medicare-Medicaid Eligibility Issues

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PROGRAM MANAGER

MEDICAID

Checking Eligibility

- Provider action: go to www.Optumidaho.com

- Member action:
  - call Optum member line: (855) 202-0973
  - call MACS (Medicaid Automated Customer Service)
    - (866) 686-4272
    - (208) 373-1424

Eligibility Response in Molina

Member Information

Member

Name	**Date of Birth**	**Member ID**
DOE, JANE	01/01/1901	0009876543

Tracking Number : 13277W000005038

Date of Inquiry : 10/4/2013 2:30:44 PM

From Date of Service : 10/4/2013

To Date of Service : 10/4/2013

Procedure Codes :

HIPAA Category Code :

Eligibility Response in Molina

Full Dual – Enhanced Plan

Enrollments

Plan	Coverage Status	Coverage Level	Plan Type	Effective Date	Termination Date
Idaho Smiles	Active	Primary	DENTAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Dental Encounter/Idaho Smiles	Active				
Care Coordination Plan	Active	Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Dual Member	Active				
Healthy Connections Benefit Plan		Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Enhanced Coverage	Active				
Idaho Behavioral Health Plan					
Part B Premium	Active	Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Part B Premium Coverage	Active				

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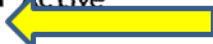| Copay	Effective Date	Termination Date
Exempt		

Other Insurance

Eligibility Response in Molina

Duals –MMCP (Medicare-Medicaid Coordinated Plan)

Enrollments

Plan	Coverage Status	Coverage Level	Plan Type	Effective Date	Termination Date
Part B Premium	Active	Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Part B Premium Coverage	Active				
MMCP - Medicaid Only Covered Services	Active	Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
A&D Waiver Coverage	Active				
MMCP Coverage	Active				
Care Coordination Plan	Active	Secondary	MEDICAL		
Coverage Code Description	**Coverage Status**			**Effective Date**	**Termination Date**
Dual Member	Active				

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Copay	Effective Date	Termination Date
Exempt		

Eligibility Response in Molina

QMB (Qualified Medicare Beneficiary only)

Enrollments

Plan	Coverage Status	Coverage Level	Plan Type	Effective Date	Termination Date
Part B Premium	Active				
Coverage Code Description	Coverage Status			Effective Date	Termination Date
Part B Premium Coverage	Active				
Open Access Benefit Plan	Active	Secondary	MEDICAL		
Coverage Code Description	Coverage Status			Effective Date	Termination Date
Medicare Co-insurance & Deductible					

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Copay	Effective Date	Termination Date
Exempt		

Other Insurance

Who is in the IBHP?

- Q: Are all Medicare-Medicaid individuals enrolled in the Idaho Behavioral Health Plan (IBHP) administered by Optum?

- A: No, only individuals enrolled in either the Medicaid Basic or Enhanced Plan are enrolled in the IBHP. Individuals who do not receive full Medicaid benefits, such as QMB-only or those enrolled in the Medicare-Medicaid Coordinated Plan (MMCP) are not enrolled in the IBHP.

QMB Services

- Q: What benefits do QMB-only individuals have since it is not full Medicaid coverage?

- A: Medicaid only pays for the coinsurance and deductible for <u>Medicare-covered</u> services. If the service is not covered by Medicare, the claim is not reimbursable through Medicaid (Molina).

Billing for QMB

- Q: How do I bill for QMB-only individuals?

- A: When a Medicare-eligible provider delivers a Medicare-covered service to an individual with QMB status, that claim is billed to Medicare. After the claim is paid by Medicare, it is automatically crosses over to Medicaid (Molina) to have the coinsurance or deductible paid.

(Providers must be enrolled with Medicare and enrolled as a cross-over provider with Medicaid in order to have their payment automatically processed by Molina.)

Scope of MMCP

- Q: What benefits do MMCP individuals have?

- A: Individuals enrolled in the MMCP receive the majority of their coverage through their Medicare Advantage Plan. The only Medicaid-reimbursable service for these individuals is psychosocial rehabilitation (PSR).

(*PSR is Community Based Rehabilitation Services in the IBHP)*

Billing for MMCP

- Q: How do I bill for MMCP individuals?

- A: Bill Medicare for Medicare-covered outpatient behavioral health services. Bill PSR to Medicaid (Molina).

Medicare-Medicaid in the IBHP

- Q: What benefits do Medicare-Medicaid individuals have who are enrolled in the Basic or Enhanced Plan?

- A: These individuals are enrolled in the IBHP and the benefit package administered by Optum is available to them.
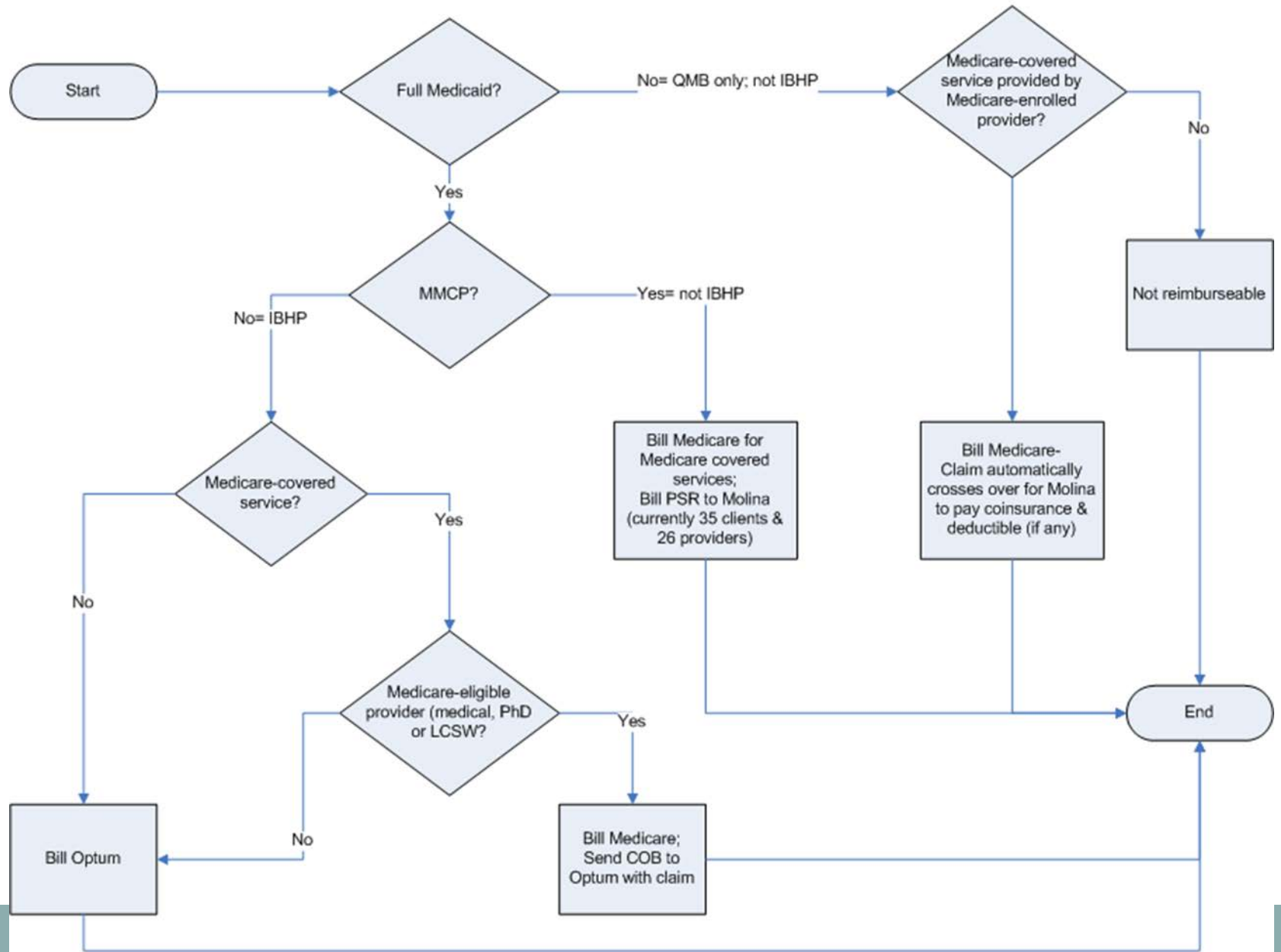
Billing for IBHP

- Q: How do I bill for IBHP-enrolled members?

- A: Providers must comply with Optum's billing requirements in order to receive reimbursement for services delivered. Agencies and practitioners must enroll as an Optum provider to continue to be reimbursed for services provided after October 30, 2013.

(Please visit the Optum website at www.OptumIdaho.com for more information.)

Medicare-Medicaid Billing Pathways

QUESTIONS?