

Part B Insider (Multispecialty) Coding Alert

Part B Payment: Know These MSP Facts to Ensure Medicare Reimbursement

Hint: Look at patient's age and employment to pinpoint primary payer.

Many different things factor into whether Medicare is the primary or secondary insurer for a particular patient, but the following are among the most common you may encounter, according to CGS Medicare's **Vanessa Williams**, who spoke during the Part B payer's March 21 webinar, "Medicare Secondary Payer: The Basics."

Follow the first chart to find out when Medicare is typically primary, and use the second chart to determine when Medicare is usually the secondary insurer.

MEDICARE IS PRIMARY:

- Patient is age 65 or older and covered by both Medicare and a group health plan for an employer with less than 20 employees.
- Patient is 65 or older and has a retirement group health plan through her employer, but is no longer working.
- Patient is under the age of 65 but entitled to Medicare, is disabled, is covered by a group health plan through an employer or a family member's employer, and the employer has fewer than 100 employees.
- Patient has end-stage renal disease and group health plan coverage, and 30 months of Medicare eligibility or entitlement have already passed.
- Patient has end-stage renal disease and COBRA coverage, and 30 months of Medicare eligibility or entitlement have already passed.
- Patient is age 65 or older OR disabled, and is covered by both COBRA and Medicare.
- Patient is dually eligible for both Medicare and Medicaid.
- Patient is covered by Medicare and also has a Medigap or supplemental insurance plan.
- Patient has both Tricare and Medicare, but is on inactive military status and is being treated by civilian providers.

MEDICARE IS SECONDARY:

- Patient is age 65 years or older and is covered by both Medicare and a group insurance plan either through herself or a spouse; employer has 20 or more employees.
- Patient is under the age of 65 but entitled to Medicare, is disabled, is covered by a group health plan through an employer or a family member's employer, and the employer has 100 or more employees.
- Patient has end-stage renal disease and group health plan coverage, and is still within her first 30 months of Medicare eligibility or entitlement.
- Patient has end-stage renal disease and COBRA coverage, and is still within her first 30 months of Medicare eligibility or entitlement.
- Patient is entitled to Medicare but is being seen under workers' compensation coverage for a job-related illness or injury.
- Patient was in an accident and no-fault or liability insurance is involved for the accident-related healthcare.
- Patient is an active duty military member entitled to both Medicare and Tricare.
- Patient is an inactive status military member entitled to both Medicare and Tricare being treated at a military hospital or by other federal providers.

