



# MONTANA HEALTHCARE PROGRAMS NOTICE

November 16, 2017

All Providers

## Effective Immediately

### Qualified Medicare Beneficiary (QMB) Claim Adjustments

On October 2, 2017, Medicare revised their remittance advices (RAs) for QMB claims that eliminated the cost share and deductible information that was previously included. This has resulted in claims that would have normally been reimbursed by Medicaid to now pay at \$0.

Medicare released a notification to providers and other payers that they are in the process of updating their remittance advices to again show the Medicare coinsurance and deductible information. This change will be effective December 8, 2017 and will ensure other payers are able to appropriately adjudicate and reimburse claims as before. In the interim, Medicare is recommending providers hold claims until this update is complete. [Their outreach information can be accessed at: https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/QMB.html](https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/QMB.html)

Medicare has indicated that claims automatically crossed to Medicaid from the Medicare Coordination of Benefits Agreement (COBA) are not affected. Electronic claims with paperwork attachments or paper claims/paper Medicare RAs that have been processed by Medicaid will require provider adjustments. Providers, you will need to adjust those claims by completing the adjustment request form. Claims requiring reimbursement will need to be resubmitted by the provider and include the following information:

- Attach a copy of the claim, completed adjustment form, the Medicare RA, along with the Medicare explanation of denial codes.
- Be sure to include language in Box 8 to specify the adjustment is necessary because of the Medicare QMB change to the information included on their RA.
- Once completed, send to the Department's fiscal agent, Conduent Claims unit, P. O. Box 8000, Helena, MT 59604 for processing.

### Contact Information

If you have any questions, please contact:

Montana Provider Relations 1(800) 642-3958 (406) 442-1837 Helena

For additional information, contact Montana Provider Relations at (800) 624-3958 or (406) 442-1837 or email [MTPRHelpdesk@conduent.com](mailto:MTPRHelpdesk@conduent.com).

Visit the Montana Healthcare Programs Provider Information website at [www.medicicaidprovider.mt.gov](http://www.medicicaidprovider.mt.gov).