Clarification to “Changes to Medicare Crossover Claims Processing and Reimbursement Effective January 1, 2012”

Information posted May 25, 2012

This is a clarification to an article titled “Changes to Medicare Crossover Claims Processing and Reimbursement Effective January 1, 2012,” which was published on December 1, 2011, on this website.

The article indicated that for crossover claims that are submitted by nephrology (hemodialysis, renal dialysis) and renal dialysis facility providers, Texas Medicaid will continue to pay the Medicare coinsurance and deductible less 5 percent.

The clarification is that the 5-percent reduction does not apply to physician-billed services. This statement applies to facilities that are enrolled in Texas Medicaid as nephrology (hemodialysis, renal dialysis) or renal dialysis facility providers.

Nephrologists that are enrolled in Texas Medicaid as physician providers may be reimbursed for coinsurance and deductible according to the following professional crossover reimbursement guidelines that were revised effective for dates of service on or after January 1, 2012:

Texas Medicaid will reimburse the lesser of the following:

- The coinsurance and deductible payment
- The amount remaining after the Medicare payment amount is subtracted from the allowed Medicaid fee or encounter rate for the service

If the Medicare payment is equal to or exceeds the Medicaid allowed amount or encounter payment for the service, Texas Medicaid will not make a payment for coinsurance and deductible.

For more information, call the TMHP Contact Center at 1-800-925-9126.