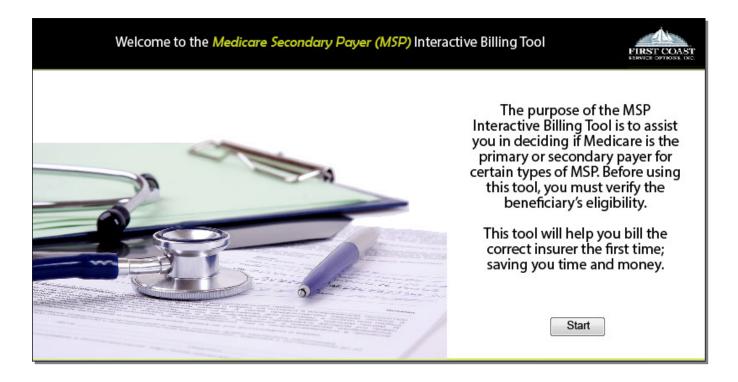


Medicare Secondary Payer (MSP) Interactive Billing Tool - Part A



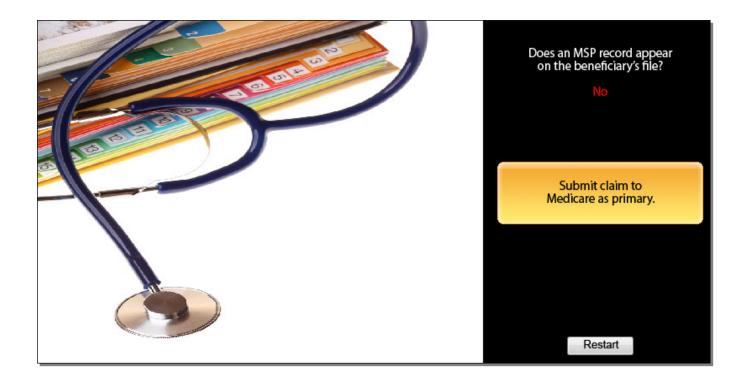
Welcome to the Medicare Secondary Payer (MSP) Interactive Billing Tool

The purpose of the MSP Interactive Billing Tool is to assist you in deciding if Medicare is the primary or secondary payer for certain types of MSP. Before using this tool, you must verify the beneficiary's eligibility.

This tool will help you bill the correct insurer the first time; saving you time and money.



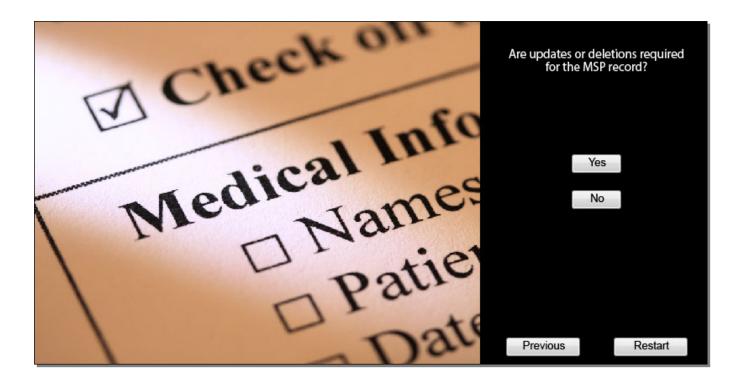
Does an MSP record appear on the beneficiary's file?



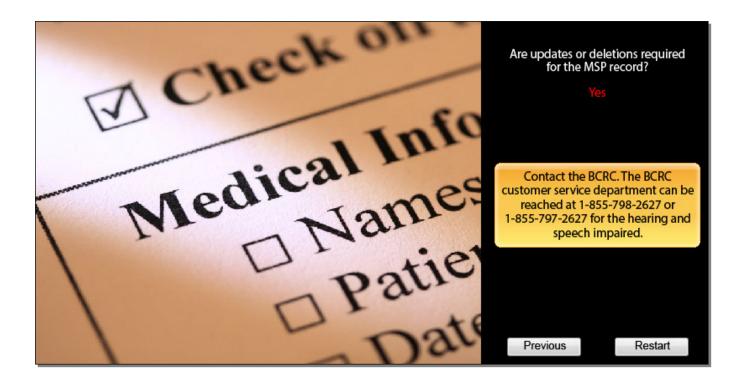
Does an MSP record appear on the beneficiary's file?

No

Submit claim to Medicare as primary.



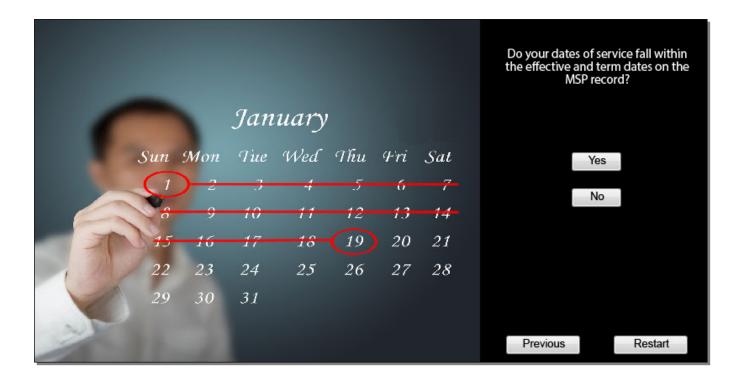
Are updates or deletions required for the MSP record?



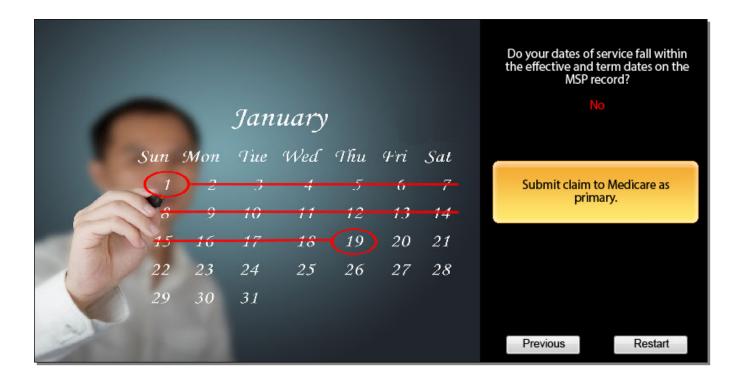
Are updates or deletions required for the MSP record?

Yes

Contact the BCRC. The BCRC customer service department can be reached at 1-855-798-2627 or 1-855-797-2627 for the hearing and speech impaired.



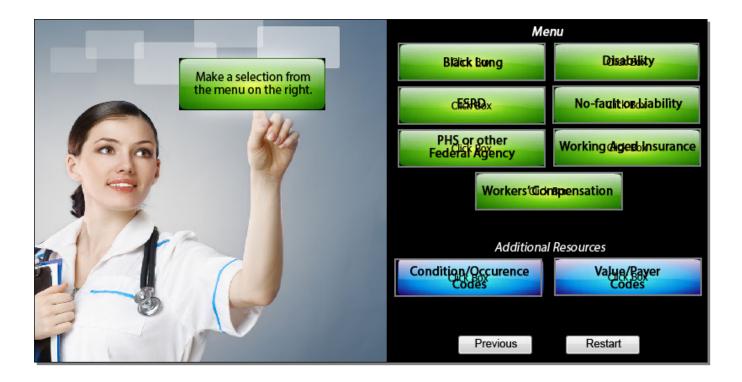
Do your dates of service fall within the effective and term dates on the MSP record?



Do your dates of service fall within the effective and term dates on the MSP record?

No

Submit claim to Medicare as primary.



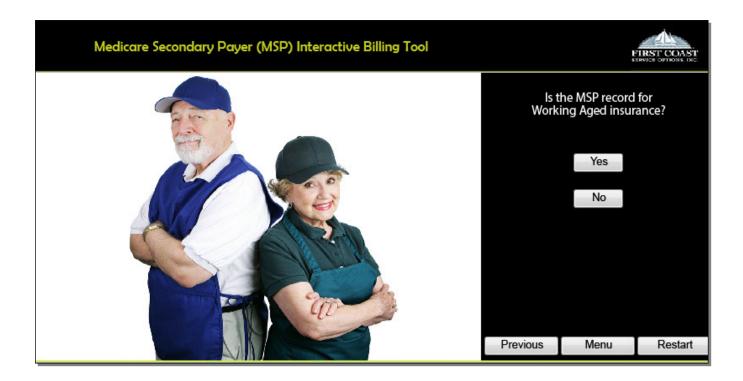
Make a selection from the menu on the right.

Menu

- Black Lung
- Disability
- ESRD
- No-fault or Liability
- PHS or other
- Federal Agency
- Workers' Compensation
- Working Aged Insurance

Additional Resources

- Condition/Occurence Codes
- Value/Payer Codes



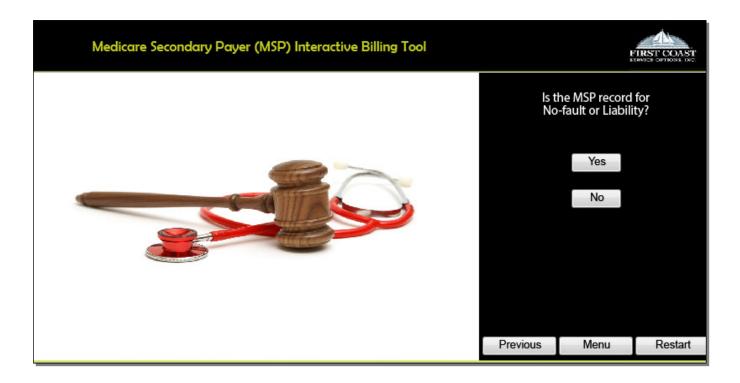
Is the MSP record for Working Aged insurance? Medicare Secondary Payer (MSP) Interactive Billing Tool



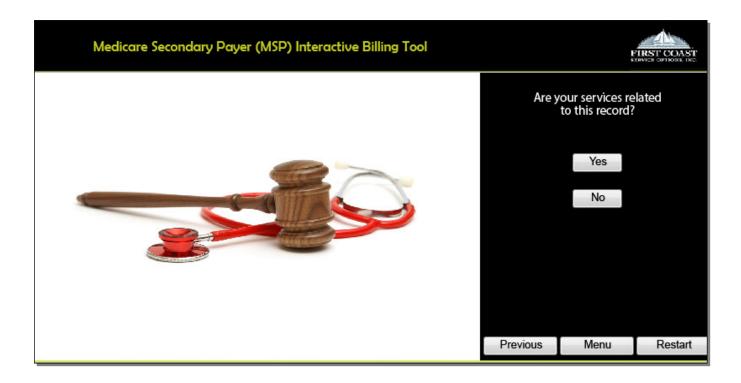
Is the MSP record for Working Aged insurance?

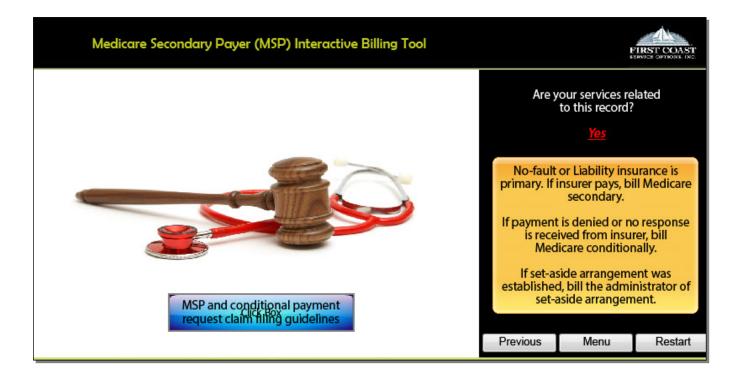
Yes

Working Aged insurance is primary. If insurer pays, bill Medicare secondary. If payment denied, applied to deductible, or not paid promptly, bill Medicare conditionally.



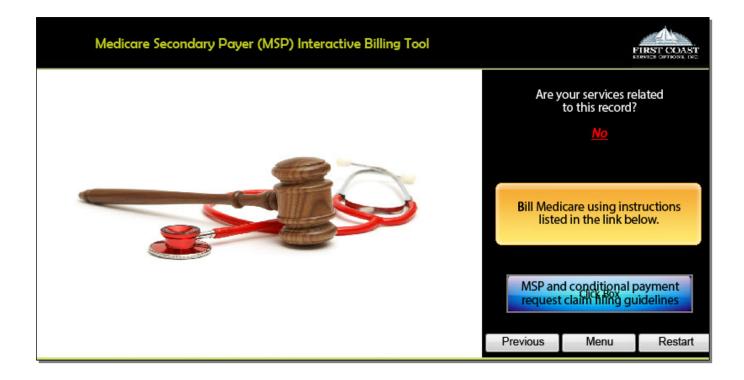
Is the MSP record for No-fault or Liability?





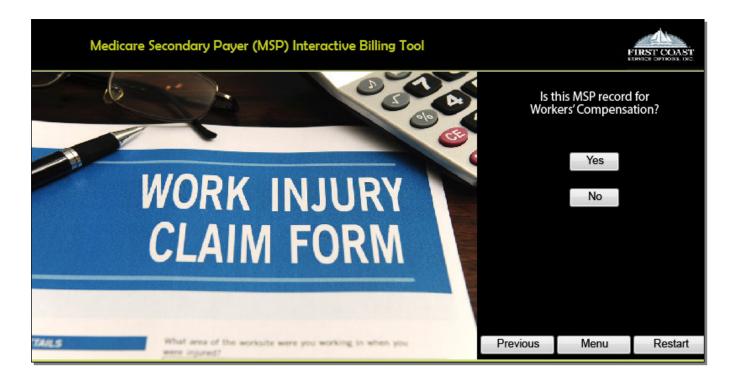
Yes

No-fault or Liability insurance is primary. If insurer pays, bill Medicare secondary. If payment is denied or no response is received from insurer, bill Medicare conditionally. If set-aside arrangement was established, bill the administrator of set-aside arrangement.

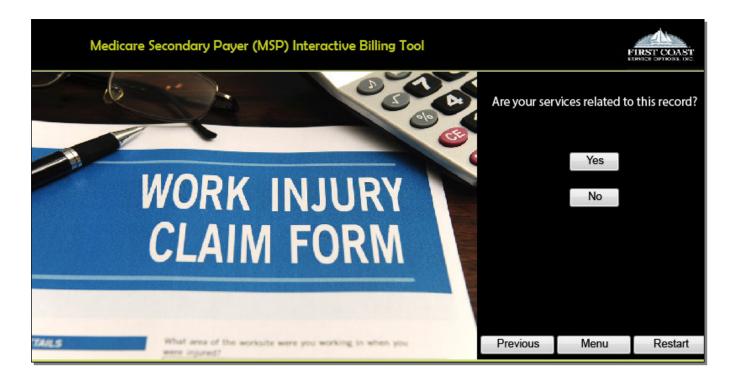


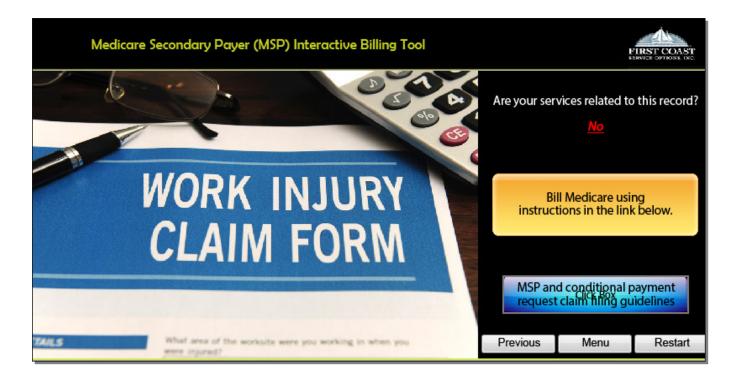
No

Bill Medicare using instructions listed in the link below.



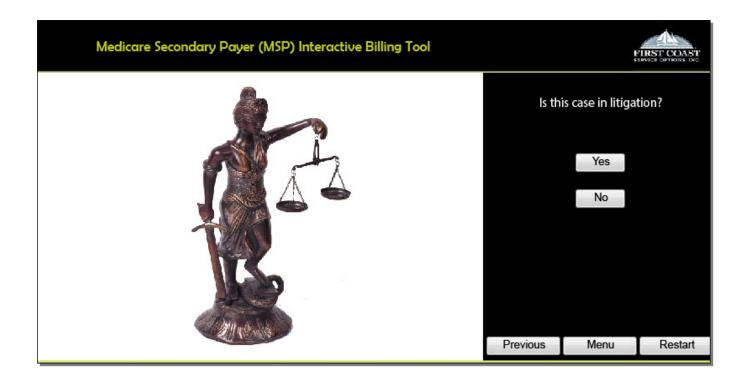
Is this MSP record for Workers' Compensation?



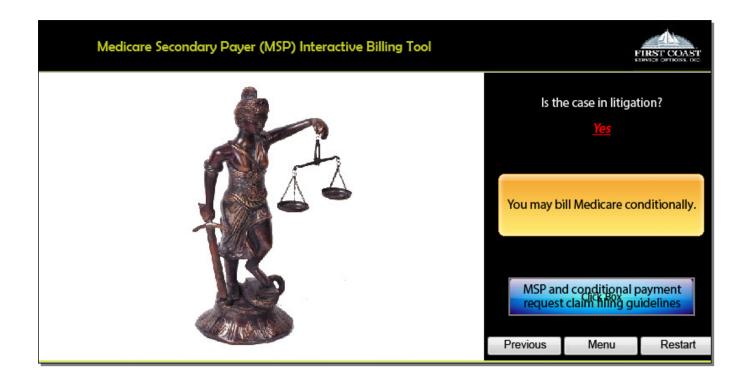


No

Bill Medicare using instructions in the link below.



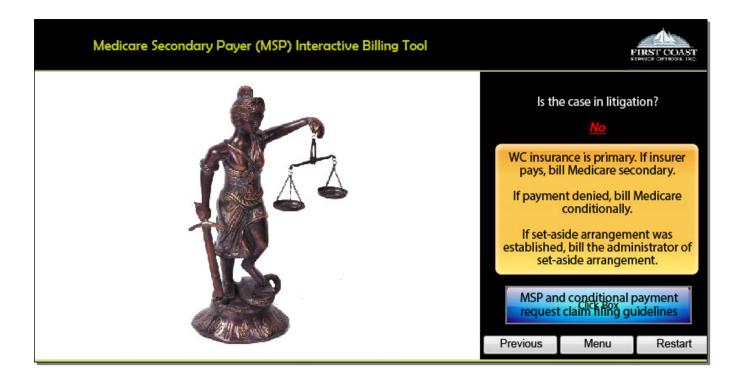
Is this case in litigation?



Is the case in litigation?

Yes

You may bill Medicare conditionally.



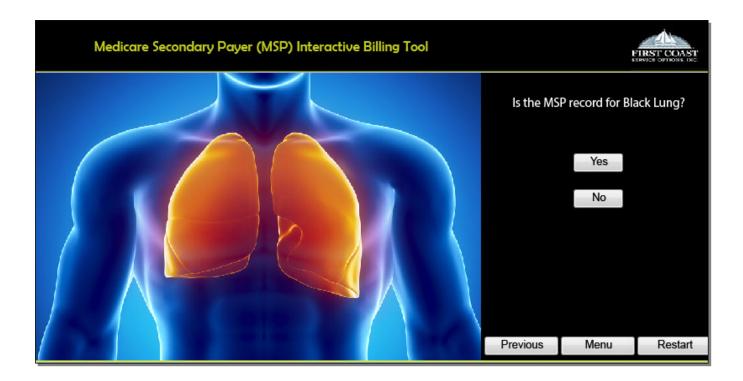
Is the case in litigation?

No

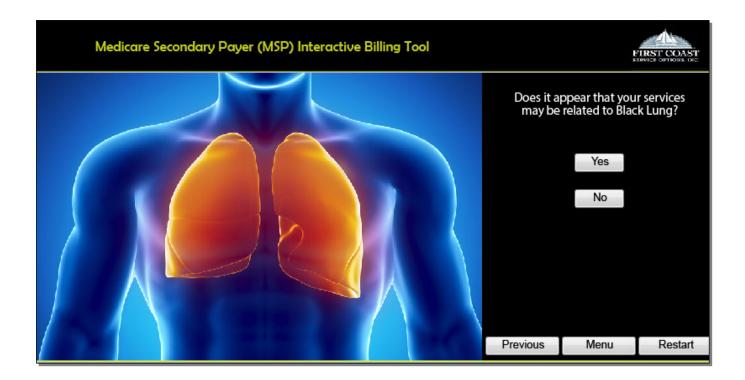
WC insurance is primary. If insurer pays, bill Medicare secondary.

If payment denied, bill Medicare conditionally.

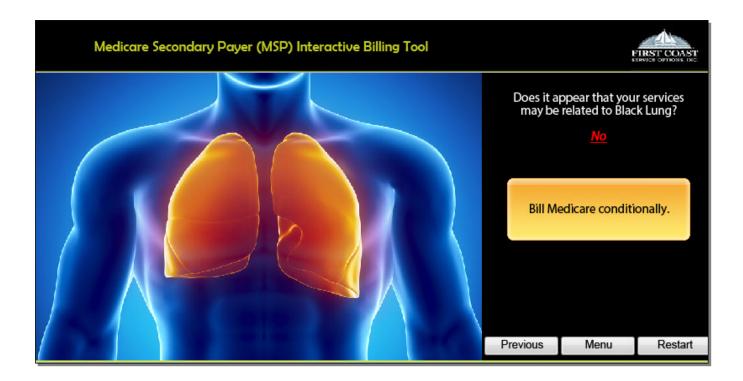
If set-aside arrangement was established, bill the administrator of set-aside arrangement.



Is the MSP record for Black Lung?



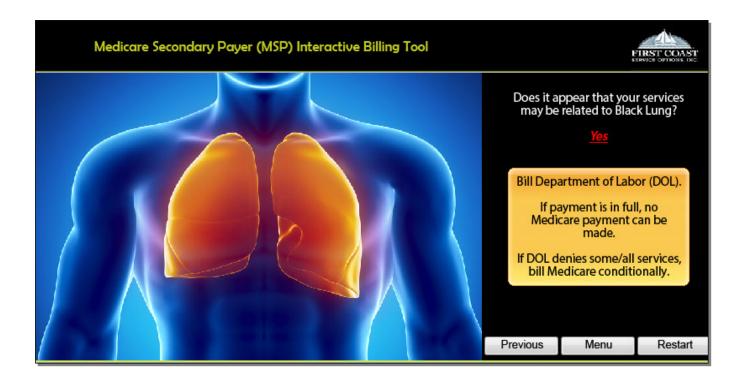
Does it appear that your services may be related to Black Lung?



Does it appear that your services may be related to Black Lung?

No

Bill Medicare conditionally.



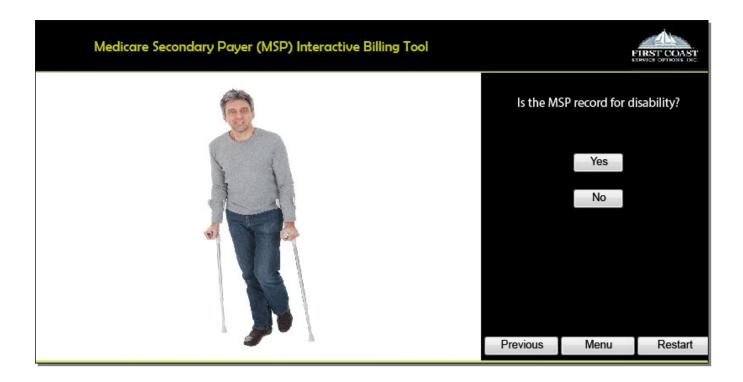
Does it appear that your services may be related to Black Lung?

Yes

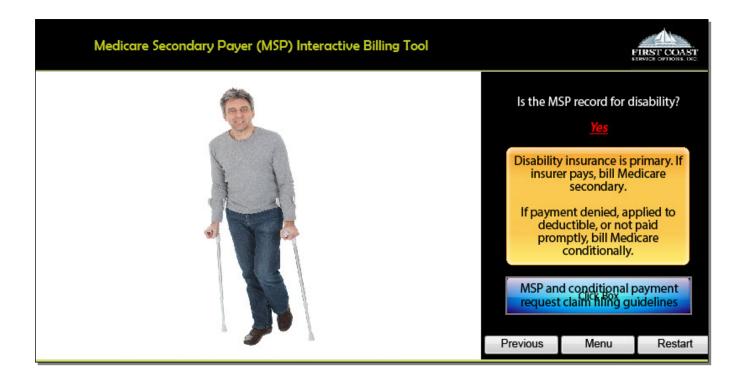
Bill Department of Labor (DOL).

If payment is in full, no Medicare payment can be made.

If DOL denies some/all services, bill Medicare conditionally.



Is the MSP record for disability?

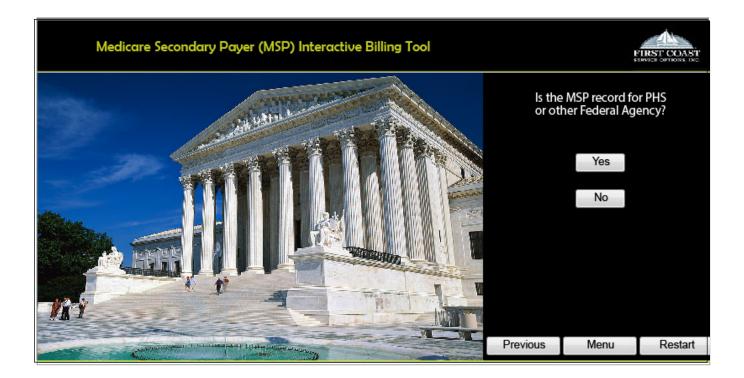


Is the MSP record for disability?

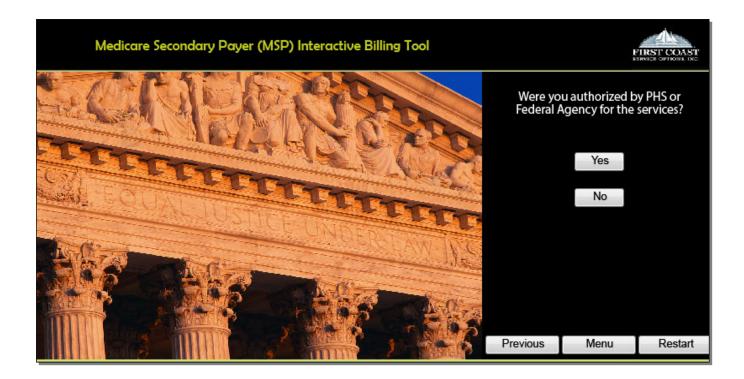
Yes

Disability insurance is primary. If insurer pays, bill Medicare secondary.

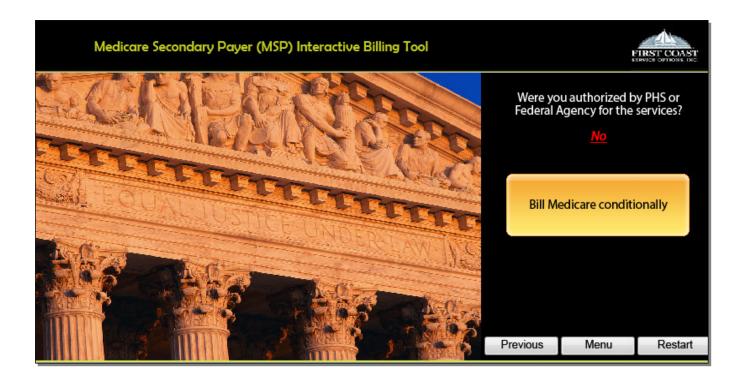
If payment denied, applied to deductible, or not paid promptly, bill Medicare conditionally.



Is the MSP record for PHS or other Federal Agency?



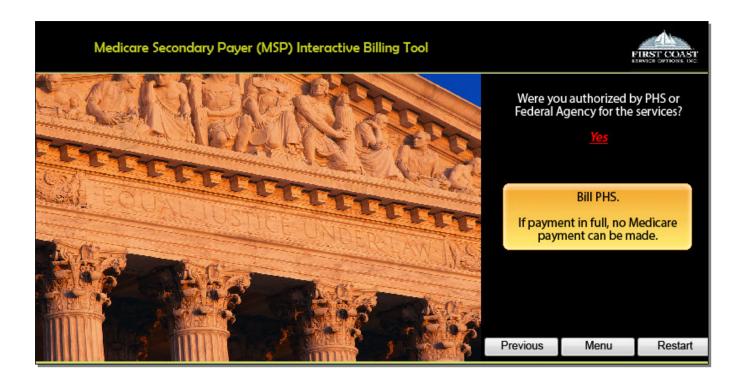
Were you authorized by PHS or Federal Agency for the services?



Were you authorized by PHS or Federal Agency for the services?

No

Bill Medicare conditionally

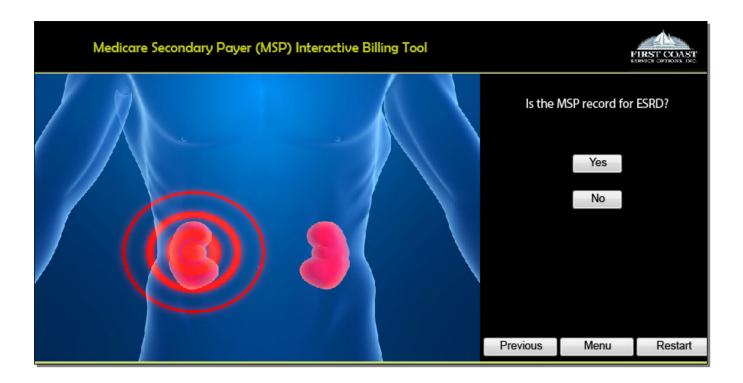


Were you authorized by PHS or Federal Agency for the services?

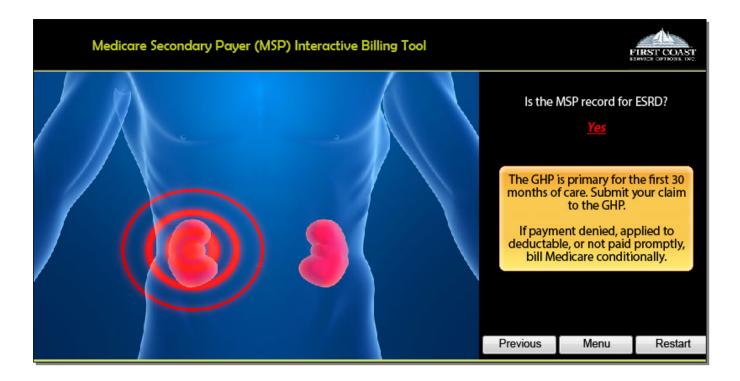
Yes

Bill PHS.

If payment in full, no Medicare payment can be made.



Is the MSP record for ESRD?



Is the MSP record for ESRD?

Yes

The GHP is primary for the first 30 months of care. Submit your claim to the GHP. If payment denied, applied to deductible, or not paid promptly, bill Medicare conditionally.

Medicare Secondary Payer (MSP) Billing Codes (FISS Field/UB-04 FL)					
Code	Description	Code	Description		
02	Condition is employment related	01	Auto Accident beneficiary's medical payment coverage		
03	Patient covered by insurance not reflected here	02	No fault insurance involved (use with VC 14)		
0.5	Lien has been filed	03	Accident - liability (includes underinsured and uninsured)		
06	ESRD patient in first 30 months of entitlement		(use with VC 47)		
08	Beneficiary would not provide information concerning other insurance coverage	04	Accident/employment related (use with VC 15) Other accident		
09	Neither patient nor spouse is employed	06	Crime victim		
10	Patient and/or spouse is employed but no EGHP coverage exists	18 Date of retirement patient/beneficiary			
11	Disabled beneficiary but no LGHP coverage	19	Date of retirement spouse		
28	Patient and/or spouse's EGHP is secondary	24	Date insurance denied		
29	Disabled beneficiary and/or family member's LGHP is	33	First day of coordination period for ESRD beneficiaries covered by EGHP		
	secondary to Medicare	A3	Benefits exhausted (payer A)		
77	Provider accepts or is obligated/required due to a contractual agreement or law to accept payment by a primary payer as payment in full. No Medicare payment will be made.		Menu		

Medicare Secondary Payer (MSP) Bi	lling Codes			
(FISS Field/UB-04 FL)				
	Value Codes	Payer Codes		
Description	VALUE CODES / FL 39 - 41	PAYER/ FL 50		
Working aged beneficiary/spouse with EGHP	12	A		
ESRD beneficiary in 30-month coordination period with an EGHP	13	B		
No-fault, including auto/other	14	D		
Workers' compensation	15	E		
Public health service (PHS) or other federal agency (Ex: crime victim, drug trial)	16	F		
Blacklung	41	н		
Veteran's administration	42	1		
Disabled beneficiary under age 65 with large group health plan (LGTP)	43	G		
Amount provider agreed to accept from primary payer when this amount is less than charges, but higher than payment received, then a Medicare secondary payment is due (Enter the total amount you agreed to or are obligated to accept.)	44	Use appropriate Payer Code All for L		
TiabilityInsurance	47	1		
		Menu		