



## Crossover Claim Resolution

Please see below for updated claims submission information.

1. FQHC Claims
  - a. Medicare requires UB
  - b. Medicaid requires HCFA
  - c. Please submit second claim on the appropriate Medicaid form with Medicare Explanation of Benefits that shows detailed lines
2. IP Hospital Claims
  - a. Condition codes:
    - i. Medicare **does not** require C1 or C3 condition code
    - ii. Medicaid **does** require a C1 or C3 condition code
    - iii. Please include the required Medicaid information on the original Medicare claim. It requires no second claim submission
  - b. Occurrence code:
    - i. Medicare **does not** require 74 occurrence code
    - ii. Medicaid **does** require 74 occurrence code
    - iii. Please include the required Medicaid information on the original Medicare claim. It requires no second claim submission
3. HFSID Requirement
  - a. Medicare **does not** require an active HFSID
  - b. Medicaid **does** require an active HFSID
  - c. Claims submissions by providers for MMAI members requires registration with IMPACT
4. Anesthesia
  - a. Medicare **does not** require a physical status modifier (P1-P6)
  - b. Medicaid **does** require a physical status modifier (P1-P6)
  - c. Please include the required Medicaid information on the original Medicare claim. It requires no second claim submission
5. Ambulance
  - a. Medicare **does not** require state code, vehicle license number, or origin/destination time
  - b. Medicaid **does** require state code, vehicle license number, and origin/destination time
  - c. Please include the required Medicaid information on the original Medicare claim. It requires no second claim submission
6. Emergency Room (ER) Visit with Inpatient Admission on Same Claim
  - a. Medicare allows ER visit billing with inpatient admission on the same claim whether or not the admission and visit are on the same date
  - b. Medicaid **does not** allow ER visits and inpatient admissions billing on the same claim
  - c. Please submit a second claim for only the inpatient admission as a replacement claim for Medicaid