Medicare Claims Processing Manual

Chapter 28 - Coordination With Medigap, Medicaid, and Other Complementary Insurers Crosswalk

Chap.	Sect.	Int. Pub.13.	Carrier Pub. 14	HO Pub. 10	P.M.	RO Office Manual	Description
28	10		B3-4700				Medigap - Definition and Scope
28	20		B3-4702, B3-3047				Assignment of Claims and Transfer Policy
28	20.1		B3-4702.1, B3-3047, B4-2110.1				Beneficiary Insurance Assignment Selection
28	30		B1-2010, B3-4702		A-01-20, A-01-63		Completion of the Claim Form
28	30.1		B1-2010, B3-4702		A-01-20, A-01-63		Form CMS-1500 (ANSI X12N 837 COB (Version 4010))
28	30.2	A3-3604		HO-460			UB-92 (Form CMS-1450)
28	40		B3-4703		AB-99-3, AB-01-155		MSN Messages
28	50		B3-4704		AB-99-3, B-01-35, A-01-57		Remittance Notice Messages
28	60		B3-4705		AB-99-3		Returned Medigap Notices

Chap.	Sect.	Int. Pub.13.	Carrier Pub. 14	HO Pub. 10	P.M.	RO Office Manual	Description
28	70	A1-1601, A3-3768 - A3-3769	B1-4607, B3-4701, B3-4706				Coordination of Medicare with Medigap and Other Complementary Health Insurance Policies
28	70.1	A1-1600 - A1-1602.5, A3-3768, A3-3769	B1-4600 - B14602.5, B3-10010				Authorization for Release of Information
28	70.1.1						Requests for Additional Information
28	70.1.2			НО-91.3			Release of Title XVIII Claims Information for Medigap Insurance Purposes by Providers
28	70.2	A3-3769					Integration of Title XVIII Claims Processing with Complementary Insurance Claims Processing
28	70.2.1						Program Recognition
28	70.2.2	A3-3769C					Records and Information
28	70.2.3	A3-3769D					Matching Files Against Medicare Claims Files
28	70.3	A1-1600	B1-4601				Standard Medicare Charges for COB Records
28	70.4		B1-4607				General Guidelines for Intermediary or Carrier Transfer of Claims Information to Medigap Insurers
28	70.5	A1-1601C	B1-4601				Audits

Chap.	Sect.	Int. Pub.13.	Carrier Pub. 14	HO Pub. 10	P.M.	RO Office Manual	Description
28	80		В3-4707		A-01-20, A-01-63, B-01-06		Electronic Transmission - General Requirements
28	80.1				A-01-20		HIPPA Provisions Affecting Medigap Transactions
28	80.2						ANSI X12N 837 COB (Version 4010) Transaction Fee Collection
28	80.3		B3-4709, B4-2110.1				Medigap Electronic Claims Transfer Agreements
28	80.3.1				A-01-20, A-02-069, A-02-077, A-02-078, AB-02-20		Intermediary Crossover Claim Requirements
28	80.3.2				B-01-32, B-01-06		Carrier/DMERC Crossover Claim Requirements
28	90		B3-4708				Paper Submission
28	100				A-00-23	RO-2700	Medigap Insurers Fraud Referral
28	110					RO-2700	Medigap Criminal Penalties/Types of Complaints under Subsection 1882(d)
28	110.1					RO-2700	Outline of Complaint Referral Process

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28	110.2					RO-2700	Preliminary Screening and Referral to Regional Office of the Inspector General
28	110.3					RO-2700	CMS Regional Office Quarterly Report on Medicare Supplemental Health Insurance Penalty Provision Activity
28	110.3.1					RO-2700	Statistics
28	110.3.2					RO-2700	Narrative