



Providers May Now Submit Medicare Advantage Claims Electronically to Medicaid

Medicaid providers may now submit electronic claims for recipients covered by Medicare Advantage plans effective January 1, 2018. This change is in place for both Medicare Advantage Part A and Part B claims.

LDH and Molina expect this change to be very beneficial for Medicaid providers with patients who are Medicare/Medicaid recipients with **Medicare Advantage** coverage. It will eliminate the need to drop claims to paper, complete the cover sheet and attach the Medicare Advantage EOB; thus, reducing staff time and eliminating mailing costs of paper claims to Medicaid.

New Medicaid File extensions have been created for the electronic submission of Medicare Advantage claim files. Extension **.XXA must be used** for Medicare Advantage Part A claims filed on 837I and **.XXB must be used** for Medicare Advantage Part B claims filed on 837P electronic files. Use of incorrect file extensions will cause your file to reject or the claims to process incorrectly.

It is very important that the appropriate Medicare Advantage Carrier Codes are included in the electronic files as the Payer ID to identify the third party coverage. The Medicare Advantage Carrier Code should be entered in Loop 2330B, Segment NM109.

Claims for recipients with both Medicare Advantage coverage and other private third party coverage may be billed electronically. It is very important to identify both the Medicare Advantage and the Other Commercial insurance using the correct Louisiana Medicaid Carrier Codes. Refer to claim examples included in the 837P and 837I Companion Guides Appendices for billing details.

Providers should review the Companion Guide for 837P (Appendix B) and 837I (Appendix B) found on the Louisiana Medicaid web site, www.lamedicaid.com, directory link HIPAA Information Center, sub-link 5010v of the Electronic Transactions, for data specifications and information.

Important note:

- This change only applies to billing claims electronically for dual eligible recipients with **Medicare Advantage** coverage **NOT** traditional Medicare coverage.

Providers who choose to continue to submit Medicare Advantage claims as paper claims should continue to follow the procedures in place for paper claims, including completion of the cover sheet and attachment of the Medicare Advantage/Other third party Explanation of Benefits. EACH **Medicare Advantage** paper claim MUST have a cover sheet and appropriate EOB(s) attached. It is never acceptable to submit multiple paper claims with only one copy of the cover sheet and EOB. Claims submitted in this manner will be returned to the provider unprocessed.