State of New Jersey
Department of Human Services
Division of Medical Assistance and Health Services

MEDICAID ALERT

October 1993

TO: Providers of Durable Medical Equipment (DME), Prosthetics and Orthotics (P&O), Vision Care (Optical Appliances)

SUBJECT: Medicare/Medicaid Crossover Claims

EFFECTIVE: Immediately

PURPOSE: To inform providers that the automated Medicare/Medicaid crossover claims process between The Travelers Insurance Company (Travelers) and New Jersey **Medicaid** is scheduled to take place on or about January 1, 1994.

BACKGROUND: As you are aware, Travelers has been designated as the **Medicare** Part B Carrier in the Northeast (Region A) for all DME, P&O, and Vision Care (Optical Appliances) claims on behalf of the **Medicare** beneficiaries residing in New Jersey. Even though New Jersey providers are scheduled to make the transition from Pennsylvania Blue Shield (PBS) to Travelers on January 1, 1994, some providers defined as "early boarders" may be submitting claims to Travelers as early as October 1, 1993.

ACTION: Providers who submit Medicare claims for DME, P&O and Vision Care (Optical Appliances) services to Travelers prior to January 1, 1994, need to submit "hard copy" claims to New Jersey **Medicaid** to have the co-insurance and deductible payment considered.

The remaining providers continuing to submit Medicare claims for DME, P&O and Vision Care (Optical Appliances) services to PBS will use current Medicare/Medicaid crossover procedures through December 31, 1993.

If you have not already done so, please return to Paramax/Unisys the attached outreach letter requesting the ten-digit **Medicare** assigned provider number for DME, P&O and Vision Care (Optical Appliances). The addition of this **Medicare** provider number to the **Medicaid** provider file will assure a more accurate match of Medicare/Medicaid crossover claims.

If you have any questions or inquiries concerning this Medicaid Alert, please contact Paramax/Unisys Provider Services Unit, the Medicaid fiscal agent, at 1-800-776-6334.

Attachment

RETAIN THIS MEDICAID ALERT CHRONOLOGICALLY BEHIND THE ALERTS TAB (GREEN TAB MARKED "4")