



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

MEDICAID ALERT

September 1995

TO: ONLY NEW YORK HOSPITALS - CHIEF EXECUTIVE OFFICER
ROUTE TO: Accounting, Billing and Finance Offices

SUBJECT: Requirement for Submitting of "Explanation of Medicare Benefits" (EOMB) forms to New Jersey Medicaid program

EFFECTIVE: Immediately

BACKGROUND: The New Jersey Medicaid program requires the submission of the "Explanation of Medicare Benefits (EOMB)" form with a claim for services provided to a New Jersey Medicaid beneficiary who was also eligible for Medicare, who received care in a New York hospital.

New York hospitals that receive electronic funds transfer from Medicare (through Empire Blue Cross and Blue Shield) receive OMNIPRO printouts for claims for services provided to dually eligible Medicare/Medicaid beneficiaries. Since hospitals can not receive or request a "hard copy" remittance advice (RA), these "hard copy" EOMBs are unavailable to them.

ACTION: Effective immediately, the New Jersey Medicaid program will accept an OMNIPRO printout in lieu of the EOMB submitted to New Jersey Medicaid's fiscal agent with any claim for hospital services provided by a New York hospital to a New Jersey dually eligible Medicare/Medicaid beneficiary. An OMNIPRO printout contains the necessary information to satisfy Medicaid's former requirement of submitting the "Explanation of Medicare Benefits" (EOMB) form.

For information or questions concerning this Medicaid Alert, please contact Mr. Brian Turner, Hospital Reimbursement Unit, Division of Medical Assistance and Health Services, (609) 588-2693.

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