TIP SHEET:

Submitting an Institutional Claim for Medicare Part B Coverage

If Medicare Part A does not make a payment or does not cover the service, then the provider will need to submit the claim to Nevada Medicaid through the Provider Web Portal (EVS) as a regular Fee-for-Service (FFS) claim. Please follow these steps to submit an Institutional claim with Medicare Part B coverage.

Step 1: Select type of claim being submitted (Institutional).

Step 2: Select the Claim Type from the drop-down menu (Inpatient).

Step 3: Complete Provider Information, Patient Information and Claims Information as needed.

Step 4: Complete the Claim Information section and select the **Include Other Insurance** checkbox.

Step 5: Complete Diagnosis Codes and External Cause of Injury Diagnosis Codes, as necessary.

Step 6: Complete the Other Insurance Details to reflect the payment received by Medicare Part B for any Ancillary Services provided.

- Please note: The policy information **will not** auto populate in the Other Insurance Details panel. Other Insurance can be added by completing the following fields:

  - Carrier Name – Enter the other insurance carrier name
  - Carrier ID – Enter the other insurance carrier ID; this is also known as the electronic payer ID
  - Policy Holder Last Name – Enter the last name of the policy holder
  - First Name – Enter the first name of the policy holder
  - MI – Enter the middle initial of the policy holder
  - Policy ID – Enter the policy ID
  - Insurance Type – Select the insurance type from the drop-down list
  - Responsibility – Select the responsibility type from the drop-down list
  - Patient Relationship to Insured – Select the patient relationship to insured from the drop-down list
  - Payer Paid Amount – Enter the amount paid by the other insurance
  - Paid Date – Enter the date the other insurance paid
  - Remaining Patient Liability – Enter the remaining patient liability
  - Claim Filing Indicator – Select the claim filing indicator from the drop-down list

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- All fields marked with a red asterisk are required fields. Fields that are not marked with a red asterisk **may** be required depending on the situation.

- Click "Add Insurance" to add the Other Insurance Details to the claim.

- Click the sequence number of any other insurance line item to add the Claim Adjustment Details as reflected on the Medicare Part B Explanation of Benefits (EOB).

- When completing the "Other Insurance Details" and when selecting an option from the "Claim Filing Indicator" field, it is important to **not** select "CI-Commercial Insurance Co." The submitter should select the appropriate designation from the drop-down menu.

- See the image below for options when selecting the "Claim Filing Indicator" drop-down menu.

TIP SHEET:

Submitting an Institutional Claim for Medicare Part B Coverage
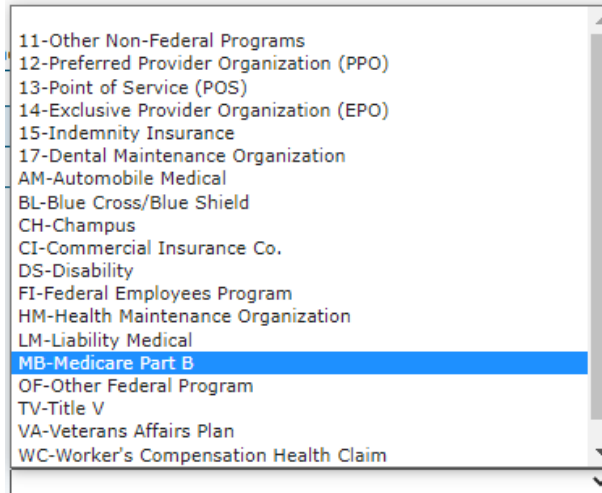
Step 7: Complete Condition Codes, Occurrence Codes, Value Codes, Surgical Procedures as necessary.
- For Medicare Part A exhaust claims, the Occurrence Code portion of the claim is required.
- For Medicare Part B only claims (recipient does not have Medicare Part A on file), the Value Codes portion of the claim is required.

Step 8: Add Service Details.
- Up to 50 service details can be added to an institutional claim
- Revenue Codes, Procedure Codes and Modifiers are searchable
- Click "Add" button to add each service detail
- Click "Remove" link to remove any service detail added to the claim in error
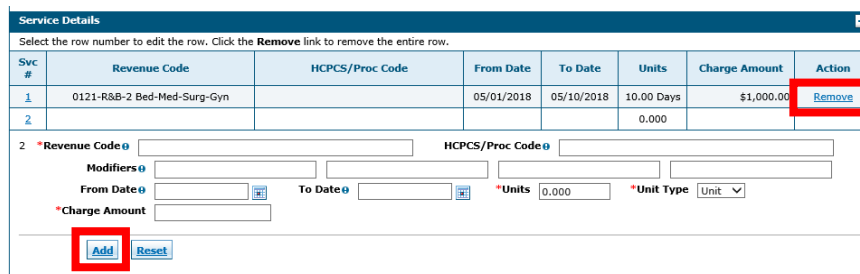
Step 9: Add Attachments as necessary. Note: It is not necessary to upload the EOB.

Step 10: Select "Submit" to submit the claim to Nevada Medicaid for processing.

Additional Notes: If you are attempting to copy a claim from one submission to another, the Medicare information "may" be present on the Other Insurance list. It is the responsibility of the user who is submitting the claim to review the copied claim for that information.