

**KMAP GENERAL BULLETIN 18034**

## **Medicare Crossover Claim Processing Changes Post-Implementation Update**

To comply with recently finalized Centers for Medicare & Medicaid Services (CMS) Managed Care regulations at Federal Register § 438.3(t), States that use the automated crossover process must require managed care organizations (MCOs) to enter into a Coordination of Benefits Agreement (COBA) with Medicare and accept and process automated crossover claims.

The COBA automatic crossover process allows CMS and the State to use a standardized contract that outlines criteria for the submission of eligibility information and Medicare adjudicated claim data that allows for the coordination of benefits in claims processing.

CMS uses a single-source national crossover contractor, the Benefits Coordination & Recovery Center (BCRC), to handle coordination of crossover data. This entity is also referred to as the Coordination of Benefits Contractor (COBC).

Effective January 1, 2018, all crossover claim files for MCO-assigned members were to be sent from the COBC directly to the applicable MCO. The routing of the affected claims is determined by the member's assignment dates with the MCO or Kansas Medical Assistance Program (KMAP). Providers do not need to change the way crossover claims are billed. COBC will route the claim to the appropriate payer.

**Due to a COBC system delay, all Kansas automatic crossover claims sent January 1-6, 2018, were sent directly to KMAP. In situations where the member was assigned to an MCO on the dates of service of the claim, the provider received the KMAP denial EOB 2534 (DENIED. THESE SERVICES ARE COVERED THROUGH THE BENEFICIARY'S KANCARE MANAGED CARE ORGANIZATION (MCO) FOR THE DATE(S) OF SERVICE BILLED. PAPER CLAIMS SUBMITTED TO KMAP FOR BENEFICIARIES ASSIGNED TO ONE OF THE MCOS MUST BE SENT DIRECTLY TO THE APPROPRIATE MCO.)**

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**Customer Service**

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.  
Monday - Friday

DXC Technology is the fiscal agent of KMAP.

## Medicare Crossover Claim Processing Changes Post-Implementation Update

On January 25, 2018, KMAP sent the impacted claims to the appropriate MCOs for processing. If providers have questions regarding the status of these automatic crossover claims, they can contact the MCO to whom the member is assigned.

Reference General Bulletin 17011, General Bulletin 17037, General Bulletin 17189, and General Bulletin 17261 on the [Bulletins](#) page of the KMAP website.

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