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# Medicare

## Intermediary Manual

### Part 3 – Claims Process

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Department of Health &  
Human Services (DHHS)  
Centers for Medicare &  
Medicaid Services (CMS)

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| <u>HEADER SECTION NUMBERS</u>                    | <u>PAGES TO INSERT</u>  | <u>PAGES TO DELETE</u>                      |
|--|-------------------------|---|
| Table of Contents – Chapter V<br>3-3401 – 3-3496 | 1 - 10 (10 pp.)<br>None | 4-1 – 4-6 (6 pp.)<br>4-15 – 4-618 (214 pp.) |

**NEW/REVISED MATERIAL--EFFECTIVE DATE: Not Applicable**  
**IMPLEMENTATION DATE Not Applicable**

Chapter V, Special Provisions Related to Payment. This chapter is being deleted and the related instructions are issued in the CMS Internet-only manual (IOM). The table of contents is replaced with a crosswalk from the old Part 3 to the related instruction in the IOM. If the material from MIM, Part 3, is no longer applicable, we indicate that it was not moved to the internet manual by entering “deleted” in the crosswalk. For each included cross-reference, we provide the old manual number (e.g., a3), and the IOM number (e.g., 100-4 for Claims Processing), and the IOM chapter number, and the section (§) number.

The Internet-only manual can be found at <http://www.cms.hhs.gov/manuals>

**These instructions should be implemented within your current operating budget.**

## CHAPTER V - SPECIAL PROVISIONS RELATED TO PAYMENT

**NOTE:** Chapter V has been moved to the new CMS Manual System, mainly in the Medicare Claims Processing Manual (Pub. 100-4) and the Medicare Secondary Payer Manual (Pub. 100-5). The new manuals can be found at <http://www.cms.hhs.gov/manuals>. A crosswalk from the deleted manual sections to the new manual sections follows.

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|   | Old §      | Pub, Chapter, & §  |
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|   | Old §  | Pub, Chapter, & §   |
|---|--|---|
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|--|---|--|
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| Individuals Not Subject to the Limitation on Payment   | A3-3491.3                                       | 100-5, 2-§10.2   |
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| Identification of Cases and Action Where There Is Indication of Possible EGHP Coverage                             | A3-3491.5                                       | 100-5, 5-§30.8, 7-§30.1.1, 30.1.2                                      |
| Action by Providers Where Medicare Is Secondary to EGHP  | A3-3491.6                                       | 100-5, 1-§10.9, 3-§30.1, 7-§10.1.3                                     |
| Limitation on Right of Provider or Facility to Charge a Beneficiary  | A3-3491.7                                       | 100-5, 3-§10.2   |
| Effect of EGHP Payments on Deductible and Coinsurance  | A3-3491.8                                       | 100-5, 1-§40   |
| Employer Plan Denies Claim for Primary Benefits  | A3-3491.9                                       | 100-5, 1-§10.7, 10.7.1, 3-§40.3, 5-§40.3.1, 7-§30.3                    |
| Referral of Cases to RO  | A3-3491.10                                      | 100-5, 7-§10.2.3   |
| Amount of Secondary Medicare Payments Where EGHP Pays in Part for Items and Services                               | A3-3491.11<br>Replaced by A3-IM3497.2, 5, and 6 | 100-5, 2-§50.1A  |
| Effect of Secondary Payments on Part A Utilization   | A3-3491.12                                      | 100-5, 1-§10, 40   |
| Recovery of Mistaken Primary Medicare Payments   | A3-3491.13                                      | 100-5, 7-§10, 10.1.1, 30.1, 30.4                                       |
| Advice to Providers, Physicians, and Beneficiaries   | A3-3491.14                                      | 100-5, 3-§10   |
| Incorrect EGHP Primary Payments  | A3-3491.15                                      | 100-5, 7-§10.6   |
| Claimant's Right to Take Legal Action Against an EGHP  | A3-3491.16                                      | 100-5, 1-§30   |
| Special Rules For Services Furnished By Source Outside EGHP Prepaid Health Plan                                    | A3-3491.17                                      | 100-5, 5-§40.1.2, 40.1.2.1, 40.1.3, 40.2                               |
| <b>Medicare as Secondary Payer for Disabled Individuals</b>  |   |  |

|   | Old §       | Pub, Chapter, & §  |
|---|-------------|--|
| Medicare as Secondary Payer for Disabled Individuals  | A3-3492     | 100-5, 1-§20, 30, 80, 100, 2-§30, 3-§20, 30.3, 5-§20, 7-10.1, 30.1.1 |
| Federal Government's Right to Sue and Collect Double Damages  | A3-3495     | 100-5, 1-§110  |
| Excise Tax Penalties for Contributors to Nonconforming Group Health Plans   | A3-3496     | 100-5, 1-§80   |
| When Medicare Secondary Benefits Are Payable And Not Payable  | A3-IM3497   | 100-5, 1-§10.8   |
| Definition of Third Party Payer   | A3-IM3497.1 | 100-5, 1-§20   |
| Definition of Gross Amount Payable by Medicare (This supersedes §§3407.3, 3490.7 and 3491.11)                             | A3-IM3497.2 | 100-5, 2-§50.1A  |
| When Medicare Secondary Benefits Are Not Payable (This supersedes §§3407.2A and 3490.8)                                   | A3-IM3497.3 | 100-5, 2-§50.1   |
| When Medicare Secondary Benefits Are Not Payable (This supersedes §§3407.2A and 3490.8)                                   | A3-IM3497.4 | 100-5, 2-§50.1   |
| When Medicare Secondary Benefits Are Payable (This supersedes §§3407.3, 3490.B3, and 3491.11)                             | A3-IM3497.5 | 100-5, 2-§50.1A  |
| Calculating Medicare Secondary Payments When Proper Claim Has Been Filed (This supersedes §§3407.B3, 3490.7, and 3491.11) | A3-IM3497.6 | 100-5, 2-§50.1A  |
| Calculating Medicare Secondary Payments When Proper Claim Has Not Been Filed With Third Party Payer                       | A3-IM3497.7 | 100-5, 1-§40   |
| Effect of Primary Payments on Deductibles and Coinsurance (This supersedes §§3407.2B, 3490.10, and 3491.8)                | A3-IM3497.8 | 100-5, 3-§10.2   |
| Duplicate Payments  | A3-IM3497.9 | 100-5, 3-§10.5   |