

Allocation Best Practices and Tips (Laboratory)

- **HDX:** Plan/Payer Assignment order will automatically allocate the Plan/Payer in the order that the HDX response comes back. Users will still need to review the insurance to ensure the policies are in correct order for Coordination of Benefits (COB).
 - *For example, if Mainecare response comes back first, Mainecare will appear as the primary insurance which needs to be corrected.*
- **Mainecare:**
 - Mainecare is always allocated last.
- **No Insurance:**
 - Please select only one indicator per encounter if no insurance information presented/available:
 - **Pt has no insurance** = Use when the patient truly does not have insurance (remember Free Care and Kennebec Access to Care are not insurance)
 - **Make Encounter Self-Pay** = Use when the patient has insurance but isn't using it for the encounter or when an organizational Guarantor is being used.
 - **Additional Health Plans Expected** = Use when the patient has insurance, but they do not have the information with them to create the payer health plan.
 - *Make sure there is a comment when Additional Health Plans Expected is used.*
- **EBPA:**
 - EBPA policies for Maine General employees need to be created as “EBPA Anthem MG Employees.”
 - Policies need to contain the “IMK” prefix and “EB” at the end.
 - All “IMKT915” policies are inactive as of 1/1/2023.
- **Medicare:**
 - Medicare IME should only be used by the Admit Unit, never on outpatient lab encounters.
 - Blue Cross policy numbers beginning with CVM, DVM & MEW are Blue Cross Medicare Advantage plans → Medicare Replacement and should not be allocated with Medicare A/B.
 - COB issues - Medicare B allocated before Medicare A, Medicare supplemental plans primary such as AARP.
 - Medicare A comes before Medicare B
 - Medicare Supplemental plans, if any, come after Medicare A/B
 - Mainecare, if any, comes last
 - Medicare A/B allocated with Medicare Advantage Plan is not appropriate as it is considered “double billing”
 - Medicare Advantage Plans replace Medicare A/B (Traditional Medicare)
 - Old Medicare A/B HIC numbers (SSN) need to be updated to the new MBI Alpha + Numeric
 - US Family Health, Veterans Administration or VACCN allocated with Medicare A/B or Medicare Advantage cannot be billed together.
 - Patient Employed or Retired:
 - If the patient is still employed and has Commercial Insurance in addition to Medicare A/B, the Commercial Insurance is first, and Medicare will be secondary.

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- If the patient is retired, then Medicare will be primary and Commercial Insurance will be secondary
- There are times when the patient only has either Medicare A or Medicare B, verify in the HDX response:

Message Text
Lifetime Psychiatric Base Days: 190
Lifetime Psychiatric Remaining Days: 190
Part A Entitlement - ACTIVE: 04/01/2022
Part B Entitlement: Inactive
Lifetime Reserve Days Remaining: 60

- Blank Medicare HMO/ other plan allocated - these are created by HDX when Medicare A/B eligibility is run and patient has a Med Advantage - these should be deleted if not being used the day it is created or if found after, a coverage period to Date of Yesterday added and unallocated from the encounter.
- **Blue Cross Blue Shield**
 - Both VNC & VND are Medicare Supplemental Plans and should not be allocated as primary or alone.
 - Either Medicare A/B or a Medicare Advantage plan should be allocated first.
 - VNC should be created as a BC Maine plan.
 - VND should be created as BC Out of State.
 - All Federal BC policy numbers begin with an R then all numbers: R1245648125.
- **Tricare:**
 - Tricare for Life is a Medicare Supplemental Plan and should not be Primary, either Medicare A/B or a Medicare Advantage plan should be allocated first.
 - Tricare East should not be allocated with Medicare A/B or a Med Advantage Plan - it transitions to Tricare for Life when the patient becomes eligible for Medicare.
 - Review all Tricare West payer health plans as Tricare East is the local administrator for the East.
 - The HDX response will say East or West.
 - Tricare and US Family Health, Veterans Admin, VACCN cannot be billed together - this is “double billing.”
- **Government Employees Health Association (GEHA)**
 - GEHA is a secondary insurance.
 - GEHA ASA is a primary insurance for people from the Northeast.
- **Worker’s Comp**
 - Workplace Health & Nursing Home Policy number should be the patient's Social Security Number (Do not use xxx-xx-0011) or NONE if the patient refuses to provide it.

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How to differentiate between a Medicare Advantage/Replacement and Medicare Supplemental plans

If user clicks on “Order Policies for a Patient or Encounter,” the Product Line or Payer/Health Plan column will indicate what type of insurance the plan is:

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Order Policies for a Patient

Policy Information and Subscriber Information

Payer/Health Plan	Product Line	Health Plan T...	Pt. Relationship	Birth Date	Gender
Mainecare/Mainecare	Medicaid traditional	Health	Self	[REDACTED]	Female
Medicare/Medicare A	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
Medicare/Medicare B	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
WellCare HealthPlans/W...	Medicare HMO	Health	Self	[REDACTED]	Female

* A policy with this symbol is court-mandated to be the primary policy.

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Order Policies for a Patient

Policy Information and Subscriber Information

Payer/Health Plan	Product Line	Health Plan T...	Pt. Relationship	Birth Date	Gender
Medicare/Medicare A	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
Medicare/Medicare B	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
Medicare/Medicare IME	Other government	Indirect Medi...	Self	[REDACTED]	Female
Aetna/Aetna Medicare M...	Medicare HMO	Health	Self	[REDACTED]	Female

* A policy with this symbol is court-mandated to be the primary policy.

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Order Policies for an Encounter

Policy Information and Subscriber Information

Payer/Health Plan	Product Line	Health Plan T...	Pt. Relationship	Birth Date	Gender
Medicare/Medicare A	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
Medicare/Medicare B	Medicare Traditional	Medicare Par...	Self	[REDACTED]	Female
AARP/AARP Supplement	Medigap	Health	Self	[REDACTED]	Female

* A policy with this symbol is court-mandated to be the primary policy.