



Pharmacy Balance Billing

for EmblemHealth Dual-Eligible Members





Don't miss your opportunity to
balance bill New York State Medicaid
through the eMedNY system for
EmblemHealth dual-eligible members

You can help EmblemHealth dual-eligible members (with Medicare and Medicaid benefits) including Qualified Medicare Beneficiary (QMB) receive no-cost diabetic supplies and other Part B medications by taking a few simple steps.

The Centers for Medicare & Medicaid Services (CMS) prohibits providers from requesting payment from dual-eligible members. However, pharmacies can receive additional payment if they balance bill all applicable Part B items to New York State’s eMedNY program on their members’ behalf.

This guide provides an easy, step-by-step list on how to complete the billing process for dual members using eMedNY’s ePACES program.

EmblemHealth is here for our members and providers. We are providing this guide to you for your reference. See page 8 for eMedNY contact information if you have questions.

Sample Member ID Card

 <p>VIP Dual Reserve (HMO D-SNP) No Referral Required</p> <hr/> <p>MEMBER: Sample Member ID NUMBER: KXXXXXXXX01</p> <hr/> <p>Network: VIP Reserve</p> <p>Copay: PCP \$XX SPEC \$XX Urgent: \$XX ER \$XX</p> <p>Rx BIN#: 400023 Rx PCN#: 0020050403 Rx GRP#: KHYA CMS#: H5991-010</p> <p>Medicaid COB may apply</p>	<p style="text-align: right;">emblemhealth.com/medicare</p> <p>Customer Service: 877-344-7364 (TTY: 711) Behavioral Health: 888-447-2526 Pharmacy: 877-444-7097</p> <p>PROVIDERS: Use emblemhealth.com/providers to check eligibility, find network providers, and see all preauthorization requirements and UM programs.</p> <p>Provider Service: 866-447-9717</p> <p>Medical/Hospital Claims: EmblemHealth, PO Box 2845, New York, NY 10116-2845, Payor ID: 55247. Behavioral Health Claims: Emblem Behavioral Health Services, PO Box 1850, Hicksville, NY 11802.</p> <p>Underwritten by Health Insurance Plan of Greater New York (HIP)</p>
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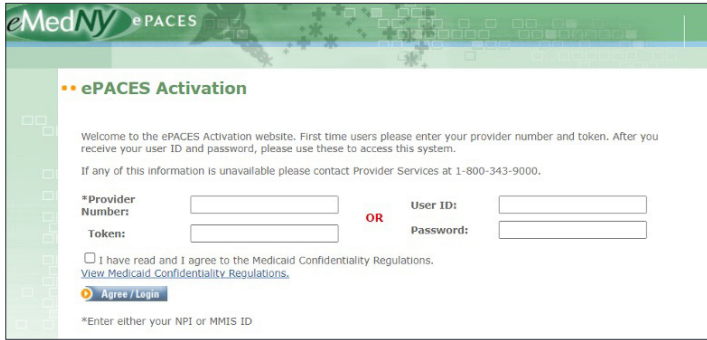


The balance must be billed to Medicaid on the eMedNY site at: emedny.org/index.

Note: This process cannot be completed as an adjudicated claim at Place of Service. It must be done on ePACES.



The pharmacy needs to be enrolled with the NY Medicaid ePACES program. Pharmacies can enroll by clicking on the Provider Enrollment tab.



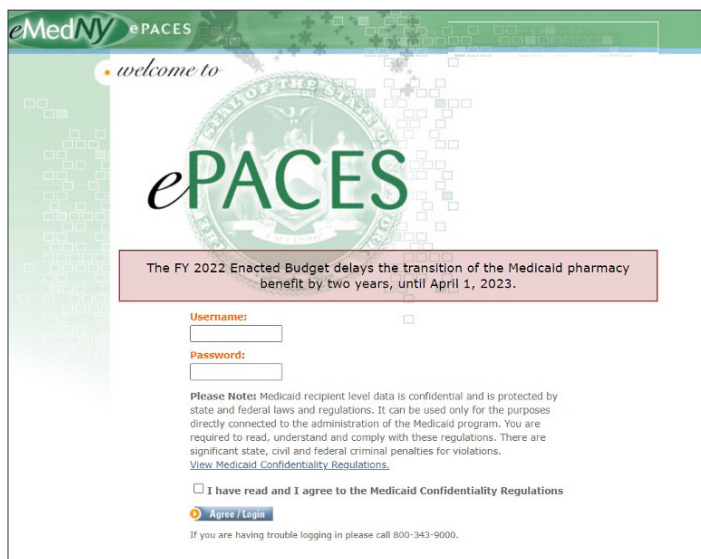
After enrolling, the pharmacy then needs to activate their ePACES identification.



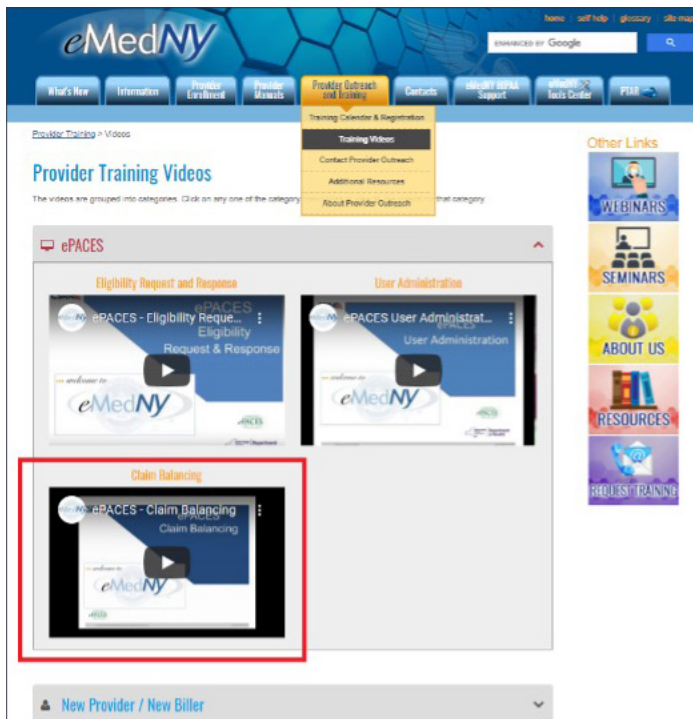
Frequently Asked Questions about ePACES is available on the eMedNY Tools Center tab.



If already enrolled, click on Login ePACES from the eMedNY main landing page.

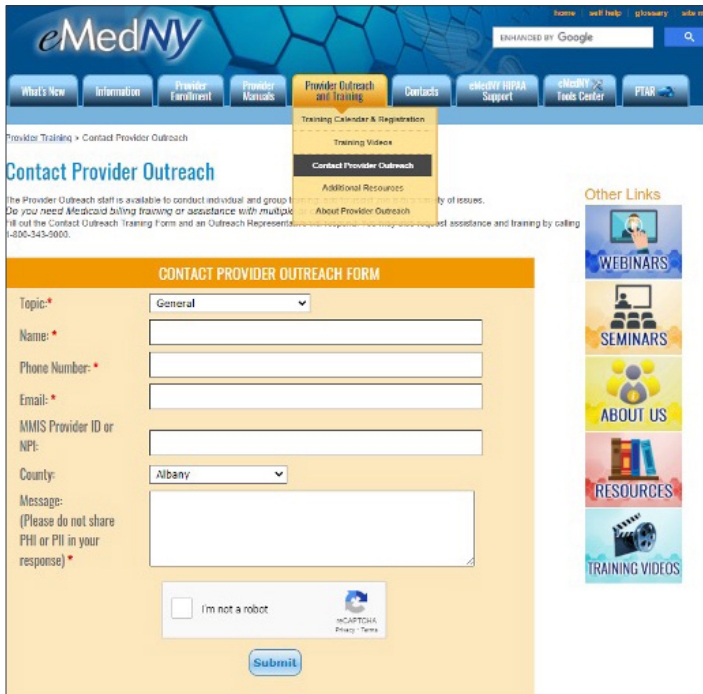


Then sign in to ePACES with the username and password provided. Once signed in, the pharmacy will be able to navigate to the page to submit claims.



For instructions on how to submit claims, see “Training Videos” on the eMedNY Provider Outreach and Training tab.

- The video for “Claim Balancing” shows each item that needs to be populated, and how to submit a manual claim on the ePACES site.



The pharmacy can contact eMedNY to request individual and group training through the Provider Outreach and Training tab.



For pertinent contacts and telephone numbers to reach a live representative, see “Information for all Providers” on the eMedNY Provider Manuals tab.



Training Requests

Requests for individual provider training can be made by calling: **800-343-9000**, or emailing: **emednyproviderrelations@csra.com**.

Training seminars are also available and are designed for specific provider types.

Registration, locations, and dates are available online at: **emedny.org/training/index.aspx**.

Telephone Directory

If you are a:

- Durable Medical Equipment (or a pharmacy processing these types of claims);
- Laboratory;
- Hearing Aid; or
- Transportation Provider

Call 800-343-9000, Option 4

Then, depending on your question:

If your question is concerning:	Choose:
<ul style="list-style-type: none">• New enrollment• ePACES enrollment• TSN/ETIN applications	Sub-option 1
<ul style="list-style-type: none">• Explanation of eligibility response• UT service authorization• POS Device Support	Sub-option 2
<ul style="list-style-type: none">• Claims• Billing• Remittance• Form orders• Prior approval questions	Sub-option 3

eMedNY Call Center Hours of Operation

For provider inquiries pertaining to non-pharmacy billing or claims,
or provider enrollment: Monday through Friday 7:30 am – 6 pm ET

For provider inquiries pertaining to eligibility, service authorizations,
dispensing validation systems, and pharmacy claims:

Monday through Friday 7 am – 10 pm ET

Weekends and Holidays 8:30 am – 5:30 pm ET

Things to Remember

- This process is for billing the balance of cost-share only. The claim must be billed to the Medicare Advantage plan first.
- Prescription items required to be balance billed through ePACES are not being paid as a Part D claim but as a Part B (medical) claim even though the pharmacy has billed the Medicare Advantage plan. It is automatically paid as a Part B claim by the Medicare Advantage plan.
- A message will be returned from the Express Scripts online claim adjudication if the member has secondary coverage, and it is the pharmacy's responsibility to ask for the member's information or access it from NY Medicaid or CMS.
- If you need assistance with member verification or other help with state-agency claim processing, please contact the Express Scripts Pharmacy Help Desk at **800-922-1557**.
- If a member does have secondary coverage, the pharmacy is not allowed to balance bill the member per CMS guidelines.
- The items that could be billed as a balance bill can include (but are not limited to) diabetic supplies, inhalants for chronic obstructive pulmonary disease, immunosuppressants, and oral chemotherapy. These are frequently covered under a member's Part B coverage, and the balance must be submitted to NY Medicaid via ePACES.



