Research Billing Buzz

A Newsletter from the Office of Clinical Research Billing Compliance

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Healthcare billing can be quite confusing and it is even more so when we add the complexities of research. In this issue of the Research Billing Buzz we will learn more about Medicare Advantage and how it affects research participants.

The Basics

Medicare defines Medicare Advantage Plans (MA) as “a type of Medicare health plan offered by a private company that contracts with Medicare to provide all your Part A and Part B benefits. Most Medicare Advantage Plans also offer prescription drug coverage”.

In other words, a private insurance company – like Blue Cross/Blue Shield, Aetna or United – contracts with Medicare to offer services to Medicare enrollees. Most of these plans offer many extra benefits, such as dental, vision and prescription coverage.

Medicare Advantage and Clinical Trials

In a previous issue of the newsletter, we discussed in detail what a qualifying clinical trial is (see [here](#) for a refresher). In recap, the study must comply with these specifications to be a qualifying trial:
If the study is qualifying and the Prospective Reimbursement Analysis (PRA) delineates charges as billable to insurance, Original Medicare becomes the participant’s primary insurance and their MA plan then gets billed as the secondary. JHM’s Financial Clearance process takes this into account when attaining authorization from the insurance.

Research participants are not expecting to receive Explanation of Benefits (EOB) documents from Original Medicare since they opted out of it in favor of the MA plan. Therefore, the subject must be aware of how their billing changes when they consent for a qualifying clinical trial.

CRBC must make sure that charges are billed to the correct payer and with all the indicators mandated by Medicare.

**Medicare Advantage and Device Studies**

In contrast, when a research subject participates in a device study (IDE, HDE, 510K, PMA, etc.) the MA plan remains the primary insurance and Original Medicare is not involved at all. Remember that the participant might have deductibles and/or copays to fulfil.
In Summary

It can be confusing for research participants with a MA insurance to understand the complexities of Medicare rules and regulations. Research teams and financial counselors should be aware of this rule so they are better able to explain the financial obligations for participants in qualifying clinical studies.
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<tr>
<th>Original Medicare Becomes Participant’s Primary Insurance</th>
<th>The Medicare Advantage Plan is the Primary Insurance.</th>
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<tr>
<td>The MA Plan Becomes the Secondary insurance</td>
<td>The Participant might have another insurance or Not.</td>
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<td>The Participant Might Have Deductibles and Copays.</td>
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<td>The Participant should be aware that they will receive EOBs from Original Medicare and the MA Plan</td>
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Note: We will not publish Research Billing Buzz in December

Need Help?

If you need help, have questions or want to suggest topics for future newsletters you can email us at:

CLINIRESBILLING@exchange.johnshopkins.edu

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Johns Hopkins Medicine - Clinical Research Billing Compliance
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