

PARTICIPATING VS. NON-PARTICIPATING PROVIDERS

PARTICIPATING PROVIDERS

- A participating provider is one who voluntarily and in advance enters into an agreement in writing to provide all covered services for all Medicare Part B beneficiaries on an assigned basis.
- Agrees to accept Medicare-approved amount as payment in full.
- May not collect more than applicable deductible and coinsurance for covered services from patient. Payment for non-covered services may also be collected.
- Charges are not subject to the limiting charge.
- Medicare payment paid directly to the provider.
- Mandatory claims submission applies.
- Placement in directory of Participating Providers (MEDPARD).
- Reimbursement is 5 percent higher than the non-participating amount.
- Medigap information is transferred.
- Patient referral service by hospital.

PARTICIPATING VS. NON-PARTICIPATING PROVIDERS

NON-PARTICIPATING PROVIDERS

- A non-participating provider has not entered into an agreement to accept assignment on all Medicare claims.
- Can elect to accept assignment or not accept assignment on a claim-by-claim basis.
- If the provider performs elective surgery costing more than \$500, the beneficiary must be notified in writing of the expected financial responsibility.
- Cannot bill the patient more than the limiting charge on non-assigned claims.
- Beneficiary receives payment on non-assigned claims.
- Mandatory claims submission applies.
- Clinical laboratory services and drugs and biologicals must be billed as assigned.
- Approved amount is 5 percent less than participating – even if assignment is accepted on the claim.
- Medigap information is not transferred.