

April 15, 2024

MFTs and MHCs Now a Covered Medicare Benefit Effective 1/1/2024

Dear provider,

Effective January 1, 2024, Marriage and Family Therapists (MFTs) and Mental Health Counselors (MHCs) are a covered Medicare benefit for the Health Plan of San Mateo (HPSM) members. This means MFT and MHC providers rendering services to HPSM members with CareAdvantage must be enrolled with Medicare (via the PECOS system).

Register with the PECOS system here: <https://pecos.cms.hhs.gov/pecos/login.do>

Filing CareAdvantage Claims using eHEALTHsuite:

- **Before January 1, 2024:** MFTs and MHCs have been instructed to select “MC” when entering claims into eHEALTHsuite for dates of service BEFORE January 1, 2024.
- **On and after January 1, 2024:** Claims for CareAdvantage members should be entered using “CA” because claims will process using the CareAdvantage Medicare benefit first.

Medicare Fee-For-Service (FFS) applies a 25% reduction in payment to these two provider types that HPSM is not going to adopt for our contracted network. Contracted providers will continue to receive 100% of Medicare reimbursement.

Coordination of CareAdvantage benefits: CareAdvantage claims will be split into two payments, with the Medi-Cal and Medicare benefits reimbursing separately. The net reimbursement amount between the two claims will equal 100% of Medicare minus transaction payments (or sequestration) for contracted providers. The initial payment will be under the Medicare benefit and will equal the Medicare allowed minus cost sharing and other required costs such as sequestration. Then, secondary

payment under the Medi-Cal benefit will be issued to cover the cost sharing portion withheld by Medicare.

Filing Secondary Claims: Claims for members with Medicare FFS as the primary insurance will need to be submitted to Medicare directly before they will be considered for payment by HPSM. These claims will either be routed directly to HPSM by Medicare or, in some cases, must be submitted to HPSM with the Explanation of Medicare Benefits (EOMB) for secondary reimbursement to be considered. Learn more about Medicare/Medi-Cal Crossover claims policy in Part 1 Medicare/Medi-Cal Crossover Claims Overview and Part 2 – Medicare/Medi-Cal Crossover Claims: CMS 1500 of the Medi-Cal Provider Manual: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/A825DECF-BCB4-41E1-BBCE-3A21560F903B/medicrcms.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYyIPyP5ULO

Review the Center for Medicare & Medicaid Services' FAQ regarding enrollment here: <https://www.cms.gov/files/document/marriage-and-family-therapists-and-mental-health-counselors-faq.pdf>

Learn more about this change in coverage here: <https://www.cms.gov/medicare/payment/fee-schedules/physician-fee-schedule/marriage-and-family-therapists-mental-health-counselors>

Please direct claims-related questions to HPSM's Claims team at ClaimsInquiries@hpsm.org. All other questions can be directed to HPSM's Provider Services team at PSInquiries@hpsm.org.

Thank you,
The Health Plan of San Mateo