

Important Eligibility Information for Community-Based Substance Abuse Service Providers

The following charts indicate coverage groups that do not have Medicaid coverage for community-based Substance Abuse benefits and coverage groups where Medicare is the primary payer. All other coverage groups **have** Substance Abuse benefits. Also, look/listen for the MCO in the EVS message. For HealthChoice recipients, bill the MCO if listed or bill Medicaid FFS if no MCO is listed. For PAC recipients, bill the MCO if listed but do not bill Medicaid FFS if no MCO is listed. Substance abuse services are not covered for PAC recipients prior to MCO enrollment.

NOT ELIGIBLE FOR SUBSTANCE ABUSE BENEFITS

Coverage Group	Online EVS Message	Phone EVS Message
Family Planning – P10	Benefit Description – Recipient has Family Planning coverage ONLY. Abortion and Infertility services not covered.	Recipient has Family Planning coverage ONLY. Abortion and Infertility services not covered.
Long Term Care for Aged, Blind and Disabled – L01-L99	Facilities – Recipient is in Facility (EVS will also tell you if the recipient is Medicare)	Recipient is in a Facility (EVS will also tell you if the recipient is Medicare)
Undocumented or Ineligible Aliens – X02	Benefit Description – Recipient has EMERGENCY MEDICAL services ONLY	Category limited to approved emergency services on approved dates only.
Specified Low-Income Medicare Beneficiaries (SLMB, SLMB II) – S07, S14 [Client does not have Medicaid benefits. There is no coverage if Medicare does not pay.]	Benefit Description – Recipient is SLMB (Recipient is eligible for Medicare part B premium payment only)	Eligible for Medicare Part B premium payment only.

The following chart includes the coverage group that must be billed to Medicare. If a recipient is in another coverage group and they also have Medicare it will be noted in the EVS message. Do not submit claims to Medicaid. For full dual eligible recipients, as well as Qualified Medicare Beneficiaries (QMBs), bill Medicare and then claims will automatically be forwarded to Medicaid for the Medicaid share.

COVERAGE GROUPS WITH MEDICARE

Coverage Group	Online EVS Message	Phone EVS Message
Qualified Medicare Beneficiary (QMB) – S03	Benefit Description – Recipient is QMB, Recipient has MEDICARE (Provider must bill the Medicare carrier first)	Medicare primary payer