

# DUAL ELIGIBLE Patient Insurance Status and Where Physicians Bill for Services

PATIENT MEDICARE & MEDI-CAL STATUS	PHYSICIAN CONTRACTED WITH HEALTH PLAN		PHYSICIAN NOT CONTRACTED WITH HEALTH PLAN		AMOUNT PAYABLE
	MEDICARE PHYSICIAN SERVICE CLAIM	MEDI-CAL WRAP/ COPAYMENT CROSSOVER CLAIM	MEDICARE PHYSICIAN SERVICE CLAIM	MEDI-CAL WRAP/ COPAYMENT CROSSOVER CLAIM	
Original/fee- for-service (FFS) Medicare  FFS Medi-Cal	Not Applicable		Bill Medicare directly	Medi-Cal will automatically receive and process claims	Medicare: 80% of Medicare fee schedule  Medi-Cal: Amount allowable under state law
Original Medicare (FFS)  Medi-Cal managed care plan	Not Applicable		Bill Medicare directly	Bill Medi-Cal managed care plan (no contract required)	Medicare: 80% of Medicare fee schedule  Medi-Cal: Amount allowable under state law
Medicare Advantage (MA) plan  FFS Medi-Cal	Bill Medicare Advantage plan	Bill Medi-Cal directly	Bill MA plan (only for continuity of care or emergency services)	Bill Medi-Cal directly	Medicare: Refer to health plan contract terms  Medi-Cal: Amount allowable under state law
Medicare Advantage (MA) plan  Medi-Cal managed care plan	Bill Medicare Advantage plan	Bill Medi-Cal managed care plan	Bill MA plan (only for continuity of care or emergency services)	Bill Medi-Cal managed care plan (no contract required)	Medicare: Refer to health plan contract terms  Medi-Cal: Amount allowable under state law
Cal MediConnect (combined Medicare and Medi-Cal)	Bill Cal MediConnect plan		Bill Cal MediConnect plan (only for continuity of care or emergency services)		Medicare: Refer to health plan contract terms  Medi-Cal: Refer to health plan contract terms
Program of All-inclusive Care for the Elderly (PACE)	Bill PACE plan		Bill PACE plan (only for continuity of care or emergency services)		Medicare: Refer to health plan contract terms  Medi-Cal: Refer to health plan contract terms

