

10.2 - Bill Processing

(Rev. 30, 09-05-03)

The CMS will pay on the behalf of the HCPP, through its intermediaries, all provider costs for covered items and services furnished to the HCPP's Medicare enrollees. A limited number of nonprovider Part B services are paid by carriers (same as cost reimbursed HMOs/CMPs).

The HCPP agreement with CMS must provide that, in paying for services furnished to the HCPP's enrollees, the HCPP is responsible for:

- Determining the eligibility of individuals to receive such items and services through the HCPP;
- Making proper coverage decisions and appropriate payment for items and services for which the HCPP's Medicare enrollees are eligible; and
- Carrying out any other procedures that CMS may require from time to time.

All health care services furnished by the HCPP may be provided through facilities directly (facilities that are owned or related through common control) or under arrangement. An arrangement is defined as a written agreement executed between the HCPP and another entity in which the other entity agrees to furnish specified services to the HCPP's Medicare enrollees. However, the HCPP retains responsibility for those services.