## 140.2 - The Medicare HCPP's Obligations

(Rev. 30, 09-05-03)

When the Medicare program is not the primary payer for covered Medicare services provided to Medicare members of an HCPP, the organization must:

- Identify payers that are primary to Medicare under §1862(b) of the Act;
- Determine the amounts payable by these payers; and
  - Take steps in accordance with these instructions and the instructions in §§3407-3419 and §§3489-3492 of the Medicare Intermediary Manual to assure that Medicare pays only secondary benefits when another insurer is primary payer.

In addition, in situations when the HCPP may charge another HCPP or the Medicare beneficiary for services when Medicare is not the primary payer, it may also require the enrollee to sign a subrogation agreement under which the HCPP is given the rights the beneficiary has against the third party.