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| LOCAL COMMISSIONERS MEMORANDUM |
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DSS-4037EL (Rev. 9/89)

Transmittal No: 96 LCM-74

Date: August 15, 1996

Division: Health and Long
Term Care

TO: Local District Commissioners

SUBJECT: Payment of the Medicare coinsurance and deductible amounts
for the technical component of the radiology services
provided by corporations providing portable care.

ATTACHMENTS: None

In settlement of litigation, the Department must make payment of the Medicare coinsurance and deductible amounts for the technical component of the radiology services provided by suppliers providing portable care.

The Department is mandated, by federal law, to pay the Medicare coinsurance and deductible amounts for Qualified Medicare Beneficiaries (QMB's) whether or not the services provided are included in New York's Medicaid Plan, as long as the services could be covered under Federal Medicaid.

We will be instructing providers to use the Department's Electronic Medicaid Eligibility Verification System (EMEVS) to verify that an individual is a QMB. Claims will only be paid for QMB's when the portable X-ray suppliers claim indicates Medicare has approved an amount paid for that claim.

Questions may be directed to Joyce Usher at (518) 473-5889, 89A143 or to Pat Longtin at (518) 474-0160, OMB160.

Martin J. Conroy
Acting Deputy Commissioner
Division of Health and Long Term Care