Greenlight *your Medicare claims at retail pharmacy*

Reducing Medicare claim rejections is simple. Just follow these easy steps:

STOP

Who is paying for the supply?

OR

Federal Government

Private Insurance

WAIT

Does the patient require insulin?

Know the quantity limits:

For patients requiring insulin

300

TEST STRIPS

per 3 month period

For patients NOT requiring insulin

100

TEST STRIPS

per 3 month period

Don't forget to include ALL Medicare prescription requirements!

GO

Bill the prescription through Medicare Part B

If the patient has Medicare Advantage, then you bill Medicare Advantage (Part C).

Remember! A patient CANNOT have both Medicare Advantage and Medicare Supplemental/Medigap

Navigating the different types of Medicare plans and coverage for retail pharmacies

MEDICARE PART A

Inpatient Services Only

Hospitalization or a skilled nursing facility

MEDICARE PART B

Outpatient Services Only

Doctor visits, laboratory, radiology, durable medical equipment, and **blood glucose supplies for a person with diabetes.**

MEDICARE PART C

Medicare Advantage Plan

Same as Part A & B coverage, provided by private insurance companies

MEDICARE PART D

Prescription Drug Coverage Only

Coverage provided by private insurance companies

Stop! Part D does NOT cover blood glucose testing supplies

Always bill the blood glucose testing supply prescription through Part B unless the patient has Medicare Advantage, then you bill Medicare Advantage

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