



Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary


### MARYLAND MEDICAL ASSISTANCE PROGRAM

Hospital Transmittal No. 320

June 3, 2025

To: Hospital Administrators

From: Sandy Kick, Director,   
Office of Medical Benefits Management

Charlie Crisp, Director,   
Office of Provider Services

Re: Medicare Explanation of Benefit Documentation for Medicare Crossover Claims

NOTE: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.

The purpose of this transmittal is to clarify the documentation required for Medicare crossover claims. Maryland's Medicaid Management Information System II (MMIS-II) is designed to identify charges that are submitted by hospitals on the UB04 Claim Form. The UB04 Hospital Billing Instructions & Revenue Code Matrix will be updated to clarify requirements for submitting claims to Maryland Medicaid.

#### For Inpatient Claims:

- In order to receive payment for inpatient services provided, the provider needs to submit the following:
  - the 835 received from the Medicare/Medicare Advantage plan;
  - the UB04 claim that is being billed to Medicaid; and
  - the Medicare EOMB.
- Recipient name, total charges, and dates of service must match, if not, the claim will be returned to the provider.
- Medicare paid date and Medicare paid amount should be reported on the Medicare/Medicare Advantage EOMB.

**For Outpatient Claims:** The revenue code(s) listed on the UB04 Claim Form must match the revenue code(s) listed on the EOMB for the Medicare/Medicare Advantage claim.

- The revenue code(s) on the claim **must be** on the EOMB.

- If there are no revenue code(s) on the EOMB, the claim will be returned to the provider.
- Recipient name, total charges, and dates of service must match, if not, the claim will be returned to the provider.
- Medicare paid date and Medicare paid amount should be reported on the Medicare/Medicare Advantage EOMB.

Note, for outpatient crossover claims for Physician-administered drugs, the claims must also include the NDC.

For any questions call the Institutional Provider Relations Unit at (410)767-5457 or (410)767-5503 and select Option 3.