



# 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?



Federal Government

OR



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



Inpatient Services Only

Hospitalization or a skilled nursing facility



Outpatient Services Only

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



Medicare Advantage Plan

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



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