

**Remittance Advice Message
for
April 19, 2006**

Dear South Dakota Medical Assistance Provider:

“IMPORTANT”

UB-92 billing instructions for reporting Medicare payments, deductible, and co-insurance on inpatient hospital manually submitted (paper) crossover claims:

- * In Form Locator 54 'Prior Payments' Line A: Report the actual payment received from Medicare.
- * In Form Locator 55 'Estimated Amount Due' Line A: Report the combined total of deductible and co-insurance amount.
- * In Form Locators 39-41 'Value Codes and Amounts', Line A, B, C, and/or D: Report codes **06, 08, 09, 10, and/or 11** and the appropriate co-insurance amount for each code.
- * In Form Locators 39-41 'Value Codes and Amounts', Line A, B, C, and/or D: Report the code **A1** for the deductible Part A cash deductible amount only.

If you have any questions, please call the Telephone Service Unit at 1-800-452-7691. Out-of-state providers may call 605-773-3495 and ask for the Service Unit.

Thank you,
Division of Medical Services