

EFFECTIVE DATE: 12 | 20 | 2012

POLICY LAST UPDATED: $12 \mid 20 \mid 2012$

OVERVIEW

Coordination of Benefits (COB) is a provision used to establish the order in which health insurance plans pay claims when more than one plan exists. This reimbursement policy was written to document coordination of benefits and to outline the payment policies of Blue Cross & Blue Shield of Rhode Island (BCBSRI) when coordinating benefits due to the presence of other coverage.

MEDICAL CRITERIA

Not applicable.

PRIOR AUTHORIZATION

Not applicable.

POLICY STATEMENT

When BCBSRI is the secondary payer for a claim, we will provide benefit consideration for the lesser of our allowance, or the outstanding member liability after payment by the primary payer, not to exceed charges in accordance with the member's contract

In the event BCBSRI determines, after payment, that BCBSRI is not the primary insurer, a retraction of that claim payment may occur. The claim should then be billed to the primary insurer and resubmitted to BCBSRI with the primary insurer's EOB for secondary coverage.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for coordination of benefit services.

BACKGROUND

Not applicable.

CODING

Not applicable.

RELATED POLICIES

None.

PUBLISHED

Provider Update, March 2012

REFERENCES

None.

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