



Network Notification

Notice Date: July 22, 2019
To: Ohio Medicaid and All Marketplace Providers
From: CareSource
Subject: Coordination of Benefits (COB) Requirement

Summary

REMINDER: Providers must submit Coordination of Benefit (COB) documentation with claim submission to ensure appropriate claim reimbursement. CareSource has seen an increase in the number of claim denials associated with COB requirements. Often, providers submit claims without the required third party liability attached.

If a claim denies due to the lack of COB information submitted, the appropriate and most expedient process to follow is to submit an electronic corrected claim including COB information. If unable to submit electronically, paper claims with COB information is also accepted.

Impact

CareSource continuously strives to ensure our COB information is current and accurate. As we receive retroactive COB information, we regularly sweep our claim data to ensure that retroactive primary information is applied to claims without necessitating corrected claims to be submitted. We've recently increased the frequency of those retrospective system sweeps, so you may see an increase in COB adjustment activity.

Questions?

As indicated in the provider manual, updates to coordination of benefits should be submitted using either the CareSource Provider Portal <https://providerportal.caresource.com> or by emailing one of the email addresses listed below.

- COBOHIO@CareSource.com
- COBKENTUCKY@CareSource.com
- COBINDIANA@CareSource.com
- COBWESTVIRIGNIA@CareSource.com

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