

HESE Coordination of Benefits (COB) FAQ

What is Coordination of Benefits and which medical plans does COB apply to under HESE?

- Coordination of Benefits (COB) is the process to coordinate either medical or pharmacy benefits when two or more health or pharmacy plans cover the same person(s) – one as Primary and one as Secondary.
- When using a primary and secondary coverage, note that the Plan and each other Plan may require the enrollees to follow its benefit requirements including, but not limited to; prior authorizations, network providers, and quantity limits.
- Dental benefits with Delta Dental are handled by the dental provider.

Who needs to complete Coordination of Benefits (COB) questions on HESE application and / or HESE Working Spouse form for medical benefits?

- Anyone including a spouse or child(ren) on their enrollment application.
- Anyone adding a spouse or child(ren) to their medical / Rx policy.

What is timeframe for submitting COB information?

- Within 31 days from date of hire or - adding child(ren) to an existing policy.
- If not received in the Treasurer's office within 31 days, Treasurer will need to advise ALR (C. Kocon) so COB records can be coded secondary until COB information is received.
- Within 31 days of a change in COB status, i.e., loss of job, new job, divorce, marriage, death.

When is HESE working spouse form needed? When will COB information be accepted on HESE enrollment application?

- All new hires, adding a new spouse or changes in spouse's job – HESE working spouse form is needed.
- Changes with cancelling COB information for a spouse (loss of job or loss of coverage) or adding new dependents, the updated HESE enrollment application is acceptable.

All updates on COB must be in writing either via the HESE working spouse form or updated HESE enrollment application.

Included information for spouse's coverage is a copy of their insurance card along with effective date or policy number, group number, single / family coverage noted, effective date and name of insurance company.

Who does the "Birthday Rule" apply to?

- If both employee and spouse have family coverage, then the enrollee whose birth month is first.

All COB changes must be reported to the Treasurer's Office not directly to Medical Mutual or Express Scripts.

- Medical Mutual does not update Express Scripts and Express Scripts does not update Medical Mutual.

Coordination of Benefits with a Health Savings Account (HSA).

- If employee or group puts dollars into a HSA to offset medical expenses, COB is not allowed per IRS regulations.

If an enrollee takes COBRA – what is needed?

- A copy of the paperwork from Infinisource showing the election.
- A new HESE enrollment application must be completed and submitted with the COBRA notice.
- COBRA is not permitted if health benefits are available.

Recommended to check COB annually with all family contracts. ALR can provide a report showing employee's name and whether enrolled in single or family coverages.

What is needed to file a claim with Express Scripts for secondary prescription drug benefits?

- Rx claim must first be processed through the member's primary insurance plan within the past 365 days (HESE's COB provision limits the reimbursement period to 1 year from the date the prescription was dispensed.)

- Submit the Rx claim to be processed under the HESE plan as secondary (two ways to do this)
 1. If a retail (30 day) claim – some retail pharmacies will process the claim through a secondary plan (it depends on the pharmacy so ask and if they will not, go through the "Submit to Express Scripts" process below)
 2. Submit the Rx claim to Express Scripts to be processed as secondary/COB
 - Submit claim & receipt documentation online through the member website (www.express-scripts.com) Submission can be done by going to the Benefits tab, then to Forms & Cards, then click "Submit Your Claims Online" and follow the prompts. Please note an image of the pharmacy receipt must be uploaded showing how the primary plan paid.
 - Complete a Prescription Drug Reimbursement/Coordination of Benefits claim form (found on the Express Scripts website or the HESE website), include the pharmacy receipt and then mail or fax to Express Scripts (address & fax number are on page 2 of the COB form).

- Important note: HESE's COB provision permits reimbursement to members in the amount of Discounted Network Price (i.e. what the claim would have cost if processed as primary under HESE's plan) minus Member Copay on the HESE plan.

Additional information available in the HESE Prescription Drug Summaries found on the HESE website.