

Coordination of Benefits

Guide for Members of the AlaskaCare Health Plans



What is Coordination of Benefits?

Coordination of Benefits (COB) is the process used to determine who pays any claim first when you or any of your dependents have more than one health plan. Most, but not all, plans include COB provisions that allow you to receive up to 100% of covered expenses. However, plans do not pay for services and costs they would not have covered if you had only one plan.

Who pays first?

A plan without COB provisions is always the primary plan. If all plans have a COB provision, the order of payment is determined pursuant to Section 8,1(b) of the Select Benefits Insurance Information Booklet, Determining Order of Payment.

How does the plan know to coordinate?

It is important to notify AlaskaCare Customer Service when you or any of your dependents are covered by another group health plan. Please use the Annual Questionnaire for Other Health Insurance Verification Form to do this; you also put this information on any claim forms you submit. The information you provide on the form will allow AlaskaCare to decide who should pay first based on the above rules. If you lose coverage under your other plan, you must notify AlaskaCare so they can change your account.



How does it work?

You or your doctor file claims to the plan that should pay first. When that plan pays, it will send you an explanation of benefits showing what was paid. If your doctor filed the claim, an explanation will be sent to them also. You send a copy of the explanation with the claim to your secondary plan so they can see what was paid on the claim by your primary plan and can coordinate benefits.

Coordination Between State Employee Health Plans

AlaskaCare will only pay 30% of covered charges for your dependents if your spouse or children are covered by a state employee health trust and that coverage:

- has been waived,
- pays less than 70% of covered expenses, or
- has an individual out-of-pocket maximum, including deductible, of more than \$3,500.

COB Examples

	First Plan	Second Plan
Covered expenses	\$1,000	\$1,000
Less deductible	- 100	- 250
	= 900	= 750
Plan coinsurance	x 80%	x 80%
Plan payment without coordination	= 720	= 600
Plan payment with coordination	= 720	= 280

This information is intended as a summary of the benefits provided. For complete information, please refer to your Select Benefits Insurance Information booklet. And, if you have questions, please contact the Member Services Contact Center at (800) 821-2251 or (907) 465-4460 or email doa.drb.mscc@alaska.gov.

Alaska Division of Retirement and Benefits

6th Floor, State Office Building | 333 Willoughby Ave. | P.O. Box 110203 | Juneau, AK 99811-0203

Member Services Contact Center

Hours: 10 a.m. - 3:30 p.m.

Toll-Free: (800) 821-2251 | In Juneau: (907) 465-4460 | Fax: (907) 465-4668 | TDD: (907) 465-2805

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