Anthem Blue Cross and Blue Shield

Coordination of Benefits Update

Starting September 11, 2017, Anthem Blue Cross and Blue Shield will begin running trauma and accident claims through the standard coordination of benefits where third party payers are identified.

This is not a change to how Anthem coordinates benefits, Medicare Advantage coverage is secondary and the Medicaid program is the payer of last resort when third-party resources are available to cover the costs of medical services provided to Medicare Advantage members. When Anthem is aware of third-party resources prior to paying for a medical service, it will follow appropriate coordination of benefits standards by either rejecting a provider’s claim and redirecting the provider to bill the appropriate insurance carrier or, if Anthem does not become aware of the resource until sometime after payment for the service was rendered, by pursuing post payment recovery of the expenditure. Providers must not seek recovery in excess of the applicable Medicare and/or Medicaid payable amounts.

For additional information please see the Medicare Advantage Provider Guidebook.

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