# Coordination of Benefits

## What is Coordination of Benefits?

It is possible for an individual to be covered under more than one benefits plan. When 2 or more benefit plans are involved, 1 plan is considered the primary plan. RWAM Plan Members should process claims through their RWAM plan first, and any remaining balance can then be processes through the other insurance plan.

To begin, log into your Plan Administrator Account at:

https://planadministrator.rwam.com

#### STEP 1

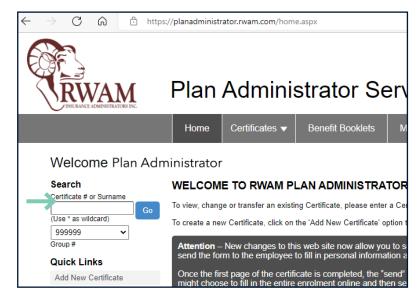
- Enter the employee's certificate number or last name in the search box.
- Select the correct corresponding group #number.
- Click Go.

### STEP 2

• Click on the Name of the individual.

	Name	Birth Date	Cert.#	Gr
F	KENNETH TUDOR	19601023	1111111	99





## Helpful Hint

The process of COB for Plan Administrators is the same if adding a new employee or making a change to an existing employee.



#### STEP 3

Click on the tab "COB"

## STEP 4

# Extended Health Care (EHC)

- If No, there is no further information required.
- If Yes, enter the date the coordinating benefits were effective.

#### Dental

- If No, there is no further information required.
- If Yes, enter the date the coordinating benefits were effective.

#### **Carrier Name**

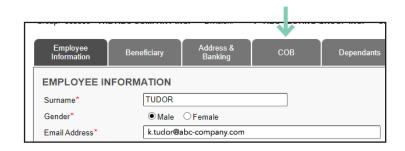
- Enter the carrier name
  - i.e., the Group Insurance Provider for the Spouse/Dependent.
- Click "Save Certificate" to save your progress.

## STEP 5

- Click on the tab "Dependents"
- Complete or Verify the information for the dependent.
- "EHC COB Coverage" and "Dent (Dental) COB Coverage" is selected to indicate Primary,

Secondary or None as per COB rules, see page 3 for further detailed scenarios.

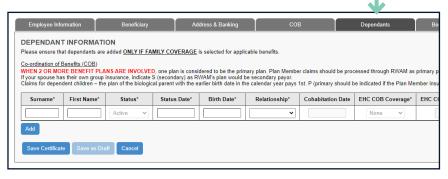
- If this is a new employee, the coverage date will be selected for you.
- In the event of a change in COB status, please update the Primary, Secondary or None options, and indicate the effective date of change.
- NOTE: COB information must be included on the enrolment form.





## Helpful Hint

For this process, you do not need to "Send Form for Signing."
To save your changes, click "Save Certificate."





#### STFP 6

- Click "Save Certificate" when you are satisfied with the changes.
- If you have saved successfully, you will see a notification like the one shown here.



# COB Common Scenarios

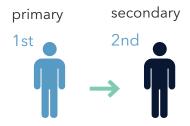
Always submit to your own employee plan first. Then submit your claim with any remaining balance along with an Explaination of Benefits to your coordinating plans.

#### If your child/dependent is submitting a claim...



#### Scenario:

Your dependent child has coverage under both yours and your partner's benefit plans.



Parent/Gaurdian with an earlier birthday i.e., March 3rd

custody

Parent/Gaurdian with the later birthday i.e., May 5th

#### What to do:

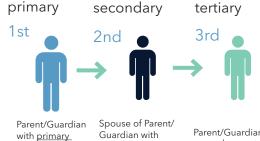
- Submit the claim to the parent whose birthday (MM/DD) comes first in the calendar year.
- If both parents have the same birth date, submit the claim to the plan of the parent whose first name begins earlier in the alphabet.

If you are separated/divorced with a child/dependent submitting a claim...



#### Scenario:

You are separated/ divorced, and have a dependent eligible under both parent's plans.



primary custody

Parent/Guardian with secondary custody

#### What to do:

- Submit first to the plan of the parent with primary custody.
- Next the plan of the spouse of the parent with custody.
- Next the plan of the parent with secondary custody.

If you have more than 1 job/ benefit plan and are submitting a claim...



#### Scenario:

You have 2 jobs and have coverage with both employers.



Full-Time employment (or job you started working at first)

Part-Time employment (or retiree plan)

#### What to do:

- Submit first to the full-time benefits plan or the job you started working at first,
- Then the other benefits plan.

If you have a retiree plan:

 submit to your current full-time benefits, then part-time, then the retiree plan.

NOTE: A Plan Administrator cannot input COB information for the insured in scenarios where 2 employers are providing coverage. Please submit the COB information to RWAM directly at <u>csr-groupadmin@rwam.com</u>.

