NH Healthy Families Coordination of Benefits (COB) Coordination of Benefits Policy

Payment Rules for Medicaid for Dates of Service AFTER 9/1/2019

When coordinating benefits with other payers, Medicaid typically will always be the payer of last resort. Once the primary plan has made payment on a claim, NHHF will process as secondary. **The payment rules for NHHF as the secondary payer are shown below.**

PRIMARY PAYER	MEDICAID/NHHF RESPONSIBILITY
MEDICARE PART A & PART B and MEDICARE ADVANTAGE CLAIMS BILLED ON THE UB-04	For Part A crossover claims, Part B crossover claims or Medicare Advantage claims billed on the UB-04, NHHF will pay the patient responsibility amount (coinsurance & deductible for covered services).
MEDICARE PART B CLAIMS and MEDICARE ADVANTAGE CLAIMS BILLED ON THE CMS- 1500	NHHF is responsible to pay the difference in primary payment and Medicaid allowable for covered services, not to exceed member responsibility. If the primary payment is equal to or greater than our allowed amount, no payment will be made.
NON-MEDICARE PAYER CLAIMS BILLED ON THE CMS-1500 (i.e. COMMERCIAL)	NHHF is responsible to pay the difference in primary payment and Medicaid allowable for covered services, not to exceed member responsibility. If the primary payment is equal to or greater than our allowed amount, no payment will be made.
NON-MEDICARE PAYER CLAIMS BILLED ON THE UB 04 (i.e. COMMERCIAL)	NHHF is responsible to pay the difference in primary payment and Medicaid allowable for covered services, not to exceed member responsibility. If the primary payment is equal to or greater than our allowed amount, no payment will be made.

^{*} NH Healthy Families secondary coverage is responsible for payment depending on the primary insurance (Medicare vs. non-Medicare)

Please Note: For both Part A and Part B claims, if the patient responsibility amount is "0" then NH Healthy Families will not make a payment.

Please contact NH Healthy Families Provider Service at: 1-866-769-3085 with any questions.

Payment Rules for Medicaid for Dates of Service PRIOR to 9/1/2019

PRIMARY PAYER	MEDICAID/NHHF RESPONSIBILITY
MEDICARE PART A & PART B CLAIMS BILLED ON THE UB-04	For Part A crossover claims and Part B crossover claims billed on the UB-04, NHHF will pay the patient responsibility amount (coinsurance & deductible) up to the Medicaid allowed amount.
MEDICARE PART B CLAIMS BILLED ON THE CMS-1500	NHHF will pay the patient responsibility amount (deductible and coinsurance) up to the Medicaid allowed amount for that service.
NON-MEDICARE PAYERS (i.e. COMMERCIAL)	NHHF is responsible to pay the difference in primary payment and Medicaid allowable. If the primary payment is equal to or greater than our allowed amount, no payment will be made.
Note: For both Part A and Part B claims, if the patient responsibility amount is \$0, no payment will be made by Medicaid/NHHF.	

^{*} NH Healthy Families secondary coverage is responsible for payment depending on the primary insurance (Medicare vs. non-Medicare)

Please Note: For both Part A and Part B claims, if the patient responsibility amount is "0" then NH Healthy Families will not make a payment.

Please contact NH Healthy Families Provider Service at: 1-866-769-3085 with any questions.