



A Public Entity

Inland Empire Health Plan



To: All PCPs, Specialists, Ancillary and Hospitals
From: IEHP – Claims & EDI
Date: September 12, 2022
Subject: **IEHP Coordination of Benefits Agreement (COBA) Implementation – Action Required!**

Inland Empire Health Plan (IEHP) is implementing a **Coordination of Benefits Agreement (COBA)** with the Centers for Medicare and Medicaid Services (CMS) effective **October 3, 2022**. Under this agreement, CMS COBA trading partners will automatically transmit secondary Medi-Cal claims for IEHP dual eligible members (**FFS Medicare primary / IEHP Medi-Cal secondary**) directly to IEHP. Automatic claim submissions will be transmitted to IEHP within two weeks of Medicare's primary claim decision.

Please note, this communication **does not apply to IEHP Cal MediConnect DualChoice members** who have their Medicare and Medi-Cal benefits through IEHP.

How does this affect me as a Provider?

- Providers will no longer need to submit electronic or paper claims for dual eligible members (FFS Medicare and IEHP Medi-Cal) to IEHP as the secondary payer.
- Members who have Part C Medicare coverage (or any other non-Medicare coverage) are not impacted by this change. Providers should continue to submit secondary Medicare claims for Medicare Part C members along with primary payer's EOB.
- Services that are directly billable to Medi-Cal should continue to be submitted directly to IEHP. Below are two hyperlinks listing these services.
<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/medinoncpt.pdf>
<https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/medinonhcp.pdf>
- COBA trading partners will be submitting your Medi-Cal secondary claims directly to IEHP once they are processed by Medicare.
 - Upon receipt, IEHP will process your claim as the secondary payer within its normal claim processing timeframes.
- IEHP's claim decision will be communicated to the provider of service in the form of a paper or electronic remittance advice (RA).
 - Upon receipt of IEHP's paper or electronic RA, if a provider disagrees with IEHP's decision, a dispute can be submitted directly to IEHP within 365 days from IEHP's claim decision date.
- IEHP will complete processing of any dual eligible claims submitted prior to the implementation date of October 3, 2022. For additional details regarding this implementation please refer to the attached FAQ document. **Providers can stop sending claims to IEHP effective September 30, 2022.**

As a reminder, all communications sent by IEHP can also be found on our Provider portal at:
www.iehp.org > For Providers > Plan Updates > Correspondence

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at call at (909) 890-2054 or 866-223-4347, or email ProviderServices@iehp.org.