

## **COORDINATION OF BENEFITS**

**Underwritten by Health First Commercial Plans** 

### **GENERAL INFORMATION**

Coordination of Benefits (COB) allows health plans that provide health and/or prescription drug coverage to determine their respective payment responsibilities when two (2) or more health insurers provide coverage for the same individual. The health plans work together to determine which insurance plan is the primary payer and pays first, and the extent to which the other plan will contribute and pay towards the remaining cost.

### **HOW COB WORKS**

The COB provisions of your policy or plan determine which plan is primary. The primary plan's benefits are applied to the claim first. The unpaid balance is usually paid by the secondary plan to the limit of its responsibility. COB is designed to avoid the costly duplication of payment for health care services and/or supplies under multiple health coverage plans. Because of this provision, the sum of the benefits that would be payable under all plans will not exceed one hundred percent (100%) of the total allowed expenses actually incurred.

### **ENROLLEE RESPONSIBILITY**

It is your responsibility to provide us and your physician with information concerning any duplication of coverage under any other health plan, program, or policy you or your covered dependents may have.

### **UPDATE YOUR INFORMATION TO PROCESS CLAIMS FASTER**

Coordinating your benefits helps us process your claims faster and maximizes your benefits, which can lower your out-of-pocket costs.

It's important that we keep your information up-to-date. We'll send you a letter from time to time asking if you have any additional coverage. Please respond to that letter.

Have you recently added a second insurance plan? Fill out the coordination of benefits form located on our secure portal at <a href="mailto:myAHplan.com/login">myAHplan.com/login</a>.

### **QUESTIONS**

If you have questions about your health benefit plan, there are several ways to contact us to obtain the assistance you need:

### By telephone

If you have questions about your plan or need assistance in a language other than English, please contact Customer Service.

Toll-free: 1.844.522.5279 TDD/TTY: 1.800.955.8771

Our Customer Service hours are: Monday through Friday from 8 a.m. to 6 p.m.

### By email

Send your questions or comments to: AHAP@HF.org

### Bv fax

Send your fax to: 1.855.328.0062

# Advent Health Advantage Plans

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By mail

Send correspondence to: Customer Service Health First Health Plans - AHAP 6450 U.S. Highway 1 Rockledge, FL 32955

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