



Accurate Benefits Coordination.

Get It Right the First Time Around.

Coordination of Benefits (COB) has been a persistent challenge for the healthcare industry, resulting in delayed and inaccurate payments, appeals and significant recovery activities and expenses.

Introducing COB Smart[®], a forward-thinking solution that enables health plans and providers to correctly identify which members have benefits that should be coordinated. This way, corresponding claims are processed correctly the first time.

- **Informative.** Identifies new or previously unknown instances of overlapping coverage to determine which health plan should pay first.
- **Cost-Effective.** Reduces administrative costs and complex workflows associated with identifying and determining coverage.
- **Smart.** Features a built-in primacy rules engine to determine the correct order of benefits.
- **Secure.** Contains strong industry standard administrative, technical and physical safeguards to maintain patient privacy and comply with HIPAA and patient privacy requirements.
- **Collaborative.** Designed for industry-wide participation. Health plans directly contribute member information to a secure registry. The more health plans and clearinghouses participate, the better the COB outcome.

Inefficiencies in benefits coordination cost the healthcare industry more than \$800 million annually, creating unnecessary difficulties for providers and patients. (CAQH, 2014).

How COB Smart works

Participating health plans supply information to the registry each week, where it is compared with data from other health plans to identify patients with more than one plan. National Association of Insurance Commissioners' (NAIC) rules are applied to determine the correct order of primacy for benefit coverage. Relevant coverage information is then shared with each participating health plan that insures the member and is also accessible to providers so they can route claims correctly. For providers this information will be contained in a 271 response segment specific to COB information.

Why use COB Smart?

COB Smart streamlines benefit coordination for health plans, providers and patients. Timely and accurate COB information produced by COB Smart increases efficiency and helps reduce:

- Administrative costs.
- Inaccurate payments.
- Provider call volumes.
- Claim rework.
- Dependency on overpayment and recovery vendors.

Right solution. Right Now.

COB Smart can be used by many types of healthcare organizations:

- Health Plans.
- State Sponsored Programs.
- Clearinghouses.

COB Smart Benefits for Health Plans and Providers

- Provides access to the most complete source of information on multiple coverage to determine primacy, streamlining investigative processes.
- Saves money by reducing the costs associated with member canvassing for other coverage, claims denials, resubmissions and recovery.
- Helps improve provider service by offering them the most complete coverage information available to expedite eligibility and claims processes.
- Integrates with existing systems to automate and streamline COB information exchange.
- Simplifies administrative processes with less paperwork for a direct, positive impact on providers and patients.

Learn more.

Reduce the challenges and costs associated with coordination of benefits. Get started by emailing sales@caqh.org or visit cobsmart.org to learn more.

Approximately four out of five records identified by COB Smart had not been previously detected as having other insurance in our eligibility system

—National Health Plan

