

**Billing Secondary Claims via 837
Effective 9/1/19**

Dear Care1st Provider and Office Staff:

Care1st is pleased to announce that we can accept coordination of benefits information electronically for claims received **September 1, 2019** and after.

Secondary claims for members who have primary insurance may be billed electronically with the coordination of benefits information included in the 837 file instead of submitting a paper claim with a copy of the primary carrier's remittance advice.

What does this mean for you?

- Faster turnaround time on secondary claims resolution
- Fewer paper claims, reducing extra work for billing staff
- Reduction in denials for primary carriers explanation of benefits

To ensure accurate processing of secondary claims, all relevant COB data fields per the 837P and 837I (TR3) Consolidated Guide must be populated. The table below outlines some of the general COB loops; however, it is *not* an all-inclusive list of COB data fields. For questions, please contact your clearinghouse or refer to your clearinghouse companion guide.

837P – CMS 1500	837I – UB 04 Outpatient	837I – UB 04 Inpatient
Other subscriber information in 2320 loop	Other subscriber information in 2320 loop	Other subscriber information in 2320 loop
Other subscriber name in 2330A loop	Other subscriber name in 2330A loop	Other subscriber name in 2330A loop
Other payer data in 2330B loop and/or Line adjudication data in 2430 loop	Other payer data in 2330B loop and/or Line adjudication data in 2430 loop	Other payer data in 2330B loop and/or Line adjudication data in 2430 loop

If you have any questions, please contact our Claim Customer Service Department at **602-778-1800 or 1-866-560-4042** (option 5, 4).

Thank you for being a valued partner with Care1st.

Network Management

Phone: **1-602-778-1800 | 1-866-560-4042** (Option 5, then 7)

Fax: **1-602-778-1875**

E-mail: **SM_AZ_PNO@Care1stAZ.com**

Visit our website at www.care1staz.com

Looking for your assigned Provider Network Representative? On our website, go to Providers > Provider Rep Contact Info