

PROVIDER MEMO

To: Santa Clara Family Health Plan Providers
From: Provider Network Management
Date: May 14, 2020
Subject: New billing process for Medicare crossover claims through COBA

Please note that this communication does not apply to VHP members.

Dear Provider,

We have great news. Effective May 18, Santa Clara Family Health Plan (SCFHP) is going live with COBA.

SCFHP will process your Medicare crossover claims through a Coordination of Benefits Agreement (COBA) with Centers for Medicare & Medicaid Services (CMS). This means that you will not need to submit most claims for members with Medicare Fee-for-Service and Medi-Cal through SCFHP.

The COBA process:

1. You bill Medicare for services rendered.
2. Medicare, as the primary payer, issues remittance advice to you and forwards this information to SCFHP for coordination of benefits.
3. SCFHP, as the secondary payer, reviews the claim and remittance advice issued by Medicare and coordinates benefits accordingly.

Note that there are specific services that are exempt from billing Medicare first. Please continue billing SCFHP directly for these services:

- Medicare non-covered services: HCPCS codes: <http://bit.ly/medi-non-hcp>
- Medicare non-covered services: CPT-4 codes: <http://bit.ly/medi-non-cpt>
- Corrected or adjusted claims. Send them to SCFHP along with the Medicare Explanation of Benefits (EOB).

If you have any questions, please contact Provider Services at ProviderServices@scfhp.com.