

Coordination of benefits

Two plans, one claim. Whose plan pays?

FOR
YOUR
BENEFIT

You and your spouse are each enrolled on your own employee benefits plan, as well as on each other's... so whose plan pays the claim? The order of payment is known as **"Coordination of Benefits" (COB)**, and is established by insurance industry guidelines.

How to coordinate benefits between you & your spouse

When the claim is for you, your employer's plan is always the **primary plan** and your spouse's plan is the **secondary plan**. This means that you should first submit your claim to your primary plan, GroupHEALTH.

Once your primary plan has paid for your claim, you can submit any remaining unpaid balance of the claim to your spouse's plan.

For your spouse this is reversed: his or her plan is their primary plan, and your GroupHEALTH plan is the secondary plan.

In the rare instance where you are the primary plan member in more than one plan, the plan in which you are active full time is the primary plan and the other plan is the secondary plan.



How to coordinate benefits for your children

When you and your spouse are both enrolled in separate benefits plans that provide family-level coverage for your dependent children, establishing the primary plan and secondary plan for children is simple:

- The **primary plan** is the plan of the parent whose month and day of birth occurs earliest in the year (year of birth is not considered);
- In the instance where you and your spouse have the same month and day of birth, the primary plan is the plan of the parent whose first name begins with the earlier letter of the alphabet.

** Remember to submit claims to the primary plan first and then any unpaid balances can be submitted to the secondary plan.

