PACE/CRDP/SPBP PROVIDER BULLETIN

May 3, 2022

Coordination of Benefits (COB) Reminder

During routine claim audits, PACE has found claims submitted with correctable errors affecting claim accuracy and adjudication.

REMINDER:

<u>Other Coverage Code= 3</u> (Other Coverage Billed, Claim Not Covered) to be used when <u>ALL</u> other payers rejected/denied the claim:

- **Field 352-NQ**, "Other Payer Patient Responsibility Amount" and **Field 431-DV**, "Other Payer Amount Paid" **must not** be submitted on these claims.
 - Claims submitted with <u>any</u> value, <u>including those containing a zero (Ø)</u> in these fields <u>will deny</u> with NCPDP Error 446—"COB/Other Payments Segment Incorrectly Formatted".

<u>Other Coverage Code= 4</u> (Other Coverage Exists, Payment Not Collected) to be used when <u>no</u> other payer is paying on the claim <u>but</u> at least <u>1</u> payer has accepted the claim:

- When **Field 352-NQ**, "Other Payer Patient Responsibility Amount" is submitted on these claims, it <u>must</u> contain a value greater than Ø.
 - Claims submitted with Field 352-NQ and containing no value or Ø's will deny with NCPDP Error NQ-"M/I Other Payer Patient Responsibility Amount".
- Field 431-DV, "Other Payer Amount Paid" must be submitted on these claims.
 - Claims submitted without this field will deny with NCPDP Error 7K-"Discrepancy Between OCC and Other Payer Amount" and 8W-"Discrepancy Between OCC/Other Payer Amount Paid".
 - Field 431-DV, "Other Payer Amount Paid", submitted with any value greater than Ø will deny with NCPDP 7K- "Discrepancy Between OCC and Other Payer Amount".

Questions may be directed to Provider Services at 1-800-835-4080.