Coordination of Benefits (COB) for Exams Between Health Plans or Medicare and VSP[®] Vision Care



Claims for coordination of benefits between health plans or Medicare and VSP for exams can now be submitted electronically through eClaim on **eyefinity.com**.

Begin your claim as you normally would and follow these steps.

1. Make it match

Provide the same diagnosis, exam, and refraction codes from the primary claim.

2. Indicate COB

Select **Yes (box 11d)** there is another health benefit plan for eye care. This will open a new section. Leave the field for "Secondary Authorization Number" blank.

3. Provide COB details

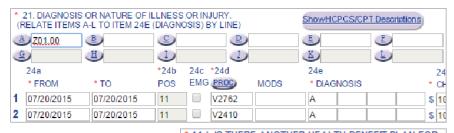
- Skip the Additional Information Detail section. (This section isn't needed)
- Complete the **Other Insured** section as shown at right.
- Click Calculate and Continue at the top left.

4. Enter payment

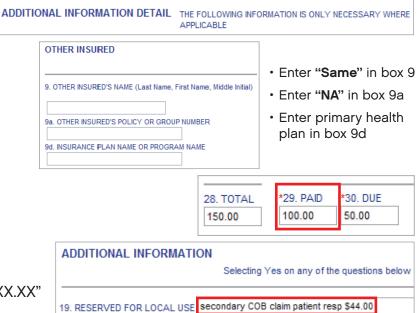
List amount paid by primary carrier(s) in box 29, even if amount is 0.00.

5. Include patient responsibility

Use this exact language in box 19 "secondary COB claim patient resp \$XX.XX"



* 11d. IS THERE ANOTHER HEALTH BENEFIT PLAN FOR EYECARE? (if yes, complete items 9 a-d below) • Yes ONO VSP COORDINATION OF BENEFITS SECONDARY AUTHORIZATION NUMBER



Important! Don't forget to keep copies of the Explanation of Benefits from the health plan or Medicare and the original CMS-1500 claim form in the patient's file for audit purposes.

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