



Provider Notice

COBA Notification

In accordance with 42 CFR 438.3(t), Managed Care Organizations (MCOs) have responsibility for coordination of benefits for individuals dually eligible for Medicaid and Medicare. Each state Medicaid program has an agreement with Medicare. This agreement is called a Coordination of Benefits Agreement (COBA).

The Pennsylvania Department of Human Services (DHS) recently required all physical health and behavioral health MCOs to accept Medicare crossover claims. A crossover is the transfer of processed claims data directly from Medicare operations to state Medicaid agencies and managed care contractors.

Magellan Behavioral Health of Pennsylvania (Magellan) has entered into a COBA with The Centers for Medicare and Medicaid Services (CMS). **Effective March 1, 2021**, Medicare providers of behavioral health services will only need to submit a single claim to the Medicare carrier, which will then “crossover” to Magellan for secondary adjudication of the deductible, co-pay, and co-insurance benefits. This applies to both institutional and professional claim types submitted as primary to Medicare A & B. This procedure will increase the efficiency of claims processing and reduce the burden on providers as a separate claims submission to Magellan will no longer be necessary.

Please let us know if you have any questions. You can send questions to: MBHofPA@magellanhealth.com.

www.MagellanProvider.com

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105 Terry Drive | Newtown, PA 18940
1 W. Broad Street, Suite 100 | Bethlehem, PA 18018
1003 Broad Street, Suite 301 | Johnstown, PA 15906

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