

Benefits 101

A detailed look at your extended health and dental benefits, one service at a time.



COORDINATION OF BENEFITS (COB)

Coordination of benefits is used to describe multiple insurance coverages when you, your spouse or dependants are covered by more than one health and dental plan.

Who pays in what order?

Guidelines established by the Canadian Health & Life Insurance Association (CHLIA) must be followed by insurance carriers to determine order of payment.



Your Claims

You submit to your plan first as the primary plan. Any amounts not covered are then submitted to your spouse's plan as your secondary coverage.



Your Spouse's Claims

Your spouse submits claims to their plan first as the primary plan. Any amounts not covered are then submitted to your plan as their secondary coverage.



Your Children's Claims

Your children's claims are submitted first to the benefits plan of the parent whose birthday falls earliest in the calendar year. Any amounts not covered are then submitted to the other parent's plan as secondary coverage.

In the event of Separation or Divorce the following guidelines apply:

Joint Custody Arrangements

The date of birth rule still applies to parents first and then to stepparents as follows:

1. First payer – the plan of the parent with the earlier birth date in the calendar year
2. Second payer – the plan of the parent with the later birth date in the calendar year
3. Third payer – the plan of the spouse of the parent who was first payer
4. Fourth payer – the plan of the spouse of the parent who was second payer

Sole Custody Arrangements

If the children live with only one parent, the order of payment is as follows:

1. First payer – the plan of the custodial parent
2. Second payer – the plan of the spouse of the custodial parent
3. Third payer – the plan of the non-custodial parent
4. Fourth payer – the plan of the spouse of the non-custodial parent

Important Reminders when Submitting a Claim:

- When submitting a claim to the first payor plan, submit all original receipts and related documents.
- Keep a copy of each receipt and document submitted.
- When submitting a claim to a second payor, submit the statement from the first payor plan along with copies of the receipts and documents originally submitted.
- When submitting a claim to a subsequent payor, be sure to submit the statement from the most recent payor along with copies of any receipts and documents.
- The maximum payable from all plans combined is 100% of the actual expense subject to monetary, service or supply maximums applicable to each plan.

Working in retirement? Contact our office for more information and assistance with Coordination of Benefits.

How To Update Coordination of Benefits

To avoid claim issues, update your file as soon as there is a change in COB details. **An Insured Benefit/Drug Card Change form (form 820)** will be required to update your file. All group insurance forms can be found on the OPP Association website – www.oppa.ca. Return completed forms to Target Benefit Administrators.