

Eligibility Verification, COB updates and COB Claims Reprocessing Information

Eligibility Verification/PCP Change Requests

Your office can fax eligibility questions and PCP Change Request forms to **573-441-2119**. For eligibility questions, please provide the following information:

- The member's first and last name
- The member's date of birth
- The member's MO HealthNet DCN or WellCare ID number
- Question(s) regarding the member's eligibility.

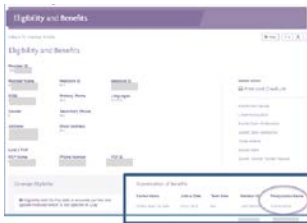
COB Update Requests

Please use this email address to contact us if you believe a member's other insurance information is incorrect - COBValidations@wellcare.com. Information from the primary carrier may be included, but is not required. The COB department will contact the primary carrier to verify eligibility. Please provide the following information:

- The member's first and last name
- The member's date of birth
- The member's MO HealthNet DCN or WellCare ID number
- The member's primary insurance carrier's name and primary insurance carrier's ID number

Verification of COB Updates

Providers may check the Missouri Care secure portal at <https://provider.wellcare.com/missouricare> to verify the COB update on the member's file is completed. Please allow 10 business days for the update to reflect on the portal.



COB Claim Submission

To submit Secondary claims, you may use the following two options:

1. **AdminiStep (allows Primary and Secondary Claim Submission)**
Administep allows providers the ability to submit secondary claims to Missouri Care by entering the primary carrier claim payment information. This is available for the CMS 1500 and UB04 claim forms. Please visit www.administep.com for more information.
2. **Mail COB paper claims to:**
Missouri Care Claims Submission
P.O. Box 31224
Tampa, FL 33631-3224



Claim Adjustment – COB Updates

Missouri Care has an automated process in place that looks back to reprocess claims after a COB update has completed. If you locate any additional denied claims, please outreach to Provider Services for COB claims reprocessing at **1-800-322-6027**.