



Dental Work Group EDI Tip

Using Electronic Coordination of Benefits

An electronic claim (the 837 transaction) can contain more information than a paper claim. If you treat a patient who is covered by more than one dental insurance policy, when you bill electronically using an 837, you can include payment information from the primary payer in your claim to the secondary payer. Because this additional information is included in your claim file, you do not have to attach an explanation of benefits (EOB). The first step to using electronic coordination of benefits is to sign up with your payers and clearinghouse to receive payment information electronically using the electronic remittance advice (the 835 transaction). The next step is to use your billing software to send the payment information that you receive inside your electronic claims.

Because software setup requirements vary widely, you will need to contact your software vendor to find out how to include payment information in claim files. If your vendor needs more information, their tech staff can contact UHIN at 877-693-3071.



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