

ILWU-PMA Pension Plan  
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan  
ILWU-PMA Supplemental Welfare Benefit Plan

January 9, 2014

To: ILWU Longshore, Ship Clerk, Walking Boss/Foreman, and Watchmen  
Locals

From: Mario Perez, Manager, Welfare Plans

**Subject: Medicare Claims Crossover Process**

The attached letter is being sent to providers who have manually submitted claims to the Coastwise Claims Office to inform them of the Medicare Crossover Process. This process allows for Medicare to electronically submit claims to the Coastwise Claims Office and eliminates the need for providers to manually submit secondary billing.

cc: Sam Alvarado, Area Welfare Director  
Nick Buckles, Area Welfare Director  
Joe Cabrales, Area Welfare Director  
Ty Gorton, Area Welfare Director

Attachment

A copy of this memo can be downloaded at [www.benefitplans.org](http://www.benefitplans.org)

# ILWU-PMA BENEFIT PLANS /

International Longshore & Warehouse Union —  
Pacific Maritime Association [www.benefitplans.org](http://www.benefitplans.org)

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ILWU-PMA Pension Plan  
ILWU-PMA Welfare Plan

ILWU-PMA Watchmen Pension Plan

January 9, 2014

TO:

**Subject: ILWU-PMA Welfare Plan - Medicare Claims Crossover Process**

Dear Provider,

For members of the ILWU-PMA Coastwise Indemnity Plan who are on record as having Medicare as their primary payer, the Coastwise Claims Office (CCO) can now receive an electronic copy of the Explanation of Medicare Benefits (EOMB) directly from Medicare. This process is called Medicare crossover. With the Medicare claims crossover process, there is no need for providers to submit their claims and Medicare EOMBs on secondary claims to the Coastwise Claims Office, even if you do not accept Medicare assignment of benefits. Once Medicare processes the claim as the primary payer, normally within 30 days of receiving your claim, they submit an electronic file to the Coastwise Claims Office, who then processes the claim as the secondary payer. The Medicare EOMB remarks code section will have a specific remark code for when a claim has been forwarded to the secondary payer via crossover. The Coastwise Claims Office processes secondary claims received from Medicare normally within 3 business days of receipt.

If your office has been billing the Coastwise Claims Office for secondary payment, there is no need to continue to do so, as this could result in duplicate claims. Please allow 10-15 business days from the date you receive your Medicare EOMB before contacting the Coastwise Claims Office to check the status of your claim. Please note the process to set up the crossover process on a newly Medicare-eligible member may take up to 90 days. The Benefit Plans office suggests reviewing the Medicare EOMB to determine once crossover has been set up. We appreciate your cooperation and assistance in serving our members. If you have any questions, please contact the Coastwise Claims Office at 1-800-955-7376.

Sincerely,

ILWU-PMA Benefit Plans