

# Creditable Coverage

What is “creditable” coverage? It includes prior coverage you had under any of the following health plans:

- A group health plan (related to employment)
- Medicare
- Medicaid
- A military-sponsored health care program such as TRICARE
- Health plans offered by the Indian Health Service
- A state high-risk health insurance pool
- The federal Employees Health Benefit Program
- A public health plan established or maintained by a state or local government
- A health benefit plan provided for Peace Corps members

## **Certificates of Creditable Coverage**

Certificates of creditable coverage must be provided automatically and free of charge by the plan or issuer when an individual:

- loses coverage under the plan;
- becomes entitled to elect COBRA continuation coverage; or
- exhausts COBRA continuation coverage.

A certificate must also be provided free of charge upon request while the patient has health coverage or anytime within 24 months after coverage ends.

## **What Information is written in a Certificate of Creditable Coverage?**

Certificates of creditable coverage should contain information about:

- the length of time the beneficiary or dependents had coverage;
- the length of any waiting period for coverage that applies;
- an educational statement that describes individuals' HIPAA portability rights.

If a certificate is not received, or the information on the certificate is wrong, the patient should contact the prior plan or issuer. The patient has the right to show prior creditable coverage with other evidence, such as pay stubs, explanation of benefits, letters from a doctor — if they cannot get a certificate.

## **TIPS**

- Your office can assist the patient by demonstrating proof of credible coverage through providing information from previous (archived) insurance information maintained on

your billing system. Be sure to include the beginning and termination date of the coverage. This is the quickest way to address the problem.

- Get the patient involved. Contact the patient to explain that s/he will be responsible for paying the charges. If the patient fails to assist your efforts, then verify to see if the patient's policy was issued under the ACA. The patient is likely to contact your office and initiate communications regarding the Certificate of Credible Coverage required to collect from insurance.