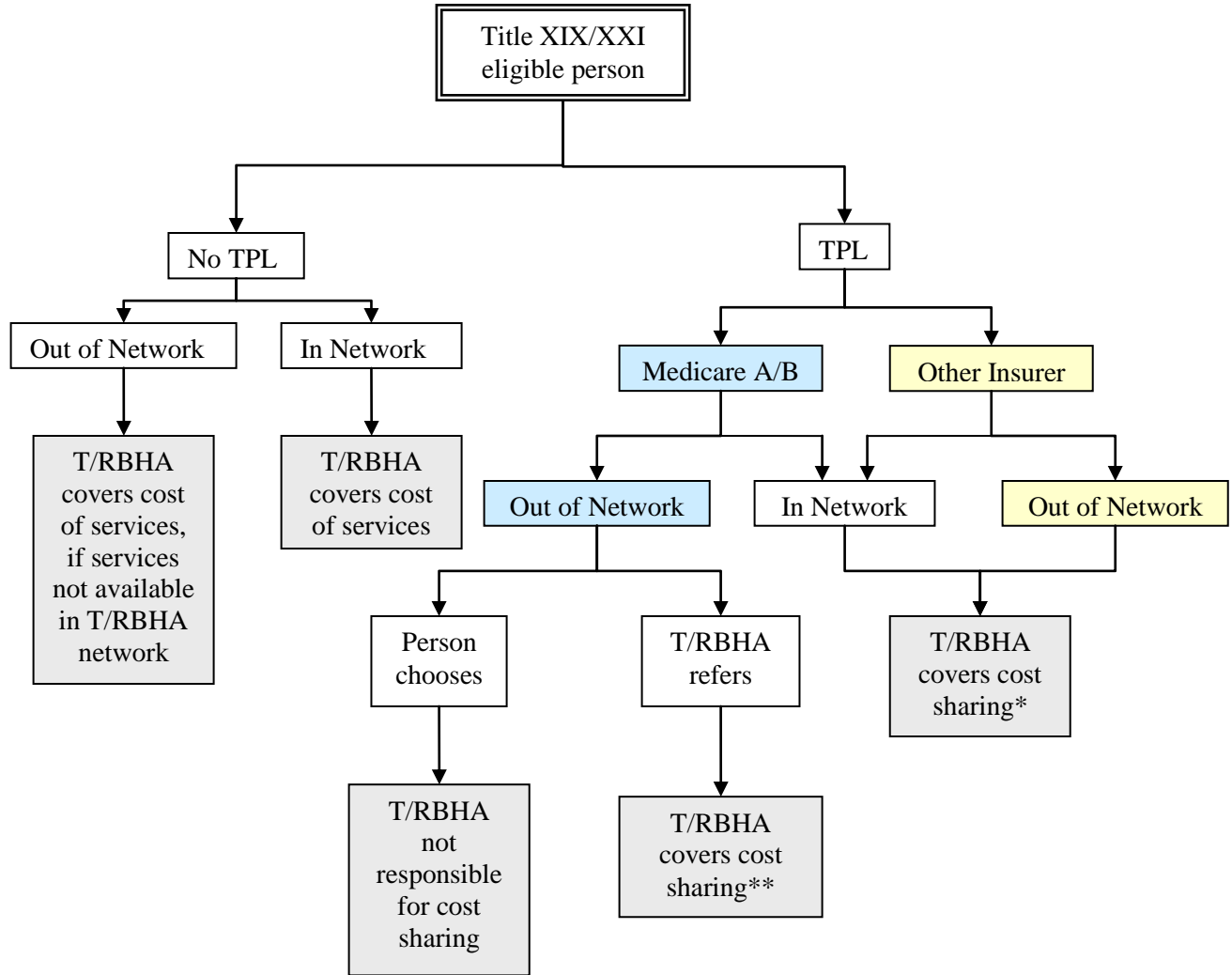


**Third Party Liability (TPL) and Coordination of Benefits  
Title XIX/XXI Eligible Persons**

**PM Attachment 3.5.1**



\*Cost sharing may include co-payments, coinsurance or deductibles. **In Network:** T/ RBHA coverage of cost sharing with third party insurer, other than Medicare, is the lesser of the difference between the primary insurance paid amount and the primary insurance rate (i.e., co-payment) or the primary insurance paid amount and the T/ RBHA contracted rate. **Out of Network:** T/ RBHA will cover the lesser of the difference between the primary insurance paid amount and the primary insurance rate (i.e., co-payment) or the primary insurance paid amount and the AHCCCS fee for service rate.

\*\***Medicare A and B:** T/ RBHAs have no cost sharing obligation if the Medicare payment exceeds what the T/ RBHA would have paid for the same service of a non-Medicare member.