

Remittance Advice/Explanation of Payment (EOP) Guide



Use this guide to understand the information provided on a Remittance Advice/EOP in a simple-to-read format. Please contact your Arkansas Total Care Provider Relations Specialist with any questions or concerns.

► Definitions of Service Detail Columns

| Serv | Dates | Proc # | Modifiers | Days Ct/Qty | Charged/ Allowed | Deduct | CoPay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | EXPL Codes | Payment/ Withheld |
|------|--------|--------|-----------|-------------|--------------------|--------|-------|---------|--------------------|---------------------|-----|--------|------------|-------------------|
| 0100 | 011620 | T1019 | | 312.00 | 1092.00 1092.00 | .00 | .00 | .00 | .00 | .00 .00 | .00 | .00 | 92 | 1092.00 .00 |

| EOP Term | Definition |
|-----------------------------|--|
| Serv | The service line/s on the claim. |
| Dates | Date/s of service. |
| Proc # | CPT®, HCPCS, or revenue codes billed. |
| Modifiers | Modifier billed. |
| Days/Ct/Qty | Total number of days, count, or quantity being billed. |
| Charged/Allowed | Charged: The amount billed for the procedure or service. Allowed: The contracted amount allowed for the procedure or service. |
| Deduct | The amount of the member's deductible that has been applied to the procedure or service. |
| Copay | The amount of the member's copay that has been applied to the procedure or service. |
| Coinsur | The amount of a member's client participation deducted from the allowed amount. |
| Discount/Interest | Discount or interest to be applied to claim. |
| Med Allowed/Med Paid | The amount allowed and paid by Medicare. |
| TPP | The amount paid by a third-party payer. |
| Denied | Total amount denied on claim. |
| EXPL Codes | Arkansas Total Care explanation codes that indicate payment, reduction, or denial reason. |
| Payment/Withheld | Total amount paid or withheld for the procedure or service. |

► Denial Code Explanations

| Explanation | Code Description |
|-------------|--|
| 92 | Paid in full |
| JU | Adjustment to previously submitted claim |
| Sr | Pay: Services reimbursed according to multiple surgery guidelines |
| bt | Info — possible TPL |
| pB | Reimbursement reduction based on payment policy — see plan website |
| v2 | Reviewed by coding editing software-HCI-PCI |
| wB | Reimbursement reduction based on payment policy — see plan website |

How to Read the Claim Details



Understanding the codes used on the claim details is key to knowing whether a claim was processed.

► Clean Paid Claim

The Serv line 0100 indicates this is an original first-time claim.

| Serv | Dates | Proc # | Modifiers | Days Ct/Qty | Charged/ Allowed | Deduct | CoPay | Coinsur | Discount/ Interest | Med Allow/Med Paid | TPP | Denied | EXPL Codes | Payment/ Withheld |
|------|--------|--------|-----------|----------------|---------------------|--------|-------|---------|-----------------------|-----------------------|-----|--------|---------------|----------------------|
| 0100 | 011620 | T1019 | | 312.00 | 1092.00 1092.00 | .00 | .00 | .00 | .00 | .00 .00 | .00 | .00 | 92 | 1092.00 .00 |

► Clean Denied Claim

The Serv line 0100 indicates this is an original first-time claim. If there is an amount in the Denied column, the denial codes will be listed. In the example below, denial codes are EF, eS, and eU.

Explanations for these codes are provided on the EOP.

| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
|------|--------|----------------|----------------|-----------------|---------|---------|------------------|---------|-----------------------|------------------------|-----|--------|------------|----------------------|
| 0100 | 070219 | F331 | 99213 | 1.00 | 100.00 | 43.23 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | 100.00 | EF eS eU | .00 .00 |

Adjusted Claim Details: Positive Payment



An example of an EOP related to the reprocessing of claims, which results in a positive net payment, is shown below.

- 1 The original claim is indicated on service line ending "00."
- 2 The adjusted line is the service line ending in odd number ("01"). This is not a recoupment, but rather a financial adjustment to allow for the fully adjusted payment amount.
- 3 The payment indicated by an even number ("02") at the end of the service line is the final adjudicated payment of the claim.

By subtracting the original payment amount ("01") **1** from the final adjudicated payment ("02") **3** provides the net amount that you will receive in addition to the original payment. In this example, a positive net payment resulted.

| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
|-----------|----------|----------------|----------------|-----------------|---------|---------|------------------|---------|-----------------------|------------------------|--------|--------|------------|----------------------|
| 0100 | 1 | J351 | 31575 | 1.00 | 339.00 | 49.01 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | Sr | 49.01 .00 |
| 0200 | 1 | J351 | 99202 | 1.00 | 179.00 | 15.67 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | pB 92 v2 | 15.67 .00 |
| Sub-total | | | | | 518.00 | 64.68 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | 64.68 .00 |
| TOTAL | | | | | 1058.00 | 155.71 | .00 .00 | .00 | .00 .00 | .00 .00 | 419.04 | .00 | | 64.68 .00 |

| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
|-----------|----------|----------------|----------------|-----------------|----------|---------|------------------|---------|-----------------------|------------------------|-----|--------|------------|----------------------|
| 0101 | 2 | J351 | 31575 | - 1.00 | - 339.00 | - 49.01 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | JU | -49.01 .00 |
| 0102 | 3 | J351 | 31575 | 1.00 | 339.00 | 49.01 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | Sr | 49.01 .00 |
| 0201 | 2 | J351 | 99202 | - 1.00 | - 179.00 | - 15.67 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | JU 92 v2 | -15.67 .00 |
| 0202 | 3 | J351 | 99202 | 1.00 | 179.00 | 15.67 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | pB 92 v2 | 31.34 .00 |
| Sub-total | | | | | .00 | .00 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | 15.67 .00 |
| TOTAL | | | | | 2547.00 | 266.45 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | 282.12 .00 |

NOTE:

- On the original claims (service line 0200), the provider was paid \$15.67.
- On the adjusted service line 0201, \$15.67 was subtracted in full.
- The final adjudicated claim was paid out (on service line 0202) at the rate of \$31.34.
- The net payment the provider would receive with this remit is \$15.67.

Adjusted Claim Details: Zero Payment



In some cases, when claims were reprocessed the original claim payment was the same as the reprocessed payment. To determine the net amount you will receive in addition to the original payment, subtract the original claim payment (service line ending in odd number, "01") from the final adjudicated payment amount (service line ending in even number, "02").

In this example, the net payment result is \$0. This means the original payment received was correct even after the adjustment was completed.

Original Claim Payment

| Serv | Date | Proc # | Modifiers | Days Ct/Qty | Charged/ Allowed | Deduct | CoPay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | EXPL Codes | Payment/ Withheld |
|-----------|------------|--------|-----------|-------------|------------------------|--------|-------|---------|--------------------|---------------------|--------------|--------|------------|---------------------|
| 0101 | 10/28/2019 | V5266 | LT | 30.00 | \$-54.00 \$-53.70 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | JU | \$-53.70 \$0.00 |
| 0201 | 10/28/2019 | V5266 | RT | 30.00 | \$-54.00 \$-53.70 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | JU | \$-53.70 \$0.00 |
| Sub-total | | | | | \$-108.00 \$-107.40 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | | \$-107.40 \$0.00 |

Final Adjusted Claim Payment

| Serv | Date | Proc # | Modifiers | Days Ct/Qty | Charged/ Allowed | Deduct | CoPay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | EXPL Codes | Payment/ Withheld |
|-----------|------------|--------|-----------|-------------|----------------------|--------|-------|---------|--------------------|---------------------|--------------|--------|------------|--------------------|
| 0102 | 10/28/2019 | V5266 | LT | 30.00 | \$54.00 \$53.70 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | 92 | \$53.70 \$0.00 |
| 0202 | 10/28/2019 | V5266 | RT | 30.00 | \$54.00 \$53.70 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | 92 | \$53.70 \$0.00 |
| Sub-total | | | | | \$108.00 \$107.40 | \$0.00 | \$.00 | \$0.00 | \$0.00 | \$.00 .00 | \$.00 .00 | \$0.00 | | \$107.40 \$0.00 |

| Explanation | Code Description |
|-------------|--|
| 92 | Paid in full |
| JU | Adjustment to previously submitted claim |

Adjusted Claim Details: Zero B (OB) Adjustments



In some cases, a claim may need to be readjusted under a new claim number due to provider system configuration changes. When this happens, the negative adjustment will process with an explanation code of JU to indicate an adjustment, and the positive adjustment will indicate explanation code OB.

If you have OB adjustments and would like your detailed crosswalk report listing the old and the new claim numbers, please reach out to your Provider Relations Specialist.

In the example below:

- On the original claim “0100”, the provider was denied \$475.00 incorrectly.
- On the adjusted line “0101” for \$475.00 was subtracted in full with a JU explanation code.
- The final adjudicated claims “0102” was denied the \$475.00 with an OB explanation code.
- The new claim is the final adjudicated payment the provider would receive with the new claim number results being \$17.58.

| Explanation code: JU | | | | | | | | | | | Explanation code: OB | | | |
|----------------------|--------|----------------|----------------|-----------------|----------|---------|------------------|---------|-----------------------|------------------------|----------------------|----------|------------|----------------------|
| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
| 0100 | 072619 | R310 | 88112 | 1.00 | 475.00 | 17.58 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | 475.00 | 1b Aa | .00 .00 |
| Sub-total | | | | | .00 | .00 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | .00 .00 |
| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
| 0101 | 072619 | R310 | 88112 | - 1.00 | - 475.00 | - 17.58 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | - 475.00 | JU Aa | .00 .00 |
| 0102 | 072619 | R310 | 88112 | 1.00 | 475.00 | 17.58 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | 475.00 | OB | .00 .00 |
| Sub-total | | | | | .00 | .00 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | .00 .00 |
| Serv | -Date- | Diag# Drug# | Proc# Proc2 | Days/Cnt Qty | Charged | Allowed | Deduct/ Copay | Coinsur | Discount/ Interest | Med Allow/ Med Paid | TPP | Denied | ANSI Codes | Payment/ Withheld |
| 0100 | 072619 | R310 | 88112 | 1.00 | 475.00 | 17.58 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | 92 | .00 .00 |
| Sub-total | | | | | 475.00 | 17.58 | .00 .00 | .00 | .00 .00 | .00 .00 | .00 | .00 | | .00 .00 |

| Explanation | Code Description |
|-------------|--|
| 92 | Paid in full |
| JU | Adjustment to previously submitted claim |
| 1b | Deny referring provider npi/name is missing |
| Aa | Informational: Claim processed through coordination of benefits |
| OB | Adjust: Claim to be reprocessed corrected under new claim number |