

REMITTANCE ADVICE

The remit is the notification to you of the claims processed during the payment cycle. Below is a description of the information provided on the new remittance advice. The numbers below match to the sections on the sample remit included on the next page.

1. The SUMMARY BOX found at the top right of the first page of the remittance advice summarized the amounts processed for this payment cycle for this remit.
 - The REMIT DATE represents the end of the payment cycle.
 - The BEGINNIG BALANCE represents any funds still owed for previous overpayments not yet recouped or for funds advanced.
 - The PROCESSED AMOUNT is the total of the amounts processed for each claim represented on the remit.
 - The DISCOUNT/PENALTY is the amount deducted from, or added to, the PROCESSED AMOUNT due to late or early payment depending on the terms of the provider contract.
 - The NET AMOUNT is the sum of the PROCESSED AMOUNT and the DISCOUNT/PENALTY.
 - The REFUND AMOUNT represents funds that the provider has returned due to overpayment. These are listed here because the claims involved have been reversed and the reversed amounts were included in the PROCESSED AMOUNT above. You can identify which claims your refunds were applied to in the detail of the remit by looking for claims with a CLAIM STATUS of REVERSED and a non-zero REFUND AMOUNT in the header area of the claim detail.
 - The AMOUNT RECOUPED is the amount retained to pay off a previous advance or negative balance.
 - The AMOUNT PAID is the total of the NET AMOUNT, plus the REFUND AMOUNT, minus the AMOUNT RECOUPED.
 - The ENDING BALANCE represents any funds still owed after this payment cycle.
 - The CHECK # and CHECK AMOUNT are also listed if there is a check associated with this remit. The check will be found at the end of the remit.
2. The BENEFIT PLAN refers to the line of business applicable for this remit.
3. The CLAIM HEADER area of the remit lists information pertinent to the entire claim. This includes the member/patient name, ID, birth date and account number, the Authorization number if obtained, the name of the provider, the claim status, claim number and refund amount if applicable.
4. The CLAIM TOTALS are the total of the detail listed above for just that claim.
5. The CODE/DESCRIPTION area will display any messages that apply to the claim detail above.
6. The REMIT TOTALS are the total of all the claims processed during this payment cycle and listed on this remit.
7. The MESSAGE area at the bottom of the remit includes important addresses and telephone numbers for additional assistance.