

Provider Update

Provider education: *Explanation of Payment*

The purpose of this bulletin is to provide insight on interpreting and understanding *Explanations of Payment (EOPs)* by providing definitions of categories and terms that appear on a standard *EOP*.

For purposes of this document, Amerigroup Iowa, Inc. will be breaking down each of the following categories:

- Cover page: header information
- Cover page: payment summary
- Detailed content: itemized claim information lines
- Detailed content: service detail columns

These categories (and information in each category) appear on our *EOP* as identified in the chart below.

Category	Detailed information
Cover page: header information	<ul style="list-style-type: none">• Provider name and address• Date of remittance advice• Check number or ACH deposit trace number• Provider ID number (Amerigroup assigned)
Cover page: payment summary	<ul style="list-style-type: none">• Gross approved claim amount• Interest paid (where applicable)• Penalty paid (where applicable)• Levy/garnishment (where applicable)• Net amount due• IRS amount withheld (where applicable)• State amount withheld (where applicable)• Amount previously overpaid (recoupments, where applicable)• Amount disbursed (payments less any offset/recoveries)• Recoupment balance (if applicable)

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Category	Detailed information
Detailed content: itemized claim information lines	<p>Line 1:</p> <ul style="list-style-type: none"> Member name, Medicaid ID, type of benefit, diagnosis-related group <p>Line 2:</p> <ul style="list-style-type: none"> Provider's patient account number, Amerigroup claim number, authorization reference number, claim received date <p>Line 3:</p> <ul style="list-style-type: none"> Service provider name, service provider NPI
Detailed content: service detail columns	From left to right of <i>EOP</i> per each claim line: service date(s), service revenue codes and/or HCPCS codes, place of service, total charged, total allowed, deductible, coinsurance copayment amount, contractual difference, total prior payments (TPP), provider responsibility amount, insured responsible amount, explanation/denial codes, total net paid

Definitions of service detail columns

Amerigroup <i>EOP</i> term	Definition
Service date(s)	From and through dates of service
Service codes	CPT, HCPCS or revenue codes billed
POS	Place of service code
Charge	The amount billed for the procedure or service
Allowed	The contracted amount allowed for the procedure or service
Deductible	The amount of the member's deductible that has been applied to the procedure or service
Coinsurance copayment	The amount of the member's coinsurance that has been applied to the procedure or service
Contractual difference	This field may be blank. When information is present, it is the contracted rate (discount) between the provider and Amerigroup.
TPP	Total prior payments

Amerigroup EOP term	Definition
Provider responsibility amount	This field may be blank. When information is present, this is the amount that the provider is contracted to write off that is outside of the provider's contractual amount. An example may be contractual discount or bundled charges.
Insured responsible amount	This field may be blank. When information is present, this is the amount the insured or responsible party may be liable for excluding deductible, coinsurance and copay.
Explanation/denial codes	Payment, reduction or rejection reason code(s)
Total net paid	Total amount paid for the procedure or service

Guidance on an EOP with an overpayment recovery

Under some circumstances, Amerigroup will need to recoup an overpayment from a provider. Overpayments can be identified by internal Amerigroup processes or by a provider. Below are some terms to help interpret an EOP with a recovery effort.

Recoupment notifications glossary

Column header	Definition
Remit date	Date of original remittance advice
Patient name	Member's name
Patient account	Provider's patient account number (if submitted on claim)
Subscriber ID	Member's state of Iowa Medicaid number
Claim number/refund ID	Amerigroup-assigned claim number
Date of service	Date services were rendered
Original negative claim number	Amerigroup-assigned claim number recouped
Claim amount	Total amount overpaid and eligible for recoupment
Credits recovered	Recoupment offset amount (could be full or partial) until balance is fully satisfied

Column header	Definition
ADJ CD	This field may be blank. When information is present, this will reflect the reason for an additional record. Common examples include balance transfers from provider pay to groups no longer used and refunds applied after claims were recouped.
Charge amount code(s)	Amount originally billed
Recovery letter ID	Number that appeared on the refund request letter sent prior to recoupment

Summary at the end of recoupment *EOP*

Column header	Definition
Total negative balance	Original amount due to Amerigroup
Total prior recoupment	Dollar amounts satisfied (previously withheld) from prior remittance advice
Total current recoupment	Dollar amounts satisfied on this (current) remittance advice
Total outstanding negative balance	Dollar amounts carried forward to the next remittance advice

If you have questions about this communication, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.