1. Servicing Provider Information
2. Payee Name
3. Patient Information
4. Claim Information
   - Dates of Service
   - Procedure Code or Revenue Code
   - Amount billed on the claim
   - Allowed Amount
   - Adjusted Amount/Disallow Amount
   - Primary Payor Payment - Coordination of Benefits
   - Patient Responsibility
     o Co Payment
     o Co-Insurance
     o Deductible
     o Non Covered Amount
   - Interest Owed
   - Plan Payment/Benefit Amount
   - Remark Codes/Explanation Codes
5. Claim Totals
   - Current Payment Amount
   - Provider Withhold Amount - Risk withhold amounts and/or Sequestration
   - Prior Paid Amount - Any amount that have been paid on this claim previously
   - Net Payments Amount - Current Payment less Provider Withhold Amount and Prior Paid Amount
6. Explanation of adjusted claims - This will display under an adjusted claim. This details the original claim number, amount paid and date the original claim was paid.

7. Provider Total - Total amounts for all claims listed on the Remittance Advice.

8. Payee mailing information

9. Payment Summary - The below headings are for all claims listed on the Remittance Advice
   • Date Payment is being made
   • Check Number
   • Who payment is being made to
   • Payee tax ID
   • Reference ID • Total Charges
   • Total Cons Charged - Total Considered Charges. This is the larger of contracted amounts and charges
   • Total Denied
   • Total Allowed
   • Non Paid - Total of Coordination of Benefits and Member responsibility
   • Prior Paid - Total of amount previously
   • Interest Owed - Total interest paid
   • Provider withhold - Total Risk withhold amounts and/or Sequestration
   • Gross Paid - Total Charged less Total Denied, Non Paid, Prior Paid, and Provider Withhold.
   • Reductions - Total amount of all original claims payments when the reprocessed claim on the Remittance Advise is paid less than the prior paid.
10. Explanation of Claims Handling- Remark Codes with descriptions
11. Payment Reduction and Recovery Summary
   • Previous Balance- Existing Medical Overpayment Balance
   • Recoveries on this Remittance- Medical Overpayment amount being recovered on this Remittance
   • Reductions on this Remittance- Medical Overpayment amount being added to the total on this Remittance
   • New Balance

12. Payment Recoveries and Reductions made in this Remittance Cycle- This provides details the claims that was originally overpaid and when the overpaid amount for that claim was recovered.

### Payment Reduction and Recovery Summary

<table>
<thead>
<tr>
<th>Transaction Type</th>
<th>Reduction Type</th>
<th>Reduction Date</th>
<th>Recovery Date</th>
<th>Previous Balance</th>
<th>Recoveries on this Remittance</th>
<th>Reductions on this Remittance</th>
<th>New Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduction</td>
<td>Medical Overpayment</td>
<td>MM/DD/YY</td>
<td>MM/DD/YY</td>
<td>0.00</td>
<td>000.00</td>
<td>000.00</td>
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<tr>
<td>Recovery</td>
<td>System Recovered</td>
<td>MM/DD/YY</td>
<td>MM/DD/YY</td>
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<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
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<tr>
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<td>MM/DD/YY</td>
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</table>

<table>
<thead>
<tr>
<th>Reduction Amount</th>
<th>Recovery Amount</th>
<th>Total Reduction Amount</th>
<th>Total Recovery Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>000.00</td>
<td>000.00</td>
<td>000.00</td>
<td>000.00</td>
</tr>
</tbody>
</table>

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- Automatic Recovery- Amount recovered from medical overpayment
- Other Recoveries
- Net Check Amount- Gross Paid less and any Recoveries