


Remittance Advice Guide

Senior Whole Health has enhanced the look of the remittance advice (RA) to better meet the needs of our providers. RA's will now print in a landscape format and include four new fields. In addition, a new EOP (Explanation of Payment) code legend will be added to the remittance advice. The EOP Code legend will provide a description explaining how the claim line was processed.



Senior Whole Health.
A MAGELLAN COMPANY

John A. Provider
Address
City, State, Zip
Provider TIN

Date: 1/1/2020
Check #: 999888777
Check Amount: \$190.00

Line Number	DOS From	DOS To	Procedure Code/ Revenue Code	Modifiers	Billed/Allowed Units	Charged Amount	Allowed Amount	Paid Amount	EOP Code
Claim #	12345678		Member	Member, L. Doe		ID # 987123	Account #	123456789H	
1	3/1/2010	3/1/2010	99203		1 1	\$150.00	\$0.00	\$0.00	C99
2	4/1/2010	4/1/2010	99215		1 1	\$190.00	\$150.00	\$150.00	P10
3	4/10/2010	4/10/2010	99212		1 1	\$90.00	\$40.00	\$40.00	P10
CLAIM TOTALS:						\$430.00	\$190.00	\$190.00	
STATEMENT TOTALS:						\$430.00	\$190.00	\$190.00	

EOP CODE	Description
C99	Code Review Edit – See attachment for claim line specific message(s).
P10	Paid according to SWH Fee Schedule. No patient responsibility