

WHAT IS “AT YOUR FINGERTIPS”?

“At Your Fingertips” is a bi-monthly tip sheet to help providers navigate Electronic Visit Verification (EVV) by answering common questions and providing assistance for resolving common issues encountered by providers in their use of the EVV system.

This tip provides terms that you should know prior to reading your RA, a detail of the sections of the RA and some resources that can assist you in reading and understand your RA. This is not a comprehensive review of the RA but it does provide access to resources that provide a comprehensive RA review.



Not sure who to contact when you have a question or issue, or if your issue needs to be escalated?

Contact DXC Technology via e-mail to: ctevv@dxc.com

Please only send client PHI in an encrypted/ secured email.



EVV TIP # 28

GET TO KNOW YOUR REMITTANCE ADVICE (RA)

Claims processed by DXC Technology on behalf of the Department of Social Services (DSS) are reported to the provider via a semi-monthly Remittance Advice (RA). The remittance advice (RA) is a document that reports all claims activity that occurred in the previous claim cycle for a provider and provides comprehensive information about claims that were paid, denied, adjusted or in process. This tip sheet provides instruction in retrieving the RA and resources to understand the information that it provides.

ARE THERE TERMS I SHOULD KNOW?

The following are some commonly used terms that providers should know. These terms would be helpful when communicating with DXC Technology or DSS regarding your claims.

Claim Detail – The specific information (From and To Date of Service, Procedure Code, Modifiers, if applicable, Units, Facility Type Code, Charges, Allowed Amount, etc.) associated with the services billed on a claim.

Explanation of Benefits (EOB) – Codes posted to claims to provide a brief explanation of the reason why claims were either suspended or denied. The EOB codes are also used to explain any discrepancies between amounts billed and amounts paid on paid claims.

Internal Control Number (ICN) – A unique 13-digit number assigned to each claim that is used for tracking and research.

Prior Authorization (PA) – Authorization for services to be provided in the plan of care from the Access Agency case managing the client,

Remittance Advice (RA) – A document that provides comprehensive information about claims that are paid, denied, adjusted or in process and are produced based on a provider's claim activity.

WHAT ARE THE SECTIONS OF THE RA?

There are 7 sections of the RA:

Banner Page – This section contains important messages from DSS or DXC Technology which may be for your provider type/ specialty or for your agency directly.

Claims Information (Paid, Denied, and Adjustments) – This section details claims information and is sorted by claim type and status. Each claim reports up to 20 EOB codes to explain why the claim paid or denied payment.

TPL Information -This section provides information regarding primary insurance (those for whom Medicaid is not the primary payer) that is on file for clients whose services appear on the RA.

Financial Transactions Processed - This section provides information regarding Payouts, Refunds and Account Receivables.

RA Summary - This section provides a month-to-day and year-to-day summary of financial activities and account receivables.

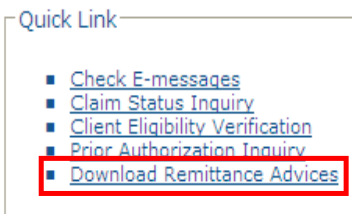
EOB Code Descriptions - This section contains the descriptions of the explanation of benefit (EOB) codes that are posted to claims on the RA. The EOB codes explain why a claim paid the way it did or why it denied payment.

Claims in Process - This section lists claims that were in suspense when the financial cycle was run.

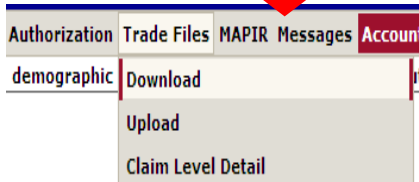
HOW DO I DOWNLOAD THE REMITTANCE ADVICE?

To access the RA in a PDF or CSV format:

- Navigate to www.ctdssmap.com and log into the secure web portal.
- Click **Download Remittance Advice** from the Quick Link box on the www.ctdssmap.com home screen 's left side
or



- Select **Download** from the **Trade Files** drop-down menu, then
- Select "Remit. Advice (RA) - PDF" or "CSV" from the "Transaction Type" on the File Download Search screen.



HOW DO I LEARN MORE?

There are a number of resources on the CMAP Web site, www.ctdssmap.com, that can help you and your billing staff read and understand the data on your RA.

1. **Remittance Advice Workshop** – This workshop is a thorough review of an actual RA that shows a provider how to read each section in the RA including the paid, denied and adjusted claims, the financial summary and the recoupment process. This training is offered to all waiver service providers once yearly but the Remittance Advice Workshop can be reviewed via the CMAP Web site whenever a provider needs a refresher.
To access the Remittance Advice Workshop navigate to www.ctdssmap.com > Provider quicklinks box > Provider Training > Waiver Provider Refresher Workshop > [Remittance Advice Workshop](#).
2. **Chapter 12 of the Provider Manual: Claim Resolution Guide** – This chapter provides a detailed description of an EOB, including why it set, and how to correct the error that caused the claim denial or the claim to pay in an unexpected manner. This chapter should be consulted whenever a provider cannot understand why a claim paid or denied in the manner it did.

FAST FACTS TO KNOW ABOUT REMITTANCE ADVICE

1) RAs are only maintained on the Provider's Secure Web Account for a period of five (5) months or the last ten (10) RAs. You should print or electronically retain your RA when it is made available.

2) Providers receive RAs electronically via the secure Provider Web site at www.ctdssmap.com.

3) Available in either the ASC X12N 835 Payment/Advice standard transaction format, CSV or PDF format. The PDF which provides the paper version of the RA.