

EOB Cheat sheet

Goals

Be a bulldog! Take charge and fight for our offices.

Be a team player and equally work on all tasks. Ask for help from our team.

Make sure every office finishes each month before anyone moves on.

Make sure to coordinate your time off so offices don't worry about the flow of EOBs being entered.

EOB Steps

1. Find EOB on respective website (Websites can be found on the Google Insurance Links Sheet)
2. Check to see if insurance estimates match.
 - a. If yes,
 - i. Click by procedure. Payments amounts should auto generate for you. Be sure to check deductibles and write off amounts are correct then click save.
 - ii. Finalize Payment by selecting one of the following:
 1. Single claim - (1 EOB) select "This Claim"
 2. Batch claim - (Multiple EOB's) select "Batch" after you have finished entering in your last claim on your EOB.
 - iii. Update - Payment Type, Payment Posting Date (EFT's are the deposit date), Amount, Check # (For EFT's - enter "EFT Verified-(Your initials)")
 - iv. See if there are claim progress notes that need deleted or modified as these show up on pt statements.
 - b. If no,
 - i. If insurance does not pay for something and they should have, look at note or call and find out why, split off from claim if part needs reprocessed, and put note with date tracking and your initial to track progress. Reiterate this process till the claim is paid as expected.
 - ii. Or if payment is partial or if our estimates don't match, find out if the insurance setup is wrong.
 1. Manually calc/write down every write-off on each procedure
 2. Check to see if allowed amounts match (Computer, book, and EOB)
 3. If small error, fix ins setup, fee schedule, or call ins company
 4. If yes, check %'s, deductible, downgrade button status
 5. After finding problem & fixing, click "recalculate estimates", if #'s now match enter payment. If problems are fixed, also click "recalculate estimates" for all un-received claims from family.
3. Write off amount insurance did not pay only if:
 - a. X-rays not paid for because of frequency limitations
 - b. Exam if they finish all TP work and haven't seen another dentist this year.
4. If legitimate changes to Pt balance, put a simple explanation of why pt is now responsible, and call pt if helpful.
5. When finished with EOB, make sure it is marked received and change background color on Google Insurance Deposit Sheet, and claim your name.
6. If bulk check done, create check and attached scanned in EOB
7. **IF THIS CLAIM has a secondary or third etc claim on hold**, you will be promoted to send . Don't sent it yet.
 - a. First go to claim, fix billing provider and treating provider, in the "claims note" section type/write " Primary EOB attached, TP \$ _.__" then click send.
 - b. Then log into Vyne, use their clip tool to send a copy of the primary EOB and any attachments that are prompted.

Double Insurance

- Primary Insurance is processed normally
 - with write-offs listed on EOB
- Second, and thirds, etc insurances should **have NO write-offs**, record what was paid and adjust primary write offs as needed. Make sure the insurance took into consideration the correct primary paid amount.
 - **Estimates will never be right on 2nd insurance.*
- *If secondary processes claim as primary, STOP, call patient to fix “coordination of benefits” and tell insurance to reprocess taking primary payment into consideration. Otherwise pt will have non legitimate credit.

For now before starting EOB write down “Est. Family Balance” on top of EOB, and also after EOB done. If there is a change I want a note listed like below.

- Ins paid more or less than we estimated (never allowed, I need more info to make sure you checked the write-offs’ and info on what went wrong so it doesn’t happen again)

You will leave the note that shows up on the patients bill as follows:

“Per insurance (the examples listed below of anything that was fixed) member responsibility \$_. __, patient paid \$_. __, leaving \$_. __ owing... or leaving a credit of \$_. __.

- Deductible information updated
- Fee schedule corrected
- Insurance setup %’s updated
- Updated allowed amount
- Write-offs adjusted because of 2nd insurance
- Button (substitute codes) was clicked or unclick when the claim was created.
- Insurance requires more for tooth colored fillings, ins info updated / Insurance require more for Tooth colored crowns ins info updated
- Insurance applied an alternate code
- UCR insurances don’t give us a contracted fee schedule