



Overpayment Recoupments on your PRA

A guide to understanding how the recovery of overpaid claims is documented on your Provider Remittance Advice



Optum

Overpayment Notifications

How You're Notified of an Overpayment

If an overpayment occurs, Optum Behavioral Health will send you a notification letter with the following info:



- Provider/member information, including patient account and ID number
- Claim number and date(s) of service
- Explanation of how the overpayment occurred
- Guidance on how to refund the overpayment
- OR, how to dispute the request if you don't agree that the claim was overpaid
- What happens if you do not respond to the notification

Getting the Overpayment Back to Optum



Provider Remittance Advice (PRA)

A Sample PRA

Hot Springs, AR 71903-3387

Provider Address
Street
City, State ZIP

**PROVIDER
EXPLANATION
OF BENEFITS**

Claim Summary Information

Pat Ctrl #		Patient Name / Subscriber Name				Pat Rel	Patient ID	
XXXXXXXXXXXXXXXXXXXXXXXXXXXX		XXXXXXXX XXXXXXXX/ XXX XXXXXXXX				EE, SP, CH	XXXXXXXXX1900	
Claim Date		Rend Prov		Claim Number	Rend Prov ID	Med Rec #		
XXXXXXXXXX - XXXXXXXXXX		XXXXXXXX XXXXXXXXXX		XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX		
Auth/Ref #		Clm Chg	Total Line Item Adjustments	Clm Payment	Pat Resp	Group/ Policy	Contract	DRG/ Wght
XXXXXXXXXXXXXXXXXXXXXXXXXXXX		9999999.99	9999999.99	9999999.99	9999999.99	9999999	999999999999	XXXXXXXXXXXX

Service Line Information

Line Ctrl#	DOS			Rend Prov ID				Auth # Ref #			
	Rev	Adj Prod/Svc	Mod	Units	Charge	Considered Charge	Adj Amt	Grp Cd	Clm Adj Rsn Cd	Payment	Remark Cd
1	01/01/1111 - 01/01/1111			111111111				X1X			
		12345			99999.99	99999.99	99999.99	99999.99		99999.99	
					99999.99	99999.99	99999.99	99999.99	XX	99	99999.99 AAA
TOTALS:					99999.99	99999.99	99999.99	99999.99		99999.99	

Check to Payee will be included here

PAGE: 1 of 2
PROD DATE: XX/XX/XXXX
REF#: XXXXXXXXX

PAYEE TAX ID: XXXXXXXXX
PAYEE ID: XXXXXXXXX

CONTACT: CUSTOMER SERVICE
XXX-XXX-XXXX

PAGE: 2 of 2
PROD DATE: 00/00/0000
RTR #: 00000000

PAYEE TAX ID: XXXXXXXXXX
PAYEE ID: XXXXXXXXXX
PAYEE NAME: XXXXX XXXXXXX
CONTACT: CUSTOMER SERVICE
XXXX-XXXX-XXXXXX

Provider Payment Information

Prov Adj Cd	Prov Adj ID	Remark Code	Prov Adj Amt
XXX	XXXXXXXXXXXX	XXX	00000000.00
		Total Adjustment	00000000.00
		Claim Total	00000000.00
		Prov Pay Amt	00000000.00

REMARK(S) LISTED BELOW ARE REFERENCED IN THE SERVICE DETAIL SECTION UNDER THE HEADING "REMARK".

AAA – Remark code explanation

Did you know most routine transactions can be performed online? Our Site Satisfaction Survey data reports that most online transactions eliminate the need for a phone call or paper transaction. Go to providerexpress.com today! www.providerexpress.com

PRA – The Provider Payment Information Section

Provider Payment Information			
Prov Adj Cd	Prov Adj ID	Remark Cd	Prov Adj Amt
WO	12345Z1000000001-25AB87654321	OVR	-12.57
WO	12345Z1000000002-25AB87654322	OVR	-9.55
FB	12345Z1000000003-25AB87654323	OVP	12.57
FB	12345Z1000000004-25AB87654324	OVP	12.57
WO	12345Z1000000005-25AB87654325	OVR	-12.57
FB	12345Z1000000006-25AB87654326	OVP	9.55
WO	12345Z1000000007-25AB87654327	OVR	-9.55
WO	12345Z1000000008-25AB87654328	OVR	-9.55
WO	12345Z1000000009-25AB87654329	OVR	-9.55
FB	12345Z1000000010-25AB87654330	OVP	12.57
		Total Adjustment	-16.08
		Claim Total	78.43
		Prov Pay Amt	62.35

OVP - Indicates an overpayment has been identified. It is FYI only – funds are not deducted from the Claim Total

OVR indicates an overpayment has been deducted (recouped) from the Claim Total

Explains status of an overpayment action

Explains action taken on a claim

- Negative amount indicates an overpayment that has been deducted from the claim payment on this PRA.
- Positive amount indicates an overpayment for claim on this PRA.

Adjustment Code Definitions

Optum follows industry-standard CARC and RARC codes to explain action taken on a claim

Claims Adjustment Reason Codes (CARC) - Industry standard		
Code	What it means	Additional Details
WO	Indicates an overpayment has been deducted from this claim payment	could be any paid member on any ERA (that individual may never have another claim, funds are taken from global account)
FB	Overpayment notification	Overpayment (notification) always related to the member on this ERA
Remittance Advice Remark Code		
Code	What it means	Additional Details
OVP	Notice that Optum Behavioral has determined there was an overpayment on a previous claim.	The overpayment is not deducted from the PRA at this time. Recoupment will take place on a future PRA.
OVR	Indicates an overpayment that has been deducted from this claim payment.	Notification of the overpayment will have occurred on a previous PRA.

Reconciling Remittance Information

PRA – How the Numbers Add Up

Provider Payment Information

Prov Adj Cd	Prov Adj ID	Remark Cd	Prov Adj Amt
WO	12345Z1000000001-25AB87654321	OVR	-12.57
WO	12345Z1000000002-25AB87654322	OVR	-9.55
FB	12345Z1000000003-25AB87654323	OVP	12.57
FB	12345Z1000000004-25AB87654324	OVP	12.57
WO	12345Z1000000005-25AB87654325	OVR	-12.57
FB	12345Z1000000006-25AB87654326	OVP	9.55
WO	12345Z1000000007-25AB87654327	OVR	-9.55
WO	12345Z1000000008-25AB87654328	OVR	-9.55
WO	12345Z1000000009-25AB87654329	OVR	-9.55
FB	12345Z1000000010-25AB87654330	OVP	12.57
Total Adjustment			-16.08
Claim Total			78.43
Prov Pay Amt			62.35

- **Claim Total** is the sum of all new (initial) claim payments listed on the PRA
- **Prov Adj Amt Box** for each claim will show the specific payment for that claim
- **Total Adjustment** is the sum of all overpayments and recoupments listed (negative and positive amounts)
- **Prov Pay Amount** is the sum of the Claim Total plus the total of all items marked as OVP, minus all items marked as OVR



Providers: You will need to update your Accounts Receivable system when a recoupment occurs

Where Does the Recoupment Money Come From?



A recoupment is not taken from the member level – it is taken at the check level.

Example

Dr. Smith informed on 5/1/25 with OVP notice on their remit in the amount of \$500.00. The overpayments occurred on claims for 5 members.

- Member 1 / John Johnson / \$75.00
- Member 2 / Sally Jones / \$150.00
- Member 3 / David Adams / \$75.00
- Member 4 / Lilly Mae / \$100.00
- Member 5 /Donna Ling / \$100.00

On 6/5/25 Dr. Smith receives a remit paying services for 20 other patients, none of which are the 5 listed above. The full remit amount is \$1250.00 but the check amount is \$1000.00.

Upon closer review, Dr. Smith finds that \$250.00 of this remit went towards the above noted recoupment.

Electronic Remittance Advice (ERA)

Sample ERA or EPRA

Account Number	Patient Name/ Patient ID			Subscriber ID/ Corrected ID		Rendering Provider		Claim #/Claim Type			Group Policy Number/Product Name
Date(s) of Service	Description of Service	Amount Charged	Claim / Service Adj	Prov Adj Discount	Amount Allowed	Deduct/Coins/ Copay	Paid to Provider	Adj Reason Code	RMK Code	Patient Resp	
5100750	DANIEL MCFORD/ HP2000157										
11/06/2020 - 11/06/2020	HC100417-HGT	-\$1,570.00	—	—	—	—	-\$1,570.00				
11/05/2020 - 11/05/2020	HC10480	-\$0.01	\$0.01	—	—	—	—	96	N130	—	
11/05/2020 - 11/05/2020	HC90853-GT	-\$0.01	—	—	—	—	—	96	N130	-\$0.01	
11/13/2020 - 11/13/2020	HC90853-GT	-\$0.01	—	—	—	—	—	96	N130	-\$0.01	
11/13/2020 - 11/13/2020	HC10480	-\$0.01	\$0.01	—	—	—	—				
11/13/2020 - 11/13/2020	HC90853-GT	-\$0.01	—	—	—	—	—				
11/13/2020 - 11/13/2020	HC10480	-\$0.01	\$0.01	—	—	—	—				
Subtotal		-\$1,570.00	\$0.03	\$0.00	\$0.00						
5100750	DANIEL MCFORD/ HP2000157										
11/06/2020 - 11/06/2020	HC100417-HGT	\$1,570.00	—	—	\$1,570.00						

“—” indicates payer has not supplied this information.

Total Paid to Provider : \$2,980.55

Provider Level Adjustments:

Adj Reason Code	Reference #	Amount
L6		-\$5.79
L6	Total	\$5.79

MA15 - Alert: Your claim has been separated to expedite handling. You will receive a separate notice for the other services reported.
 N130 - Consult plan benefit documents/guidelines for information about restrictions for this service.
 L6 - Interest Owed
 2 - Coinsurance Amount
 3 - Co-Payment Amount
 45 - Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. Usage: This adjustment amount cannot equal the total service or claim charge amount; and must not duplicate provider adjustment amounts (payments and contractual reductions) that have resulted from prior payer(s) adjudication.

Account Number	Patient Name/ Patient ID			Subscriber ID/ Corrected ID		Rendering Provider		Claim #/Claim Type			Group Policy Number/Product Name
Date(s) of Service	Description of Service	Amount Charged	Claim / Service Adj	Prov Adj Discount	Amount Allowed	Deduct/Coins/ Copay	Paid to Provider	Adj Reason Code	RMK Code	Patient Resp	

96 - Non-covered charge(s). At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT). Usage: Refer to the 833 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

Provider Level Adjustments (PLA)

Adjustment codes describe action taken

"--" indicates payer has not supplied this information.

MA15 - Alert: Your claim has been separated to expedite handling. You will receive a separate notice for the other services reported.

N130 - Consult plan benefit documents/guidelines for information about restrictions for this service.

L6 - Interest Owed

2 - Coinsurance Amount

3 - Co-Payment Amount

45 - Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. Usage: This adjustment amount cannot equal the total service or claim charge amount; and must not duplicate provider adjustment amounts (payments and contractual reductions) that have resulted from prior payer(s) adjudication.

Total Paid to Provider : \$2,980.55

Provider Level Adjustments		
Adj Reason Code	Reference #	Amount
L6		-\$5.79
L6	Total	\$5.79

Account Number	Patient Name/ Patient ID			Subscriber ID/ Corrected ID		Rendering Provider		Claim #/Claim Type			Group Policy Number/Product Name
Date(s) of Service	Description of Service	Amount Charged	Claim / Service Adj	Prov Adj Discount	Amount Allowed	Deduct/ Coins/ Copay	Paid to Provider	Adj Reason Code	RMK Code	Patient Resp	

96 - Non-covered charge(s). At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.) Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

ERA – The Provider Payment Information Section

Explains action taken on a claim

Total Paid To Provider : \$ 62.35		
Provider Level Adjustments		
Adj Reson Code	Reference #	Amount
WO	20240903 -Z12345	-\$12.57
WO	20240103-Z111333	-\$9.55
WO	24XXC123456780	\$12.57
WO	25XD1234567800	\$12.57
WO	20240810 Z12AC45	-\$12.57
WO	24X1234567899	\$9.55
WO	20240315 Z1AC1111	-\$9.55
WO	20240614 Z1212121	-\$9.55
WO	20251222 ZI1CI46	-\$9.55
WO	25XC12345678	\$12.57

Reference #

Recouped Claim

20240903 = Date of service

1234 = Patient Account #

Overpayment Claim

Claim number

- Negative amount indicates an overpayment that has been deducted from the claim payment on this PRA.
- Positive amount indicates an overpayment notification for claim on this PRA.

Clearinghouse ERA (X12 835)

Optum ERA

Provider Payment Information

Prov Adj Cd	Prov Adj ID	Remark Cd	Prov Adj Amt
WO	20240903 -Z12345	OVR	-12.57
FB	20240103-Z111333	OVP	12.57
FB	24XXC123456780	OVP	12.57
WO	25XD1234567800	OVR	-12.56
WO	20240810 Z12AC45	OVR	-12.57
WO	24XI1234567899	OVR	-12.57
WO	20240903 -Z12345	OVR	-12.57
WO	20240103-Z111333	OVR	-12.57
WO	24XXC123456780	OVR	-12.57
WO	25XD1234567800	OVR	-12.57
WO	20240810 Z12AC45	OVR	-12.57
WO	24XI1234567899	OVR	-12.57
FB	20240315 Z1AC1111	OVP	12.57
FB	20240614 Z1212121	OVP	12.57
FB	20251222 Z11CI46	OVP	12.57
FB	25XC12345678	OVP	12.57
FB	20240315 Z1AC1111	OVP	12.57
Total Adjustment			-37.70
Claim Total			37.70
Prov Pay Amt			0.00

REMARK(S) LISTED BELOW ARE REFERENCED IN THE SERVICE DETAIL SECTION UNDER THE HEADING "Remark Cd"

OVP - Overpayment Amount

PSS - (PSS) Charge exceeds allowable rate for this service or code submitted is not on contracted fee schedule-contact Network M

re

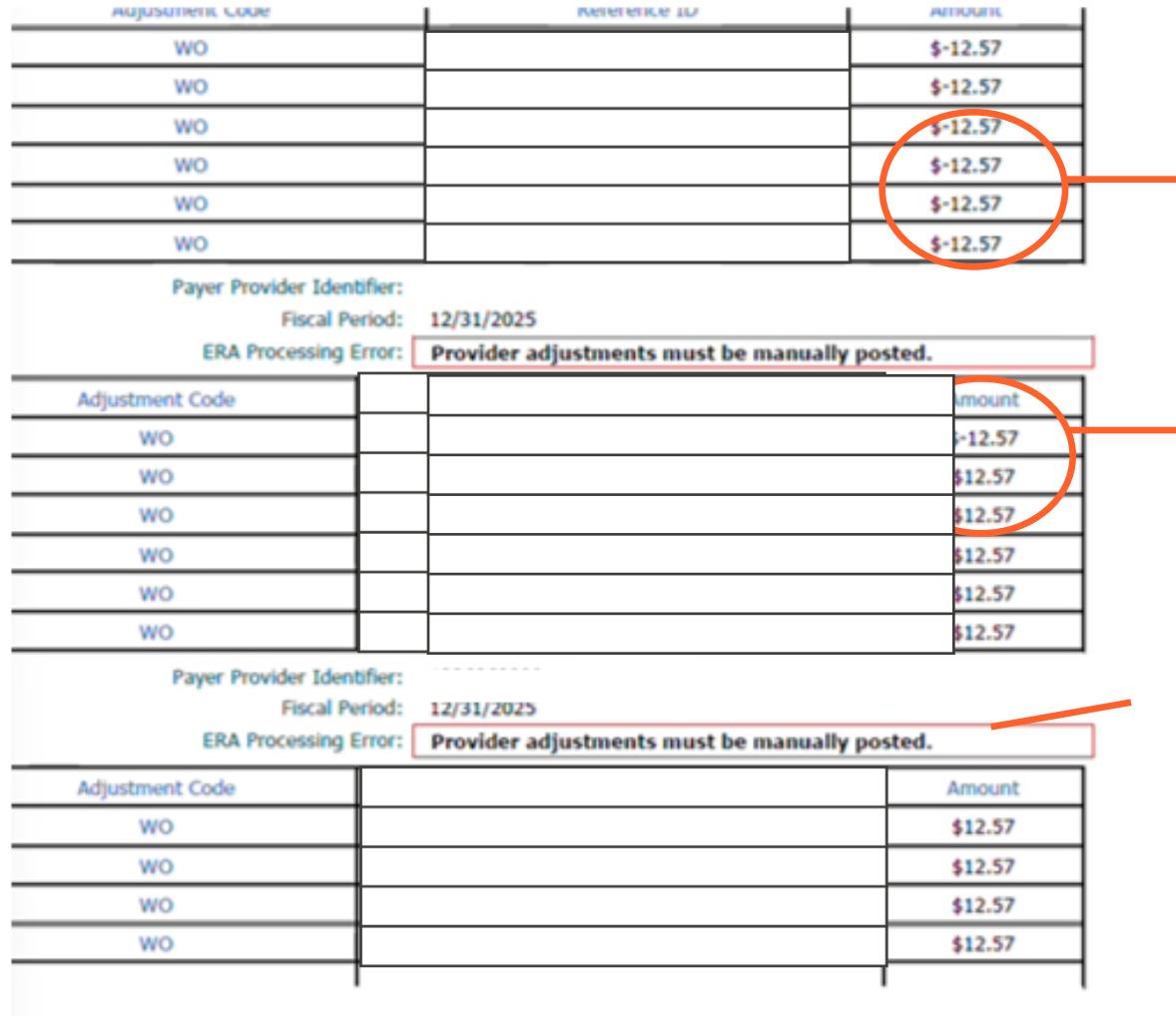
OVR - Overpayment Auto Recovery Amount

If the number is negative, it means the amount has been deducted from the provider payment as a recoupment

If the number is positive, it is a notification of an overpayment

Clearing House ERA

Negative/positive numbers mean the opposite from what's shown on an Optum ERA



ADJUSTMENT CODE	INTERVENTION ID	AMOUNT
WO		\$-12.57

Payer Provider Identifier: _____
Fiscal Period: 12/31/2025
ERA Processing Error: Provider adjustments must be manually posted.

ADJUSTMENT CODE	AMOUNT
WO	\$-12.57
WO	\$12.57

Payer Provider Identifier: _____
Fiscal Period: 12/31/2025
ERA Processing Error: Provider adjustments must be manually posted.

ADJUSTMENT CODE	AMOUNT
WO	\$12.57

On a Clearing House ERA:

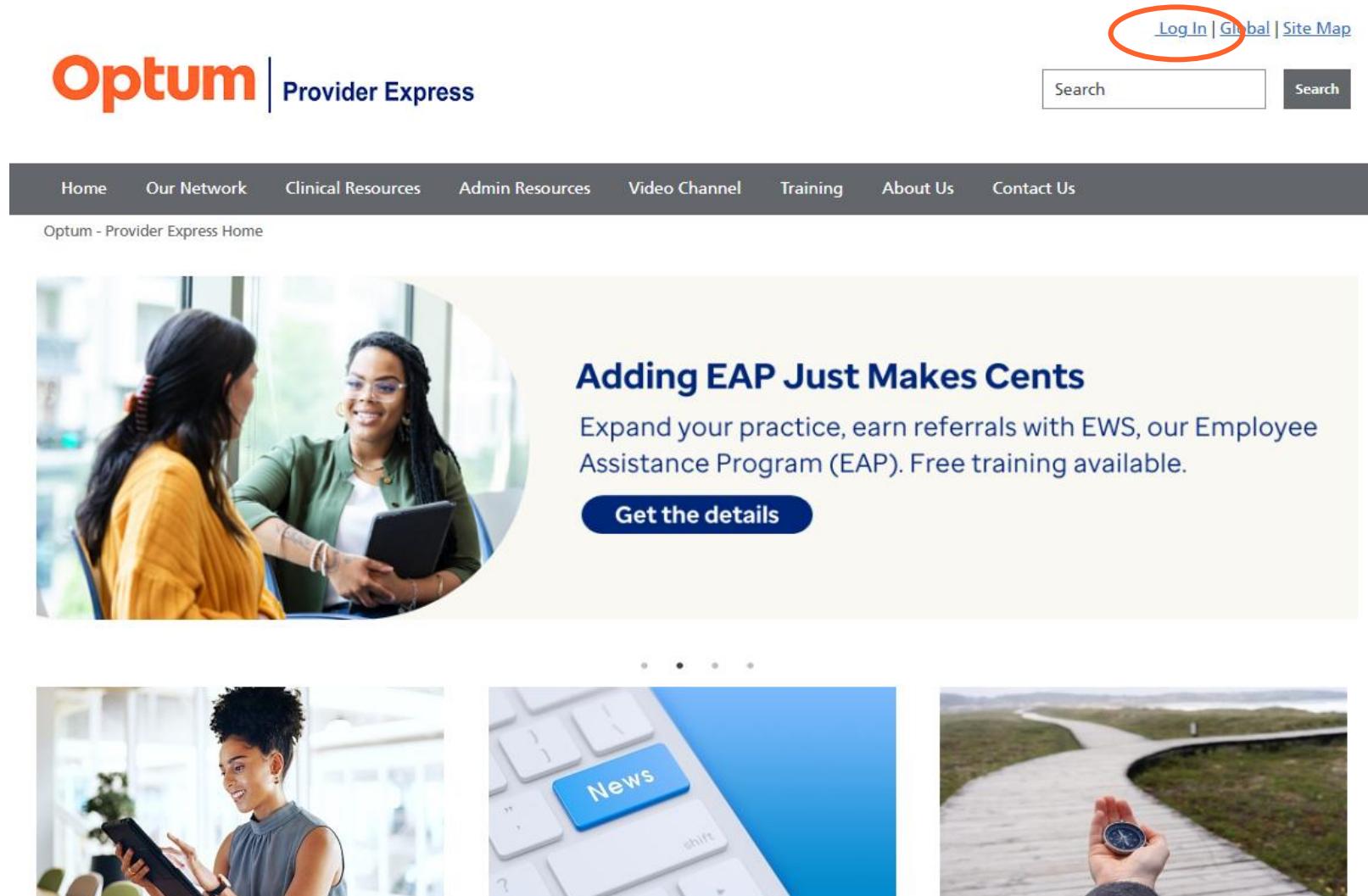
If the number is negative, it is a notification of an overpayment

If the number is positive, it means the amount has been deducted from the provider payment as a recoupment

The clearing house notes that the provider adjustment section requires manual posting intervention. Recoupments occur at the remit check level not individual member level.

Provider Express Enhanced PRA View

Accessing PRAs via the Provider Express Secure Portal



[Log In](#) | [Global](#) | [Site Map](#)

Search

Home Our Network Clinical Resources Admin Resources Video Channel Training About Us Contact Us

Optum - Provider Express Home

Adding EAP Just Makes Cents

Expand your practice, earn referrals with EWS, our Employee Assistance Program (EAP). Free training available.

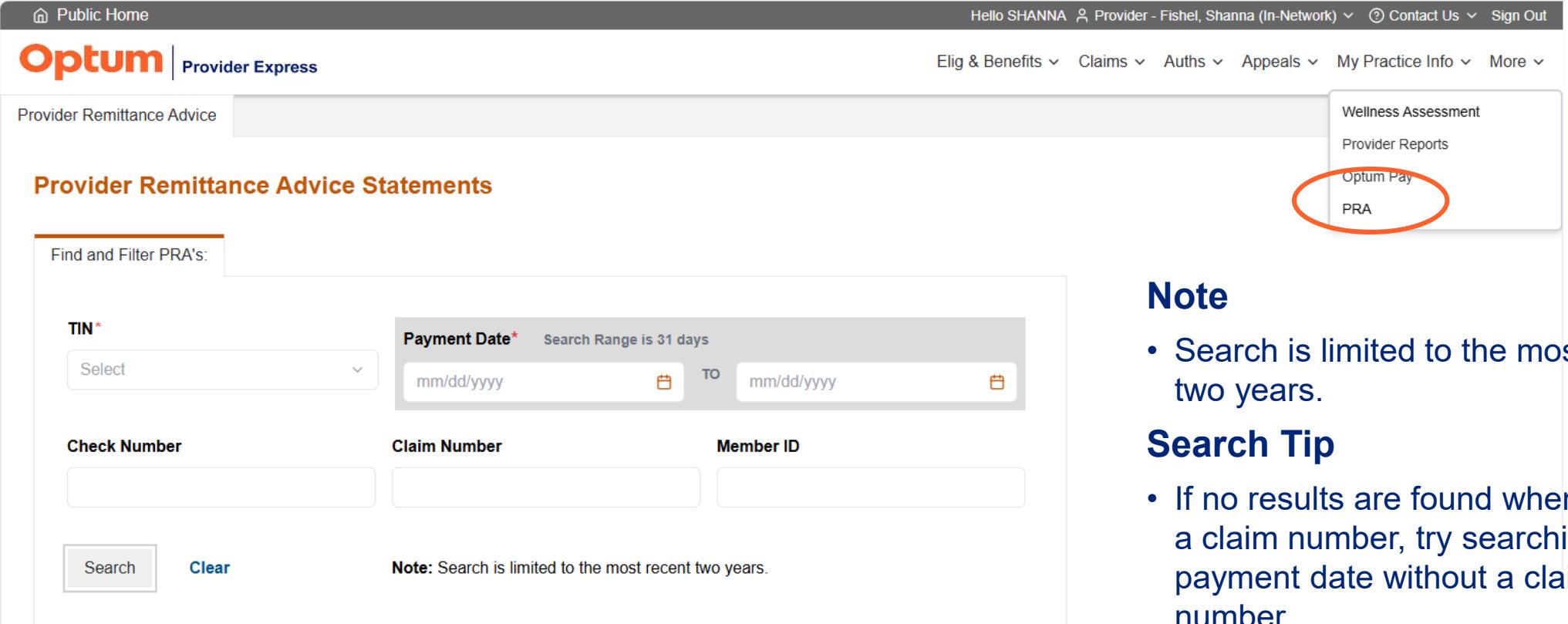
[Get the details](#)



To access the secure portal, go to Providerexpress.com and log in (upper right corner) with your One Healthcare ID and password

Navigating to the PRA Section

Select More, then PRA at the bottom of the options. You can then search for the PRA by claim number, patient ID number, payment date or check number.



The screenshot shows the Optum Provider Express interface. At the top, there is a navigation bar with links for 'Public Home', 'Hello SHANNA', 'Provider - Fishel, Shanna (In-Network)', 'Contact Us', and 'Sign Out'. Below the navigation bar, the 'Optum Provider Express' logo is displayed. The main content area is titled 'Provider Remittance Advice' and contains a sub-section titled 'Provider Remittance Advice Statements'. This section includes a search bar labeled 'Find and Filter PRA's:' and fields for 'TIN*', 'Check Number', 'Claim Number', 'Member ID', and 'Payment Date'. A note below the search bar states: 'Note: Search is limited to the most recent two years.' At the bottom of the page, a note reads: 'Please Note: Provider Remittance Advice (PRA) statements for UHC Community Plan and UHC Exchange Plans are not available through Provider Express. Please use Document Vault through your UnitedHealthcare Provider Portal account (Secure.UHCprovider.com) to access PRAs under those benefit plans.' On the right side of the screen, a dropdown menu is open, showing options like 'Wellness Assessment', 'Provider Reports', 'Optum Pay', and 'PRA'. The 'PRA' option is circled in red.

Note

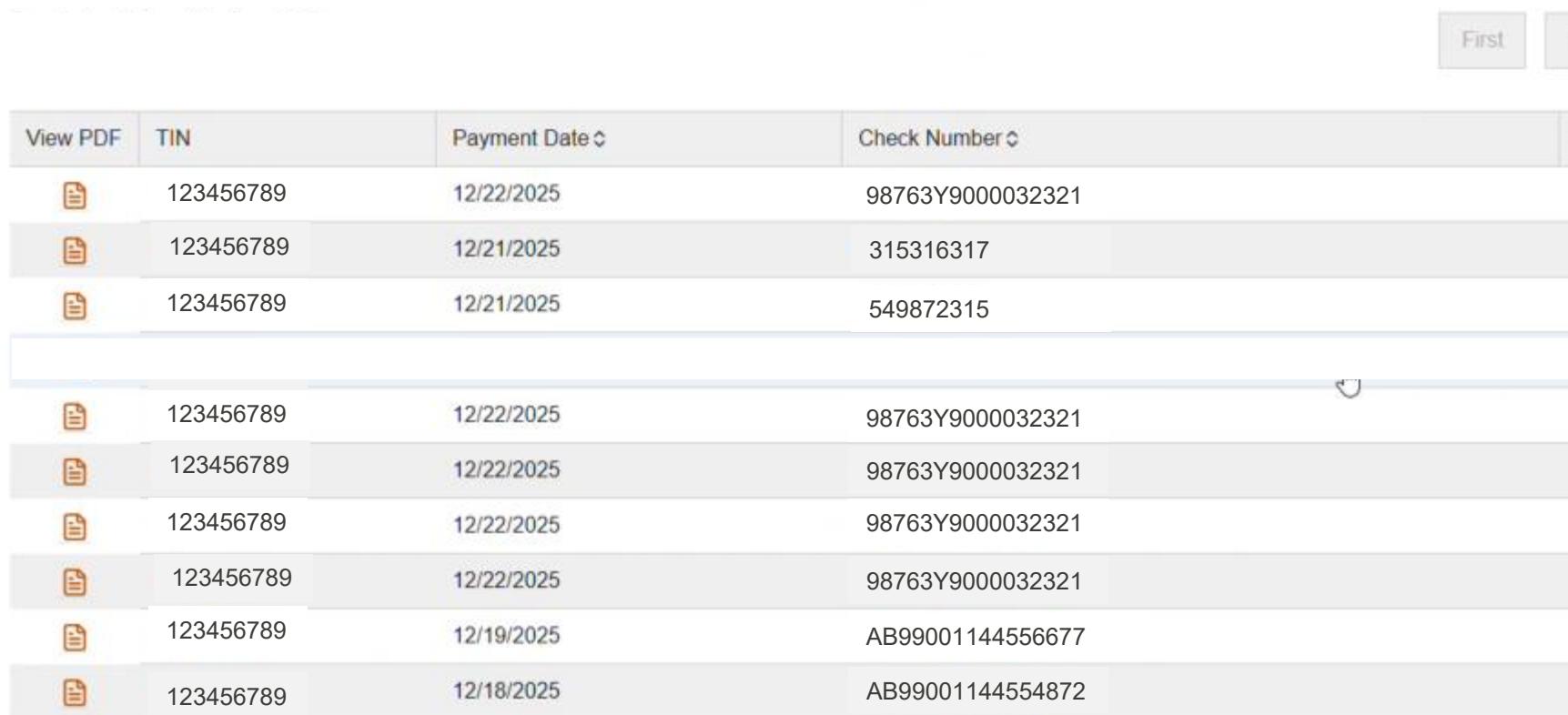
- Search is limited to the most recent two years.

Search Tip

- If no results are found when entering a claim number, try searching with payment date without a claims number

How to View a Remittance Advice

To see the details of a PRA, click view PDF. From there, you can also choose to save the PDF elsewhere or print it out.



View PDF	TIN	Payment Date	Check Number
	123456789	12/22/2025	98763Y9000032321
	123456789	12/21/2025	315316317
	123456789	12/21/2025	549872315
	123456789	12/22/2025	98763Y9000032321
	123456789	12/19/2025	AB99001144556677
	123456789	12/18/2025	AB99001144554872

Note: Adobe Acrobat Reader 3.0 or higher is required to view and print PDF files. For help viewing files, refer to Adobe Acrobat Reader information.

Example of PRA through Provider Express Secure Portal

United HealthCare Services, Inc. PO BOX 809025 DALLAS TX 75380 Phone: 1-866-808-8464		STD - PRA														
PROVIDER REMITTANCE ADVICE																
ABC Corporation		<table border="1"><tr><td>PAYMENT DATE: 01/28/25</td></tr><tr><td>PAYEE TAX ID:</td></tr><tr><td>PAYEE NAME:</td></tr><tr><td>PAYMENT NUMBER:</td></tr><tr><td>PAYMENT AMOUNT:</td></tr><tr><td>PAYEE ID/NPI:</td></tr></table>		PAYMENT DATE: 01/28/25	PAYEE TAX ID:	PAYEE NAME:	PAYMENT NUMBER:	PAYMENT AMOUNT:	PAYEE ID/NPI:							
PAYMENT DATE: 01/28/25																
PAYEE TAX ID:																
PAYEE NAME:																
PAYMENT NUMBER:																
PAYMENT AMOUNT:																
PAYEE ID/NPI:																
PATIENT: John Smith																
MEMBER ID: SUBSCRIBER ID: SUBSCRIBER NAME: DRG: REMIT DETAIL:	CLAIM NUMBER: PATIENT CONTROL NUMBER: GROUP NUMBER: DRG WGT: DC NC	RENDERING PROVIDER: RENDERING NPI: SCHOOL ID:														
LINE CONTROL NUMBER	DATE(S) OF SVC	DESCRIPTION OF SERVICE		UNITS SUB/ADJ	AMOUNT CHARGED	AMOUNT ALLOWED	DEDUCT	CO PAY/COINSUR	PROV RESP	PATIENT NOT COV	COB AMOUNT	WITH HOLDING	PAID TO PROVIDER	QPA AMOUNT	ADJ CD	NOTES
		REV CD SUB/ADJ	CPT/HCPCS SUB/ADJ													
01/08/25 - 01/08/25		99284		1							\$0.00		\$		CO45	
CLAIM#		SUBTOTAL									\$0.00		\$			
CLAIM TOTAL PAYMENT RESPONSIBILITY \$0.00																
CLAIM REMARKS: Payment has been made in accordance with an agreement with United Healthcare or United Behavioral Health.																
TOTAL PAYABLE TO PROVIDER																
Adjustment Code Description																
(CO45) CONTRACTUAL OBLIGATIONS - CHARGE EXCEEDS FEE SCHEDULE/MAXIMUM ALLOWABLE OR CONTRACTED/LEGISLATED FEE ARRANGEMENT.																

Optum Pay

What is Optum Pay?

Optum Pay is a full-service payment and remittance solution used by all sizes and types of health care organizations. Optum Pay integrates with financial management systems and can help reduce the time spent on administrative tasks related to posting and reconciling payments.



[Learn more about Optum Pay](#)



[Benefits of using Optum Pay](#)



[How To Enroll](#)



[Frequently Asked Questions](#)

Choose How You Want to be Paid

Claim payments from Optum Behavioral Health are distributed in 1 of 3 ways

Facilitated by Optum Pay		
ACH/Direct Deposit	Virtual Card Payment	Paper Check via USPS
<p>Automated Clearing House (ACH)/direct deposit — also referred to as Electronic funds transfer (EFT) — is preferred by most practices for its speed and efficiency in depositing claim payments directly into your bank account(s).</p> <p>Each payment is issued for the full amount of the claim payment — there is no charge for the deposit.</p>	<p>VCPs are processed as a credit transaction through the same terminal used for patient copays. No bank account information required</p> <p>Each payment is issued for the full amount of the claim payment. However, virtual card transactions are subject to additional terms and conditions, including fees, between you and your card service processor.</p>	<p>If you choose not to enroll in Optum Pay, you will be mailed a check to be deposited into your bank account. Each payment is issued for the full amount of the claim payment.</p> <p>You can view your Remittance Advice (PRA) in the Provider Express secure portal on the same day as the PRA is posted. The check is mailed and normal delivery timeframes apply.</p>

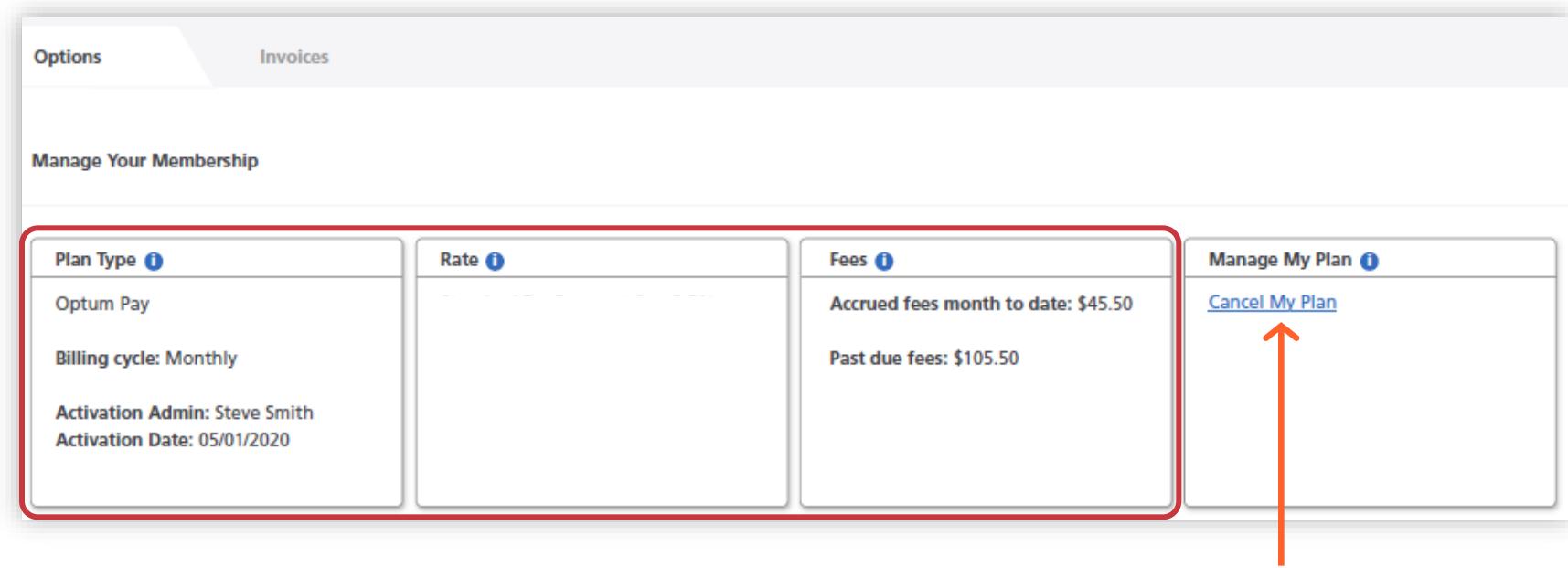
Choose How You Want to View Payment Information

Key Feature	Facilitated by Optum Pay		Provider Express Secure Portal
	Premium Level	Basic Level	
Access to claims payment data	36 months	13 months	24 months
Number of users	Unlimited	Unlimited	Unlimited
Ability to control access and data per user	Yes	Yes	Yes
Data options			
• Downloadable 835	Yes	Yes	No
• Electronic Remittance PDF (data is in 835 file)	Yes	Yes	No
• Payer's proprietary remittance PDF (includes data not contained in 835 file, such as proprietary remark codes)	Yes	Yes	Yes
Payment search capabilities	Yes	No	Yes
Workflow management tools (sort claims based on reconciliation stats and claim count per payment)	Yes	No	No
Fees	0.5% per payment	No fee	No fee

Optum Pay Solutions – Premium Access Experience

Information available

- Billing cycle
- Informational icons – provide basic information about fees and billing
- Accrued fees month to date – displays the total fees accrued during the billing cycle
- Past due fees, if applicable



The screenshot shows a user interface for managing a membership. At the top, there are tabs for 'Options' and 'Invoices'. Below that, a section titled 'Manage Your Membership' contains four boxes: 'Plan Type', 'Rate', 'Fees', and 'Manage My Plan'. The 'Fees' and 'Manage My Plan' boxes are highlighted with a red border. A red arrow points from the text 'To cancel, the provider can either submit a cancellation form or click here.' to the 'Cancel My Plan' link in the 'Manage My Plan' box.

Plan Type	Rate	Fees	Manage My Plan
Optum Pay Billing cycle: Monthly Activation Admin: Steve Smith Activation Date: 05/01/2020		Accrued fees month to date: \$45.50 Past due fees: \$105.50	Cancel My Plan

To cancel, the provider can either submit a cancellation form or click here.

Search Remittance— Premium Access Experience

Home View Payments Search Remittance **Payment Data Files** Maintain Enrollment Manage Users My Profile Billing Service Information Optum Pay Solutions

TIN 007898789

Search Remittance

Deep search history to better manage claims

As an Optum Pay user, we maintain your remittance search history for years so you can better manage claims.

Organization: Dr David Javdan
Search Criteria:
Date(s) of Payment:
Payment Date: Start Date: 10/01/2020 - End Date: 10/20/2020
Payer: AARP Supplemental Health Plans insured by UnitedHealthcare

Search Results:

Payer	Claim Date	NPI	Payment Number	Proxy Number	Patient Name	Subscriber ID	Account Number	Claim #	Claim Amount	ACH Trace Number	Redemption Date	Market Type	Payment Status
AARP Supplemental ...	07/09/2020		1543466627					021464069681	\$18.19			Medical	New
AARP Supplemental ...	07/20/2020		1543461929					022014068391	\$48.45			Medical	New
AARP Supplemental ...	01/14/2020		1543467327					022044568881	\$1.94			Medical	New
AARP Supplemental ...	07/08/2020		1543466627					021474060421	\$18.19			Medical	New
AARP Supplemental ...	07/18/2020		1543465237					021754565171	\$0.00			Medical	New
AARP Supplemental ...	07/15/2020		1543468111					021714166981	\$0.00			Medical	New
AARP Supplemental ...	07/19/2020		1543465237					021724760361	\$0.00			Medical	New
A ADD Supplemental	07/17/2020		1543466627					021775066671	\$0.00			Medical	New

1 Next Previous First Page Last Page Page 1 of 1

Payment Data Files – Premium Access Experience

Home View Payments Search Remittance **Payment Data Files** Maintain Enrollment Manage Users My Profile Billing Service Information Optum Pay Solutions

TIN: 123-4567890 - Enrolled

Create Data Bundle Download Data Bundle

Data bundling boosts your efficiency

Data bundling saves you time. Simply create a data bundle and Optum Pay will email you when it's available for download.

The Payment Data File feature enables faster and easier access to large amounts of payment data. Using this tool you can create data bundles by day, by file type and by payer.

[Detailed Instructions For Bundle Creation](#)

Provider: FACULTY PRACTICE ASSOCIATES MOUNT SINAI SCHOOL OF MEDICINE

File Types:
Note: Payer PRAs and EPRAs may not be available for all Payers.

835s
 Payer PRAs
 EPRAs

Settlement Date Range

From: To:

Payer Selection:

Available Payer(s):

- UHC Member Payment
- AARP Supplemental Health Plans insured by UnitedHealthcare
- AIG Claims Inc
- Allied National
- AppleCare Medical Group
- COVID19 HRSA Uninsured Treatment Fund

Selected Payer(s):

- UHC Member Payment
- AARP Supplemental Health Plans insured by UnitedHealthcare
- AIG Claims Inc
- Allied National
- AppleCare Medical Group
- COVID19 HRSA Uninsured Treatment Fund

Add
Add All
Remove
Remove All

View Payments – Premium Access Experience

Fee Amount column
is only visible with the
Premium experience

Manage Users – Premium Access Experience

Home View Payments Search Remittance Payment Data Files Maintain Enrollment **Manage Users** My Profile Billing Service Information Optum Pay Solutions

Manage Users

Good to know

With Optum Pay, you can add an unlimited number of administrative and general users to your account.

User List ▲ [+ Add User](#)

ANNEKE, EMMA	First Name:	EMMA	Middle Initial:		Email Address:	emma.jones@optum.com
ANNEKE, CARMELLE	Last Name:				Terms and Conditions Acceptance	N
ANNA, AMBER	Phone Number:	646	- 605	- 800	Terms and Conditions Acceptance Date	
Angela, Billie	User Type	Provider			Add TIN	
Angela, Freda	Status	Active			Select TIN	+ Add TIN/NPI

View Purged Users

TIN ▲ [Provider Name](#) [TIN Access Level](#) [NPI](#) [NPI Name](#) [Plan Type](#) [Email Notification](#) [Delete User](#)

371605198	SECRET DRIN MULTISPECIALTY PHYSICIANS	General		Limited	<input checked="" type="checkbox"/>	Delete
388801255	FACULTY PRACTICE ASSOCIATES II	General		Limited	<input type="checkbox"/>	Delete

Basic Access Experience – View Payments

View Payments Search Remittance Payment Data Files Maintain Enrollment Manage Users My Profile Billing Service Information Optum Pay Solutions

Get Started with Optum Pay Today

TIN: [REDACTED] - Enrolled

Payment Summary

We've added functionality to our basic level of access

We've upgraded our basic service to now include PPRA and EPRA documents as well as 13 months of historical data. Your organization may want to consider upgrading to the premium level of access if there is a need for search capabilities, data bundling features and unlimited portal users. [Get Started](#).

Organization: Vail Valley Medical Center

Quick Search Filter Payments Market Type Payment Status

Last 30 days Show All Show All Show All

Showing 14 Results													(Click on column headings to re-sort payment information)					
Payer	Payment Date	NPI	Payment Number	Proxy Number	Amount	Claim Count	ACH Trace Number	Redemption Date	Market Type	835 / EPRA	Payer PRA	Payment Status	1	Next	Previous	First Page	Last Page	Page 1 of 1
COVID19 HRSA Uninsured Treatment Fund	03/12/2021	195 [REDACTED]	439674054		\$668.15	N/A			Medical	835 PDF	N/A	N/A						
Pinnacol Assurance	03/12/2021	195 [REDACTED]	9439594014		\$169.10	N/A			Workers Compensation	835 PDF	PDF	N/A						
Pinnacol Assurance	03/12/2021		9439594060		\$303.84	N/A			Workers Compensation	835 PDF	PDF	N/A						
UnitedHealthcare	03/12/2021	195 [REDACTED]	1439647217		\$56,440.72	N/A			Medical	835 PDF	PDF	N/A						
Pinnacol Assurance	02/16/2021		1545031813		\$432.14	N/A			Workers Compensation	835 PDF	PDF	N/A						
Pinnacol Assurance	02/16/2021	195 [REDACTED]	1545031989		\$4,195.76	N/A			Workers Compensation	835 PDF	PDF	N/A						

Claim &
Remittance data
is accessible via
the Payment
Number link

Optum

Columns in grey are unavailable

Additional Optum Pay Resources

- [Learn more about Optum Pay](#)
- [Benefits of Optum Pay](#)
- [User/enrollment guides](#)
- Contact:
 - Email: optumpay@optum.com
 - Phone: 1-877-620-6194, 7am – 6pm CT, Monday – Friday

Welcome to Optum Pay™

Optum Pay accelerates claims payments to your organization, improving processing accuracy that enables you to reconcile claim payments faster - reducing administrative work for your organization. With Optum Pay you get access to the right tools and solutions so you can spend less time on reconciling claims and more time getting people the care they need.

[BENEFITS OF OPTUM PAY](#)[ENROLL NOW](#)

Learn more about Optum Pay

[Watch video](#)

Get more with Premium

Optum Pay Premium provides enhanced functionality and improved features designed to drive your practice forward.*

- **Deeper, broader history** - access up to 36 months of claim and remittance data
- **Robust search tools** - search current and historical claim data by patient name, claim number, date of service and many other options
- **Workflow management tools** - organize claims based on reconciliation status
- **Claim count details** - easily identify the number of claims consolidated per payment
- **Data bundling tools** - combine a week's worth of data into a single file for input into your practice management system.

Optum Pay Support

Phone: 1-877-620-6194

Hours: 7 am - 6 pm CST, Monday - Friday

One Healthcare ID Support

Phone: 1-855-819-5909

Email: OptumSupport@optum.com

Hours: 6 am - 10 pm CST, Monday - Friday

Key Acronyms & Definitions

What They Mean

Acronym/Term	Definition
835 File	A data file that can be uploaded to your practice management system. It is used to report adjudicated (processed) claims and contains Electronic Remittance Advice (ERA) information. This is sometimes referred to as a HIPAA 835 file.
ACH / Automated Clearinghouse	An electronic network for financial transactions to facilitate your EPS transactions.
CCD / Cash Concentration and Disbursement	An electronic transaction used to transfer funds between businesses.
EDI (Electronic Data Interchange)	The exchange of information for routine business transactions in a standardized computer format.
EFT / Electronic Funds Transfer	The movement of funds by electronic means.
EOB / Explanation of Benefits	A claim processing summary most typically sent to the health plan member after a claim has been processed. It has the same information as a Provider Remittance Advice (PRA), but the format of the document is different.
EPS / Electronic Payments and Statements	A solution that integrates electronic funds transfer (EFT) and electronic remittance advice (ERA) with a unique payment number for faster, easier reconciliation.
EPRA / Electronic Provider Remittance Advice	A Word version of the 835 electronic claim processing file.
MEOB / Multiple Explanation of Benefits	A document combining more than one EOB representing a consolidated EPS payment.

And More Definitions

Acronym/Term	Definition
Optum Pay™	Optum Pay is a full-service payment and remittance solution that integrates with financial management systems and can help reduce the time spent on administrative tasks related to posting and reconciling payments. Optum Behavioral Health uses Optum Pay to distribute claim payments to providers via either Automated Clearing House (ACH)/direct deposit or virtual card payment.
PRA / Provider Remittance Advice	A claim processing summary distributed to providers. It has same information as an Explanation of Benefits (EOB) sent to members, but the format is different.
RTN / Routing Transit Number	A 9-digit number that identifies the financial institution where the account is located. The RTN is usually located in the lower left-hand corner of your checks, before the Account Number.
TRN / Trace Number	This is the EPS payment number.

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