EXPLANATION OF BENEFITS (EOB) TIP SHEET

1. Programs should review the EOB’s prior to sending to MHBU (Mental Health Billing Unit) for posting in Cerner. This will prevent delays in claiming.
2. Do not send EOB’s to MHBU with the following reasons: These are not acceptable denials for MHBU to post in Cerner.

* Member cannot be identified
* Charges covered under a capitation agreement/managed care plan
* Misdirected claim
* Lack of information
* Notice of Acknowledgment

1. EOB’S received from contract providers that billing unit cannot post in Cerner due to the following reasons:

* Client is “No Show” as identified in the Detail Menu on display services
* Policy has not been entered in Cerner
* Provider not certified or eligible to be paid – denial reason code B-7 (Noridian)
* The EOB received was previously received by billing unit and was posted, had been crossed to Medi-Cal and was paid.
* No date of service found in Cerner through display services menu
* Procedure code billed on the EOB does not match service found in Cerner
* Service was already been claimed to Medi-Cal and was paid.
* Missing the EOB page that explains the denial codes.

1. If in the event that any of these reasons was found in a EOB with multiple clients and services in it, please black- out that client name for us not to post.