

# How to read your professional Explanation of Payment

Certain Independence Blue Cross (IBC) members with spending accounts have a new payment option called Direct Pay to Provider (DPTP). DPTP allows these members to pay providers from their Health Savings Account (HSA), Health Reimbursement Account (HRA), or Flexible Spending Account (FSA). For HRA and FSA participants, DPTP is an employer-only option; however, these participants have the option to generate payment directly from their account to the provider or self-reimburse through direct deposit. Professional providers receiving payment from members will be issued an Explanation of Payment (EOP).

This guide provides an overview and detailed information for the professional spending account EOP for professional providers. It includes the definitions for headers, numbers, and remarks used in the new professional EOP. Use this guide as a reference tool for office staff to understand and interpret payments.

*Note:* This guide was current at the time of publication but is subject to change.

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## Professional Provider EOP with check

Spending Account Processing

**EXPLANATION OF PAYMENT  
CHECK IS ENCLOSED**

PROVIDER SUMMARY	
1	Provider: DR. IMA SAMPLE
2	Provider Number: 9999990000

  

PAYMENT SUMMARY	
3	PROVIDER CHECK NUMBER ..... 010000176
4	TOTAL SPENDING ACCOUNT FUNDS PAYABLE ..... \$2,950.00
5	TOTAL PROVIDER PAYMENTS..... \$2,950.00

The image above is a sample copy of a spending account explanation of payment (EOP) where payment was made by paper check. The first page of each professional spending account EOP is the summary page, which includes the following:

1. **Provider:** The name of the billing provider.
2. **Provider Number:** The NPI of the billing provider.
3. **Provider Check Number:** The check number on the paper check received by the billing provider.
4. **Total Spending Account Funds Payable:** Total amount of funds payable during this claim cycle.
5. **Total Provider Payments:** The actual amount paid to the provider.

## Professional Provider EOP with EFT

Spending Account Processing

**EXPLANATION OF PAYMENT  
DEPOSIT NOTICE ONLY**

PROVIDER SUMMARY	
6	Provider: Professional Provider ABC
7	Provider Number: 9999900000

  

DIRECT DEPOSIT SUMMARY			
FUNDS AVAILABLE DATE	06/19/2013	EFT PAYMENT NUMBER	992100031
ACCOUNT TYPE	CHECKING		
8	TOTAL SPENDING ACCOUNT FUNDS PAYABLE .....		\$65.00
9	TOTAL SPENDING ACCOUNT EFT DEPOSIT .....		\$65.00

The image above is a sample copy of an EOP where payment was remitted through Electronic Funds Transfer (EFT). The first page of each professional spending account EOP is the summary page, which includes the following:

6. **Provider:** The name of the billing provider.
7. **Provider Number:** The NPI of the billing provider.
8. **Total Spending Account Funds Payable:** Total amount of funds payable during this claim cycle.
9. **Total Spending Account EFT Deposit:** The actual amount paid to the provider via EFT.

## Spending account payment summary

**Provider Number:** 9999999999  
**Provider Name:** PROFESSIONAL PROVIDER ABC

**SPENDING ACCOUNT  
PAYMENT SUMMARY**

PAT ACCOUNT NUMBER	MEMBER ID	PATIENT FNAME PATIENT LNAME	BEGIN DOS END DOS	CLAIM NUMBER	TOTAL SPENDING ACCOUNT FUNDS REQUEST <sup>10</sup>	SPENDING ACCOUNT FUNDS PAID <sup>11</sup>	REMAINING LIABILITY <sup>12</sup>	REMARKS CODE <sup>13</sup>
1234567	999999999999	JOHN SAMPLE	01-03-14	13713066905	150.00	150.00	.00	J0091
TOTAL AVAILABLE FOR PAYMENT					150.00	150.00	.00	

**Spending Account Processing**

- 10. **Total spending account funds request:** The total amount of funds requested by the provider.
- 11. **Spending account funds paid:** The actual amounts paid to the provider.
- 12. **Remaining liability:** The remaining member liability amount.
- 13. **Remarks code:** A numeric code for any messages to the provider associated with the payment. Descriptions are provided on the last page of the EOP.

<sup>14</sup> **MESSAGE(S):**  
 J0091 If you have any questions, call 1-800-275-2583.

<sup>15</sup>

"The amount(s) noted above are payments made by AmeriHealth, Inc., an independent company. AmeriHealth administers these payments on behalf of Independence Blue Cross (IBC) for members who have directed IBC to make payments from their personal spending accounts to providers for amounts which are the responsibility of such members. Such amount(s) are not being paid by AmeriHealth on behalf of IBC in IBC's capacity as an insurer or administrator of the member's health insurance plan and are in addition to any amount paid by IBC pursuant to such plan. As a result, IBC members should not be separately billed for any amount(s) relating to this service which are satisfied by the payment and any amount(s) also directly collected from the member in excess of the amount(s) due should be refunded to the member."

- 14. **Message(s):** Displays any messages to the provider associated with the payment.
- 15. **Disclaimer information:** Payment checks will be made out by AmeriHealth, Inc., an independent company that administers check payment on behalf of IBC for members who have directed IBC to make payments from their personal spending account to providers for amounts that are the member's responsibility.