Provider Refund/Recoupment Guide



Important note: Information included in this document is not part of an actual remit advice or overpayment notification letter and serves as a helpful guide to better understand this process.



Overpayment Notification letter

You have access to the most common UMR forms right at your fingertips. Quickly and easily complete claims, appeal requests and referrals, all from your computer.

This letter is generated to alert a provider of an overpayment. In addition, a corresponding remittance notification is created for additional notification.



 Patient Acct Number 	4) Patient Name	7) Date of	 8) UMR EDI ID 		
		Service	#		
644626	Spring Sunshine	09/18/2019	19275555559		
5) Member ID	6) Member Name				
4444444	Spring Sunshine				
9) Plan Name (Employer)					
ABC Company					

Bullets 1 – 9 are added to help correspond with the providers remits. Refer to the following examples for Remit Advice Notification and Remit Advice Recoupment.

Remit Advice Notification

A recoupment notification can be included in a regular remit or as a standalone. The date of the remit is the same date as the letter.

LTJ SAUFUM FUN STRACUEL, NY 99911 TATES SERVICE CHARGED ALLOWED DEDUCTIBLE CORAY CORISURANCE CARE ADP INELIGIBLE WITHHED DC AKE PAID PAID FROM/TD CODE AMOUNT AMOUNT AMOUNT INAPPY J IO42222222 CLAIM NUMBER: GASASS CARE ADA 0 100 01 S71.39 .00 CODE AMOUNT FUNAEE: GASASS CARE ADA 0 0 00 01 S71.39 .00 TOTAL 1000.00 571.39 .00 .00 .00 1028.4100 .00 01 S71.39 .00 STRUCUEL PATENT HARPY J IO422222222 TOTAL 1000.00 571.39 .00 .00 .00 1028.4100 .00 01 S71.39 .00 STRUCUEL PATENT HARPY J IO42222222 CLAIM NUMBER: GASASS CARE ADA 0 0 00 571.39 .00 STRUCUEL PATENT STRUCT STR	CF713 2404783090 0000044444 PERFECT PROVIDER				REMITTANCE ADVICE FOR PERIOD ENDING 02-24-20 PERFECT PROVIDER PO BOX ROFALSALT LARE CITY UT BELINF 1-800-826-9781 PORCO SELECT WITH LINE OFFICIALS AGE COMPANY SELF-INSUR FEDERAL IO NO. 123456789						and recoupment will always b same plan.						
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		TOTAL	.00		.00	15.00	.00	.00	04.89-	.00			.00	15.00-			

In this remit example, the claim was adjusted due to COB.

1) FCN Financial Control Number

This is assigned so you can track the overpayment until it's satisfied. See website instructions.

2) Overpayment Amount - This is only a notification on this remit because there is no subtraction sign by \$72.11 and the amount is not subtracted from remit paid total.

9) Plan Name – The overpayment

Remit Advice Recoupment

The actual recoupment is taken on this remit. It is almost 30 days from the date of the letter and remits notification.



Online Refund/ Recoupment Tracking

Go to **umr.com** and log in using your secure username and password.

If you do not have a username and password, you can register and create an account. Click on the **Register** icon and follow the steps outlined.

Click on the **Refund** tracking icon from the home page to review recoupment activity on your account.

Enter the 11-digit financial control number ~ (FCN), including the leading zeros, in the designated field. You can locate the FCN within the Overpayment Notification Letter or Remittance Advice. Click **Go**.

The Refund activity screen will display all claims associated with the overpayment. Click on the claim number to view additional details.

This screen will display the status of the recoupment activity details.





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