

## **PI - Explanation of Medical Benefits (EOMB) Review**

### **Purpose:**

The IME performs audits of services delivered under Medicaid through an Explanation of Medicaid Benefits (EOMB) survey, as required in 42 CFR 433.116 (e) and (f), by sending an individual notice to a sample of Medicaid members, to confirm that the services on the claims were performed. Returned notices are sent to the PI for review.

### **Identification of Roles:**

IME Program Integrity (PI) Unit— ensure review of returned EOMB forms.

CORE Unit Mailing Room— scan Explanation of Medical Benefits (EOMB) forms into OnBase.

### **Path of Business Procedure:**

#### PI Review of EOMB Forms

- Step 1. All EOMB forms returned to the IME are scanned into the Document Imaging and Workflow System, known as OnBase. These EOMB forms are electronically routed in OnBase to the PI Unit for processing. The Investigator, is responsible for ensuring review of these EOMBs.
- Step 2. The EOMB is reviewed by the Administrative Assistant
- a. If the Medicaid member has verified on the returned EOMB that the services have been rendered as indicated on the EOMB (by checking box 1), the document is key worded with the member ID number.
    1. After key wording the document with the member ID, answer “no” to the prompt “Do you need to create a referral e-form?”
    2. The EOMB is archived in OnBase, and processing of the EOMB is completed.
  - b. If the response of the Medicaid member on the returned EOMB indicates concerns about the services provided (box 2 or box 3 is checked), the Administrative Assistant sends the OnBase referral to the Investigator.
    1. After key wording the document with the member ID, answer “yes” to the prompt “Do you need to create a referral e-form?”

- c. The Investigator contacts the Medicaid member by telephone if there are questions about the response on the EOMB, or to explain to the member that a service rendered is from a provider the member may not have seen face-to-face, such as a radiologist. If a telephone conversation between the investigator and the Medicaid member does not resolve questions or concerns, or if the response of the Medicaid member on the EOMB still indicates valid concerns about the services provided, the Investigator conducts a preliminary investigation that may lead to a full review. Refer to the procedures for opening, conducting, and closing preliminary investigations and full reviews as necessary.

Step 3. Because these EOMBs are all stored electronically in OnBase, reports and statistics concerning these EOMBs are readily available.

**Forms/Reports:**

Explanation of Medical Benefits Form

**RFP References:**

6.1.2.3.11

**Interfaces:**

Program Integrity Unit  
CORE

**Attachments:**

None