

Download EOB Report

To download an EOB, please follow the steps below:

1. From the Billing tab on your Dashboard, click on the **Search** link beside the 835 Remittance section.

Professional Claim	
Billing Data	New Search Summary Detail Report Archive
Service Authorization	Search
Professional Claim	New New (Using Template) New Template Send Search Template Search Transaction Search Archive
Report	Utilization Unclaimed Reconciliation Denied Claim Aging Report
Claim Submission	Send Claim
Remittance 835	Search

2. On the Remittance 835 Search page, select an appropriate date range and click on the **Search** button.

Remittance 835 Search

File Name

Upload Date From

03/16/2017

To

MM/DD/YYYY

Uploaded By

Search

Update Date From

MM/DD/YYYY

To

MM/DD/YYYY

Cancel

→

Search

Note: Users can just click on the search button to generate search results.

- On the next page, click on a file name to open the file.

Remittance 835 Search

The first 100 records matching your search criteria are shown here. Please note that, Export to Excel link at the bottom of the page contains the full report. If you want to view a different set of records, please narrow down your search criteria.

15 Records

File Name	Upload Date	Uploaded By	Claim Type	Time Zone
DEMO-NE-1231222-1231111-1231111.txt	01/11/2017	David Powell	Professional Claim	US/Central
DEMO-NE-123456-123456-123456.txt	01/11/2017	David Powell	Professional Claim	US/Central
DEMO-NE-1231222-1231111-1231111.txt	01/11/2017	David Powell	Professional Claim	US/Central

- You will be taken to the Remittance 835 page. Click on the **CSV Report/PDF Report/Text Report** button to download the report.

Remittance Report

Note: This report is for preview and does not show the full content. To see the full content click on the 'CSV Report' or 'PDF Report' or 'Text Report' button.

PROVIDER NAME: BILLING PROVIDER
 PROVIDER ID: A123456789
 CHECK NUMBER: 000111111
 CHECK AMOUNT: 350.00
 CHECK ISSUE DATE: 06/01/2017

LAST NAME	FIRST NAME	CLIENT ID	TRACK ID	ICN #	STATUS
CHARGED AMT	PAID AMT				
SRV CODE	DATE FROM	DATE TO	PROC MOD	UNITS	CHARGED AMT

[CSV Report](#)
[PDF Report](#)
[Text Report](#)

[Original 835](#)
[Status Update Report](#)

[Back](#)
[Cancel](#)

- Open the downloaded file to view the report in PDF, CSV or Text format.

File Edit Format View Help								

PROVIDER NAME: BILLING PROVIDER OF NEBRASKA								
PROVIDER ID: A123456789								
CHECK NUMBER: 0001111111								
CHECK AMOUNT: 350.00								
CHECK ISSUE DATE: 06/01/2016								

LAST NAME	FIRST NAME	INDIV ID	CLAIM ID	TCN	STATUS	CHARGED AMT	PAID AMT	
SRV CODE		DOS FROM	DOS TO	SRV AUTH		ORIG CLM ID		
WILLIAM	ETHAN	00222222	P4000001	01111122233344401	PAID	100.00	100.00	
H2032	ADULT DAY HAB	05/01/2016	05/31/2016	42034590113		P345000001		
NELSON	MARY	00222223	P4000002	01111122233344402	PAID	100.00	100.00	
H2032	ADULT DAY HAB	05/01/2016	05/31/2016	42034590113				

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A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
PROV ID	CHECK #	LAST NAM	FIRST NAM	INDIV ID	PCN	TCN	CHARGED	PAID AMT	STATUS	DOS FROM	DOS TO	SRV CODE	SRV AUTH	REP PCN	ADJ GROU	ADJ CODE	ADJ AMO
2825005	#8239500X	ETHAN	WILLIAM	71939199	P5156256	#P512365	2205.6	2205.6	PAID	4/1/2016	4/30/2016	4366	IBSA-STATENE-E3V4YA9XKZA6R				
2825005	#8239500X	NELSON	MARY	24329994	P5175626	#P512522	3522.48	3522.48	PAID	4/1/2016	4/30/2016	7090	IBSA-STATENE-E3V4YA9XKZA6R				