

EDI Support Services

Medicare Remit Easy Print (MREP) Quick Start Guide

Download and install MREP from the CMS website.

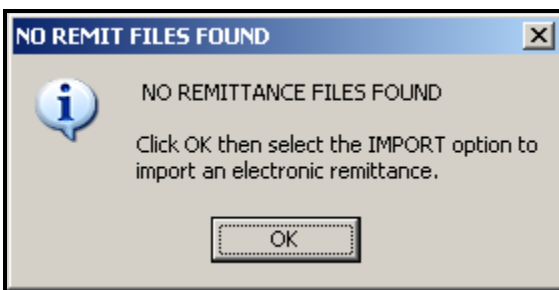
1. Open the [CMS Website](#) and click on the Medicare Remit Easy Print link. Please refer to the Downloads section on the CMS website for complete MREP documentation and helpful guides.
2. Select and run the extracted MedicareRemitEasyPrint.msi file.
3. Download the remittance advice from EDISS' Bulletin Board System.
Link: [EDISS User Documentation Bulletin Board System \(BBS\)](#).

Note: Save the remit in the Import folder for easy reference. The path for the Import folder is C:\Program Files\Medicare EasyRemit\Import.

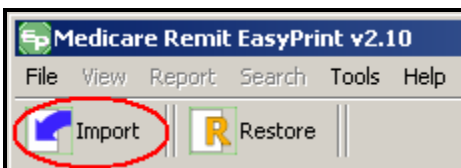
4. To start MREP, double-click the Medicare Remit Easy Print shortcut.



The following message displays the *first time* that you start MREP, or when no Remittance files are in the Import folder. Click Ok.



5. Select Import.

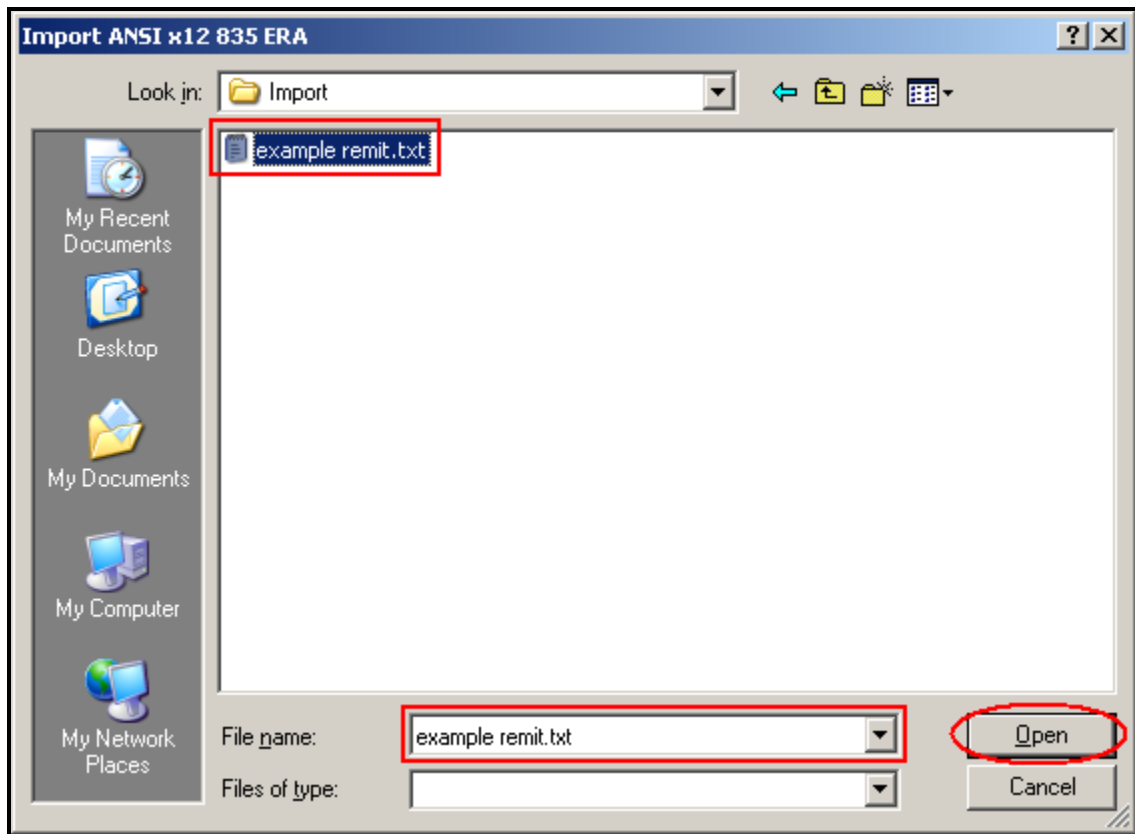


6. Select the HIPAA 835 file that you want to import by double-clicking on it or by clicking on it and selecting open.

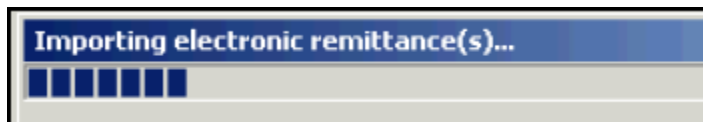
In this document:

- Download and Install MREP software
- Import and translate remittance advices using MREP

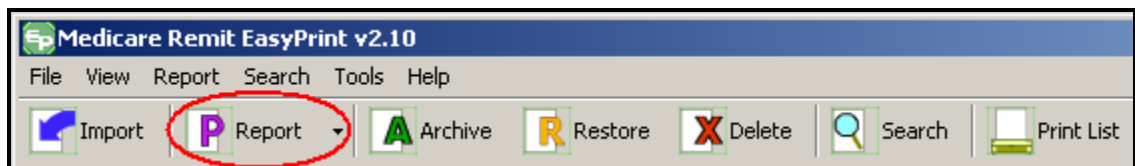
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MREP starts the import:



7. Click the down arrow on the Report button to pick a view. The report list display, select Entire Remittance, for the display that most resembles the Standard Paper Remittance (SPR) Medicare generates and mails to providers.



8. The file and its corresponding claims display, click on the print  button to print the remittance.

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PC-ACE Post-32 ETHA Medicare Remittance Notice (Printed)

Zoom 100 Page 1 of 1 Close

MEDICARE SERVICE CENTER
4301 33TH AVE NORTH
FARGO, ND 581031071

**MEDICARE
REMITTANCE
NOTICE**

LONGME HEALTH
111 BIRCH ST E
MINOT, ND 581414492

PROVIDER #: W11171
PAGE #: 2
DATE: 08/12/2005
CLAIM/RTY #: 323333332

| SEND FROM | SEND DATE | PO1 | REG | PROF | PRO2 | BILLED | ALLOWED | DEDUCT | COINS | CD-REASON | CD | AMT | FROM PAID |
|---------------------------------|---------------------------------|---------------|-------------------|-------|------|--------|---------|--------|-------|-----------|--------|----------|-----------|
| ----- | | | | | | | | | | | | | |
| NAME BRNCH, DEME | HIP 111456709A | ACHT 01114567 | ICM 118805239941A | ADG Y | MOA | HA61 | HA16 | | | | | | |
| WEIGHTER | 0111 011195 02 | 1 91024 | | | | | | | | 0.00 | CO-210 | -125.00 | 0.00 |
| WEIGHTER | 0111 011195 02 | 1 91135 | 2E | | | | | | | 0.00 | -7.15 | CR-41 | -52.16 |
| WEIGHTER | 0111 011195 02 | 1 91092 | 2E | | | | | | | 0.00 | -5.13 | CR-41 | -30.57 |
| PT RESP | | | | | | | | | | | | | -21.14 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | -176.69 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | -54.54 |
| CLAIM INFORMATION FORWARDED TO: | BENEFICIARY OF HONORABLE DECATA | | | | | | | | | | | | |
| ----- | | | | | | | | | | | | | |
| NAME BRNCH, DEME | HIP 111456709A | ACHT 01114567 | ICM 478514773100A | ADG Y | MOA | HA61 | HA16 | | | | | | |
| WEIGHTER | 0111 011195 02 | 1 91499 | CC | | | | | | | 0.00 | CO-41 | 125.00 | 0.00 |
| WEIGHTER | 0111 011195 02 | 1 91135 | 2E | | | | | | | 0.00 | | 51.21 | 29.59 |
| WEIGHTER | 0111 011195 02 | 1 91092 | 2E | | | | | | | 0.00 | 1.29 | CO-41 | 30.24 |
| PT RESP | | | | | | | | | | | | | 23.14 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 150.69 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 54.54 |
| CLAIM INFORMATION FORWARDED TO: | BENEFICIARY OF HONORABLE DECATA | | | | | | | | | | | | |
| ----- | | | | | | | | | | | | | |
| NAME BRNCH, DEME | HIP 001054311A | ACHT 1145670 | ICM 148514619100A | ADG Y | MOA | HA61 | | | | | | | |
| WEIGHTER | 0419 042995 24 | 1 56594 | LT | | | | | | | 0.00 | CR-23 | 122.51 | 0.00 |
| WEIGHTER | | | | | | | | | | 0.00 | CR-25 | -1761.10 | 0.00 |
| PT RESP | | | | | | | | | | | | | -1761.77 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 0.00 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 0.00 |
| CLAIM INFORMATION FORWARDED TO: | BENEFICIARY OF HONORABLE DECATA | | | | | | | | | | | | |
| ----- | | | | | | | | | | | | | |
| NAME BRNCH, DEME | HIP 001054311A | ACHT 1145670 | ICM 478515141701A | ADG Y | MOA | HA61 | | | | | | | |
| WEIGHTER | 0419 042995 24 | 1 56594 | LT | | | | | | | 0.00 | CO-25 | 1145.00 | 0.00 |
| WEIGHTER | | | | | | | | | | 0.00 | CR-23 | 844.57 | 0.00 |
| WEIGHTER | | | | | | | | | | 0.00 | CR-25 | -150.12 | 0.00 |
| PT RESP | | | | | | | | | | | | | 1761.77 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 0.00 |
| ADJ TO TOTAL: PRN PD | | | | | | | | | | | | | 0.00 |
| TOTAL: # OF CLAIMS | | | | | | | | | | | | | |
| BILLED AMOUNT | | | | | | | | | | | | | |
| ALLOWED AMOUNT | | | | | | | | | | | | | |
| DEDUCT AMOUNT | | | | | | | | | | | | | |
| COINS CD AMOUNT | | | | | | | | | | | | | |
| FROM PAID AMOUNT | | | | | | | | | | | | | |
| FROM ADJ CHECK AMOUNT | | | | | | | | | | | | | |

GLOSSARY : GROUP AND REASON CODES FOR CLAIM/SERVICE LINE ADJUSTMENTS

- 03 Payment adjusted due to the impact of prior payer(s) adjudication including payments and/or adjustments
- 05 Lifetime benefit maximum has been reached
- 06 Charge exceed our fee schedule or maximum allowable amount
- 09 Payment adjusted because procedure/service was partially or fully furnished by another provider
- 10 Contractual Obligations - Use this code when a joint payer/payer contractual agreement or a regulatory requirement resulted in an adjustment
- 12 Correction and Reversals - Use this code for corrections and reversals to RECUR claims. Use when CL901011, Reversal of Previous Payments
- 08 Other Adjustments
- 09 Patient Responsibility

GLOSSARY : MEDICARE SUPPLEMENT ADJUDICATION (MOA) AND CLAIM PAYMENT REMARK CODES

- HA61 If you do not agree with what we approved for these services, you may appeal our decision. To make sure that we are fair to you, we require another individual than did not process your initial claim to conduct the appeal. However, in order to be eligible for an appeal, you must write to us within 180 days of the date you received this notice, unless you have a good reason for being late.
- HA16 The claim information is also being forwarded to the patient's supplemental insurer. Send any questions regarding supplemental benefits to them.
- HA67 Correction to a prior claim.