

## SWMBH Third Party Review Audit

<b>Date of Review:</b>
<b>Reviewer:</b>

<b>Corrective Action Required</b>
<b>Recoupment Required</b>
<b>Corrective Action / Recoupment Required</b>

Scoring Key: 0 = Noncompliant 1 = Partial Compliance 2 = Full Compliance

**Score**

**Comments (Required for any score of 1 or 0):**

<b>Section 1: SUD EOBs</b>		<b>Possible</b>	<b>Actual</b>	<b>Percent</b>
<b>A</b>	The consumer is eligible for the funding source that paid for this service? Verification Source: CHAMPS, etc.	0	0	#DIV/0!
<b>B</b>	Does the information on the Primary Payor's EOB match the information entered into Smartcare? Allowed Amount	0	0	#DIV/0!
	Paid Amount	0	0	#DIV/0!
	Adjusted Amount	0	0	#DIV/0!
<b>C</b>	Is the amount paid equal to the lessor of either (contract rate less primary payment) or (allowed amount less primary payment)?	0	0	#DIV/0!
<b>D</b>	Is there documentation on file to support that the service was provided to the consumer?	0	0	#DIV/0!
<b>Total</b>		0	0	#DIV/0!

Additional Comments: