OP or UP	Adjustment Reason	Why was this reason chosen?
Overpay	Annual Max	Overpay occurred because the plan's annual maximum was refreshed in the new calendar year.
Overpay	AOB Changed	Benefits were not estimated at contract signing because the policy was originally verified as AOB to Subscriber. Overpay occurred because payments were issued to the Provider instead of the Subscriber.
Overpay	Balance Transfer Between Plans	This reason will be used when transferring a credit on the insurance balance to another policy on file.
Overpay	Benefit Previously Adjusted	Overpay occurred because a previous contract adjustment resulted in the benefits being underestimated.
Overpay	Benefits Not Previously Estimated	This reason will be used when the estimate is $0, the overpay is valid and there is not a more descriptive reason to choose.
Overpay	Benefits Underestimated	This reason will be used as a "catchall" when the overpay is valid but no other reason fits.
Overpay	Claim and Contract Mismatch	Overpay occurred because the estimate was based on details in the Treatment Configuration that do not match the Claim Form.
Overpay	COB Savings	Overpay occurred because this plan issues extra payments for COB Savings. **Metlife is the most common carrier for this.*
Overpay	Coinsurance Increase	Overpay occurred because the coinsurance percentage increased from the time of the eligibility check.
Overpay	Corrected Claim	Benefits were estimated based on the details of the Claim Form at contract signing. The practice requested an update to the Claim Form that resulted in a payment that was more than originally estimated.
Overpay	DHMO - Benefits Not Estimated	Benefits were not estimated at contract signing because OrthoFi does not estimate benefits for DHMO. Overpay occurred because benefits were paid on a DHMO plan.
Overpay	Discount Removed from Claim	Overpay occurred because a discount was applied to the Patient Contract but not the Claim Form.
Overpay	INN Contracted Rate	Overpay occurred because the carrier paid on higher contracted rates than we have on file in the OrthoFi System.
Overpay	LTM Increased	Overpay occurred because the Lifetime Maximum increased from the time of the eligibility check.
Overpay	Network Participation Changed During Treatment	Overpay occurred because the Network Participation (INN vs OON) changed since the time of the eligibility check.
Overpay	Plan Added After Start	Benefits were not estimated at contract signing because this policy was added to the system after the contract was signed. The carrier issued a valid payment resulting in a credit on the insurance balance.
Overpay	Policy Paid on Alternate Network Type	Overpay occurred because the Network Type (Premier vs PPO) is different than what was originally verified in the eligibility check.
Overpay	Practice Overrode Benefits	Overpay occurred because the practice overrode the benefit estimate, and the plan paid more than the practice's estimate.
Overpay	Pre-authorization Required	Benefits were not estimated at contract signing because OrthoFi does not estimate benefits when the policy has a Pre-Auth/Pre-D requirement. The carrier issued a valid payment resulting in a credit on the insurance balance.
Overpay	Records	Overpay occurred because the carrier paid more for records than was estimated for the records codes.
Overpay	Retention	Overpay occurred because a payment was made for retention that was not originally part of the estimate.
Overpay	Rounding	This reason will be used when there is a valid overpayment that is less than a dollar.
Overpay	Sales Tax	Overpay occurred because the carrier made a payment for Sales Tax that was not included in the benefit estimate.
Overpay	Secondary Non-Duplicating COB	Overpay occurred because the carrier processed a Secondary Non-Duplicating claim for more than estimated.
Overpay	Treatment In Progress	Benefits were not estimated at contract signing because this is a Treatment in Progress policy. The carrier issued a valid payment resulting in a credit on the insurance balance.
Overpay	Waiting Period	Benefits were underestimated at contract signing because the patient had a Waiting Period still in effect when they began treatment. The Waiting Period has been met or waived, and the plan is making valid payments on the claim submitted.
Underpay	Age Limit	Underpay occurred because the patient has met the orthodontic Age Limit of their policy.
Underpay	Annual Maximum	Underpay occurred because the plan's annual maximum has been met, and the patient will not be in treatment in the next calendar year.
Underpay	AOB - Issued to Subscriber due to Carrier Processing	Underpay occurred because benefits were estimated to be paid to the Provider. We confirmed with the carrier that the plan is paying to the Subscriber/Patient.
Underpay	Balance Transfer Between Plans	This reason will be used when transferring an outstanding insurance balance to another policy on file.

OP or UP	Adjustment Reason	Why was this reason chosen?
Underpay	Benefit Previously Adjusted	Underpay occurred because a previous contract adjustment resulted in the benefits being overestimated.
Underpay	Carrier Timely Filing Denial	Underpay occurred because the claim was not filed within the carrier's timely filing limit.
Underpay	Carrier Withholding	Underpay occurred because the plan paid the full estimated benefit minus the amounts deducted for provider withholding. *This amount should NOT be billed to the patient.*
Underpay	Change In TX (Fees / Procedures Codes / Dates / TX Length)	Benefits were calculated based on the treatment details available at contract signing, but the practice requested an update to the treatment details (Codes / Fees / Dates / Treatment Length) that resulted in the policy paying less than originally estimated.
Underpay	Claim and Contract Mismatch	Underpay occurred because the estimate was based on details in the Treatment Configuration that do not match the Claim Form.
Underpay	COB - Non-Duplication Clause	Underpay occurred because the Secondary policy is Non-Duplicating and they will not duplicate benefits paid by the Primary.
Underpay	Coinsurance Decreased	Underpay occurred because the coinsurance percentage decreased from the time of the eligibility check.
Underpay	Deductible	Underpay occurred because a deductible was applied to the benefit.
Underpay	Duplicate Policy Listed with Benefits	Underpay occurred because benefits were estimated on a policy that is a duplicate of another policy on file.
Underpay	Frequency Limitation(s)	Underpay occurred because one or more codes submitted on the Claim Form were denied due to a frequency limitation of the patient's plan.
Underpay	INN Contracted Rate	Underpay occurred because the carrier paid on lower contracted rates than we have on file in the OrthoFi System.
Underpay	Lapse in Coverage	Underpay occurred because the patient had a lapse in insurance coverage during treatment.
Underpay	Leased Network	Underpay occurred because benefits were calculated with an incorrect leased network (Dentamax, GRID+, etc).
Underpay	Lifetime Maximum Met	Underpay occurred because the plan stopped paying due to the patient's orthodontic Lifetime Maximum being met.
Underpay	LTM Decreased	Underpay occurred because the Lifetime Maximum decreased from the time of the eligibility check.
Underpay	Medical Necessity	Underpay occurred because the practice set a benefit on a plan that only covers medically necessary orthodontic treatment. The claim has been denied or we have not received the documents needed to prove medical necessity.
Underpay	Network Participation Changed During Treatment	Underpay occurred because the Network Participation (INN vs OON) changed since the time of the eligibility check.
Underpay	OON Allowed UCR Amount(s)	(Out of Network plans only) Benefits were estimated on the policy using the submitted fees for each procedure code. The carrier calculated the claim using Out-of-Network allowable fees that were less than the fees submitted.
Underpay	Ortho No Longer Covered	Underpay occurred because the policy no longer covers orthodontic benefits.
Underpay	Ortho Not Covered	Underpay occurred because the policy has never covered orthodontic benefits.
Underpay	Patient Dismissed	Underpay occurred because the patient was Dismissed from treatment. *This will be written off.*
Underpay	Patient Transferred Out	Underpay occurred because the patient has Transferred Out of treatment. *This will be written off.*
Underpay	Percentage Discount	Benefits were estimated on this policy using the Contracted Rates on file. However, this carrier paid a percentage of the submitted fee instead of using the contracted rates per procedure code, leaving an outstanding insurance balance.
Underpay	Plan Paid per Treatment Length	The policy paid for all active dates of service per the Treatment Length listed on the Claim Form.
Underpay	Policy Paid on Alternate Network Type	Underpay occurred because the Network Type (Premier vs PPO) is different than what was originally verified in the eligibility check.
Underpay	Policy Termed - No Replacement Policy on File	Underpay occurred due to the policy terminating. There is no replacement policy on file that the outstanding balance can be moved to.
Underpay	Policy Termed - Other Policy on File Already Has an Estimate Set	Underpay occurred due to the policy terminating. There is another policy on file, but that policy already has an estimate set.
Underpay	Policy Termed - Prior to Banding Date	Underpay occurred due to the policy terminating prior to the patient's Appliance Placement Date.
Underpay	Policy Termed - Replacement Policy is AOB to Subscriber	Underpay occurred due to the policy terminating. There is another policy on file, but that policy is AOB to Subscriber.
Underpay	Policy Termed - Replacement Policy with Decreased Benefits Expected	Underpay occurred due to the policy terminating. There is another policy on file, but that policy has fewer available benefits than the remaining outstanding balance.

OP or UP	Adjustment Reason	Why was this reason chosen?
Underpay	**Policy Termed - Replacement Policy with No Benefits Expected**	Underpay occurred due to the policy terminating. There is another policy on file, but no benefits are expected to be paid on that policy (no ortho coverage, WIP not covered, etc).
Underpay	**Practice Cancelled Claim**	The practice does not want us to submit this claim, as the treatment has been cancelled. ***This will be written off.***
Underpay	**Practice Estimated Benefits (No OrthoFi Estimate)**	Underpay occurred because the plan paid less than the estimate set by the practice, as there was no estimate set by OrthoFi at the time the contract was signed.
Underpay	**Practice Info / Action Required**	This reason will be used when we have made three attempts to obtain carrier required information from the practice for claim's processing, and have not yet obtained the necessary information.
Underpay	**Practice Override**	Underpay occurred the plan paid less than the practice's estimate, which was greater than the estimate originally set by OrthoFi.
Underpay	**Pre-Authorization Required**	This plan requires Pre-Auth, and the original estimate set by OrthoFi was $0. Underpay occurred because the claim has been denied and/or the Pre-Auth was never submitted.
Underpay	**Records**	Underpay occurred because the carrier paid less for records than was estimated for the records codes.
Underpay	**Retention**	Underpay occurred because the retention code was included in the estimate, but the carrier denied retention or OrthoFi never received confirmation of the patient's debonding date.
Underpay	**Rounding**	This reason will be used when there is a valid underpayment that is less than a dollar.
Underpay	**Subscriber Info / Action Required**	This reason will be used when we have created a Case Ticket in an attempt to get necessary information from the subscriber/patient, but the subscriber/patient has not responded to the Patient Care Team.
Underpay	**Treatment Code(s) Not Covered**	Underpay occurred because one or more codes submitted on the Claim Form resulted in a denial and/or a lesser payment than estimated. ***This reason will be used for all non-records, non-ortho codes.***
Underpay	**Treatment In Progress - Not Accepted**	An existing outstanding insurance balance was transferred to the Treatment in Progress policy. Underpay occurred because, after the claim was submitted, it was discovered that this group does not cover Treatment in Progress.
Underpay	**Waiting Period**	Underpay occurred because a Waiting Period prevented certain Dates of Service from being paid, or the claim was denied in full due to the waiting period.