

# SERVICE RECONCILIATION PROCESS: UTILIZING COUNTY REPORTS

*The following information is to aid in the service (unit) reconciliation process for Providers. Reconciling service units throughout the year will allow changes to be made in a timely manner, therefore making the final cost report schedules easier to complete. A determination has been made that the following reports, reviewed in the order listed, can simplify this process.*

## PVD 2004

- Includes all services entered into the ELMR Billing System whether in DRAFT or FINALIZED mode. These services may not yet be approved by Invoice Processing Unit (IPU) for payment. If there are discrepancies on this report, please send an email to [ELMR\\_Support@ruhealth.org](mailto:ELMR_Support@ruhealth.org).

## PVD 2002

- Includes all services entered into the ELMR Billing System that have been finalized. This report shows what IPU has approved or denied. Use the "IPU DENIAL REASON CODE" Report for the description. If the service can be re-billed, make the correction and bill again during the next month's billing cycle. If you are unsure if a service can be re-billed or have questions regarding the denial, contact IPU at [ELMR\\_PIF@ruhealth.org](mailto:ELMR_PIF@ruhealth.org) or (951) 358-7797, option 6. All approved units will be used during the cost report settlement process.

## MHS 3011

- The MHS 3011 Report can be found in the RDS system and shows all approved services provided by your Agency. This report further details Medi-Cal services regarding what has not been billed, what has been billed then denied, and those that were re-billed. Services that do not show a claim number have not yet been billed to the State. Contact your designated authorizing personnel for more information on non-billed services and/or denials. Medi-Cal denials should also be listing in the V&R Report. If you have questions regarding non-billable services, please contact [ELMR\\_PIF@ruhealth.org](mailto:ELMR_PIF@ruhealth.org). All approved units will be used during the cost report settlement process.

## V&R Report

- If you provide Medi-cal services, the Void & Replace Report is sent to you on a monthly basis and identifies all denied Medi-cal services and the reason for denial. Use the State's Short-Doyle Specialty Mental Health Services Claim Adjustment Reason Code (CARC) publication attached for further description. If you are unsure how to correct a denied service, contact the designated authorizing personnel. Questions regarding the report can be forwarded to the Patient Accounts HelpDesk at (951) 358-6900, opt 3 or send an email to [Billing\\_Support@ruhealth.org](mailto:Billing_Support@ruhealth.org).