# Running a Payment Reimbursement / History Report

Follow the steps below to run these three reports that provide details and/or history on reimbursements:

- **Payment Reimbursement Detail** – Shows all payment requests returned by the search results and each reimbursement (or state payment) transaction which has taken place for that payment request.
- **Payment Reimbursement Summary** – Shows all payment requests returned by the search results and the "net" reimbursed amount.
- **Payment History Detail** – Shows the payment history detail information from the filter criteria that were entered.

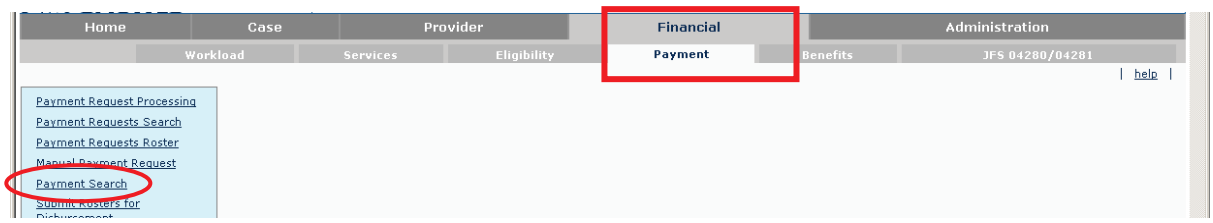
**Example:** Due to changes in the system (eligibility / reimbursability, benefits, etc), a reimbursement can be created, then reversed, then replaced, etc.

Each of these items would display on the **Payment Reimbursement Detail Report**, but the sum would display on the **Payment Reimbursement Summary Report**.

The **Payment Reimbursement Summary Report** gives you a "quick" comparison to easily compare **net paid** vs. **net reimbursement** units.

## Accessing the Reports

1. On the SACWIS **Home** screen, click the **Financial** tab.
2. Click the **Payment** tab.
3. Click the **Payment Search** link.



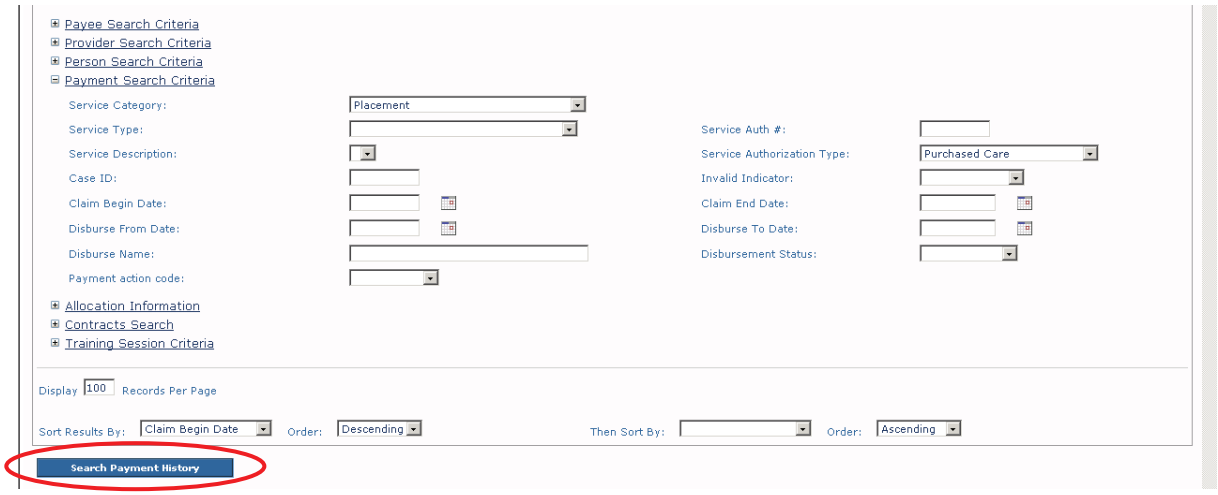

The **Payment History Search Criteria** screen appears.

# Running a Payment Reimbursement / History Report

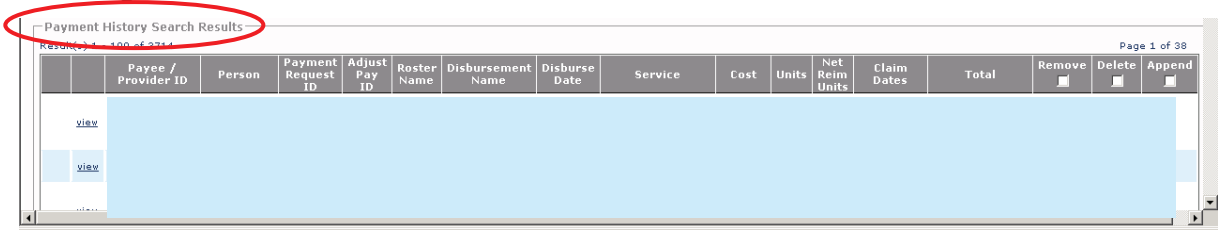
4. Click the **Payment Search Criteria** link to expand the screen.

The **Payment Search Criteria** fields appear to filter the information.

5. Enter search criteria into the fields, as needed.
6. Click the **Search Payment History** button.




The **Payment History Search Results** section appears at the bottom of the screen showing the search results.



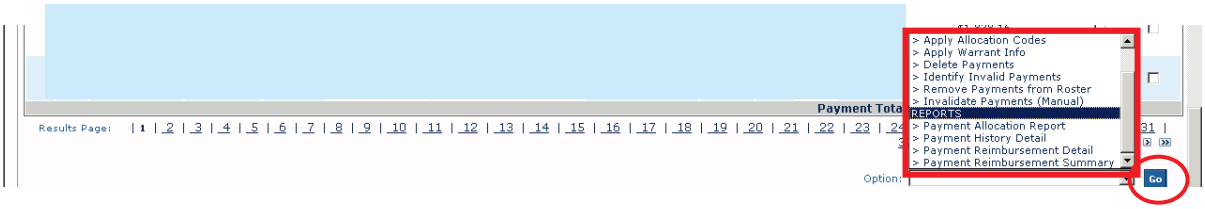
# Running a Payment Reimbursement / History Report

The following three reports can be run using the filtered information:

- **Payment Reimbursement Detail** – Shows all payment requests returned by the search results and each reimbursement (or state payment) transaction which has taken place for that payment request.
- **Payment Reimbursement Summary** – Shows all payment requests returned by the search results and the "net" reimbursed amount.
- **Payment History Detail** – Shows the payment history detail information from the filter criteria that were entered.

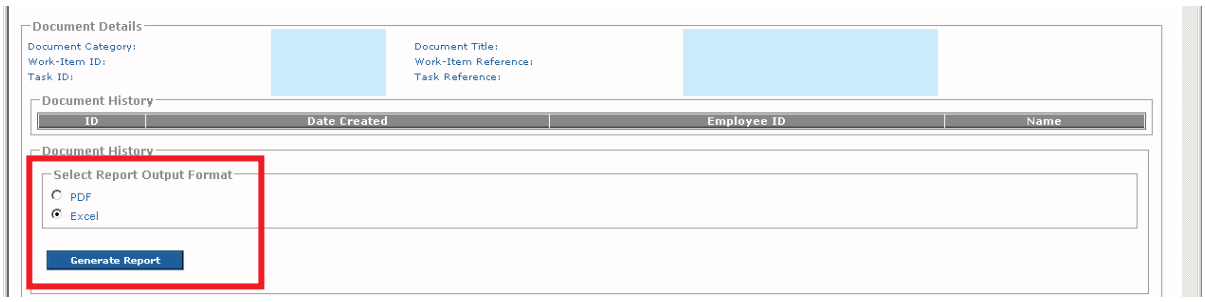
**Note:** A Payment Allocation report can also be run. To do so, refer to the **Running an Allocation Report** Knowledge Base Article for additional information.

7. To run these reports, scroll to the bottom of the **Payment History Search Results** screen and to the right
8. In the **Option** field, choose the appropriate report from the drop-down list.
9. Click the **Go** button.




The **Document Details** screen appears.

10. In the **Document History** section, click the appropriate radio button for **PDF** or **Excel** to select the report output format.
11. Click the **Generate Report** button.






Ohio Department of Job and Family Services

# Running a Payment Reimbursement / History Report

Depending on which report you choose, the following will appear:

## Payment Reimbursement Detail Report:

| | A | B | C | D | E | |
|---|---|---|---|---|---|---|
| 1 | Payment Reimbursement Report ( Detail ) Rpt 312 | | | | | |
| 2 | Agency Name: | | | | | |
| 3 | Run Date: | | | | | |
| 4 | | | | | | |
| 5 | Invalid Date | Invalid Reason | Invalid Review Indicator | Invalid Review Reason | Payee Name | Persc |
| 6 | | | No | | | |
| 7 | | | No | | | |
| 8 | | | No | | | |
| 9 | | | No | | | |
| 10 | | | No | | | |
| 11 | | | No | | | |

## Payment Reimbursement Summary:

| | A | B | C | D | E | |
|---|---|---|---|---|---|---|
| 1 | Payment Reimbursement Report ( Summary ) Rpt 312 | | | | | |
| 2 | Agency Name: | | | | | |
| 3 | Run Date: | | | | | |
| 4 | | | | | | |
| 5 | Invalid Date | Invalid Reason | Invalid Review Indicator | Invalid Review Reason | Payee Name | Pers |
| 6 | | | No | | | |
| 7 | | | No | | | |
| 8 | | | No | | | |
| 9 | | | No | | | |
| 10 | | | No | | | |
| 11 | | | No | | | |
| 12 | | | No | | | |
| 13 | | | No | | | |

## Payment History Detail:

| | | | | | |
|---|---|---|---|---|---|
| 1 | | | | Report ID: RPT242 | |
| 2 | | Payment History Detail | | | |
| 3 | | | | | |
| 4 | Run Date: | | | Page: 1 of 832 | |
| 5 | | Person ID: 6751279 | Case ID: | | |
| 6 | Agency: | | | Maintenance Cost (M): | |
| 7 | Payment ID: | | | Administration Cost (A): | |
| 8 | Claim Begin Date: | | | Case Management Cost (A): | |
| 9 | Claim End Date: | | | Transportation Maintenance Cost (A): | |
| 10 | Paid Or Adjust Code: | | | Transportation Administration Cost (A): | |
| 11 | Adjustment Reason: | | | Other Direct Services Cost (A): | |
| 12 | Adjustment Payment ID: | | | Behavior Health Care Cost: | |
| 13 | Payee ID: | | | Other - Non IV-E Reimb Cost: | |
| 14 | Payee Name: | | | Standard Cost (M): | |
| 15 | Provider ID: | | | Basic Cost (M): | |
| 16 | Provider Name: | | | Maint Add-On Cost (M): | |
| 17 | Authorization Number: | | | Admin Add-On Cost (A): | |
| 18 | Invoice Number: | | | Other – Non IV-E Reimb Add-On Cost: | |
| 19 | Invoice Date: | | | Paid Amount: | |
| 20 | Vendor Number: | | | Other Financial Resources: | |
| 21 | Purchase Order Number: | | | Reimbursed Indicator: | |

12. View or save the report, as needed.

# Running a Payment Reimbursement / History Report

## Report Column Names and Descriptions

### Payment Reimbursement Detail Report

| Report Column Name | Payment Reimbursement Detail Description |
|---|---|
| Invalid Date | Date the payment was marked invalid. If payment is not invalid, the field is blank. |
| Invalid Reason | Reason the payment is invalid |
| Invalid Review Indicator | Yes if payment is marked for review by the Invalid Payment Process. No if it is not marked for review. |
| Invalid Review Reason | Reason for the invalid review |
| Payee Name | Name of payee associated to the payment request |
| Person Name | Last and first name of the person on the payment request |
| Person ID | Displays the Person ID assigned to the person on the payment request |
| Case ID | Displays the Case ID of the person on the payment request |
| Provider ID | Displays the Provider ID of the service provider that the payment request is for |
| Payment Request ID | Displays the Payment Request ID assigned by the system to identify the payment request |
| Adjust Pay Req ID | Shows the original payment ID (only on payments that are reversals), replacements, or an original payment that has been adjusted |
| Service Auth ID | Displays the Service Authorization ID assigned by the system to identify the service authorization |
| Service Auth Type | Displays the Service Authorization Type, such as placement, case service, or alternative care |
| Adoption Subsidy ID | Displays the Adoption Subsidy ID if the payment request is associated with a subsidy record. If not, the field is blank. |
| Roster Name | Roster name of the payment request roster |
| Roster Created By | First and last name of person who created the roster |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Detail Description |
|---|---|
| Roster Approved By | First and last name of person who approved the roster |
| Roster Approved Date | Date the roster was approved |
| Disbursement Name | Disbursement name associated to the Roster ID on the payment request |
| Disbursed Date | Disbursement date associated to the Roster ID on the payment request |
| Agency Warrant Date | Displays the agency warrant date |
| Agency Warrant Number | Displays the agency warrant number |
| JFS 2820 Codes | Displays the JFS 2820 code(s) associated to the payment request, if applicable. If more than one code exists, the codes are separated by commas. If allocation codes are not applicable to the payment, the field is blank. |
| County Account Number | Displays the county account number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Voucher Number | Displays the voucher number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Purchase Order Number | Displays the purchase order number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Invoice Number | Displays the invoice number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Service Category | If the service category code is placement, it displays the service group code from the payment request. Otherwise, it displays the service category code from the payment request. |
| Service Type | Displays the service type |
| Service Description | Displays the service description |
| Unit Cost | The calculated per diem or unit rate by dividing the total paid amount by the paid units amount |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Detail Description |
|---|---|
| Paid Units | Sum of all paid unit rows, except the rows which contain duplicate payment request ids |
| Net Reim Units | Sum of all net reimbursement units |
| Claim Begin Date | Displays the claim begin date |
| Claim End Date | Displays the claim end date |
| Total | Displays the total payment amount |
| Payment Comments | Displays any payment comments recorded by the user |
| State Payment ID | Displays the State Payment ID |
| Warrant Number | Displays the warrant number |
| Maintenance Warrant Status | Displays the maintenance warrant status |
| Admin Warrant Status | Displays the admin warrant status |
| Voucher ID Related | Displays the related Voucher ID |
| Total Reimbursed | Displays total amount reimbursed |
| Maintenance Reimbursed | Displays maintenance amount reimbursed |
| Admin Reimbursed | Displays admin amount reimbursed |
| Reimbursement Exception | Displays the reimbursement exceptions if no reimbursement is present for the payment request. The field is blank if no exception was generated. |
| Original State Payment ID | Displays the original state payment ID |
| State Payment Comments | Displays any state payment comments |
| Training Session Date | Displays date of training session, if applicable |
| Training Session Name | Displays name of training session as recorded by the user, if applicable to the payment request |
| Training Session ID | Displays ID of the training session assigned by the system, if applicable to the payment request |
| Training Type | Displays the type of training, continuing or pre-service, if applicable to the payment request |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Detail Description |
|---|---|
| Training IV-E Amount | Displays the IV-E portion of the reimbursement for training session payment requests calculated by the system |
| Training IV-B Amount | Displays the IV-B portion of the reimbursement for training session payment requests calculated by the system |
| Training State Amount | Displays the state portion of the reimbursement for training session payment requests calculated by the system |

## Payment Reimbursement Summary Report

| Report Column Name | Payment Reimbursement Summary Description |
|---|---|
| Invalid Date | Date payment was marked invalid. If payment is not invalid, the field is blank. |
| Invalid Reason | Reason the payment is invalid |
| Invalid Review Indicator | Yes if payment is marked for review by the Invalid Payment Process. No if it is not marked for review. |
| Invalid Review Reason | Reason for the invalid review |
| Payee Name | Name of payee associated to the payment request |
| Person Name | Last and first name of the person on the payment request |
| Person ID | Displays the Person ID assigned to the person on the payment request. |
| Case ID | Displays the Case ID of the person on the payment request. |
| Provider ID | Displays the Provider ID of the service provider the payment request is for. |
| Payment Request ID | Displays the Payment Request ID assigned by the system to identify the payment request. |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Summary Description |
|---|---|
| Adjust Pay Req ID | Shows the original payment ID (only on payments that are reversals), replacements, or an original payment that has been adjusted |
| Service Auth ID | Displays the Service Authorization ID assigned by the system to identify the service authorization. |
| Service Auth Type | Displays the Service Authorization Type, such as placement, case service, or alternative care |
| Adoption Subsidy ID | Displays the Adoption Subsidy ID if payment request is associated with a subsidy record. If not, the field is blank. |
| Roster Name | Roster name of the payment request roster |
| Roster Created By | First and last name of person who created the roster |
| Roster Approved By | First and last name of person who approved the roster |
| Roster Approved Date | Date the roster was approved |
| Disbursement Name | Disbursement name associated to the Roster ID on the payment request |
| Disbursed Date | Disbursement date associated to the Roster ID on the payment request |
| Agency Warrant Date | Displays the agency warrant date |
| Agency Warrant Number | Displays the agency warrant number |
| JFS 2820 Codes | Displays the JFS 2820 code(s) associated to the payment request, if applicable. If more than one code exists, the codes are separated by commas. If allocation codes are not applicable to the payment, the field is blank. |
| County Account Number | Displays the county account number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Voucher Number | Displays the voucher number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Purchase Order Number | Displays the purchase order number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Summary Description |
|---|---|
| Invoice Number | Displays the invoice number associated to the payment request, if applicable. If allocation codes are not applicable to the payment, the field is blank. |
| Service Category | If the service category code is placement, it displays the service group code from the payment request. Otherwise, it displays the service category code from the payment request. |
| Service Type | Displays the service type |
| Service Description | Displays the service description |
| Unit Cost | Displays the calculated per diem or unit rate by dividing the total paid amount by the paid units amount |
| Paid Units | Displays sum of all paid unit rows, except the rows that contain duplicate payment request IDs |
| Claim Begin Date | Displays the claim begin date |
| Claim End Date | Displays the claim end date |
| Total | Displays the total payment amount |
| Payment Comments | Displays any payment comments recorded by the user |
| Reimbursement Exception | Displays the reimbursement exceptions if no reimbursement is present for the payment request. The field is blank if no exception was generated. |
| Net Reim Units | Sum of units which have been reimbursed for all state payment transactions for this payment request |
| Net Reimbursed | Sum of Maintenance and Administration amounts reimbursed for all state payment transactions for this payment request |
| Net Maintenance Reimbursed | Sum of Maintenance amount reimbursed for all state payment transactions for this payment request |
| Net Admin Reimbursed | Sum of Administration amount reimbursed for all state payment transactions for this payment request |
| Training Session Date | Displays date of training session, if applicable |
| Training Session Name | Displays name of training session as recorded by the user, if applicable to the payment request |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment Reimbursement Summary Description |
|---|---|
| Training Session ID | Displays ID of the training session assigned by the system, if applicable to the payment request |
| Training Type | Displays the type of training, continuing or pre-service, if applicable to the payment request |
| Training IV-E Amount | Displays the IV-E portion of the reimbursement for training session payment requests calculated by the system |
| Training IV-B Amount | Displays the IV-B portion of the reimbursement for training session payment requests calculated by the system |
| Training State Amount | Displays the state portion of the reimbursement for training session payment requests calculated by the system |

## Payment History Detail Report

| Report Column Name | Payment History Detail Report Description |
|---|---|
| Name | Displays name of person for the payment history |
| Person ID | Displays person ID assigned to the person on the payment request |
| Case ID | Displays case ID of the person on the payment request |
| Agency | Displays name of agency |
| Payment ID | Displays payment request ID |
| Claim Begin Date | Displays claim begin date |
| Claim End Date | Displays claim end date |
| Paid Or Adjust Code | Displays the paid or adjust code |
| Adjustment Reason | Displays the reason for the adjustment |
| Adjustment Payment ID | Displays the adjustment payment ID |
| Payee ID | Displays payee ID |
| Payee Name | Displays payee name |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment History Detail Report Description |
|---|---|
| Provider ID | Displays the provider ID (assigned by the system) to identify the payment request |
| Provider Name | Displays the provider name |
| Authorization Number | Displays the authorization number (assigned by the system) to identify the service authorization |
| Invoice Number | Displays the invoice number associated to the payment request, if applicable. If allocation codes are not applies to the payment, the field is blank. |
| Invoice Date | Displays the invoice date associated to the payment request, if applicable. If allocation codes are not applies to the payment, the field is blank. |
| Vendor Number | Displays the vendor number associated to the payment request, if applicable. If allocation codes are not applies to the payment, the field is blank. |
| Purchase Order Number | Displays the purchase order number associated to the payment request, if applicable. If allocation codes are not applies to the payment, the field is blank. |
| Contract # | Displays the contract number assigned by the county user on the associated contract, if applicable. If no contract number is recorded on the contract for the network provider, then the field is blank. |
| Service Category | Displays service category |
| Service | Displays the type of service |
| Fund Source | Displays the fund source |
| Units Type | Displays type of units |
| Paid Units | Displays the paid units |
| Cost per Unit | Displays cost per units |
| ODJFS Voucher Number | Displays the voucher number |
| ODJFS EFT or Warrant Flag | Displays the EFT or warrant flag |
| ODJFS Warrant Number | Displays the warrant number |
| ODJFS Warrant Date | Displays the warrant date |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment History Detail Report Description |
|---|---|
| ODJFS Warrant Disp Status | Displays the warrant disposition status |
| Maintenance Cost (M) | Displays the Maintenance Costs |
| Administration Cost (A) | Displays the Admin Costs |
| Case Management Cost (A) | Displays the Case Management Costs |
| Transportation Maintenance Cost (A) | Displays the Transportation Maintenance Costs |
| Transportation Admin Cost (A) | Displays the Transportation Admin Costs |
| Other Direct Services Cost (A) | Displays the Other Direct Service Costs |
| Behavioral Health Care Cost | Displays Behavioral Health Care Costs |
| Other- Non IV-E Reimb Cost | Displays Other- Non IV-E Reimb Costs |
| Standard Costs (M) | Displays Standard Costs |
| Basic Cost (M) | Displays Basic Costs |
| Maint Add-On Cost (M) | Displays Maint Add-On Costs |
| Admin Add-On Cost (A) | Displays Admin Add-On Costs |
| Other – Non IV-E Reimb Add-On Cost | Displays the Other – Non IV-E Reimb Add-On Costs |
| Paid Amount | Displays the Paid Amount |
| Other Financial Resources | Displays the Other Financial Resources for child benefits if applicable. |
| Reimbursed Indicator | Displays the Reimbursed Indicator which indicates if information has been transmitted to OAKS. |
| Reimbursement Amount | Displays the Reimbursement Amount |
| Reimbursed Units | Displays the number of units reimbursed |
| Federal Amount | Displays the amount of Federal reimbursement |
| State Amount | Displays the amount of State Reimbursement |
| Local Amount | Displays the Local Amount |

# Running a Payment Reimbursement / History Report

| Report Column Name | Payment History Detail Report Description |
|---|---|
| Disburse Payment Name | Displays the Disburse Payment Name |
| Disburse Payment Date | Displays the Disburse Payment Date |
| Caseworker ID | Displays the Caseworker ID |
| Last Updated ID | Displays the Last Updated ID |
| Last Updated Date | Displays the Last Updated Date |
| Creation Date | Displays the Creation Date |
| Agency Warrant Number | Displays the Agency Warrant Number |
| Agency Warrant Date | Displays the Agency Warrant Date |