

Receipt code matrix

Type of monies	Program	Br	Case	Self check	Case name	WID	Ref'd ID	OBCL	Spec	Main	Prov. #
<b>Child support</b>											
<b>235</b> Child support general fund; use when an obligee has received an OVP.	9		NS + 4 digit #	No	Yes	No	No	No	No	No	No
<b>236</b> Obligor's child support case due to NSF.	9	8601 only	NS + 4 digit #	No	Yes	No	No	No	No	No	No
<b>237</b> OVP cases when the obligee received money that should have gone to SCF.	9	8601 only	NS + 4 digit #	No	Yes	No	No	No	No	No	No
<b>238</b> OVP cases when the obligee received money that should have gone to the OYA.	9	8601 only	NS + 4 digit #	No	Yes	No	No	No	No	No	No
<b>745</b> When a child support case cannot be found through SMUX or SMU1.	Must be blank	Yes	CMS 6 digits	No	Obligee	No	No	No	No	No	No
<b>855</b> When obligee has cashed a child sup check in error and is refunding by cash, personal check, or money order. Return uncashed, checks to the Receiving Unit.	Must be blank	Yes	CMS 6 digits	No	Obligee	No	No	No	No	No	No

Receipt code matrix

Claims Processing Unit/Administrative Payments Unit PO Box 14016											
<b>130</b> Voluntary refunds made by providers to reimburse OVPs	0 or valid # req.	Yes	CMS 6 digits	Yes	No	No	6 digit prov.#	01-07	No	No	Yes
<b>140</b> Voluntary refunds made by Providers to reimburse OVPs caused by third party	0 or valid # req.	Yes	No	No	Provider	No	No	01-07	No	No	Yes
<b>141</b> From providers following an audit	Valid # req.	Yes	No	No	Provider	No	No	01-07	No	No	Yes
<b>214</b> Reasonable cost audit refunds from audit of NF and hospital inpatient claims or Physicians Care Org. refunds	Valid # req.	0101 to 3913 and 8606	Six "0"	No	Provider	No	No	01-07	No	No	Yes
<b>215</b> Refunds from hospital outpatient claims audit	Valid # req.	0101 to 3913 only	Six "0"	No	Provider	No	No	01-07	No	No	Yes
Direct Pay Unit (DOU)											
<b>115</b> ERDC overpayments (providers)	0 or valid # req.	Yes	Prov.	No	No	No	No	No	No	No	No
Estates Administration Unit (EAU) PO Box 14021											
<b>112</b> Reimbursement of cash assistance	Valid # req.	0101 to 5503	CMS 6 digits	No	Yes	No	No	No	No	No	No

Receipt code matrix

<b>113</b> Reimbursement of medical assistance	Valid # req.	0101 to 5503	CMS 6 digits	No	Yes	No	No	No	No	No	No
<b>Overpayment (OVP) collections/unit</b>											
<b>231</b> Recovery of public assistance overpayments (cash assistance)	Valid # req.	0101 to 5503	CMS 6 digits	Yes	Yes	No	No	No	No	No	No
<b>232</b> Recovery of OVPs 100% state funded (consumer payments)	Valid # req.	0101 to 5503	CMS 6 digits	Yes	Yes	No	No	No	No	No	No
<b>527</b> Refunds apply against fees or court costs due obtaining judgment or garnishing wages.	Valid # req.	0101 to 3913 only	OVP	No	Yes	No	No	No	No	No	No
<b>745</b> Recovery of SNAP OVPs caused by admin error.	Yes	0101 to 5503	SSN on OVP	No	Yes	No	No	No	No	No	No
<b>746</b> Reimbursed fraud or SNAP over-issuance. Accept only when there is/will be a SNAP claim prepared by the office to document the need for reimbursement.	Yes	0101 to 5503	SSN on OVP	No	Yes	No	No	No	No	No	No
<b>747</b> Reimbursement of fraud SNAP claims or IPV errors	Yes	0101 to 5503	SSN on OVP	No	Yes	No	No	No	No	No	No

Receipt code matrix

Repayment of assistance											
<b>121</b> Used when an OVP case does not relate to a specific period.	Valid # req.	0101 to 5503	CMS 6 digits	Yes	Yes	No	No	No	No	No	No
<b>216</b> Used when an OVP case does not exist and payment will reimburse assistance for a specific period in the current biennium.	Valid # req.	0101 to 3913 only	CMS 6 digits	No	Yes	No	refund mo. & year	No	No	No	No
Third Party Recovery (TPR) Unit PO Box 14023											
<b>122</b> Personal injury lien cash assistance	Valid # req.	0101 to 5503	CMS 6 digits	Yes	No	No	No	No	No	No	No
<b>145</b> Refund requested by TPR or insurance recovery drug project	Valid # req.	0101 to 5503	CMS 8 digits+ PL	Yes	Yes	No	No	No	No	No	No
<b>173</b> Refund of medical assistance by third party, initiated by Personal Liens	Valid # req.	0101 to 5503	CMS 6 digits	No	Yes	No	No	No	No	No	No
<b>175</b> Medical Court-Ordered Restitution (Assault)	Valid # req.	0101 to 5503	CMS 6 digits	No	Yes	No	No	No	No	No	No
<b>191</b> Reimbursement of medical costs from liable third party excluding Medicare	Valid # req.	0101 to 5503	CMS 6 digits	Yes	Yes	No	No	No	No	No	No
<b>192</b> Refunds requested by Post Payment Recovery from Medicare for medical assistance	Valid # req.	0101 to 5503	CMS 6 digits	Yes	Yes	No	No	No	No	No	No

