

Remittance Advice Details (RAD): Electronic

Page updated: February 2025

«Through individual agreements, the *Remittance Advice Details* (RAD) information on ASC X12N 837 v.5010 claim to Medi-Cal providers or designated agents.»

Supplemental Claims Payment Information

The Supplemental Claims Payment Information (SCPI), formerly Automated Remittance Data Services (ARDS), offers providers automated RAD data. «The data, which is available through electronic download from an archive, is intended for the automated reconciliation of 837 submission claims history.»

Automated remittance data is produced for each checkwrite and is forwarded to the provider or the provider's agent the week of the checkwrite. «For enrollment or additional information, providers can contact the FI by calling (916) 601-7402 and by email at SCPI@us.ibm.com.»

SSN Recipient Identifier on a RAD – SCPI

Only the nine-digit Social Security Number (SSN) is displayed on the SCPI RAD with five leading blanks – whether a 9- or 10-digit (including the optional check digit) SSN is entered on the claim. This format makes the SSN appear right-justified regardless of how the field was entered on the claim. If a check digit was entered on the claim, it will not be printed on the SCPI RAD (see *Figure 1*).

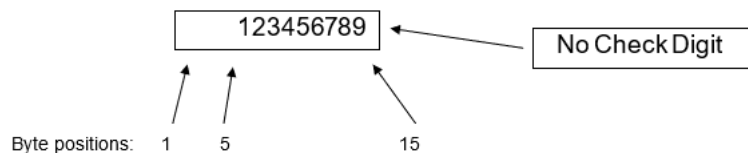


Figure 1: SSN Recipient Identifier on an SCPI RAD

SCPI Services

The following services are offered by SCPI:

- «Claim data by electronic download from the Medi-Cal Provider Portal Correspondence Center»:
 - Adjudicated claims for the week, including all paid and denied items
 - All suspended claims, including claims in suspense for 30 days or less
- «Summary Counts Report (see *Figure 2, Summary for 837 RAD Records*, on the following page) containing»:
 - A breakdown of claims by claim type and provider number
 - Totals for all claims – adjustments, approves, denies and suspends

REPORT NO. AA-0-999 PROVIDER NAME PAGE 1
 REPORT DATE 08/27/99 SUMMARY COUNTS FOR COMPUTER MEDIA RAD RECORDS RUN ON 09/01/99 AT 11:54

PROVIDER: 9999999990 CLAIM TYPE: 04 WARRANT DATE: 08/27/99

	TOT LINES	CMC LINES	TOT CHARGE	NON-COVERED	ALLOWABLE	PAID AMOUNT	PATIENT LIAB	3RD PARTY AMT	REIM AMOUNT
ADJ	0	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00
APPR	2	2	58.97	33.79	24.58	24.58	0.00	0.00	24.58
DENY	22	22	1,004.44	0.00	0.00	0.00	0.00	0.00	0.00
SUSP	131	131	5,606.59	0.00	0.00	0.00	0.00	0.00	0.00

PROVIDER: 9999999991 CLAIM TYPE: 01 WARRANT DATE: 08/27/99

	TOT LINES	CMC LINES	TOT CHARGE	ALLOWABLE	PATIENT LIAB	REIM AMOUNT
SUSP	344	321	8,408.77	0.00	0.00	0.00

PROVIDER: 9999999992 CLAIM TYPE: 04 WARRANT DATE: 08/27/99

	TOT LINES	CMC LINES	TOT CHARGE	NON-COVERED	ALLOWABLE	PAID AMOUNT	PATIENT LIAB	3RD PARTY AMT	REIM AMOUNT
ADJ	0	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00
APPR	213	213	5,555.15	2,675.79	2,879.36	2,879.36	0.00	0.00	2,879.36
DENY	288	288	6,778.32	0.00	0.00	0.00	0.00	0.00	0.00
SUSP	798	798	20,327.97	0.00	0.00	0.00	0.00	0.00	0.00

SUMMARY TOTAL COUNTS FOR PROVIDER NAME

	TOT LINES	CMC LINES	CMC PERCENT OF TOTAL	TOT CHARGE	REIM AMOUNT
ADJ	0	0	0.0	0.00	0.00
APPR	215	215	100.0	5,613.52	2,903.94
DENY	290	290	100.0	7,782.78	0.00
SUSP	1,273	1,250	98.1	34,343.33	0.00
TOTAL	1,778	1,755	98.7		

505 505 TOTAL ADJ. APPR. AND DENY LINES

1,273 1,250 TOTAL SUSP LINES

«Figure 2: Summary for 837 RAD Records Example»

«ASC X12N 835 Claim»

Providers and intermediaries log on to the Provider Portal to retrieve remittance advice information. The Provider Portal contains the 835 transactions generated for the last six weeks in individual, weekly files for each receiver (provider or intermediary). The 835 transactions are available by the Medi-Cal warrant date. Files older than six weeks will not be available. Providers registered in the Provider Portal can designate up to two entities to receive an 835 transaction. The two receivers can be either the provider or an outside party (such as a billing service, clearinghouse or another provider). For more information, refer to the Provider Portal user guides located on the [Electronic Services Transition](#) webpage.

«Online RADs

Providers can access their RAD and Medi-Cal *Financial Summary* in the Correspondence Center of the Medi-Cal Provider Portal. For more information, refer to “Online RADs” in the *Remittance Advice Details (RAD) and Medi-Cal Financial Summary* section of this manual.>

<<Legend>>

<<Symbols used in the document above are explained in the following table.>>

Symbol	Description
<<	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
>>	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.