

Pennsylvania Department of Human Services

EVV Vendor Specification v1.3

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Version History

Name	Title	Version	Changes	Date
Michael Frosty John Kalivas	Technical Account Manager VP, Solutions Engineering	1.0	Initial Version – Home Health Expansion. Consolidated generic specifications and PA specific addendums for Fee-for-Service, CHC-MCOs, and PH-MCOs as one document.	02/01/2022
Sandata Team	N/A	1.0	Edits, Updates, Clarifications	02/16/2022
Sandata Team	N/A	1.0	Added missing Payer and associated services.	02/16/2022
Michael Frosty	Technical Account Manager	1.0	Added General specifications from V7.2 Open EVV document. Added table of contents, numbering, and formatted appendices. Added PHS DHS specific requirements. Added string length and required/conditional to new fields. Added time zone appendix. Updated colors and fonts.	02/28/2022
Michael Frosty	Technical Account Manager	1.0	Removed specific vendors from 2.1. Added format for Client SSN and Zip Code. Updated expected value for ClientQualifier to ClientCustomID. Updated ClientAddressIsPrimary and VisitCancelledIndicator expected value to "true" "false". Updated EmployeeIdentifier to list Registry ID as the first format in expected value. Updated generic specification fields to No (not required).	03/03/2022
Michael Frosty	Technical Account Manager	1.0	Updated generic fields to “Optional” from “No”. Added “Should be Null” to modifier fields. Added Conditional-Optional-Required descriptions to segments. Modified Clients status and EffectiveStartDate to required “Yes”. Modified AdjInDateTime/AdjOutDateTime description and added format. VisitCancelledIndicator set to required “Yes” and added details to the description. BillVisit set to required “Yes”. Modified fields in conditional segments to reflect what is required if conditional segments are sent. Added additional details to the description for ChangeReasonMemo. Updated MobileLogin, TelephonyPIN and OriginatingPhoneNumber to conditional. Updated CallLatitude, CallLongitude to conditional and updated type, length, and expected value. Updated Generic Spec information with additional information from the new specifications and added rules. Updated Sequence ID, MobileLogin, TelephonyPIN and OriginatingPhoneNumber expected value. Removed service verification exception and added ack/fix column.	03/07/2022

Michael Frosty	Technical Account Manager	1.0	Updated VisitLocationType to be included and added as a required value of Home or Community Location Type.	03/10/2022
Michael Frosty	Technical Account Manager	1.0	Removed "Other" as a value for Call Type and Call Assignment. Updated description for CallLatitude and CallLongitude to include required for FVV. Updated VisitLocationType description to "required" for all call types. Updated Service Descriptions.	03/15/2022
Michael Frosty	Technical Account Manager	1.0	Updated services (Appendix 9.1.1) to break them out by PCS/HHCS and added provider ID type (MPI or NPI) to be used based on Payer/Program/Service. Updated EffectiveStartDate to optional.	03/23/2022
Michael Frosty	Technical Account Manager	1.0	Updated the ProviderIdentifier and ProviderQualifier expected value to include a reference to the 9.1.1 appendix.	03/25/2022
Michael Frosty	Technical Account Manager	1.0	Added new fields Modifier 1, Modifier 2 Modifier 3, and Modifier 4 to the ClientPayerInformation segment	03/25/2022
Michael Frosty	Technical Account Manager	1.1	Updated "EmployeeIdentifier" field to clarify expected values format. Updated the "State" Field to clarify the expected value format. Updated the "EmployeeEmail" field to clarify expected value format. Updated the "VisitLocationType" expected value format. Memo field was updated from 512 characters to 1024	06/01/2022
Michael Frosty	Technical Account Manager	1.1	Updated Vendor Pre-fix list to include "OPTONOME OP". Updated mobile login to expected value to "Mobile login for employee".	07/01/2022
Michael Frosty	Technical Account Manager	1.1	Updated AdjustedIn/Out description to "Adjusted in/out date/time required only if manually adjusted." also made this field "Conditional". Updated the GroupCode description to "GroupCode applies to visits for a single caregiver that provides services to multiple clients or mutiple caregivers providing service to a single client that occur during the same time span. It is used to reassemble all members of the group and will impact state reporting and analytics for overlapping visits. Use only if this functionality is provided by the Alternate EVV vendor."	07/08/2022
Michael Frosty	Technical Account Manager	1.1	Removed G0299 U9 HD from PAOMAP, PAACP, PAAHPH, PAGEIS, PAGHP, PAHPP, PAHW, PAKF, PAKPH, PAUHC, PAUPMC, PAUPPH	07/15/2022
Michael Frosty	Technical Account Manager	1.2	Added Service Codes Associated with CO 22074 007 (CS-198)	01/25/2023
Michael Frosty	Technical Account Manager	1.3	Added and End dated Services as per CS#452883 (CO#23080)	08/23/2023

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This interface supplies the delivery mechanisms and the data layout/structure necessary to provide externally sourced EVV data to the Sandata systems for processing.

Base Version 7.14

1 EVV Vendor Interface Transmission Guidelines

File Format	JSON
File Delimiter	not applicable
Headers	not applicable
File Extension	not applicable
File Encryption	Delivery to occur over secure HTTPS connection
Control File	not applicable
RESTful API Endpoint(s)	Client: UAT: https://uat-api.sandata.com/interfaces/intake/clients/rest/api/v1.1 Employee: UAT: https://uat-api.sandata.com/interfaces/intake/employees/rest/api/v1.1 Visit: UAT: https://uat-api.sandata.com/interfaces/intake/visits/rest/api/v1.1 Client: Prod: https://api.sandata.com/interfaces/intake/clients/rest/api/v1.1 Employee: Prod: https://api.sandata.com/interfaces/intake/employees/rest/api/v1.1 Visit: Prod: https://api.sandata.com/interfaces/intake/visits/rest/api/v1.1
Payload Compression	No compression of data during delivery
Delivery Mechanism	Via RESTful API call
Delivery Frequency	No less frequent than daily (at time decided by each vendor supplying the EVV data). Can be multiple times per day at the vendor's discretion.

2 Overview

This specification is intended to document the requirements for using the Sandata Real Time Interface (part of the Open EVV Series of Interface) for receiving information from 3rd party EVV Vendors into the Sandata Aggregator. This interface is also referred to as the Alternate EVV Data Interface of altEVV. An Alternate EVV Data Collection System will build one data pipe to the Aggregator and send synchronous data 'packages' per defined provider agency.

2.1 Intended Audience

The intended audience of this document is:

Project Management and Technical teams at Sandata.

Project Management and Technical teams at a designated Providers/Vendors who will be implementing this interface.

2.2 Transmission Frequency

For optimal system performance, it is recommended that visits should be sent in near real time. It is expected that information is sent as it is added/changed/deleted in the Alternate EVV Data Collection.

System Note: Rejection responses will be delivered on a separate API call that is initiated by the third party—in near real time.

2.3 Transmission Limits

A single transaction may contain from 1 to 5,000 records. A single record set would include all associated elements. If the group size exceeds the maximum limit for the group, the complete group will be rejected.

During peak loads, records received may be queued and processed as resources permit. Other transactions received for the Provider ID will be queued behind these until they are processed since they must be processed in the proper order.

Expected result of queued data is...Error Message: “The result for the input UUID is not ready yet. Please try again”.

Expected vendor action: Wait 5 minutes before attempting the GET status response.

2.4 Data Type Format Details

The user will send information in JSON or XML format. JSON and XML allow multiple “child” entities for a parent.

The format of the information sent must match exactly the format defined below and must be sent via web service using JSON or XML. Ultimately, we support only three data types during transmission: string, number, and Boolean. The specification uses more additional data types to ensure that data is received in the expected formats and appropriate record level editing can be incorporated. Except where numeric, the assumed JSON and XML format should be string. The data type provided in the specification is based on the following field definitions.

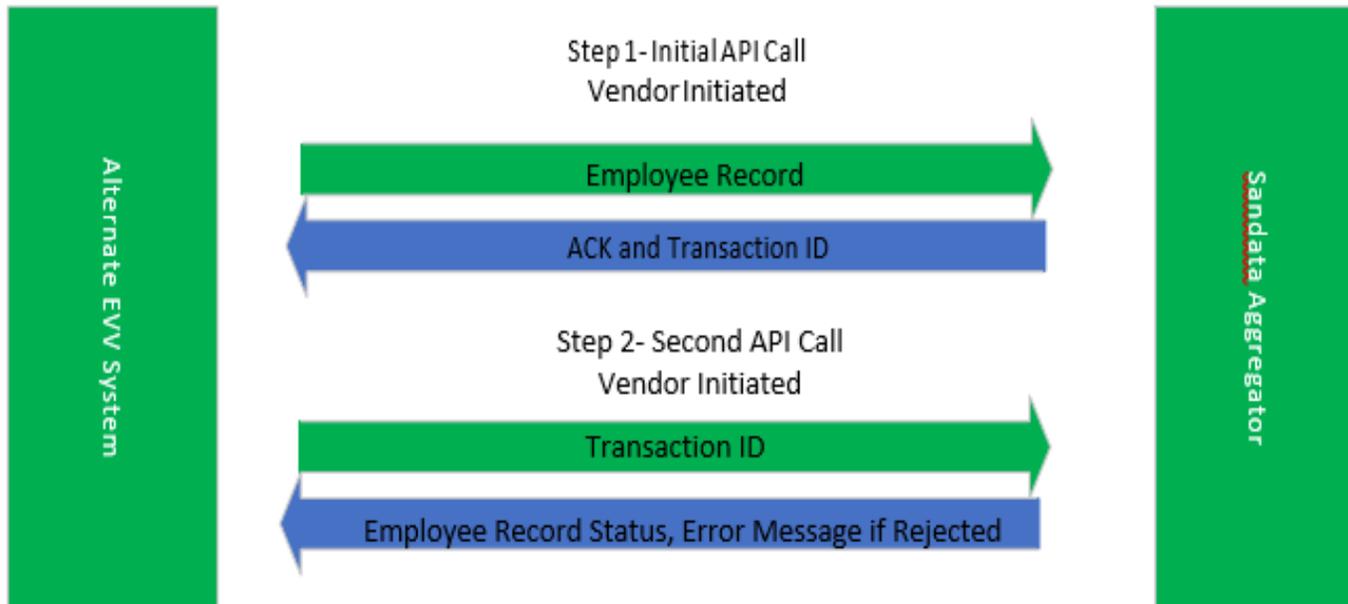
Note that the format is case sensitive. All field names must be provided in EXACTLY the casing used in the definitions below. Sandata recommends using RESTful services with JSON formatting.

Data Type	Description	Example
DateTime	<p>The date and time are represented as a string with the following format: YYYY-MM-DDTHH:MM:SSZ All times will be provided in UTC. If time is not material, it will be provided as is expected.</p>	2016-12-20T16:10:28Z
Date (Only Date)	<p>The data is represented as a string with the following format: YYYY-MM-DD Date only will be sent in UTC format.</p>	2016-12-20
Timezone	<p>All time for tracking visits will be in UTC. All time zone values will be derived from the Internet Assigned Numbers Authority (IANA) time zone database, which contains data that represents the history of local time for locations around the globe. It is updated periodically to reflect changes made by political bodies to time zone boundaries, UTC offsets, and daylight-saving rules. The time zone name expected in each transaction is the actual time zone where the event took place. i.e., US/Eastern.</p>	<p>A complete list of time zones can be found at: https://www.iana.org/time-zones See Appendix for the list of time zones.</p>

Data Type	Description	Example
String	A string is a row of zero or more characters that can include letters, numbers, or other types of characters as a unit, not an array of single characters. (e.g., plain text).	"This is a string"
Integer	An integer is a numeric value without a decimal. Integers are whole numbers and can be positive or negative.	52110 (positive) -87721 (negative)
Decimal	A floating-point number is referred to as a decimal . Can be positive or negative.	8221.231 (positive) -71.214 (negative)
Boolean	A logic predicate indicator that can be either true or false.	true false

3 Rejected Record Process

When records are received, Sandata will return against each group a transaction ID and an ACK (acknowledgment of receipt). This transaction ID can be queried by the caller for status of the records in the transaction. This process will allow the provider/vendor to “GET status” on any of the records that may have been rejected. The example below is for an employee record.



3.1 New Record and Updates

New records and updates for previously sent data should be provided via clients, employees, visits interfaces ('data packages'). If a set of records is sent (either client, employee, or visit), all associated applicable elements should be sent. Partial updates will be rejected. An update that deletes a record will not actually remove information since Sandata will not physically delete information. The deleted record/s will no longer be visible on the application. However, the record history will maintain the original data received.

4 Transmission Method

Sandata supports an SOA architecture. Sandata will provide an API for 3rd party vendors or agency's internal IT organizations to utilize. Sandata will provide sample JSON format information (Java equivalent to XML), as well as the WADL (JSON equivalent of the WSDL) to those parties developing the interface. This specification will include the rest endpoints needed to request status on record acceptance /rejection.

4.1 Rules

The following rules apply to information received through this interface. For all rules that result in a rejection, it is expected that the issue will be resolved in the Alternate Data Collection System and the information subsequently retransmitted.

There is one set of Interfaces per Sandata Provider Agency State ID.

There will be 3 independent types of data provided through the Alternate EVV interface:

- Clients
- Employees (Field Staff)
- Visit Information

Each will be sent individually but can be delivered through the same single connection.

THE ALTERNATE DATA COLLECTION SYSTEM WILL BE RESPONSIBLE FOR:

Visit transmittals: Visits should be transmitted near real time. Actual payer frequency requirements may vary. Note that rejection responses will be delivered as separate API calls initiated by the third party. Information should be sent for only those records that are added, changed, or deleted. This is an incremental interface. Records which have not changed should not be resent.

Complete transmissions:

- When sending a client, all applicable elements and sub elements must be sent during each transmission.
- When sending an employee, all applicable elements and sub elements must be sent during each transmission.
- When sending a visit, all applicable elements and sub elements must be sent during each transmission.

Call matching: Calls received regardless of the collection method used by the Alternate Data Collection System are received together into a complete visit by the Aggregator, per the specification. Sandata will not attempt to match or rematch the visits received.

Data quality: All data will be accepted from third party data “as is,” including any calculated fields.

Latitude and Longitude: Alternate EVV Data Collection Systems are responsible for providing latitude and longitude on all client addresses provided. Latitude and longitude must be provided for both the visit start and visit end time, assuming it is collected via a GPS-enabled device.

Assigning sequence numbers: For each of the 3 types of records (client, employee, visit), the Alternate Data Collection System will be responsible for assigning sequence numbers for each interface to ensure that updates are applied in the appropriate sequence. If a record is rejected, an incremented sequence is expected on the next transmission of that record set. Sequence numbers are per unique record (client, employee, visit) and record set (modifications to the same client, employee, visit). For example, the first time a particular client is sent, the sequence would be set to 1. The second time that same client is sent, the sequence would be set to 2, etc.

Ability to correct defined exceptions: Exceptions must be corrected using the standard set of reason codes provided by Payer/State. Some of the defined reason codes require additional text to provide additional information; this information must also be sent as part of this interface.

Change log transmission: Changes made to all visit information must be fully logged, and the log information must be transmitted as part of the visit record, as applicable. The log must be completed in the VisitChanges segment.

Standard date/time format: All dates and times provided must be sent in UTC (Coordinated Universal Time) format in GMT.

GENERAL PROCESSING RULES:

If a record is received and any required data is missing, malformed, or incomplete as defined in the specification, the record will be rejected or set to default values in accordance with the detailed specifications.

If an optional field is provided with an invalid value (one not listed in this specification), the field will be set to the default value, null and/or rejected, unless otherwise specified in this specification.

If text (string) field length is longer (>/greater than) than the maximum allowed for that field value, unless otherwise noted, the field will be truncated to the maximum length specified for that field.

Any record without a sequence number will be rejected. Sequence numbers are per unique record (client, employee, visit). For example, the first time a particular client is sent, the sequence would be set to 1. The second time the same client is sent, the sequence would be set to 2, etc.

Records will be processed in the order received using the assigned sequence number.

If the record is received with a sequential number that is less than the one already processed, the data will be rejected with error "Version number is duplicated or older than current." The vendor must correct the SequenceID and resend the data.

Header information as determined for the payer and program must be included in each transmission for each record (client, employee, visit), otherwise the entire collection of records will be rejected.

CLIENT RULES:

The following represents a subset of the requirements for client information. Please see the Field Information section of this document for all applicable rules.

If the client does not include at least 1 complete address (address line 1, city, state, zip code) the client will be rejected.

If the client does not include the defined unique identifier, the client will be rejected.

If the client does not include first name, last name and time zone, the client will be rejected.

EMPLOYEE RULES:

The following represents a subset of the requirements for employee information. Please see the Field Information section of this document for all applicable rules.

If SequenceID and Staff ID are not provided, the employee will be rejected.

If employee first name and last name are not provided, the employee will be rejected.

VISIT RULES:

Clients and Employees must be sent before visits, to ensure they exist in the Sandata system at the time of visit receipt.

No Client Provided - To allow the Aggregator to determine if the visit is for a Payer/State client, the visit must include a client. If a visit does not include a client, the complete visit will be rejected.

Invalid/Unknown Client Provided - To allow the Aggregator to determine if the visit is for a Payer/State Client, the visit must include a valid client associated with the payer. If a visit includes a client that is unknown to Sandata (has not been received and accepted), the complete visit record will be rejected.

No Employee Provided / Invalid or Unknown Employee Provided - If a visit does not include an employee (visit record send without an employee associated), The visit will be rejected as 'Worker not found'. The data will not process with an 'Unknown Employee' exception in Aggregator.

The Alternate EVV system is expected to be able to handle a visit that crosses calendar days.

A visit can only be cancelled if it does not have any calls associated with it or any adjusted times. If a visit has calls but is being cancelled in the source EVV system, the "Bill Visit" indicator should be set to False to indicate that the visit should be disregarded for billing purposes. The visit status will be set to Omit by the Aggregator.

The following rules apply to the dates and times provided for the visit:

Date and Time Exists for the Following:				Rule
Call In	Call Out	Adjusted In	Adjusted Out	
x	x			Call Out must be > Call In Otherwise record rejected.
Superseded by Adj. In	Superseded by Adj. Out	x	x	Adj. Out must be > Adj. In Otherwise record rejected.
x	Superseded by Adj. Out		x	Adj. Out must be > Call In Otherwise record rejected.
Superseded by Adj. In	x	x		Call Out must be > Adj. In Otherwise record rejected.

Upon receipt, Sandata will calculate all configured Payer/Program exceptions and apply those exceptions as applicable. For those exceptions that may be recalculated over the life of the visit, these exceptions will be calculated as appropriate.

It is assumed that there are some exceptions that cannot be “fixed” in the Alternate Data Collection System by their nature. They are configured for the Payer/State program as requiring acknowledgement by the system user. One of the included visit elements provides the ability for the user to

send their acknowledgement. These exceptions require attestation that the exception has been reviewed/acknowledged in the system along with the appropriate reason code and attestation that appropriate documentation exists. Exceptions are specific to a given Payer/Program and will be noted in the associated appendix.

Upon receipt, Sandata will calculate and apply visit status as defined for the Payer/Program.

The Alternate Data Collection System will be expected to send a reason code and optionally the defined resolution code if it applies to the payer. Based on the definitions of the reason codes, some reason codes require additional information explaining the change. If additional information is required, the alternate data collection system must collect the information and include it when transmitting the visit to Sandata.

5 Sequencing

The SequenceID on all three types of records (clients, employees, visits) should be independent per record and should be incremented each time any record is sent. The Sequence ID will be used to ensure that a record is processed only once and that the most current information is used for reporting and claims processing. In the event a visit update is not accepted (rejected), the SequenceID on that transmission should not be reused. The next update should increment to the next number in the sequence. Failure to do so will cause the new record to be rejected as a duplicate.

Sequence Rules:

- If the latest SequenceID is greater than the highest value previously received, the record set will not be rejected. i.e. latest SequenceID = 5, previous SequenceID = 4 Record accepted and latest record is displayed.
- If the latest SequenceID is less than the value previously received, and the record has not yet been processed, it will be accepted and recorded as historical information. i.e. latest SequenceID = 8, previous SequenceID = 10 Record accepted and latest record is still SequenceID = 10.
- If the Sequence ID is equal to a value previously received, it will be rejected. i.e. latest SequenceID = 15, previous SequenceID = 15 Record rejected.
- Gaps in sequence will be allowed.

Please Note:

For those agencies that wish to use the Alternate EVV interface, and would prefer to use timestamps as the sequence number in their deliveries, the Sandata system can accept the timestamp value as the sequence number, under two conditions:

1. The timestamp value provided must contain only numbers, and no other symbols (i.e. “/”, “-”, and “:” characters removed)
2. The timestamp value provided must be formatted as YYYYMMDDHHMMSS. For example:



6 Message Acknowledgement (ACK) and Transaction ID

Index	Column Name	Description	Max Length	Type
1	AgencyIdentifier	Unique identifier for the agency.	10	String
2	ProviderID	Unique identifier for the agency.	64	String
3	TransactionID	Unique identifier for the request generated by the payer.	50	String
4	Reason	Default and only value provided: “Transaction Received”	250	String

7 Response for Record Status

Index	Column Name	Description	Max Length	Type
1	AgencyIdentifier	Unique identifier for the agency.	10	String
2	ProviderID	Unique identifier for the agency.	64	String
3	RecordType	Type of record that was rejected Values: Client, Employee, Visit	10	String
4	RecordOtherID	Value of the record identifier	50	String
5	Reason	Default and only value provided: "Transaction Received"	250	String

8 PA-DHS Specific Requirements

This interface, for PA-DHS, is intended for Third-Party EVV Vendors to provide completed visits on at least a daily basis to the Sandata Aggregator. Visits are completed when all required information has been supplied for the visit and all visit exceptions have been remediated. Sandata will verify that visits received pass all PA-DHS edit rules on receipt. Note that the expectation is that all visit changes will be supplied along with the final completed visit.

8.1 EVV- Element- Activity

The following element includes the schedule information for the client. This includes both the client and employee information. Both client and employee must exist in the system for a schedule to be successfully uploaded or it must be part of the same transaction set.

Note: Conditional means if it is present then it is required.

8.2 Client Data Endpoint

This endpoint receives information regarding the individual member/beneficiary (known here as the 'Client') that receives care as part of the visit. Please note - the Client record must be successfully delivered and loaded PRIOR to the delivery of the Visit information, or else the visit will be rejected due to "Client not found".

Index	Element	Description	Max Length	Type	Required?	Expected Value
ProviderIdentification - Required						
1	ProviderQualifier	Unique identifier for the provider as determined by the program definition.	20	String	Yes	"MedicaidID" or "NPI" Refer to Appendix 9.1.1 for required format (based upon Payer/Service)
2	ProviderID	Unique identifier for the agency. ID type must match to the ProviderQualifier value being passed for Provider validation and lookup.	50	String	Yes	MedicaidID - 9-digit ProviderID Format: ##### OR NPI - 10-digit ID Format: ##### Refer to Appendix 9.1.1 for required format (based upon Payer/Service)
ClientGeneralInformation - Required						
1	ClientQualifier	Value being sent to uniquely identify the client. Should be the same as the value used by the Payer if a client feed is provided by the payer.	20	String	Yes	ClientCustomID

Index	Element	Description	Max Length	Type	Required?	Expected Value
2	ClientIdentifier	Unique client identifier used by the state to reference the member data across all Medicaid activities. This value will need to be the same as the ClientCustomID.	64	String	Yes	MedicaidID (10-digit ID) Format: #####
3	ClientFirstName	Client's First Name.	30	String	Yes	Client's First Name (See Field Level Errors in Appendix 9.7)
4	ClientMiddleInitial	Client's Middle Initial.	1	String	Optional	Client's Middle Initial
5	ClientLastName	Client's Last Name.	30	String	Yes	Client's Last Name (See Field Level Errors in Appendix 9.7)
6	ClientMedicaidID	Unique ID provided by the State Medicaid program to the client.	64	String	Yes	MedicaidID (10-digit ID) Format: #####
7	MissingMedicaidID	Indicator that a patient is a newborn.	5	String	Optional	"false"
8	SequenceID	The Third-Party EVV visit sequence ID. Sandata recommends this be a timestamp (to the second) to ensure the order of the client data updates. For HHA System users, the value is the system-generated key.	16	Integer	Yes	Third-Party EVV Vendor Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters.
9	ClientOtherID	Additional client user-defined ID. This value is used to match the client to an existing record during import.	24	String	Optional	Primary Client Key from the EVV Vendor System (No Special Characters)

Index	Element	Description	Max Length	Type	Required?	Expected Value
10	ClientTimeZone	Client's primary time zone. Depending on the program, this value may be defaulted or automatically calculated.	64	String	Yes	"US/Eastern"
11	ClientCustomID	Unique client identifier used by the state to reference the member data across all Medicaid activities. This value will need to be the same as the ClientIdentifier.	24	String	Yes	MedicaidID (10-digit ID) Format: #####
12	ClientSSN	Client's social security number. Not required if ClientOtherID is sent. May be required if needed for billing.	9	Integer	Optional	Last 5-digits of SSN Format: 0000####
13	Coordinator	The staff member is assigned to the client in a specific agency as the coordinator for an employee.			Do not provide	Do not provide
14	ClientID	This is a value auto assigned by Sandata internal process.			Do not provide	Do not provide
15	ProviderAssentContPlan	Indicator to capture provider's assent that the member's contingency plan provided will be reviewed with the member every 90 days and documentation will be provided.			Do not provide	Do not provide
ClientAddress - Required						
Required segment. At least one record for each client is required for the program. Multiple addresses are accepted with different address types.						
1	ClientAddressType	This field designates the client address type. Note that multiple of the same type can be provided. Default to Other if not available.	12	String	Yes	"Home" "Business" "Other"

Index	Element	Description	Max Length	Type	Required?	Expected Value
2	ClientAddressIsPrimary	One address must be designated as primary by sending true. Additional addresses will be false.	5	String	Yes	"true" "false"
3	ClientAddressLine1	Street address line 1 associated with this address. PO Box may be used for Safe at Home participants. PO Box may impact GPS reporting.	30	String	Yes	Address Line 1
4	ClientAddressLine2	Street address line 2 associated with this address.	30	String	Optional	Address Line 2
5	ClientCounty	County associated with this address.	25	String	Optional	County
6	ClientCity	City associated with this address.	30	String	Yes	City
7	ClientState	State associated with this address.	2	String	Yes	Two character standard state abbreviation. (Must be capitalized)
8	ClientZip	Zip Code associated with this address. If additional 4 digits are not known, provide zeros.	9	String	Yes	Zip Code Format: #####
9	ClientAddressLongitude	Calculated for each address.			Do not provide	Do not provide
10	ClientAddressLatitude	Calculated for each address.			Do not provide	Do not provide
ClientPayerInformation - Required						
1	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes	Valid Values = PAOLTL, PAODP, PAOMAP, PAABH, PAGHP, PAHPP, PAUHC, PAGEIS, PAAHPH, PAKPH, PAUPPH, PAUPMC, PAHW, PAACP, PAKF
2	PayerProgram	If applicable, the program to which this visit belongs.	9	String	Yes	Valid Values = OLTL, ODP, OMAP, PHC, CHC

Index	Element	Description	Max Length	Type	Required?	Expected Value
3	ProcedureCode	This is the billable procedure code which would be mapped to the associated service.	5	String	Yes	Billing Service code as listed. See Appendix 9.1.1
4	Modifier1	Modifier for the HCPCS procedure code (when applicable). Up to 4 modifiers are allowed. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
5	Modifier2	Modifier for the HCPCS procedure code (when applicable). Up to 4 modifiers are allowed. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
6	Modifier3	Modifier for the HCPCS procedure code (when applicable). Up to 4 modifiers are allowed. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1

Index	Element	Description	Max Length	Type	Required?	Expected Value
7	Modifier4	Modifier for the HCPCS procedure code (when applicable). Up to 4 modifiers are allowed. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
8	ClientPayerID	Unique identifier sent by the payer.			Do not provide	Do not provide
9	ClientStatus	The client's status. Provide the 2-digit code including the 0.	2	String	Yes	String match = "02" "04" Available values: 02 = Active 04 = Inactive
10	EffectiveStartDate	The effective start date for the client payer information.	10	Date	Optional	Date Format: YYYY-MM-DD
11	EffectiveEndDate	The effective end date for the client payer information.	10	Date	Optional	Date Format: YYYY-MM-DD
12	ClientEligibilityDateBegin	Client eligibility end date. This field is optional if ClientStatus is sent.			Do not provide	Do not provide
13	ClientEligibilityDateEnd	Client eligibility begin date. This field is optional if ClientStatus is sent.			Do not provide	Do not provide
ClientPhone - Conditional						
The fields in this segment marked as required "Yes" are only needed when this segment is sent.						
1	ClientPhoneType	This is the client phone type. Note that multiple of the same type can be provided.	12	String	Yes	"Home" "Mobile" "Business" "Other" Required if provided in MCO's records.

Index	Element	Description	Max Length	Type	Required?	Expected Value
2	ClientPhone	Client phone number including area code.	10	String	Yes	Client Phone Number Format: ##### Required if provided in MCO's records.

8.3 Employee Data Endpoint

This endpoint receives information regarding the individual caregiver (known here as the 'Employee') that delivered the actual care to the individual as part of the visit. Please note- the Employee must be successfully delivered and loaded PRIOR to the delivery of the Visit information, or else the visit will be rejected due to 'Worker not found'.

ProviderIdentification - Required

1	ProviderQualifier	Identifier being sent as the unique identifier for the provider.	20	String	Yes	"MedicaidID" or "NPI" Refer to Appendix 9.1.1 for required format (based upon Payer/Service)
2	ProviderID	Unique identifier for the agency. ID type must match to the ProviderQualifier value being passed for Provider validation and lookup.	50	String	Yes	MedicaidID - 9-digit ProviderID Format: ##### OR NPI - 10-digit ID Format: ##### Refer to Appendix 9.1.1 for required format (based upon Payer/Service)

EmployeeGeneralInformation - Required

Required data in the body of the transmission. This segment provides the basic information about the employee.

1	EmployeeQualifier	Descriptive reference of the value being sent to uniquely identify the employee.	20	String	Yes	"EmployeeCustomID" (See Field Level Errors in Appendix 9.7)
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Index	Element	Description	Max Length	Type	Required?	Expected Value
2	EmployeeIdentifier	<p>Employee identifier identified by EmployeeQualifier. This value must equal the EmployeeIdentifier provided in the Visit transmission. Employee Identifier is to be provided in one of the three acceptable formats. The EmployeeIdentifier format must be consistent in both the EmployeeGeneral and VisitGeneral segments.</p> <p>Note: Format 1 is only used for OLTL</p>	9	String	Yes	<p>Format 1: PA-DHS Unique Registry ID 6- character alphanumeric value</p> <p>Note: Format 1 is required, if the employee has a PA-DHS Unique Registry ID</p> <p>Format 2: 2 char vendor specific prefix + the vendor system's identifier for the caregiver/employee (e.g., if the prefix = XX and the vendor system identifier = 1234567, then the EmployeeIdentifier should be "XX1234567") See Appendix 9.4 for pre-fix codes.</p> <p>Format 3: Last 5-digits of SSN with 4 leading 0's Format: 0000##### Must be unique within each agency. (WARNING: This value is being phased out due to a higher occurrence of duplicate caregiver rejection)</p>
3	EmployeeOtherID	Unique employee identifier in the external system, if any.	64	String	Optional	Vendor Supplied value based on Vendor's solutions. Unique ID for each employee.

Index	Element	Description	Max Length	Type	Required?	Expected Value
4	SequenceID	The Third-Party EVV visit sequence ID to which the change applied. For HHA System users, the value is the system-generated key.	16	Integer	Yes	Third-Party EVV Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters.
5	EmployeeSSN	Employee Social Security Number.	9	String	Yes	Last 5-digits of SSN Format: 0000##### Must be Unique within each Agency.
6	EmployeeLastName	Employee's last name.	30	String	Yes	Employee's Last Name (See Field Level Errors in Appendix 9.7)
7	EmployeeFirstName	Employee's first name.	30	String	Yes	Employee's First Name (See Field Level Errors in Appendix 9.7)
8	EmployeeEmail	Employee's email address.	64	String	Conditional	Employee's Email Address Format: "@" and extension (.xxx) are required to validate as an email address
9	EmployeeManagerEmail	Email of the employee's manager.			Do not provide	Do not provide
10	EmployeeHireDate	Employee's Date of Hire.			Do not provide	Do not provide
11	EmployeeEndDate	Employee's HR recorded end date.			Do not provide	Do not provide
12	EmployeeAPI	Employee client's alternate provider identifier or Medicaid ID.			Do not provide	Do not provide

Index	Element	Description	Max Length	Type	Required?	Expected Value
13	EmployeePosition	Values for payer/state programs to be determined during implementation. If multiple positions, send primary.			Do not provide	Do not provide

8.4 Visit Data Endpoint

This endpoint receives the information regarding the EVV visits themselves- including all individual components of the visit, and corrections/changes to the visits over time. Please Note: The visit information must be loaded AFTER the client and the employee associated with the visit have been successfully loaded, or else the visit record will be rejected with appropriate error description.

ProviderIdentification - Required

1	ProviderQualifier	Identifier being sent as the unique identifier for the provider.	20	String	Yes	“MedicaidID” or “NPI” Refer to Appendix 9.1.1 for required format (based upon Payer/Service)
2	ProviderID	Unique identifier for the agency. ID type must match to the ProviderQualifier value being passed for Provider validation and lookup.	50	String	Yes	MedicaidID – 9-digit ProviderID Format: ##### OR NPI – 10-digit ID Format: ##### Refer to Appendix 9.1.1 for required format (based upon Payer/Service)

VisitGeneralInformation - Required

Required segment provides the base data regarding an EVV visit. If a visit is changed (corrections, alterations, updates) over time, the same visit may be delivered multiple times, **each sharing the same 'VisitOtherID'**, but each change represented with a different Sequence ID- ascending over time- to allow the state's Aggregator system to keep the changes ordered appropriately. Each update requires a 'VisitChanges' segment.

1	VisitOtherID	Visit identifier in the external system.	50	String	Yes	Visit Identifier
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Index	Element	Description	Max Length	Type	Required?	Expected Value
2	SequenceID	The Third-Party EVV visit sequence ID to which the change applied. For HHA System users, the value is the system-generated key.	16	Integer	Yes	Third-Party EVV Visit Sequence ID If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters.
3	EmployeeQualifier	Descriptive reference of the value being sent to uniquely identify the employee.	20	String	Yes	"EmployeeCustomID"
4	EmployeeOtherID	Unique employee identifier in the external system, if any. The EmployeeOtherID format must be consistent in both the EmployeeGeneral and VisitGeneral segments.	64	String	Optional	Vendor Supplied value based on Vendor's solutions. Unique ID for each employee.

Index	Element	Description	Max Length	Type	Required?	Expected Value
5	EmployeeIdentifier	<p>Employee identifier identified by EmployeeQualifier. This value must equal the EmployeeIdentifier provided in the Visit transmission. Employee Identifier is to be provided in one of the three acceptable formats. The EmployeeIdentifier format must be consistent in both the EmployeeGeneral and VisitGeneral segments.</p> <p>Note: Format 1 is only used for OLTL</p>	9	String	Yes	<p>Format 1: PA-DHS Unique Registry ID 6- character alphanumeric value</p> <p>Note: Format 1 is required, if the employee has a PA-DHS Unique Registry ID</p> <p>Format 2: 2 char vendor specific prefix + the vendor system's identifier for the caregiver/employee (e.g., if the prefix = XX and the vendor system identifier = 1234567, then the EmployeeIdentifier should be "XX1234567") See Appendix 9.4 for pre-fix codes.</p> <p>Format 3: Last 5-digits of SSN with 4 leading 0's Format: 0000#### Must be unique within each agency. (WARNING: This value is being phased out due to a higher occurrence of duplicate caregiver rejection)</p>

Index	Element	Description	Max Length	Type	Required?	Expected Value
6	GroupCode	GroupCode applies to visits for a single caregiver that provides services to multiple clients or multiple caregivers providing service to a single client that occur during the same time span. It is used to reassemble all members of the group and will impact state reporting and analytics for overlapping visits. Use only if this functionality is provided by the Alternate EVV vendor.	6	String	Optional	GroupCode
7	ClientIDQualifier	Describes what type of identifier is being sent to identify the client.	20	String	Yes	"ClientCustomID"
8	ClientIdentifier	Unique client identifier used by the state to reference the member data across all Medicaid activities.	64	String	Yes	MedicaidID (10-digit ID) Format: #####
9	ClientID	Unique client identifier used by the state to reference the member data across all Medicaid activities.	64	String	Yes	MedicaidID (10-digit ID) Format: #####
10	ClientOtherID	Additional client user-defined ID. This value is used to match the client to an existing record during import.	24	String	Optional	Vendor System Client ID

Index	Element	Description	Max Length	Type	Required?	Expected Value
11	VisitCancelledIndicator	Set to false as the default. Set to true if a future scheduled visit previously sent and accepted with NO "CallIn", "CallOut" or "Adjusted" times to be cancelled / deleted. Can only be applicable to future schedules.	5	String	Yes	"true" "false" Can only be true or false.
12	PayerID	Sandata EVV assigned ID for the payer.	64	String	Yes	Valid Values = PAOLTL, PAODP, PAOMAP, PAABH, PAGHP, PAHPP, PAUHC, PAGEIS, PAAHPH, PAKPH, PAUPPH, PAUPMC, PAHW, PAACP, PAKF
13	PayerProgram	If applicable, the program to which this visit belongs.	9	String	Yes	Valid Values = OLTL, ODP, OMAP, PHC, CHC
14	ProcedureCode	This is the billable procedure code which would be mapped to the associated service.	5	String	Yes	Billing Service code as listed. See Appendix 9.1.1
15	Modifier1	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1

Index	Element	Description	Max Length	Type	Required?	Expected Value
16	Modifier2	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
17	Modifier3	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
18	Modifier4	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix.	2	String	Conditional	Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1
19	VisitTimeZone	Visit primary time zone. Depending on the program, this value may be defaulted or automatically calculated. Should be provided if the visit is occurring in a time zone other than that of the client.	64	String	Yes	"US/Eastern"

Index	Element	Description	Max Length	Type	Required?	Expected Value
20	AdjInDateTime	Adjusted in date/time required only if manually adjusted. The VisitChanges segment is required.	20	DateTime	Conditional	Adjusted In Date and Time Format: YYYY-MM-DDTHH:MM:SSZ
21	AdjOutDateTime	Adjusted out date/time required only if manually adjusted. The VisitChanges segment is required.	20	DateTime	Conditional	Adjusted Out Date and Time Format: YYYY-MM-DDTHH:MM:SSZ
22	BillVisit	True for all visits to be billed. False is only sent if the visit is not to be considered for claims validation and set to omit status.	5	String	Yes	"true" "false"
23	Memo	Associated free form text.	1024	String	Optional	Memo
24	ClientVerifiedTimes	If the client did verify times in EVV Vendor system set this value to true. If the client did not verify times in EVV Vendor system set this value to false.	5	String	Optional	"true" "false"
25	ClientVerifiedTasks	If the client did verify tasks performed in EVV Vendor system set this value to true. If the client did not verify tasks performed in EVV Vendor system set this value to false.	5	String	Optional	"true" "false"
26	ClientVerifiedService	If the client did verify service performed in EVV Vendor system set this value to true. If the client did not verify service performed in EVV Vendor system set this value to false.	5	String	Optional	"true" "false"

Index	Element	Description	Max Length	Type	Required?	Expected Value
27	ClientSignatureAvailable	The actual signature will not be transferred. The originating system will be considered the system of record. If the client signature is captured in EVV Vendor system set this value to true. If the client signature is not captured in EVV Vendor system set this value to false.	5	String	Optional	"true" "false"
28	ClientVoiceRecording	The actual voice recording will not be transferred. The originating system will be considered the system of record. If the client voice recording is captured in EVV Vendor system set this value to true. If the client voice recording is not captured in EVV Vendor system set this value to false.	5	String	Optional	"true" "false"
29	ScheduleStartTime	Activity/Schedule start date and time. This field is generally required but may be omitted if the schedule is denoting services that can happen at any time within the service date. Schedules are required in all cases. Lack of a schedule is on an exception basis.			Do not provide	Do not provide

Index	Element	Description	Max Length	Type	Required?	Expected Value
30	ScheduleEndTime	Activity/Schedule end date and time. This field is generally required but may be omitted if the schedule is denoting services that can happen at any time within the service date. Schedules are required in all cases. Lack of schedule is on an exception basis.			Do not provide	Do not provide
31	ContingencyPlan	Indicator of member's contingency plan selected by member. Valid values include (CODE should be sent only): CODE- DescriptionCP01 - Reschedule within 2 HoursCP02 - Reschedule within 24 HoursCP03 - Reschedule within 48 HoursCP04 - Next Scheduled VisitCP05 - Non-Paid Caregiver			Do not provide	Do not provide
32	Reschedule	Indicator if schedule is a "reschedule".			Do not provide	Do not provide
33	HoursToBill	Hours that are going to be billed.			Do not provide	Do not provide
34	HoursToPay	If payroll is in scope for the payer program, the hours to pay.			Do not provide	Do not provide

Calls - Conditional

Conditional segment if calls are not provided, adjusted times must be included in the parent visit element. Calls include any type of clock in or clock out depending on system capabilities. Note that some vendor systems may not record some visit activity as calls. If this is the case, the call element can be omitted. Sandata will treat visit information without calls as manually entered. The fields in this segment marked as required "Yes" are only needed when this segment is sent.

1	CallExternalID	Call identifier in the external system.	16	String	Yes	Call Identifier
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Index	Element	Description	Max Length	Type	Required?	Expected Value
2	CallDateTime	Event date time. Must be to the second.	20	DateTime	Yes	Call Date Time Format: YYYY-MM-DDTHH:MM:SSZ
3	CallAssignment	This identifies the call assignment type.	10	String	Yes	"Time In" "Time Out"
4	GroupCode	GroupCode applies to visits for a single caregiver that provides services to multiple clients or mutiple caregivers providing service to a single client that occur during the same time span. It is used to reassemble all members of the group and will impact state reporting and analytics for overlapping visits. Use only if this functionality is provided by the Alternate EVV vendor.	6	String	Optional	GroupCode
5	CallType	The type of device used to create the event. Any call with GPS data collected should be identified as Mobile. FVV should be used for any type of fixed visit verification device. VisitChanges segment is required for CallType = Manual.	20	String	Yes	"Telephony" "Mobile" "FVV" "Manual"
6	ProcedureCode	This is the billable procedure code which would be mapped to the associated service.	5	String	Yes	HCPSC Code See Appendix 9.1.1
7	ClientIdentifierOnCall	If a client identifier was entered on the call, this value should be provided.	10	String	Conditional	MedicaidID (10-digit ID) Format: #####

Index	Element	Description	Max Length	Type	Required?	Expected Value
8	MobileLogin	Login used if a mobile application is in use for GPS calls. Required if CallType = Mobile.	64	String	Conditional	Mobile Login of employee
9	CallLatitude	GPS latitude recorded during event. Latitude has a range of -90 to 90 with a 15-digit precision. Required for CallType = Mobile and FVV.	19	Decimal	Conditional	Latitude Value Decimal with sign if negative 2 primary.15digit precision. Decimal format with (-)XX.XXXXXXXXXXXXXXXXXX digits
10	CallLongitude	GPS longitude recorded during event. Longitude has a range of -180 to 180 with a 15-digit precision. Required for CallType = Mobile and FVV.	20	Decimal	Conditional	Longitude Value Decimal with sign if negative 3 primary.15digit precision. Decimal format with (-)XXX.XXXXXXXXXXXXXXXXXX digits
11	TelephonyPIN	PIN for telephony. Identification for the employee using telephony. Required if CallType = Telephony.	9	Integer	Conditional	Telephony PIN Numbers only
12	OriginatingPhoneNumber	Originating phone number for telephony. Required if CallType = Telephony.	10	String	Conditional	Originating Phone Number No Special Characters
13	Location	Specific values to be provided based on the program.			Do not provide	Do not provide
14	VisitLocationType	Self-Reported visit location REQUIRED for all call types. Value to be sent should be "1 "or "2" 1=Home, 2=Community	25	String	Yes	"1" "2"

Index	Element	Description	Max Length	Type	Required?	Expected Value
VisitChanges - Conditional						
Conditional segment provided when a visit has been manually entered, adjusted, or updated in the source system. The Visit General segment should reflect the updated information, while this associated Visit Change segment should record the details around that change and supply the reason code for why it occurred. The fields in this segment marked as required "Yes" are only needed when this segment is sent.						
1	SequenceID	The Third-Party EVV visit sequence ID to which the change applied. For HHA System users, the value is the system-generated key.	16	String	Yes	Third-Party EVV Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters.
2	ChangeMadeBy	The unique identifier of the user, system, or process that made the change. This could be a system identifier for the user or an email. Could also be a system process, in which case it should be identified.	64	String	Yes	Unique Identifier of Change Agent Required - Username or User Identifier who completed the change to the visit information (Audit)
3	ChangeDateTime	Date and time when change is made. At least to the second.	20	DateTime	Yes	Date and Time When Change is Made Format: YYYY-MM-DDTHH:MM:SSZ
4	GroupCode	GroupCode applies to visits for a single caregiver that provides services to multiple clients or multiple caregivers providing service to a single client that occur during the same time span. It is used to reassemble all members of the group and will impact state reporting and analytics for overlapping visits. Use only if this functionality is provided by the Alternate EVV vendor.	6	String	Optional	GroupCode

Index	Element	Description	Max Length	Type	Required?	Expected Value
5	ReasonCode	Reason Code associated with the change.	4	String	Yes	See Appendix 9.2 for values
6	ChangeReasonMemo	Reason/Description of the change being made if entered. Required for some reason codes and CallType "Manual" or if "Adjusted" times are included.	256	String	Conditional	Required if ReasonCode = Other, Participant Refusal Optional otherwise
7	ResolutionCode	Resolution codes, if selected. Resolution Codes are specific to the program.	4	String	Yes	String Value 1 = Written Documentation Maintained
VisitExceptionAcknowledgement - Conditional						
Conditional segment provided for a visit when it has corrections, alterations, or updates that caused exceptions, which have been acknowledged by the provider agency. Every exception that is acknowledgeable (versus exceptions that require a fix- or alteration of the visit data) must have an acknowledgement for the visit to be fully verified and compliant with the EVV program's rules. The fields in this segment marked as required "Yes" are only needed when this segment is sent.						
1	ExceptionID	ID for the exception being acknowledged.	2	String	Yes	See Appendix 9.3 for values
2	ExceptionAcknowledged	True to acknowledge exceptions that are indicated as acknowledgeable only. False by default.	5	String	Yes	"true" or "false"

9 Appendices

Note: Alternate EVV vendors may begin submitting the new Program Codes "PHC" and "CHC" on or after August 10, 2022.

Note: Alternate EVV vendors should no longer submit the Program Codes with the two-character plan codes for Date(s) of Service on or after December 31, 2022.

9.1 Payers & Programs

PayerID	Payer Program	Payer Name	Program Description
PAOLTL	OLTL	Office of Long Term Living	Office of Long Term Living
PAODP	ODP	Office of Developmental Programs	Office of Developmental Programs
PAOMAP	OMAP	Office of Medical Assistance Programs	Office of Medical Assistance Programs
PAABH	PHC	Aetna PH MCO	Physical HealthChoices
PAGHP	PHC	Highmark Whole Care PH MCO	Physical HealthChoices
PAHPP	PHC	Health Partners PH MCO	Physical HealthChoices
PAUHC	PHC	United Healthcare PH MCO	Physical HealthChoices
PAGEIS	PHC	Geisinger Health Plan PH MCO	Physical HealthChoices
PAAHPH	PHC	AmeriHealth Caritas PH MCO	Physical HealthChoices
PAKPH	PHC	Keystone First PH MCO	Physical HealthChoices
PAUPPH	PHC	UPMC PH MCO	Physical HealthChoices
PAUPMC	CHC	UPMC CHC MCO	Community HealthChoices
PAHW	CHC	PA Health and Wellness CHC MCO	Community HealthChoices
PAACP	CHC	AmeriHealth Caritas CHC MCO	Community HealthChoices
PAKF	CHC	Keystone First CHC MCO	Community HealthChoices

9.1.1 HCPCS Procedure Codes

Payers, Program, Services, & Modifiers: Payer = PAODP PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	W1724	U1				Companion Basic (1:3) - ECS
PAODP	ODP	W1724					Companion Basic (1:3)
PAODP	ODP	W1725	U1				Companion Level 1 (1:2) - ECS
PAODP	ODP	W1725					Companion Level 1 (1:2)
PAODP	ODP	W1726	U1				Companion Level 2 (1:1) - ECS
PAODP	ODP	W1726	U4	U1			Companion Level 2 (1:1) - No Benefit Allowance - ECS
PAODP	ODP	W1726	U4				Companion Level 2 (1:1) - No Benefit Allowance
PAODP	ODP	W1726					Companion Level 2 (1:1)
PAODP	ODP	W7058	U1				IHCS Basic (1:3) - ECS
PAODP	ODP	W7058					IHCS Basic (1:3)
PAODP	ODP	W7059	U1				IHCS Level 1 (1:2) - ECS
PAODP	ODP	W7059					IHCS Level 1 (1:2)
PAODP	ODP	W7060	U1				IHCS Level 2 (1:1) - ECS
PAODP	ODP	W7060	U4	U1			IHCS Level 2 (1:1) - No Benefit Allowance - ECS
PAODP	ODP	W7060	U4				IHCS Level 2 (1:1) - No Benefit Allowance
PAODP	ODP	W7060					IHCS Level 2 (1:1)
PAODP	ODP	W7061	TD	U1			IHCS Level 2 (1:1) Enhanced - RN - ECS
PAODP	ODP	W7061	TD	U4	U1		IHCS Level 2 (1:1) Enhanced - RN - No Benefit Allowance - ECS
PAODP	ODP	W7061	TD	U4			IHCS Level 2 (1:1) Enhanced - RN - No Benefit Allowance
PAODP	ODP	W7061	TD				IHCS Level 2 (1:1) Enhanced - RN
PAODP	ODP	W7061	TE	U1			IHCS Level 2 (1:1) Enhanced - LPN - ECS
PAODP	ODP	W7061	TE	U4	U1		IHCS Level 2 (1:1) Enhanced - LPN - No Benefit Allowance - ECS
PAODP	ODP	W7061	TE	U4			IHCS Level 2 (1:1) Enhanced - LPN - No Benefit Allowance
PAODP	ODP	W7061	TE				IHCS Level 2 (1:1) Enhanced - LPN
PAODP	ODP	W7061	U1				IHCS Level 2 (1:1) Enhanced - ECS
PAODP	ODP	W7061	U4	U1			IHCS Level 2 (1:1) Enhanced - No Benefit Allowance - ECS

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	W7061	U4				IHCS Level 2 (1:1) Enhanced - No Benefit Allowance
PAODP	ODP	W7061					IHCS Level 2 (1:1) Enhanced
PAODP	ODP	W7068	U1				IHCS Level 3 (2:1) - ECS
PAODP	ODP	W7068	U4	U1			IHCS Level 3 (2:1) - No Benefit Allowance - ECS
PAODP	ODP	W7068	U4				IHCS Level 3 (2:1) - No Benefit Allowance
PAODP	ODP	W7068					IHCS Level 3 (2:1)
PAODP	ODP	W7069	TD	U1			IHCS Level 3 (2:1) Enhanced - RN - ECS
PAODP	ODP	W7069	TD	U4	U1		IHCS Level 3 (2:1) Enhanced - RN - No Benefit Allowance - ECS
PAODP	ODP	W7069	TD	U4			IHCS Level 3 (2:1) Enhanced - RN - No Benefit Allowance
PAODP	ODP	W7069	TD				IHCS Level 3 (2:1) Enhanced - RN
PAODP	ODP	W7069	TE	U1			IHCS Level 3 (2:1) Enhanced - LPN - ECS
PAODP	ODP	W7069	TE	U4	U1		IHCS Level 3 (2:1) Enhanced - LPN - No Benefit Allowance - ECS
PAODP	ODP	W7069	TE	U4			IHCS Level 3 (2:1) Enhanced - LPN - No Benefit Allowance
PAODP	ODP	W7069	TE				IHCS Level 3 (2:1) Enhanced - LPN
PAODP	ODP	W7069	U1				IHCS Level 3 (2:1) Enhanced - ECS
PAODP	ODP	W7069	U4	U1			IHCS Level 3 (2:1) Enhanced - No Benefit Allowance - ECS
PAODP	ODP	W7069	U4				IHCS Level 3 (2:1) Enhanced - No Benefit Allowance
PAODP	ODP	W7069					IHCS Level 3 (2:1) Enhanced
PAODP	ODP	W7201					Specialized Skill Development (1:1)
PAODP	ODP	W7204					Specialized Skill Development (1:2)
PAODP	ODP	W7205					Specialized Skill Development (1:3)
PAODP	ODP	W7213					Respite - Agency Managed In Home
PAODP	ODP	W7283	U4				Homemaker - Permanent - 1 Hour - No Benefit Allowance
PAODP	ODP	W7283	UA	U4			Homemaker - Temporary - 1 Hour - No Benefit Allowance
PAODP	ODP	W7283	UA				Homemaker - Temporary - 1 Hour
PAODP	ODP	W7283					Homemaker-1 Hour
PAODP	ODP	W8095	TD	U1			Respite Unlicensed Level 4 (2:1) RN ECS-15 Mins
PAODP	ODP	W8095	TD	U4	U1		Respite Unlicensed Level 4 (2:1) RN-No Benefit Allowance-ECS-15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	W8095	TD	U4			Respite Unlicensed Level 4 (2:1) RN-No Benefit Allowance-15 Mins
PAODP	ODP	W8095	TD				Respite Unlicensed Level 4 (2:1) RN-15 Mins
PAODP	ODP	W8095	TE	U1			Respite Unlicensed Level 4 (2:1) LPN-ECS-15 Mins
PAODP	ODP	W8095	TE	U4	U1		Respite Unlic Level 4 (2:1) LPN-No Benefit Allowance-ECS-15 Mins
PAODP	ODP	W8095	TE	U4			Respite Unlic Level 4 (2:1) LPN-No Benefit Allowance-15 Mins
PAODP	ODP	W8095	TE				Respite Unlicensed Level 4 (2:1) LPN-15 Mins
PAODP	ODP	W8095	U1				Respite - Unlicensed Level 4 (2:1) Enhanced) - ECS - 15 Mins
PAODP	ODP	W8095	U4	U1			Respite-Unlic Level 4 (2:1) Enh-No Benefit Allow-ECS-15 Mins
PAODP	ODP	W8095	U4				Respite-Unlic Level 4 (2:1) Enh-No Benefit Allowance-15 Mins
PAODP	ODP	W8095					Respite Unlicensed Level 4 (2:1) Enhanced-15 Mins
PAODP	ODP	W8096	U1				Respite - 15 Mins Basic (1:4) - ECS
PAODP	ODP	W8096					Respite - 15 Mins Basic (1:4)
PAODP	ODP	W9596					Respite - Agency Managed Out of Home - 15 Mins
PAODP	ODP	W9795	U1				Respite Unlicensed Basic (1:4)-ECS-Day
PAODP	ODP	W9795					Respite Unlicensed Basic (1:4)-Day
PAODP	ODP	W9796	U1				Respite Unlicensed Level 1 (1:3)-ECS-Day
PAODP	ODP	W9796					Respite Unlicensed Level 1 (1:3)-Day
PAODP	ODP	W9797	U1				Respite Unlicensed Level 2 (1:2)-ECS-Day
PAODP	ODP	W9797					Respite Unlicensed Level 2 (1:2)-Day
PAODP	ODP	W9798	U1				Respite Unlicensed Level 3 (1:1)-ECS-Day
PAODP	ODP	W9798	U4	U1			Respite Unlicensed Level 3 (1:1)-No Benefit Allowance-ECS-Day
PAODP	ODP	W9798	U4				Respite Unlicensed Level 3 (1:1)-No Benefit Allowance-Day
PAODP	ODP	W9798					Respite Unlicensed Level 3 (1:1)-Day
PAODP	ODP	W9799	TD	U1			Respite Unlicensed Level 3 (1:1) - Enhanced - RN - ECS - Day
PAODP	ODP	W9799	TD	U4	U1		Respite Unlic Level 3 (1:1) Enh-RN-No Benefit Allowance-ECS-Day
PAODP	ODP	W9799	TD	U4			Respite Unlicensed Level 3 (1:1) -Enh-RN-No Benefit Allowance-Day
PAODP	ODP	W9799	TD				Respite Unlicensed Level 3 (1:1) - Enhanced - RN - Day
PAODP	ODP	W9799	TE	U1			Respite Unlicensed Level 3 (1:1) - Enhanced - LPN - ECS - Day
PAODP	ODP	W9799	TE	U4	U1		Respite Unlic Level 3 (1:1) Enh-LPN-No Benefit Allowance-ECS-Day

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	W9799	TE	U4			Respite Unlicensed Level 3 (1:1) Enh-LPN-No Benefit Allowance-Day
PAODP	ODP	W9799	TE				Respite Unlicensed Level 3 (1:1) - Enhanced - LPN - Day
PAODP	ODP	W9799	U1				Respite Unlicensed Level 3 (1:1) Enhanced-ECS-Day
PAODP	ODP	W9799	U4	U1			Respite Unlic Level 3 (1:1) Enhanced-No Benefit Allowance-ECS-Day
PAODP	ODP	W9799	U4				Respite Unlic Level 3 (1:1) Enhanced-No Benefit Allowance-Day
PAODP	ODP	W9799					Respite Unlicensed Level 3 (1:1) Enhanced-Day
PAODP	ODP	W9800	U1				Respite Unlicensed Level 4 (2:1) ECS-Day
PAODP	ODP	W9800	U4	U1			Respite Unlicensed Level 4 (2:1) No Benefit Allowance-ECS-Day
PAODP	ODP	W9800	U4				Respite Unlicensed Level 4 (2:1) No Benefit Allowance-Day
PAODP	ODP	W9800					Respite Unlicensed Level 4 (2:1)-Day
PAODP	ODP	W9801	TD	U1			Respite Unlicensed Level 4 (2:1) Enhanced - RN - ECS - Day
PAODP	ODP	W9801	TD	U4	U1		Respite Unlic Level 4 (2:1) Enh - RN-No Benefit Allowance-ECS-Day
PAODP	ODP	W9801	TD	U4			Respite Unlic Level 4 (2:1) Enh - RN - No Benefit Allowance - Day
PAODP	ODP	W9801	TD				Respite Unlicensed Level 4 (2:1) Enhanced - RN - Day
PAODP	ODP	W9801	TE	U1			Respite Unlicensed Level 4 (2:1) - Enhanced - LPN - ECS - Day
PAODP	ODP	W9801	TE	U4	U1		Respite Unlic Level 4 (2:1) Enh-LPN-No Benefit Allowance-ECS-Day
PAODP	ODP	W9801	TE	U4			Respite Unlic Level 4 (2:1) - Enh - LPN-No Benefit Allowance-Day
PAODP	ODP	W9801	TE				Respite Unlicensed Level 4 (2:1) - Enhanced - LPN - Day
PAODP	ODP	W9801	U1				Respite Unlicensed Level 4 (2:1) Enhanced - ECS - Day
PAODP	ODP	W9801	U4	U1			Respite Unlic Level 4 (2:1) Enhanced-No Benefit Allowance-ECS-Day
PAODP	ODP	W9801	U4				Respite Unlic Level 4 (2:1) Enhanced-No Benefit Allowance-Day
PAODP	ODP	W9801					Respite Unlicensed Level 4 (2:1) Enhanced-Day
PAODP	ODP	W9860	U1				Respite Unlicensed Level 1 (1:3)-ECS-15 Mins
PAODP	ODP	W9860					Respite Unlicensed Level 1 (1:3)-15 Mins
PAODP	ODP	W9861	U1				Respite Unlicensed Level 2 (1:2)-ECS-15 Mins
PAODP	ODP	W9861					Respite Unlicensed Level 2 (1:2)-15 Mins
PAODP	ODP	W9862	U1				Respite Unlicensed Level 3 (1:1)-ECS-15 Mins
PAODP	ODP	W9862	U4	U1			Respite Unlicensed Level 3 (1:1)-No Benefit Allowance-ECS-15 Mins
PAODP	ODP	W9862	U4				Respite Unlicensed Level 3 (1:1)-No Benefit Allowance-15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	W9862					Respite Unlicensed Level 3 (1:1)-15 Mins
PAODP	ODP	W9863	TD	U1			Respite Unlicensed Level 3 (1:1) Enhanced RN-ECS-15 Mins
PAODP	ODP	W9863	TD	U4	U1		Respite Unlic Level 3(1:1)Enh-RN-No Benefit Allowance-ECS-15 Mins
PAODP	ODP	W9863	TD	U4			Respite Unlic Level 3 (1:1) Enh-RN-No Benefit Allowance-15 Mins
PAODP	ODP	W9863	TD				Respite Unlicensed Level 3 (1:1) Enhanced – RN - 15 Mins
PAODP	ODP	W9863	TE	U1			Respite Unlicensed Level 3 (1:1) Enhanced – LPN -ECS - 15 Mins
PAODP	ODP	W9863	TE	U4	U1		Respite Unlic Level 3(1:1)Enh-LPN-No Benefit Allow-ECS-15 Mins
PAODP	ODP	W9863	TE	U4			Respite Unlic Level 3(1:1)Enh-LPN-No Benefit Allowance- 15 Mins
PAODP	ODP	W9863	TE				Respite Unlicensed Level 3 (1:1) Enhanced- LPN-15 Mins
PAODP	ODP	W9863	U1				Respite Unlicensed Level 3 (1:1) Enhanced-ECS-15 Mins
PAODP	ODP	W9863	U4	U1			Respite Unlic Level 3 (1:1) Enh-No Benefit Allowance-ECS- 15 Mins
PAODP	ODP	W9863	U4				Respite Unlic Level 3 (1:1) Enhanced-No Benefit Allowance-15 Mins
PAODP	ODP	W9863					Respite Unlicensed Level 3 (1:1) Enhanced-15 Mins
PAODP	ODP	W9864	U1				Respite Unlicensed Level 4 (2:1)-ECS-15 Mins
PAODP	ODP	W9864	U4	U1			Respite Unlic Level 4 (2:1)-No Benefit Allowance-ECS-15 Mins
PAODP	ODP	W9864	U4				Respite Unlicensed Level 4 (2:1)-No Benefit Allowance-15 Mins
PAODP	ODP	W9864					Respite Unlicensed Level 4 (2:1)-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAODP HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAODP	ODP	T2025	GN	U1			Speech/Language Therapy-15 Mins - ECS
PAODP	ODP	T2025	GN	U2			Speech/Language Therapy - 15 mins - AAW
PAODP	ODP	T2025	GN				Speech/Language Therapy-15 Mins
PAODP	ODP	T2025	GO	U1			Occupational Therapy-15 Mins - ECS
PAODP	ODP	T2025	GO	U2			Occupational Therapy - 15 mins - AAW
PAODP	ODP	T2025	GO				Occupational Therapy-15 Mins
PAODP	ODP	T2025	GP	U1			Physical Therapy-15 Mins - ECS
PAODP	ODP	T2025	GP				Physical Therapy-15 Mins
PAODP	ODP	T2025	HE				Therapies - Counseling
PAODP	ODP	T2025	TD	U1			Nursing - (1:1) RN-15 Mins -ECS
PAODP	ODP	T2025	TD	UN	U1		Nursing (1:2) RN -ECS
PAODP	ODP	T2025	TD	UN			Nursing (1:2) RN
PAODP	ODP	T2025	TD				Nursing - (1:1) RN-15 Mins
PAODP	ODP	T2025	TE	U1			Nursing - (1:1) LPN-15 Mins - ECS
PAODP	ODP	T2025	TE	UN	U1		Nursing (1:2) LPN - ECS
PAODP	ODP	T2025	TE	UN			Nursing (1:2) LPN
PAODP	ODP	T2025	TE				Nursing - (1:1) LPN-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAOLTL PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAOLTL	OLTL	S5150	TU				Respite - Consumer Overtime
PAOLTL	OLTL	S5150					Respite - Consumer
PAOLTL	OLTL	T1005					Respite - Agency
PAOLTL	OLTL	W1792	TU				Personal Assistance Services - Consumer Overtime
PAOLTL	OLTL	W1792					Personal Assistance Services - Consumer
PAOLTL	OLTL	W1793					Personal Assistance Services - Agency
PAOLTL	OLTL	W1900					Participant-Directed Community Supports

Payers, Program, Services, & Modifiers: Payer = PAOLTL HHCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAOLTL	OLTL	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAOLTL	OLTL	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAOLTL	OLTL	T2025	GN				Speech/Language Therapy-15 Mins
PAOLTL	OLTL	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAOLTL	OLTL	T2025	GO				Occupational Therapy-15 Mins
PAOLTL	OLTL	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAOLTL	OLTL	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAOMAP HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAOMAP	OMAP	92551					Screening Test, Pure Tone, Air Only
PAOMAP	OMAP	92552					Pure tone audiometry (threshold); Air Only
PAOMAP	OMAP	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAOMAP	OMAP	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAOMAP	OMAP	G0108					Diabetes Outpatient Training Service, individual
PAOMAP	OMAP	G0109					Diabetes Outpatient Training, group

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAOMAP	OMAP	G0151	UD	SC			Physical Therapy (Day 29 & beyond) by a PT, PE
PAOMAP	OMAP	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAOMAP	OMAP	G0151					Physical Therapy (Day 1-28) by a PT
PAOMAP	OMAP	G0152	UD	SC			Occupational Therapy (Day 29 & beyond) by a OT, PE
PAOMAP	OMAP	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAOMAP	OMAP	G0152					Occupational Therapy (Day 1-28) by a OT
PAOMAP	OMAP	G0153	UD	SC			Speech Therapy (Day 29 & beyond) by a ST, PE
PAOMAP	OMAP	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAOMAP	OMAP	G0153					Speech Therapy (Day 1-28) by a ST
PAOMAP	OMAP	G0156	U8	UD	SC		HHA visit to patient's home (Day 29 & beyond) by a HH Aide, PE
PAOMAP	OMAP	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAOMAP	OMAP	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAOMAP	OMAP	G0156	U7				Services of home health/hospice aide - 15 Mins
PAOMAP	OMAP	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAOMAP	OMAP	G0299	U8	UD	SC		HHA visit to a patient's home (Day 29 & beyond) by a RN, PE
PAOMAP	OMAP	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAOMAP	OMAP	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAOMAP	OMAP	G0300	U8	UD	SC		HHA visit to a patient's home (Day 29 & beyond) by a LPN, PE
PAOMAP	OMAP	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAOMAP	OMAP	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAOMAP	OMAP	S9123					Home Health - Nursing (RN), Hr
PAOMAP	OMAP	S9124					Home Health - Nursing (LPN), Hr
PAOMAP	OMAP	T1002					Home Health - Nursing (RN), 15 Mins
PAOMAP	OMAP	T1003					Home Health - Nursing (LPN), 15 Mins

Payers, Program, Services, & Modifiers: Payer = PAABH PCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAABH	PHC	S9122	TK				Aide In Home Care - Hr - TK
PAABH	PHC	S9122	TT				Aide In Home Care - Hr - TT
PAABH	PHC	S9122	TV				Aide In Home Care - Hr - TV
PAABH	PHC	S9122	U3				Aide In Home Care - Hr - U3
PAABH	PHC	S9122	UC				Aide In Home Care - Hr - UC
PAABH	PHC	S9122	UN				Aide In Home Care - Hr - UN
PAABH	PHC	S9122	UP				Aide In Home Care - Hr - UP
PAABH	PHC	S9122					Aide In Home Care - Hr
PAABH	PHC	T1019	TK				Aide In Home Care - 15 Mins - TK
PAABH	PHC	T1019	TT				Aide In Home Care - 15 Mins - TT
PAABH	PHC	T1019	TV				Aide In Home Care - 15 Mins - TV
PAABH	PHC	T1019	U3				Aide In Home Care - 15 Mins - U3
PAABH	PHC	T1019	UC				Aide In Home Care - 15 Mins - UC
PAABH	PHC	T1019	UN				Aide In Home Care - 15 Mins - UN
PAABH	PHC	T1019	UP				Aide In Home Care - 15 Mins - UP
PAABH	PHC	T1019					Aide In Home Care - 15 Mins

Payers, Program, Services, & Modifiers: Payer = PAACP PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAACP	CHC	S5150	TU				Respite - Consumer Overtime
PAACP	CHC	S5150					Respite - Consumer
PAACP	CHC	T1005					Respite - Agency
PAACP	CHC	W1792	TU				Personal Assistance Services - Consumer Overtime
PAACP	CHC	W1792					Personal Assistance Services - Consumer
PAACP	CHC	W1793					Personal Assistance Services - Agency
PAACP	CHC	W1900					Participant-Directed Community Supports

Payers, Program, Services, & Modifiers: Payer = PAACP HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAACP	CHC	92551					Screening Test, Pure Tone, Air Only
PAACP	CHC	92552					Pure tone audiometry (threshold); Air Only
PAACP	CHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAACP	CHC	99500					Home Visit Prenatal (Non HBP)
PAACP	CHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAACP	CHC	99501					Home Visit Postnatal (Non HBP)
PAACP	CHC	G0108					Diabetes Outpatient Training Service, individual
PAACP	CHC	G0109					Diabetes Outpatient Training, group
PAACP	CHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAACP	CHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAACP	CHC	G0151					Physical Therapy (Day 1-28) by a PT
PAACP	CHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAACP	CHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAACP	CHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAACP	CHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAACP	CHC	G0153					Speech Therapy (Day 1-28) by a ST
PAACP	CHC	G0154					HHCP - Svs of RN, EA 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAACP	CHC	G0155					Social Worker
PAACP	CHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAACP	CHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAACP	CHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAACP	CHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAACP	CHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAACP	CHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAACP	CHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAACP	CHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAACP	CHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAACP	CHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAACP	CHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAACP	CHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAACP	CHC	G0299					Dir SNS RN HH/Hospice Set
PAACP	CHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAACP	CHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAACP	CHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAACP	CHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAACP	CHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAACP	CHC	G0300					Dir SNS LPN HH/Hospice Set
PAACP	CHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAACP	CHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAACP	CHC	S9122	UD				Aide In Home Care - Hr - UD
PAACP	CHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAACP	CHC	S9123					Home Health - Nursing (RN), Hr
PAACP	CHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAACP	CHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAACP	CHC	S9124					Home Health - Nursing (LPN), Hr
PAACP	CHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAACP	CHC	S9127					Social Work Visit, In the Home, Per Diem

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAACP	CHC	S9128					Speech Therapy, In The Home
PAACP	CHC	S9129					Occupational Therapy, In The Home
PAACP	CHC	S9131					Physical Therapy, In The Home
PAACP	CHC	T1000	TT				Private Duty/Independent Nursing - TT
PAACP	CHC	T1000					Private Duty/Independent Nursing
PAACP	CHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAACP	CHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG

Payers, Program, Services, & Modifiers: Payer = PAACP HHCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAACP	CHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAACP	CHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAACP	CHC	T1002					Home Health - Nursing (RN), 15 Mins
PAACP	CHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAACP	CHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAACP	CHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAACP	CHC	T2025	GN				Speech/Language Therapy-15 Mins
PAACP	CHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAACP	CHC	T2025	GO				Occupational Therapy-15 Mins
PAACP	CHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAACP	CHC	T2025	GP				Physical Therapy-15 Mins
PAACP	CHC	T2025					Home Health Aide

Payers, Program, Services, & Modifiers: Payer = PAAHPH HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAAHPH	PHC	92551					Screening Test, Pure Tone, Air Only
PAAHPH	PHC	92552					Pure tone audiometry (threshold); Air Only
PAAHPH	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAAHPH	PHC	99500					Home Visit Prenatal (Non HBP)
PAAHPH	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAAHPH	PHC	99501					Home Visit Postnatal (Non HBP)
PAAHPH	PHC	G0108					Diabetes Outpatient Training Service, individual
PAAHPH	PHC	G0109					Diabetes Outpatient Training, group
PAAHPH	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAAHPH	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAAHPH	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAAHPH	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAAHPH	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAAHPH	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAAHPH	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAAHPH	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAAHPH	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAAHPH	PHC	G0155					Social Worker
PAAHPH	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAAHPH	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAAHPH	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAAHPH	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAAHPH	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAAHPH	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAAHPH	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAAHPH	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAAHPH	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAAHPH	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAADPH	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAADPH	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAADPH	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAADPH	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAADPH	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAADPH	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAADPH	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAADPH	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAADPH	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAADPH	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAADPH	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAADPH	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAADPH	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAADPH	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAADPH	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAADPH	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAADPH	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAADPH	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAADPH	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAADPH	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAADPH	PHC	G0299					Dir SNS RN HH/Hospice Set
PAADPH	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAADPH	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAADPH	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAADPH	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAADPH	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAADPH	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAADPH	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAADPH	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAADPH	PHC	S9122	UD				Aide In Home Care - Hr - UD

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAAHPH	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAAHPH	PHC	S9123					Home Health - Nursing (RN), Hr
PAAHPH	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAAHPH	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAAHPH	PHC	S9124					Home Health - Nursing (LPN), Hr
PAAHPH	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAAHPH	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAAHPH	PHC	S9128					Speech Therapy, In The Home
PAAHPH	PHC	S9129					Occupational Therapy, In The Home
PAAHPH	PHC	S9131					Physical Therapy, In The Home
PAAHPH	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAAHPH	PHC	T1000					Private Duty/Independent Nursing
PAAHPH	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAAHPH	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAAHPH	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAAHPH	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAAHPH	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAAHPH	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAAHPH	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAAHPH	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAAHPH	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAAHPH	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAAHPH	PHC	T2025	GO				Occupational Therapy-15 Mins
PAAHPH	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAAHPH	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAGEIS HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGEIS	PHC	92551					Screening Test, Pure Tone, Air Only
PAGEIS	PHC	92552					Pure tone audiometry (threshold); Air Only
PAGEIS	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAGEIS	PHC	99500					Home Visit Prenatal (Non HBP)
PAGEIS	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAGEIS	PHC	99501					Home Visit Postnatal (Non HBP)
PAGEIS	PHC	G0108					Diabetes Outpatient Training Service, individual
PAGEIS	PHC	G0109					Diabetes Outpatient Training, group
PAGEIS	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAGEIS	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAGEIS	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAGEIS	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAGEIS	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAGEIS	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAGEIS	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAGEIS	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAGEIS	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAGEIS	PHC	G0155					Social Worker
PAGEIS	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAGEIS	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAGEIS	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAGEIS	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAGEIS	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAGEIS	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAGEIS	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAGEIS	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAGEIS	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAGEIS	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGEIS	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAGEIS	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAGEIS	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAGEIS	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAGEIS	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAGEIS	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAGEIS	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAGEIS	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAGEIS	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAGEIS	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAGEIS	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAGEIS	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAGEIS	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAGEIS	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAGEIS	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAGEIS	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAGEIS	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAGEIS	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAGEIS	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAGEIS	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAGEIS	PHC	G0299					Dir SNS RN HH/Hospice Set
PAGEIS	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAGEIS	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAGEIS	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAGEIS	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAGEIS	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAGEIS	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAGEIS	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAGEIS	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAGEIS	PHC	S9122	UD				Aide In Home Care - Hr - UD

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGEIS	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAGEIS	PHC	S9123					Home Health - Nursing (RN), Hr
PAGEIS	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAGEIS	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAGEIS	PHC	S9124					Home Health - Nursing (LPN), Hr
PAGEIS	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAGEIS	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAGEIS	PHC	S9128					Speech Therapy, In The Home
PAGEIS	PHC	S9129					Occupational Therapy, In The Home
PAGEIS	PHC	S9131					Physical Therapy, In The Home
PAGEIS	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAGEIS	PHC	T1000					Private Duty/Independent Nursing
PAGEIS	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAGEIS	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAGEIS	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAGEIS	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAGEIS	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAGEIS	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAGEIS	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAGEIS	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAGEIS	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAGEIS	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAGEIS	PHC	T2025	GO				Occupational Therapy-15 Mins
PAGEIS	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAGEIS	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAGHP HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGHP	PHC	92551					Screening Test, Pure Tone, Air Only
PAGHP	PHC	92552					Pure tone audiometry (threshold); Air Only
PAGHP	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAGHP	PHC	99500					Home Visit Prenatal (Non HBP)
PAGHP	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAGHP	PHC	99501					Home Visit Postnatal (Non HBP)
PAGHP	PHC	G0108					Diabetes Outpatient Training Service, individual
PAGHP	PHC	G0109					Diabetes Outpatient Training, group
PAGHP	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAGHP	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAGHP	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAGHP	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAGHP	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAGHP	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAGHP	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAGHP	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAGHP	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAGHP	PHC	G0155					Social Worker
PAGHP	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAGHP	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAGHP	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAGHP	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAGHP	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAGHP	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAGHP	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAGHP	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAGHP	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAGHP	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGHP	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAGHP	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAGHP	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAGHP	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAGHP	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAGHP	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAGHP	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAGHP	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAGHP	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAGHP	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAGHP	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAGHP	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAGHP	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAGHP	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAGHP	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAGHP	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAGHP	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAGHP	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAGHP	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAGHP	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAGHP	PHC	G0299					Dir SNS RN HH/Hospice Set
PAGHP	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAGHP	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAGHP	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAGHP	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAGHP	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAGHP	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAGHP	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAGHP	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAGHP	PHC	S9122	UD				Aide In Home Care - Hr - UD

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAGHP	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAGHP	PHC	S9123					Home Health - Nursing (RN), Hr
PAGHP	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAGHP	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAGHP	PHC	S9124					Home Health - Nursing (LPN), Hr
PAGHP	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAGHP	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAGHP	PHC	S9128					Speech Therapy, In The Home
PAGHP	PHC	S9129					Occupational Therapy, In The Home
PAGHP	PHC	S9131					Physical Therapy, In The Home
PAGHP	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAGHP	PHC	T1000					Private Duty/Independent Nursing
PAGHP	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAGHP	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAGHP	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAGHP	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAGHP	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAGHP	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAGHP	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAGHP	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAGHP	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAGHP	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAGHP	PHC	T2025	GO				Occupational Therapy-15 Mins
PAGHP	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAGHP	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAHPP HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHPP	PHC	92551					Screening Test, Pure Tone, Air Only
PAHPP	PHC	92552					Pure tone audiometry (threshold); Air Only
PAHPP	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAHPP	PHC	99500					Home Visit Prenatal (Non HBP)
PAHPP	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAHPP	PHC	99501					Home Visit Postnatal (Non HBP)
PAHPP	PHC	G0108					Diabetes Outpatient Training Service, individual
PAHPP	PHC	G0109					Diabetes Outpatient Training, group
PAHPP	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAHPP	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAHPP	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAHPP	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAHPP	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAHPP	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAHPP	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAHPP	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAHPP	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAHPP	PHC	G0155					Social Worker
PAHPP	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAHPP	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAHPP	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAHPP	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAHPP	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAHPP	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAHPP	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAHPP	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAHPP	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAHPP	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHPP	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAHPP	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAHPP	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAHPP	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAHPP	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAHPP	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAHPP	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAHPP	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAHPP	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAHPP	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAHPP	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAHPP	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAHPP	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAHPP	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAHPP	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAHPP	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAHPP	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAHPP	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAHPP	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAHPP	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAHPP	PHC	G0299					Dir SNS RN HH/Hospice Set
PAHPP	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAHPP	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAHPP	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAHPP	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAHPP	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAHPP	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAHPP	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAHPP	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAHPP	PHC	S9122	UD				Aide In Home Care - Hr - UD

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHPP	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAHPP	PHC	S9123					Home Health - Nursing (RN), Hr
PAHPP	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAHPP	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAHPP	PHC	S9124					Home Health - Nursing (LPN), Hr
PAHPP	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAHPP	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAHPP	PHC	S9128					Speech Therapy, In The Home
PAHPP	PHC	S9129					Occupational Therapy, In The Home
PAHPP	PHC	S9131					Physical Therapy, In The Home
PAHPP	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAHPP	PHC	T1000					Private Duty/Independent Nursing
PAHPP	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAHPP	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAHPP	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAHPP	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAHPP	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAHPP	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAHPP	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAHPP	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAHPP	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAHPP	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAHPP	PHC	T2025	GO				Occupational Therapy-15 Mins
PAHPP	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAHPP	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAHW PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHW	CHC	S5150	TU				Respite - Consumer Overtime
PAHW	CHC	S5150					Respite - Consumer
PAHW	CHC	T1005					Respite - Agency
PAHW	CHC	W1792	TU				Personal Assistance Services - Consumer Overtime
PAHW	CHC	W1792					Personal Assistance Services - Consumer
PAHW	CHC	W1793					Personal Assistance Services - Agency
PAHW	CHC	W1900					Participant-Directed Community Supports

Payers, Program, Services, & Modifiers: Payer = PAHW HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHW	CHC	92551					Screening Test, Pure Tone, Air Only
PAHW	CHC	92552					Pure tone audiometry (threshold); Air Only
PAHW	CHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAHW	CHC	99500					Home Visit Prenatal (Non HBP)
PAHW	CHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAHW	CHC	99501					Home Visit Postnatal (Non HBP)
PAHW	CHC	G0108					Diabetes Outpatient Training Service, individual
PAHW	CHC	G0109					Diabetes Outpatient Training, group
PAHW	CHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAHW	CHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAHW	CHC	G0151					Physical Therapy (Day 1-28) by a PT
PAHW	CHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAHW	CHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAHW	CHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAHW	CHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAHW	CHC	G0153					Speech Therapy (Day 1-28) by a ST
PAHW	CHC	G0154					HHCP - Svs of RN, EA 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHW	CHC	G0155					Social Worker
PAHW	CHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAHW	CHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAHW	CHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAHW	CHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAHW	CHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAHW	CHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAHW	CHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAHW	CHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAHW	CHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAHW	CHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAHW	CHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAHW	CHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAHW	CHC	G0299					Dir SNS RN HH/Hospice Set
PAHW	CHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAHW	CHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAHW	CHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAHW	CHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAHW	CHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAHW	CHC	G0300					Dir SNS LPN HH/Hospice Set
PAHW	CHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAHW	CHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAHW	CHC	S9122	UD				Aide In Home Care - Hr - UD
PAHW	CHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAHW	CHC	S9123					Home Health - Nursing (RN), Hr
PAHW	CHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAHW	CHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAHW	CHC	S9124					Home Health - Nursing (LPN), Hr
PAHW	CHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAHW	CHC	S9127					Social Work Visit, In the Home, Per Diem

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHW	CHC	S9128					Speech Therapy, In The Home
PAHW	CHC	S9129					Occupational Therapy, In The Home
PAHW	CHC	S9131					Physical Therapy, In The Home
PAHW	CHC	T1000	TT				Private Duty/Independent Nursing - TT
PAHW	CHC	T1000					Private Duty/Independent Nursing
PAHW	CHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAHW	CHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG

Payers, Program, Services, & Modifiers: Payer = PAHW HHCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAHW	CHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAHW	CHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAHW	CHC	T1002					Home Health - Nursing (RN), 15 Mins
PAHW	CHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAHW	CHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAHW	CHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAHW	CHC	T2025	GN				Speech/Language Therapy-15 Mins
PAHW	CHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAHW	CHC	T2025	GO				Occupational Therapy-15 Mins
PAHW	CHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAHW	CHC	T2025	GP				Physical Therapy-15 Mins
PAHW	CHC	T2025					Home Health Aide

Payers, Program, Services, & Modifiers: Payer = PAKF PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	S5150	TU				Respite - Consumer Overtime
PAKF	CHC	S5150					Respite - Consumer

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	T1005					Respite - Agency
PAKF	CHC	W1792	TU				Personal Assistance Services - Consumer Overtime
PAKF	CHC	W1792					Personal Assistance Services - Consumer
PAKF	CHC	W1793					Personal Assistance Services - Agency
PAKF	CHC	W1900					Participant-Directed Community Supports

Payers, Program, Services, & Modifiers: Payer = PAKF HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	92551					Screening Test, Pure Tone, Air Only
PAKF	CHC	92552					Pure tone audiometry (threshold); Air Only
PAKF	CHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAKF	CHC	99500					Home Visit Prenatal (Non HBP)
PAKF	CHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAKF	CHC	99501					Home Visit Postnatal (Non HBP)
PAKF	CHC	G0108					Diabetes Outpatient Training Service, individual
PAKF	CHC	G0109					Diabetes Outpatient Training, group
PAKF	CHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAKF	CHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAKF	CHC	G0151					Physical Therapy (Day 1-28) by a PT
PAKF	CHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAKF	CHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAKF	CHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAKF	CHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAKF	CHC	G0153					Speech Therapy (Day 1-28) by a ST
PAKF	CHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAKF	CHC	G0155					Social Worker
PAKF	CHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAKF	CHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAKF	CHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAKF	CHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAKF	CHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAKF	CHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAKF	CHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAKF	CHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAKF	CHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAKF	CHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAKF	CHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAKF	CHC	G0299					Dir SNS RN HH/Hospice Set
PAKF	CHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAKF	CHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAKF	CHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAKF	CHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAKF	CHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAKF	CHC	G0300					Dir SNS LPN HH/Hospice Set
PAKF	CHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAKF	CHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAKF	CHC	S9122	UD				Aide In Home Care - Hr - UD
PAKF	CHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAKF	CHC	S9123					Home Health - Nursing (RN), Hr
PAKF	CHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAKF	CHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAKF	CHC	S9124					Home Health - Nursing (LPN), Hr
PAKF	CHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAKF	CHC	S9127					Social Work Visit, In the Home, Per Diem
PAKF	CHC	S9128					Speech Therapy, In The Home
PAKF	CHC	S9129					Occupational Therapy, In The Home
PAKF	CHC	S9131					Physical Therapy, In The Home

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	T1000	TT				Private Duty/Independent Nursing - TT
PAKF	CHC	T1000					Private Duty/Independent Nursing
PAKF	CHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAKF	CHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG

Payers, Program, Services, & Modifiers: Payer = PAKF HHCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKF	CHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAKF	CHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAKF	CHC	T1002					Home Health - Nursing (RN), 15 Mins
PAKF	CHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAKF	CHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAKF	CHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAKF	CHC	T2025	GN				Speech/Language Therapy-15 Mins
PAKF	CHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAKF	CHC	T2025	GO				Occupational Therapy-15 Mins
PAKF	CHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAKF	CHC	T2025	GP				Physical Therapy-15 Mins
PAKF	CHC	T2025					Home Health Aide

Payers, Program, Services, & Modifiers: Payer = PAKPH HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKPH	PHC	92551					Screening Test, Pure Tone, Air Only
PAKPH	PHC	92552					Pure tone audiometry (threshold); Air Only
PAKPH	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAKPH	PHC	99500					Home Visit Prenatal (Non HBP)
PAKPH	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKPH	PHC	99501					Home Visit Postnatal (Non HBP)
PAKPH	PHC	G0108					Diabetes Outpatient Training Service, individual
PAKPH	PHC	G0109					Diabetes Outpatient Training, group
PAKPH	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAKPH	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAKPH	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAKPH	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAKPH	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAKPH	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAKPH	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAKPH	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAKPH	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAKPH	PHC	G0155					Social Worker
PAKPH	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAKPH	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAKPH	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAKPH	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAKPH	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAKPH	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAKPH	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAKPH	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAKPH	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAKPH	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins
PAKPH	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAKPH	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAKPH	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAKPH	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAKPH	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAKPH	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAKPH	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKPH	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAKPH	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAKPH	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAKPH	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAKPH	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAKPH	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAKPH	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAKPH	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAKPH	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAKPH	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAKPH	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAKPH	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAKPH	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAKPH	PHC	G0299					Dir SNS RN HH/Hospice Set
PAKPH	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAKPH	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAKPH	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAKPH	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAKPH	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAKPH	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAKPH	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAKPH	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAKPH	PHC	S9122	UD				Aide In Home Care - Hr - UD
PAKPH	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAKPH	PHC	S9123					Home Health - Nursing (RN), Hr
PAKPH	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAKPH	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAKPH	PHC	S9124					Home Health - Nursing (LPN), Hr
PAKPH	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAKPH	PHC	S9127					Social Work Visit, In the Home, Per Diem

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAKPH	PHC	S9128					Speech Therapy, In The Home
PAKPH	PHC	S9129					Occupational Therapy, In The Home
PAKPH	PHC	S9131					Physical Therapy, In The Home
PAKPH	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAKPH	PHC	T1000					Private Duty/Independent Nursing
PAKPH	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAKPH	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAKPH	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAKPH	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAKPH	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAKPH	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAKPH	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAKPH	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAKPH	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAKPH	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAKPH	PHC	T2025	GO				Occupational Therapy-15 Mins
PAKPH	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAKPH	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAUHC HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUHC	PHC	92551					Screening Test, Pure Tone, Air Only
PAUHC	PHC	92552					Pure tone audiometry (threshold); Air Only
PAUHC	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAUHC	PHC	99500					Home Visit Prenatal (Non HBP)
PAUHC	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAUHC	PHC	99501					Home Visit Postnatal (Non HBP)
PAUHC	PHC	G0108					Diabetes Outpatient Training Service, individual

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUHC	PHC	G0109					Diabetes Outpatient Training, group
PAUHC	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAUHC	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAUHC	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAUHC	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAUHC	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAUHC	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAUHC	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAUHC	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAUHC	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAUHC	PHC	G0155					Social Worker
PAUHC	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAUHC	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAUHC	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAUHC	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAUHC	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAUHC	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAUHC	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAUHC	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAUHC	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAUHC	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins
PAUHC	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAUHC	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAUHC	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAUHC	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAUHC	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAUHC	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAUHC	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAUHC	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAUHC	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUHC	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAUHC	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAUHC	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAUHC	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAUHC	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP
PAUHC	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAUHC	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAUHC	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAUHC	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAUHC	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAUHC	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAUHC	PHC	G0299					Dir SNS RN HH/Hospice Set
PAUHC	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAUHC	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAUHC	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAUHC	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAUHC	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAUHC	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAUHC	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAUHC	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAUHC	PHC	S9122	UD				Aide In Home Care - Hr - UD
PAUHC	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAUHC	PHC	S9123					Home Health - Nursing (RN), Hr
PAUHC	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAUHC	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAUHC	PHC	S9124					Home Health - Nursing (LPN), Hr
PAUHC	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAUHC	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAUHC	PHC	S9128					Speech Therapy, In The Home
PAUHC	PHC	S9129					Occupational Therapy, In The Home

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUHC	PHC	S9131					Physical Therapy, In The Home
PAUHC	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAUHC	PHC	T1000					Private Duty/Independent Nursing
PAUHC	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAUHC	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAUHC	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAUHC	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAUHC	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAUHC	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAUHC	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAUHC	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAUHC	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAUHC	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAUHC	PHC	T2025	GO				Occupational Therapy-15 Mins
PAUHC	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAUHC	PHC	T2025	GP				Physical Therapy-15 Mins

Payers, Program, Services, & Modifiers: Payer = PAUPMC PCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	EVV Service Description
PAUPMC	CHC	S5150	TU				Respite - Consumer Overtime
PAUPMC	CHC	S5150					Respite - Consumer
PAUPMC	CHC	T1005					Respite - Agency
PAUPMC	CHC	W1792	TU				Personal Assistance Services - Consumer Overtime
PAUPMC	CHC	W1792					Personal Assistance Services - Consumer
PAUPMC	CHC	W1793					Personal Assistance Services - Agency
PAUPMC	CHC	W1900					Participant-Directed Community Supports

Payers, Program, Services, & Modifiers: Payer = PAUPMC HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPMC	CHC	92551					Screening Test, Pure Tone, Air Only
PAUPMC	CHC	92552					Pure tone audiometry (threshold); Air Only
PAUPMC	CHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAUPMC	CHC	99500					Home Visit Prenatal (Non HBP)
PAUPMC	CHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAUPMC	CHC	99501					Home Visit Postnatal (Non HBP)
PAUPMC	CHC	G0108					Diabetes Outpatient Training Service, individual
PAUPMC	CHC	G0109					Diabetes Outpatient Training, group
PAUPMC	CHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAUPMC	CHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAUPMC	CHC	G0151					Physical Therapy (Day 1-28) by a PT
PAUPMC	CHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins
PAUPMC	CHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAUPMC	CHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAUPMC	CHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAUPMC	CHC	G0153					Speech Therapy (Day 1-28) by a ST
PAUPMC	CHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAUPMC	CHC	G0155					Social Worker
PAUPMC	CHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAUPMC	CHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAUPMC	CHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAUPMC	CHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAUPMC	CHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAUPMC	CHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAUPMC	CHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAUPMC	CHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAUPMC	CHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAUPMC	CHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPMC	CHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAUPMC	CHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAUPMC	CHC	G0299					Dir SNS RN HH/Hospice Set
PAUPMC	CHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAUPMC	CHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAUPMC	CHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAUPMC	CHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAUPMC	CHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAUPMC	CHC	G0300					Dir SNS LPN HH/Hospice Set
PAUPMC	CHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAUPMC	CHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAUPMC	CHC	S9122	UD				Aide In Home Care - Hr - UD
PAUPMC	CHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAUPMC	CHC	S9123					Home Health - Nursing (RN), Hr
PAUPMC	CHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAUPMC	CHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAUPMC	CHC	S9124					Home Health - Nursing (LPN), Hr
PAUPMC	CHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAUPMC	CHC	S9127					Social Work Visit, In the Home, Per Diem
PAUPMC	CHC	S9128					Speech Therapy, In The Home
PAUPMC	CHC	S9129					Occupational Therapy, In The Home
PAUPMC	CHC	S9131					Physical Therapy, In The Home
PAUPMC	CHC	T1000	TT				Private Duty/Independent Nursing - TT
PAUPMC	CHC	T1000					Private Duty/Independent Nursing
PAUPMC	CHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAUPMC	CHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG

Payers, Program, Services, & Modifiers: Payer = PAUPMC HHCS (Use MPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPMC	CHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAUPMC	CHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT
PAUPMC	CHC	T1002					Home Health - Nursing (RN), 15 Mins
PAUPMC	CHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAUPMC	CHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAUPMC	CHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAUPMC	CHC	T2025	GN				Speech/Language Therapy-15 Mins
PAUPMC	CHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAUPMC	CHC	T2025	GO				Occupational Therapy-15 Mins
PAUPMC	CHC	T2025	GP	U4			Physical Therapy Assistant - 15 Mins
PAUPMC	CHC	T2025	GP				Physical Therapy-15 Mins
PAUPMC	CHC	T2025					Home Health Aide

Payers, Program, Services, & Modifiers: Payer = PAUPPH HHCS (Use NPI only)

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPPH	PHC	92551					Screening Test, Pure Tone, Air Only
PAUPPH	PHC	92552					Pure tone audiometry (threshold); Air Only
PAUPPH	PHC	99500	AT				Home Visit Prenatal (Non HBP) Assessment
PAUPPH	PHC	99500					Home Visit Prenatal (Non HBP)
PAUPPH	PHC	99501	AT				Home Visit Postnatal (Non HBP) Follow-up Care
PAUPPH	PHC	99501					Home Visit Postnatal (Non HBP)
PAUPPH	PHC	G0108					Diabetes Outpatient Training Service, individual
PAUPPH	PHC	G0109					Diabetes Outpatient Training, group
PAUPPH	PHC	G0151	U8				HHCP-SERV OF PT,EA 15 Mins
PAUPPH	PHC	G0151	UD				Physical Therapy (Day 29 and beyond) by a PT
PAUPPH	PHC	G0151					Physical Therapy (Day 1-28) by a PT
PAUPPH	PHC	G0152	U8				HHCP-SERV OF OT,EA 15 Mins

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPPH	PHC	G0152	UD				Occupational Therapy (Day 29 and beyond) by a OT
PAUPPH	PHC	G0152					Occupational Therapy (Day 1-28) by a OT
PAUPPH	PHC	G0153	UD				Speech Therapy (Day 29 and beyond) by a ST
PAUPPH	PHC	G0153					Speech Therapy (Day 1-28) by a ST
PAUPPH	PHC	G0154					HHCP - Svs of RN, EA 15 Mins
PAUPPH	PHC	G0155					Social Worker
PAUPPH	PHC	G0156	AT				Aide in Home Health or Hospice - 15 Mins - AT
PAUPPH	PHC	G0156	TT				Aide in Home Health or Hospice - 15 Mins - TT
PAUPPH	PHC	G0156	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a HH Aide
PAUPPH	PHC	G0156	U8				HHA visit to patient's home (Day 1-28) by a HH Aide
PAUPPH	PHC	G0156	U9				Aide in Home Health or Hospice - 15 Mins - U9
PAUPPH	PHC	G0156	UD				Aide in Home Health or Hospice - 15 Mins - UD
PAUPPH	PHC	G0156					Aide in Home Health or Hospice - 15 Mins
PAUPPH	PHC	G0156	U8	TT			HHA visit to patient's home (Days 1-28) by home health aide - TT
PAUPPH	PHC	G0156	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by HH aide-TT
PAUPPH	PHC	G0156	U7				Services of home health/hospice aide - 15 Mins
PAUPPH	PHC	G0156	U7	UC			Services of home health/hospice aide - 15 Mins - UC
PAUPPH	PHC	G0156	U7	U3			Services of home health/hospice aide - 15 Mins - U3
PAUPPH	PHC	G0156	U7	TT			Services of home health/hospice aide - 15 Mins - TT
PAUPPH	PHC	G0156	U7	UN			Services of home health/hospice aide - 15 Mins - UN
PAUPPH	PHC	G0156	U7	UP			Services of home health/hospice aide - 15 Mins - UP
PAUPPH	PHC	G0156	U7	TV			Services of home health/hospice aide - 15 Mins - TV
PAUPPH	PHC	G0156	U7	TK			Services of home health/hospice aide - 15 Mins - TK
PAUPPH	PHC	G0156	U7	TG			Services of home health/hospice aide - 15 Mins - TG
PAUPPH	PHC	G0156	U7	SC			Services of home health/hospice aide - LRR - 15 Mins
PAUPPH	PHC	G0156	U7	SC	UC		Services of home health/hospice aide - LRR - 15 Mins - UC
PAUPPH	PHC	G0156	U7	SC	U3		Services of home health/hospice aide - LRR - 15 Mins - U3
PAUPPH	PHC	G0156	U7	SC	TT		Services of home health/hospice aide - LRR - 15 Mins - TT
PAUPPH	PHC	G0156	U7	SC	UN		Services of home health/hospice aide - LRR - 15 Mins - UN
PAUPPH	PHC	G0156	U7	SC	UP		Services of home health/hospice aide - LRR - 15 Mins - UP

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPPH	PHC	G0156	U7	SC	TV		Services of home health/hospice aide - LRR - 15 Mins - TV
PAUPPH	PHC	G0156	U7	SC	TK		Services of home health/hospice aide - LRR - 15 Mins - TK
PAUPPH	PHC	G0156	U7	SC	TG		Services of home health/hospice aide - LRR - 15 Mins - TG
PAUPPH	PHC	G0299	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a RN
PAUPPH	PHC	G0299	U8				HHA visit to a patient's home (Day 1-28) by a RN
PAUPPH	PHC	G0299	UB				Dir SNS RN HH/Hospice Set - UB
PAUPPH	PHC	G0299					Dir SNS RN HH/Hospice Set
PAUPPH	PHC	G0299	U8	TT			HHA visit to a patient's home (day 1-28) by a RN - TT
PAUPPH	PHC	G0299	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a RN - TT
PAUPPH	PHC	G0300	U8	UD			HHA visit to patient's home (Day 29 and beyond) by a LPN
PAUPPH	PHC	G0300	U8				HHA visit to a patient's home (Day 1-28) by a LPN
PAUPPH	PHC	G0300	UB				Dir SNS LPN HH/Hospice Set - UB
PAUPPH	PHC	G0300					Dir SNS LPN HH/Hospice Set
PAUPPH	PHC	G0300	U8	TT			HHA visit to a patient's home (day 1-28) by a LPN - TT
PAUPPH	PHC	G0300	U8	UD	TT		HHA visit to patient's home (29th day and beyond) by a LPN - TT
PAUPPH	PHC	S9122	UD				Aide In Home Care - Hr - UD
PAUPPH	PHC	S9123	TT				Home Health - Nursing (RN), Hr - TT
PAUPPH	PHC	S9123					Home Health - Nursing (RN), Hr
PAUPPH	PHC	S9123	TG				Home Health - Nursing (RN), Hr - TG
PAUPPH	PHC	S9124	TT				Home Health - Nursing (LPN), Hr - TT
PAUPPH	PHC	S9124					Home Health - Nursing (LPN), Hr
PAUPPH	PHC	S9124	TG				Home Health - Nursing (LPN), Hr - TG
PAUPPH	PHC	S9127					Social Work Visit, In the Home, Per Diem
PAUPPH	PHC	S9128					Speech Therapy, In The Home
PAUPPH	PHC	S9129					Occupational Therapy, In The Home
PAUPPH	PHC	S9131					Physical Therapy, In The Home
PAUPPH	PHC	T1000	TT				Private Duty/Independent Nursing - TT
PAUPPH	PHC	T1000					Private Duty/Independent Nursing
PAUPPH	PHC	T1002	SE				Home Health - Nursing (RN), 15 Mins - SE
PAUPPH	PHC	T1002	TT				Home Health - Nursing (RN), 15 Mins - TT

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Description
PAUPPH	PHC	T1002					Home Health - Nursing (RN), 15 Mins
PAUPPH	PHC	T1002	TG				Home Health - Nursing (RN), 15 Mins - TG
PAUPPH	PHC	T1003	SE				Home Health - Nursing (LPN), 15 Mins - SE
PAUPPH	PHC	T1003	TT				Home Health - Nursing (LPN), 15 Mins - TT
PAUPPH	PHC	T1003					Home Health - Nursing (LPN), 15 Mins
PAUPPH	PHC	T1003	TG				Home Health - Nursing (LPN), 15 Mins - TG
PAUPPH	PHC	T2025	GN				Speech/Language Therapy-15 Mins
PAUPPH	PHC	T2025	GO	U4			Home Health - Occupational Therapy Assist.
PAUPPH	PHC	T2025	GO				Occupational Therapy-15 Mins
PAUPPH	PHC	T2025	GP	U4			Physical Therapy Assistant -15 Mins
PAUPPH	PHC	T2025	GP				Physical Therapy-15 Mins

9.2 Reason Codes

Reason Code	Description	Memo Required
10	Direct Care Worker Error	No
20	Participant Unavailable	No
30	Mobile Device Issue	No
40	Telephony Issue	No
50	Participant Refusal	Yes
60	Service Outside the Home	No
70	Other	Yes

9.3 Exceptions

Exception Code	Acknowledge/Fix	Exception Name	Description
0	Fix: Resubmit visit	Unknown Client	Exception for a visit that was performed for a recipient of care that is not yet entered or not found in the EVV system. Note: Visit data will reject on intake. Client on visit must match to an existing client within the distinct Provider Agency Account.
1	Fix: Resubmit visit	Unknown Employee	(Telephony only) Exception for a visit that was performed by a caregiver who was not yet entered or not found in the EVV system (At the time the visit was recorded). Note: Visit data will reject on intake. Client on visit must match to an existing client within the distinct Provider Agency Account.
3	Fix: Resubmit visit	Visits Without In-Calls	Exception thrown when a visit is recorded without an "in" call that began the visit. Note: All visits will require the Call segment to be provided.
4	Fix: Resubmit visit	Visits Without Out-Calls	Exception thrown when a visit is recorded without an "out" call that completed the visit. Note: All visits will require the Call segment to be provided.
15	Acknowledge: submit VisitExceptionAcknowledgement segment	Unmatched Client ID / Phone	(Telephony only) Exception when the visit was recorded from a phone number that was not matched to a recipient of care in the EVV system.
23	Fix: Resubmit visit	Missing Service	Exception when the service provided during a visit is not recorded or present in the system. Note: Visit data will reject if the inbound service (ProcedureCode) does not match a record defined in the specification Appendix.

9.4 Employee Identifier Vendor Prefix Codes

Vendor	Prefix for Employee Identifier
ABC SRCM	AB
ABRIO	AR
ABS	BS
ACCEL	AC
ACCUPOINT	AP
ACUMEN	AM
AdaCare	AD
ADP	DP
AIDETECH	AT
ALAYACARE	AY
ALLEGHENY	AG
ALORA PLUS	AL
AMPERSAND	AS
ANKOTA	AK
ANNKISSAM	AN
ANS	AZ
AQUILA SOFTWARE	AQ
ASSURICARE	AI
ATTENTIONPLUSCARE	AE
AUGUSTSYS	AU
AUTOVISIT	AO
AVEANNA	AV
AXISCARE	AX
AXXESS	AF
AYMIRA	AA
BARNESTORM	BA
BAYADA	BY

Vendor	Prefix for Employee Identifier
HOME CARE SOFTWARE	HS
HOMECARE IT	HO
HORIZON INFORMATION	HI
IHEALTHHOME	IH
INTEGRATED DB SYS	IN
INTELLINETICS	IT
ITHERAPY DOCS	ID
JOTFORM	JT
JULISOFT	JL
KALEIDA	KL
KALEIDOSCOPE	KS
KANTIME	KT
KDG	KD
KICHI CODE	KI
LEAF	LE
LOGICIEL TECHNOLOGY	LG
LOVELYCARE	LV
MATRIX CARE	MC
MAXIMCARE MOBILE	MX
MCKESSON	MK
MEASUREPM	MP
MEDFORALL	MF
MEDREFORM	MR
MEDSKED	MD
MEDSYS	MS
MID LLC	MI
MITC	MT

Vendor	Prefix for Employee Identifier
BETHESDA LC	BE
BILLIYO	BI
BRIGHTTREE	BR
BRIGHTSTAR	BS
BRITTCO	BT
CARECENTA	CA
CAREFICIENT	CF
CAREGIVER BY GT	CG
CARESMARTZ360	CR
CARETIME	CE
CAREVOYANT	CV
CAREWATCH	CW
CAREWHEN	CN
CASAMBA	CS
CELLTRAK	CT
CENTRALREACH	CL
CLEARCARE	CC
CLISTAHR TECH	CI
CLOCKINCLOCKOUT	CO
CLOUDQUEST	CQ
COMPLIA HEALTH	CH
CONNECT-A-VOICE	CJ
CONTINULINK	CU
COUPSELL	CP
CREDIBLE	CD
CRESCENDO	
CONNECT	CE
CUBHUB	CB

Vendor	Prefix for Employee Identifier
NETSMART	NS
NOTEEFIED	NO
OASIS TECHNOLOGIES	OT
ONE TIME HOME CARE	ON
OPTONOME	OP
OnTarget by Abound Health	AH
PALCO	PL
PANDA	PN
POINTCLICKCARE	PC
POST-EVV	PE
PPL	PP
PRIMARY SOLUTIONS	PS
PRIMECARETECH	PT
PSNET	PB
QUANTUM SOLUTIONS	QS
RAINTREE SYSTEMS	RT
RIVERSOFT	RS
ROSEMARK	RM
SANDATA AGENCY MGMT	SA
SAVII	SV
SCL HEALTH	SC
SEMBRACARE	SM
SETWORKS	SW
SHOSHANA	SH
SMARTCARE	SR
SOFTIYA	SF
SOLANA	SL

Vendor	Prefix for Employee Identifier
CYBERWOLF	CY
DCI	DI
DD REPORTS	DD
DELTA HEALTH TECH	DH
DESERTLAB	DS
DIRECT CARE	DC
DOCUMENTOR	DO
EPIC	EP
ERSP	ER
E-SYSTEM	ES
EVERGREENELM	EV
EVVPLUS	EL
EWEBSCHEDULE	EW
FMSEngine	FM
FORMDOX EVV MOBILE	FX
FORTYAU	FT
GENERATIONS	GN
GEOH	GE
GOOD NEIGHBOR	GD
GRAY SWAN SOFTWARE	GR
GUARDIANTRAC	GT
HALO	HA
HCHB	HC
HHAX	HH

Vendor	Prefix for Employee Identifier
SPOKECHOICE	SP
STONE BELT ARC	SB
STRYKER	ST
SWYFTOPS	SO
TANGRA	TG
THE MENTOR NETWORK	TM
THERAP	TH
THERAPY CORNER	TC
THINKHEALTH	TK
TIMETRACK	TT
TOPSTEP	TP
TRUETRAK	SS
UNICENTRIC	UC
UNISON WORKFORCE	UW
VERTEX	VX
VISITCALL	VC
VTRACK	VT
WEBABA	WB
Welligent	WI
WELLSKY	WS
WIN SOLUTIONS	WN
XOOMIA	XO
XYPFR	XY
YWCA	YW
ZCO	ZC

9.5 Acronyms & Definitions

Abbreviation	Name
AKA	Also Known As
API	Application Programming Interface
GMT	Greenwich Mean Time
HTTP	Hyper Text Transfer Protocol
TBD	To Be Determined
UTC	Universal Time Coordinated

9.6 Terminology

Sandata Terminology	Other Possible References
Agency	Agency Provider Provider Account Billing Agency
Authorization	Service Plan Prior Auth
Client	Individual Patient Member Recipient Beneficiary
Contract	Program Program Code
Employee	Caregiver Admin
HCPCS	Healthcare Common Procedure Coding System
Payer	Admission Insurance Company Contract Managed Care Organization (MCO) State
Provider	Agency Third-Party Administrator (TPA)

9.7 Field Level Errors

Section	Field Name	Description
Client General	ClientFirstName	Only the following special character will be accepted: Alpha Letters Hyphens Periods Apostrophe All other special characters will be rejected.
Client General	ClientLastName	Only the following special character will be accepted: Alpha Letters Hyphens Periods Apostrophe All other special characters will be rejected.
Client General	ClientQualifier	The value is the actual string value "ClientQualifier" and is required to be mixed case.
Employee General	EmployeeLastName	Only the following special character will be accepted: Alpha Letters Hyphens Periods Apostrophe All other special characters will be rejected.
Employee General	EmployeeFirstName	Only the following special character will be accepted: Alpha Letters Hyphens Periods Apostrophe All other special characters will be rejected.
Employee General	EmployeeQualifier	The value is the actual string value "EmployeeQualifier" and is required to be mixed case.

9.8 Time Zone List

This is the common list of time zone we used. If your area is not covered by this list, please contact Sandata support to get additional time zone value that we accept. Please note that the value sent must exactly match the value and case shown.

Text Value	Daylight Saving
US/Alaska	Active
US/Aleutian	Active
US/Arizona	Inactive
US/Central	Active
US/East-Indiana	Active
US/Eastern	Active
US/Hawaii	Inactive
US/Indiana-Starke	Active
US/Michigan	Active
US/Mountain	Active
US/Pacific	Active
US/Samoa	Inactive
America/Indiana/Indianapolis	Active
America/Indiana/Knox	Active
America/Indiana/Marengo	Active
America/Indiana/Petersburg	Active
America/Indiana/Vevay	Active
America/Indiana/Vincennes	Active