Sandata TECHNOLOGIES

REQUIREMENT SPECIFICATION

for Receipt of Alternate Electronic Visit Verification Systems Data (altEVV)

Part of the Open EVV Series of Interfaces

Version 4.9.1

Version Update

Name	Title	Changes	Date
Ajay Bagga	Product Delivery Owner	Document Created	12.07.2017
Arushan Davydov	Dir. Business System Analysis	1. Reviewed	12.27.2017
Judy Ross	VP Technical Product Management	Final Review	01.11.2018
Ajay Bagga	Product Delivery Owner	Added 1 new field in the visit element	05.30.2018
Ajay Bagga	Product Delivery Owner	Added fields in the Client element and Visit element	07.18.2018
Ajay Bagga	Product Delivery Owner	Updated XML structure and attribute. Changed version to 4.7	08.30.2018
Ajay Bagga	Product Delivery Owner	Added IsPatientNewBorn field to the patient element Fixed XML Structure	08.01.2018
Ajay Bagga	Product Delivery Owner	Added ClientPayerID in the Client Payer Information element and updated the XML structure	08.07.2018
Ajay Bagga	Product Delivery Owner	ProviderID length was updated to 50 STRING	08.14.2018
Ajay Bagga	Product Delivery Owner	Added Modifiers to Visit General	08.21.2018
Ajay Bagga	Product Delivery Owner	Changed SequenceID to be Number from STRING	08.29.2018
Ajay Bagga	Product Delivery Owner	Changed type for SequenceID field	09.24.2018
Ajay Bagga	Product Delivery Owner	Removed elements- Message Acknowledgement and Response for Record Status Changed version to 5.4	09.24.2018
Ajay Bagga	Product Delivery Owner	Fixed spelling error for ExceptionAcknowledged Updated length and description for TelephonyPIN Updated document version to 5.6	09.26.2018
Ajay Bagga	Product Delivery Owner	Added ClientIDQualifier in the Visit General Information element	10.02.2018
Ajay Bagga	Product Delivery Owner	Added EmployeeIDQualifier in the Visit General Information element	10.03.2018

Name	Title	Changes	Date
Derek P. Granquist (DXC)	IT Analyst	Update for minor grammatical errors noted by State client	10.11.2018
Michael Valentin	CTO	Updated required fields tables to match formatting and content used in previous specification versions (added columns for Index and Required). Clarified and confirmed various field descriptions Moved Message Ack and Record Status Response to section 1.x	10.17.2018
Judy Ross / Michael Valentin	SVP Solution Enablement / Edits	Answer questions, cleanup	10-30-2018
Judy Ross	SVP Solution Enablement	Group – Final Edits Final Cleanup Updated version to 4.9	10-31-2018
Jennifer Demory	Payer Implemenation	Final cleanup of suggested edits from DXC	12/7/2018
Pamela Brooks	Product Management	V4.9.1 added clarifying language on pg. 9 regarding exception resolution.	02.24.2020

1. 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.

This interface includes clients, employees, visits, and their associated calls as well as the ability to send data related to visit modifications.

A companion guide will be created for each Payer / Program implemented to specify agreed upon frequencies, additional required fields and those fields which will be omitted or left to the sender's discretion.

1.1. Intended Audience

The intended audience of this document is:
- Project Management and Technical teams at Sandata.
- Project Management and Technical teams at designated Providers/Vendors who will be implementing this interface.

1.2. 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 that rejection responses will be delivered on a separate API call that is initiated by the third-party—in near real time.

1.3. 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.

1.4. Document Conventions

DateTime format:
Throughout this document DateTime represents a specific instant of time. The value space of DateTime is the space of combinations of date and time of day values as defined in ISO 8601. For example, to indicate 5:20 pm on January 15th, 1999 for Eastern Standard Time which is 5 hours behind Coordinated Universal Time (UTC), one would write: 1999-01-15T22:20:00Z.

1.5. 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.

Step 1- Initial API Call
Vendor Initiated

Employee Record

ACK and Transaction ID

Step 2- Second API Call
Vendor Initiated

Transaction ID

Employee Record Status, Error Message if Rejected

Alternate EVV System

Sandata Aggregator
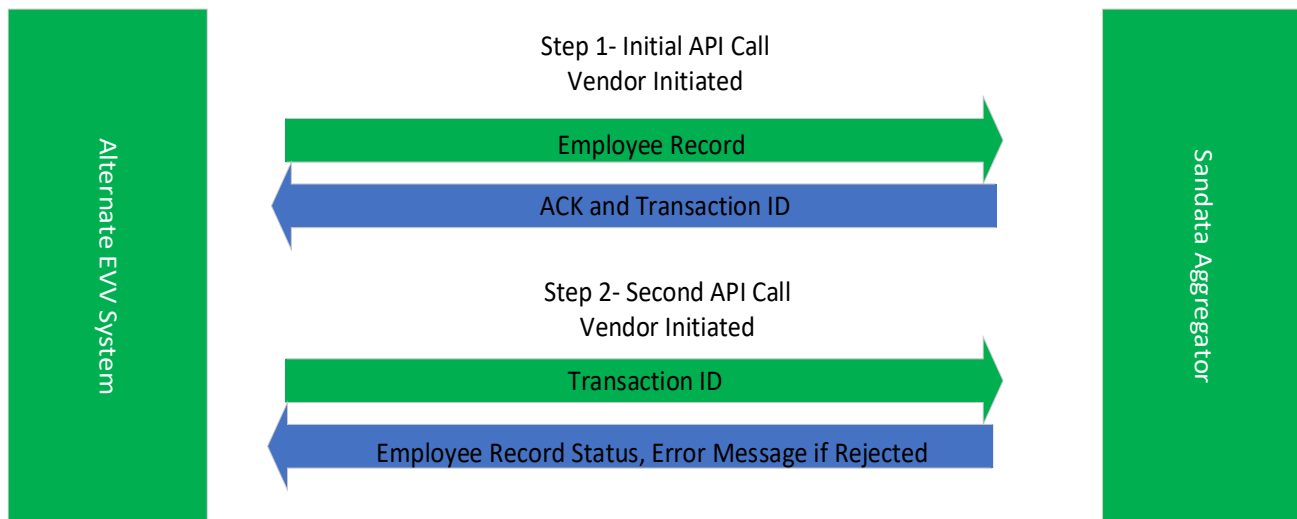
1.6. New Record and Updates

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.

1.7. 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 or XML 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.

1.8. Format

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.

Data Type		Detailed Description	Format/ Example
DATE/TIME	Alpha-numeric	The date and time together in a data string. All times will be provided and expected in UTC. If time is not material, it will be provided as is expected.	Format: YYYY-MM-DDTHH:MM:SSZ Example: 2016-12-20T16:10:28Z
DATE **(only date)**	Alpha-numeric	If the value is only date, it will be provided with: YYYY-MM- DD (10 characters) ONLY date is significant. Date only will be sent in UTC format.	Format: YYYY-MM-DD Example: 2016-12-20
TIMEZONE	Alpha-numeric	For Payer/State ALL time for tracking visits will be in UTC format. (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 Timezone name expected in each transaction is the actual Timezone where the event took place. i.e. US/Eastern.	See Appendix for list of Timezones
STRING	Alpha-numeric (Unless otherwise specified)	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).	Example: string (55644555)
INTEGER	Numeric	An integer is a numeric value without a decimal. Integers are whole numbers and can be positive or negative.	Example: (positive number): 999999 Example: *(negative number):* - 999999

Data Type	Detailed Description		Format/ Example
DECIMAL	Numeric	A number with a decimal is referred to as a decimal.	Example: 9999.9999 Example: (positive number): 999.999 Example: *(negative number):* -999.999
BOOLEAN	Logical	Two values allowed: true or false	Example: -true -false

Note that the format is case sensitive. All field names must be provided in EXACTLY the casing used in the definitions below. Sandata can handle RESTful and SOAP but it is highly recommended using RESTful services with JSON formatting.

1.9. **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 ID.

✓ There will be 3 independent types of data provided through the Alternate EVV interface:
- Clients;
- Employees (Field Staff); and
- 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 considered to be 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.

✓ Having the 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. Please note that all exceptions are expected to be acknowledged or resolved within the vendor's EVV System when appropriate. Data delivered to Sandata by a Vendor System cannot be modified within the Sandata system. All changes, edits, updates or corrections must occur in the Vendor System and be resupplied to Sandata via the vendor data feed, this includes exception resolution and acknowledgement.

✓ 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.

✓ Using 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 a record that has been received has a sequential number that is less than the one already processed, it WILL BE PROCESSED, but will be logged as "received" and inserted into history. It will not be considered to be the current record.

✓ 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) with a latitude and longitude, 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 a Client Other ID (external ID) and Sequence ID, 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 the employee 9-digit social security number is required for the payer / program and this value is not provided, the employee will be rejected.

✓ If Staff Other ID (External ID), Sequence ID 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:

✓ 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 accepted and the 'Unknown Employee' exception will be calculated and applied. This record is accepted but raises an exception.

✓ 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 companion guide.

✓ 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.

1.10.   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:*

Timestamp Value	Formatted as Sequence Number (YYYY+MM+DD+HH+MI+SS)
April 6, 2017 3:23:15pm	20170406152315

Year Month Day Hour (24) Minute Second
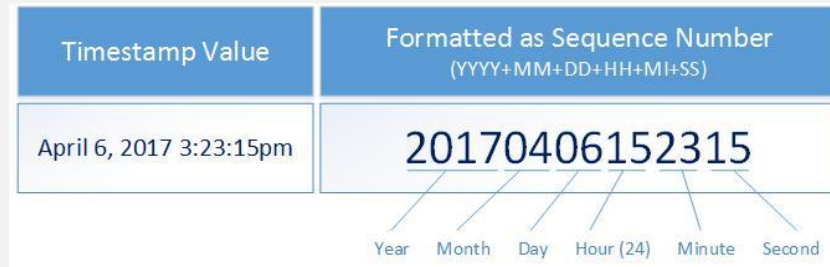
1.11. Message Acknowledgement (ACK) and Transaction ID

Index	Column Name	Description	Max Length	Type
1	AgencyIdentifier [BusinessEntityID]	Unique identifier for the agency.	10	String
2	ProviderID [BusinessEntityMedicaidIdentifier]	Unique identifier for the agency.	10	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

XML Structure

```
<MessageAcknowledgementAndTransactionID>
        <AgencyIdentifier></AgencyIdentifier>
        <ProviderID></ProviderID>
        <TransactionID></TransactionID>
        <Reason></Reason>
</MessageAcknowledgementAndTransactionID>
```

1.12. Response for Record Status

Index	Column Name	Description	Max Length	Type
1	AgencyIdentifier [BusinessEntityID]	Unique identifier for the agency.	10	String

Index	Column Name	Description	Max Length	Type
2	ProviderID [BusinessEntityMedicaidIdentifier]	Unique identifier for the agency.	10	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

XML Structure

```
<ResponseForRecordStatus>
        <AgencyIdentifier></AgencyIdentifier>
        <ProviderID></ProviderID>
        <RecordType></RecordType>
        <RecordOtherID></RecordOtherID>
        <Reason></Reason>
</ResponseForRecordStatus>
```

2. Field Information

Note that this element will be required as part of the header information provided for all three types of transmissions. This information will be compared to the connection being used within the interface to ensure that the transmission is appropriate. If this match cannot be validated, the transmission will be rejected. As part of the implementation process, required fields may be adjusted and the available fields may be reduced based on the program specifics.

2.1. Provider Identification

Index	Column Name	Description	Max Length	Type	Required
1	ProviderQualifier	Identifier being sent as the unique identifier for the provider. Values: SandataID, NPI, API, MedicaidID, TaxID, Taxonomy, Legacy, Other.	20	String	Yes
2	ProviderID [BusinessEntityMedicaidIdentifier]	Unique identifier for the agency.	50	String	Yes

XML Structure

```
<Provider_Identification>
      <ProviderQualifier>MedicaidID</ProviderQualifier>
      <ProviderID>ABC000123456789</ProviderID>
</Provider_Identification>
```

2.2. Client General Information

Additional fields may be required depending on the program; fields below may be ignored if a Payer Client Feed is implemented.

Index	Column Name	Description	Max Length	Type	Required
1	ClientID	Assigned client_id. If a value is assigned by another system. Note that this value can be automatically assigned by Sandata EVV. Note that this value may be used as the client identifier for telephony and MVV when Client ID entry is applicable.	10	String	
2	ClientFirstName [PatientFirstName]	Client's First Name.	30	String	Yes
3	ClientMiddleInitial	Client's Middle Initial.	1	String	
4	ClientLastName [PatientLastName]	Client's Last Name.	30	String	Yes

Index	Column Name	Description	Max Length	Type	Required
5	ClientQualifier	Value being sent to unique identify the client. Values: ClientSSN; ClientOtherID, ClientCustomID. Should be the same as the value used by the Payer if a client feed is provided by the payer.	20	String	Yes. Please see the Addendum for program specific values.
6	ClientMedicaidID	Unique ID provided by the State Medicaid program to the client.	64	String	Yes. Please see the Addendum for program specific values.
7	ClientIdentifier [PatientOtherID]	Payer assigned client identifier identified by ClientQualifier. If client information is received from the payer, this information will be used to link the received 3rd party EVV information with the payer information provided.	64	String	Yes. Please see the Addendum for program specific values.
8	MissingMedicaidID	Indicator that a patient is a newborn. If this value is provided, Client Medicaid ID will be ignored and will be valid as null. Values True/False	5	String	
9	SequenceID	The Third-party visit sequence ID to which the change applied.	16	Integer	Yes
10	ClientCustomID	Additional Client User-Defined ID. Commonly used to customize the built-in client ID within the system. Must be provided if billing if in scope. May be equal to another ID provided.	24	String	
11	ClientOtherID	Additional Client User-Defined ID. Commonly used to store client's ID from another system. This value is used to match the client to an existing record during import. During implementation it will be determined if this value or the ClientSSN will be used for matching.	24	String	

Index	Column Name	Description	Max Length	Type	Required
12	ClientSSN	Client's Social Security Number. If the Field is left empty, ClientOtherID must be populated. Not required if ClientOtherID sent. Numbers only, no dashes and leading zeroes must be included. May be required if needed for billing. Format - #########.	9	String	
13	ClientTimeZone [PatientTimeZone]	Client's primary time zone. Depending on the program, this value may be defaulted or automatically calculated. Please see the appendix for acceptable values.	64	String	Yes

XML Structure

```
<Client_General_Information>
     <ClientID></ClientID>
     <ClientFirstName>firstname</ClientFirstName>
     <ClientMiddleInitial></ClientMiddleInitial>
     <ClientLastName>lastname</ClientLastName>
     <ClientQualifier>ClientOtherID</ClientQualifier>
     <ClientMedicaidID>JH1234567</ClientMedicaidID>
     <ClientIdentifier>1234567</ClientIdentifier>
     <MissingMedicaidID></MissingMedicaidID>
     <SequenceID>12345</SequenceID>
     <ClientCustomID></ClientCustomID>
     <ClientOtherID></ClientOtherID>
     <ClientSSN></ClientSSN>
     <ClientTimeZone>US/Eastern</ClientTimeZone>
</Client_General_Information>
```

2.3. Client Payer Information

This segment is only required for programs where members/clients and their association to the associated programs and services is not provided by the payer.

Index	Column Name	Description	Max Length	Type	Required
1	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes. Please see the Addendum for program specific values.
2	PayerProgram	If applicable, the program to which this visit belongs. Potential use and list of values to be determined during implementation.	9	String	Yes. Please see the Addendum for program specific values.
3	ProcedureCode	This is the billable procedure code which would be mapped to the associated service. For most programs, it is the HCPCS number.	5	String	Yes. Please see the Addendum for program specific values.
4	ClientPayerID	Unique Identifier sent by Payer.	20	String	
5	ClientEligibilityDateBegin (MemberEligibilityDateBegin)	Client Eligibility Begin Date. Format YYYY-MM-DD. This field is optional if ClientStatus is sent.	10	Date	
6	ClientEligibilityDateEnd (MemberEligibilityDateEnd)	Client Eligibility End Date. Format YYYY-MM-DD. This field is optional if ClientStatus is sent.	10	Date	
7	ClientStatus (MemberStatus)	The client's current status. Provide the 2-digit code including the 0. Available values: 02 = Active, 04 = Inactive. This field is optional if ClientEligibilityDateBegin or ClientEligibilityDateEnd is sent.	2	String	

XML Structure

```
<Client_Payer_Information>
        <PayerID>ABCDEF</PayerID>
        <PayerProgram>29</PayerProgram>
        <ProcedureCode>G1234</ProcedureCode>
        <ClientPayerID></ClientPayerID>
        <ClientEligibilityDateBegin></ClientEligibilityDateBegin>
        <ClientEligibilityDateEnd></ClientEligibilityDateEnd>
        <ClientStatus></ClientStatus>
</Client_Payer_Information>
```

2.4. **Client Address**

At least one record for each client is required if GPS validation is required for the program. If an address is provided via a Payer feed, this address information will be regarded as secondary based on program rules.

Index	Column Name	Description	Max Length	Type	Required
1	ClientAddressType [PatientAddressType]	Values: Home, Business, Other. Note that multiple of the same type can be provided. Default to Other if not available.	12	String	Yes
2	ClientAddressIsPrimary [PatientAddressIsPrimary]	One address must be designated as primary

Values: true/false | 5 | String | Yes |
3	ClientAddressLine1 [PatientAddressLine1]	Street Address Line 1 associated with this address. PO Box may not be acceptable for Billing and PO Box will not function correctly for MVV.	30	String	Yes
4	ClientAddressLine2 [PatientAddressLine2]	Street Address Line 2 associated with this address.	30	String	
5	ClientCounty	County associated with this address	25	String	
6	ClientCity [PatientCity]	City associated with this address.	30	String	Yes
7	ClientState [PatientState]	State associated with this address. Two Character standard abbreviation.	2	String	Yes
8	ClientZip [PatientZip]	Zip Code associated with this address. Required for Billing. 9-digit primary address zip code. If additional 4 digits are not known, provide zeros. Format #########.	9	String	Yes

Index	Column Name	Description	Max Length	Type	Required
9	ClientAddressLongitude [PatientAddressLongitude]	Calculated for each address.	(99.99 99999 99999 999)	Decimal	Yes
10	ClientAddressLatitude [PatientAddressLatitude]	Calculated for each address.	(99.99 99999 99999 999)	Decimal	Yes

XML Structure

```
<ClientAddress>
    <ClientAddressType>Home</ClientAddressType>
    <ClientAddressIsPrimary>True</ClientAddressIsPrimary>
    <ClientAddressLine1>123 Park Ave</ClientAddressLine1>
    <ClientAddressLine2></ClientAddressLine2>
    <ClientCounty></ClientCounty>
    <ClientCity>New York</ClientCity>
    <ClientState>NY</ClientState>
    <ClientZip>110360000</ClientZip>
    <ClientAddressLongitude>38.898648</ClientAddressLongitude>
    <ClientAddressLatitude>77.03769</ClientAddressLatitude>
</ClientAddress>
```

2.5. **Client Phone** - Optional

Index	Column Name	Description	Max Length	Type	Required
1	ClientPhoneType [PatientPhoneType]	Values: Home, Mobile, Business and Other. Note that multiple of the same type can be provided. Default to Other if not available.	12	String	
2	ClientPhone [PatientPhoneNumber]	Client phone number. Format ##########.	10	String	

XML Structure

```
<Client_Phone>
    <ClientPhoneType></ClientPhoneType>
    <ClientPhone></ClientPhone>
</Client_Phone>
```

2.6. **Responsible Party/Designated Signer**-

Provide if applicable for the Client and in the absence of a Payer member feed.

Index	Column Name	Description	Max Length	Type	Required
1	ClientContactType	Client Contact Type. Values: Family, Other.	12	String	
2	ClientContactFirstName [PatientResponsiblePartyFirstName]	Client Contact First Name. Entered by provider agency.	30	String	
3	ClientContactLastName [PatientResponsiblePartyLastName]	Client Contact Last Name. Entered by provider agency.	30	String	
4	ClientContactPhoneType	Client Contact's Phone Type. Values: Business, Home, Mobile, Other.	12	String	
5	ClientContactPhone	Client Contact Home Phone Number. Entered by provider agency. Format ##########.	10	String	
6	ClientContactEmailAddress	Client Contact's email address. Required if this client will be authorized to login to the client portal as the client's authorized representative and approve timesheets on behalf of the client.	64	String	
7	ClientContactAddressLine1	Client Contact's Street Address, Line 1.	30	String	
8	ClientContactAddressLine2	Client Contact's Street Address, Line 2.	30	String	
9	ClientContactCity	Client Contact's City.	30	String	
10	ClientContactState	Client Contact's State. Two Character standard abbreviation.	2	String	
11	ClientContactZip	Client Contact's Zip Code. 9-digit primary address zip code. If additional 4 digits is not known, provide zeros. Format #########.	9	String	

XML Structure

```xml
<RepsonsibleParty_DesignatedSigner>
    <ClientContactType></ClientContactType>
    <ClientContactFirstName></ClientContactFirstName>
    <ClientContactLastName></ClientContactLastName>
    <ClientContactPhoneType></ClientContactPhoneType>
    <ClientContactPhone></ClientContactPhone>
    <ClientContactEmailAddress></ClientContactEmailAddress>
    <ClientContactAddressLine1></ClientContactAddressLine1>
    <ClientContactAddressLine2></ClientContactAddressLine2>
    <ClientContactCity></ClientContactCity>
    <ClientContactState></ClientContactState>
    <ClientContactZip></ClientContactZip>
</RepsonsibleParty_DesignatedSigner>
```

2.7. Employee General Information

Index	Column Name	Description	Max Length	Type	Required
1	EmployeeQualifier	Value being sent to unique identify the employee. Values: EmployeeSSN, EmployeeRegID, EmployeeCustomID.	20	String	Yes
2	EmployeeIdentifier [StaffID]	Employee identifier identified by EmployeeQualifier. If employee information is received from the payer, this information will be used to link the received 3rd party EVV information with the payer information provided and should be defined as the same value.	9	String	Yes
3	EmployeeOtherID [StaffOtherID]	Unique employee identifier in the external system, if any.	64	String	
4	SequenceID	The Third-party visit sequence ID to which the change applied	16	Integer	Yes
5	EmployeeSSN [StaffSSN]	Employee Social Security Number. Employee SSN may be required depending on the program rules.	9	String	Please see the Addendum for program specific values.
6	EmployeeLastName [StaffLastName]	Employee's Last Name	30	String	Yes
7	EmployeeFirstName [StaffFirstName]	Employee's First Name	30	String	Yes
8	EmployeeEmail [StaffEmail]	Employee's Email Address	64	String	Yes

Index	Column Name	Description	Max Length	Type	Required
9	EmployeeManagerEmail	Email of the Employee's Manager	64	String	
10	EmployeeAPI	Employee Client's Alternate Provider Identifier or Medicaid ID.	25	String	
11	EmployeePosition [StaffPosition]	Values for Payer/State Programs to be determined during implementation. If multiple positions, send primary.	3	String	

XML Structure

```
<Employee_GeneralInformation>
    <EmployeeQualifier>EmployeeSSN</EmployeeQualifier>
    <EmployeeIdentifier>12345</EmployeeIdentifier>
    <EmployeeOtherID></EmployeeOtherID>
    <SequenceID>98765</SequenceID>
    <EmployeeSSN>123456789</EmployeeSSN>
    <EmployeeLastName>Lastname</EmployeeLastName>
    <EmployeeFirstName>Firstname</EmployeeFirstName>
    <EmployeeEmail>user.email@domainname.com</EmployeeEmail>
    <EmployeeManagerEmail></EmployeeManagerEmail>
    <EmployeeAPI></EmployeeAPI>
    <EmployeePosition></EmployeePosition>
</Employee_GeneralInformation>
```

2.8. **Visit General Information**

Index	Column Name	Description	Max Length	Type	Required
1	VisitOtherID	Visit identifier in the external system	50	String	Yes
2	SequenceID	The Third-party visit sequence ID to which the change applied	16	Integer	Yes
3	EmployeeQualifier	Value being sent to unique identify the employee. Values: EmployeeSSN, EmployeeRegID, EmployeeCustomID.	20	String	Yes
4	EmployeeOtherID [StaffOtherID]	Unique employee identifier in the external system, if any.	64	String	

Index	Column Name	Description	Max Length	Type	Required
5	EmployeeIdentifier [StaffID]	Employee identifier identified by EmployeeQualifier. If employee information is received from the payer, this information will be used to link the received 3rd party EVV information with the payer information provided and should be defined as the same value.	9	String	Yes
6	GroupCode	This visit was part of a group visit. Group Code is used to reassemble all members of the group.	6	String	
7	ClientIDQualifier	Value being sent to unique identify the client. Values: ClientID, ClientSSN; ClientOtherID, ClientCustomID. Should be the same as the value used by the Payer if a client feed is provided by the payer.	20	String	Yes
8	ClientID	Identifier used in the client element.	64	String	Yes
9	ClientOtherID [PatientOtherID]	Additional Client User-Defined ID. Commonly used to store client's ID from another system. This value is used to match the client to an existing record during import.	24	String	
10	ClientIdentifier	Identifier used in the client element.	64	String	Yes
11	VisitCancelledIndicator	true/false – allows a visit to be cancelled / deleted based on defined rules.	5	String	Yes
12	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes. Please see the Addendum for program specific values.
13	PayerProgram	If applicable, the program to which this visit belongs. Potential use and list of values to be determined during implementation.	9	String	Yes. Please see the Addendum for program specific values.

Index	Column Name	Description	Max Length	Type	Required
14	ProcedureCode	This is the billable procedure code which would be mapped to the associated service. For most programs, it is the HCPCS number.	5	String	Yes. Please see the Addendum for program specific values.
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.	2	String	
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.	2	String	
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.	2	String	
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.	2	String	
19	VisitTimeZone [TimeZone]	Visit primary time zone. Depending on the program, this value may be defaulted or automatically calculated. Please see the appendix for acceptable values. Should be provided if the visit is occurring in a time zone other than that of the client.	64	String	Yes
20	ScheduleStartTime (StartTime)	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.	20	Date Time	

Index	Column Name	Description	Max Length	Type	Required
21	ScheduleEndTime (EndTime)	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.	20	Date Time	
22	AdjInDateTime	Adjusted in date/time if entered manually. Otherwise the actual date/time received.	20	Date Time	
23	AdjOutDateTime	Adjusted out date/time if entered manually. Otherwise the actual date/time received.	20	Date Time	
24	BillVisit	True/False. If the visit is going to be billed, should be sent as Y. Otherwise N.	5	String	
25	HoursToBill	Hours that are going to be billed.	99.999	Decimal	
26	HoursToPay	If payroll is in scope for the payer program, the hours to pay.	99.999	Decimal	
27	Memo [VisitMemo]	Associated free form text.	512	String	
28	ClientVerifiedTimes [MemberVerifiedTimes]	true/false	5	String	
29	ClientVerifiedTasks	true/false	5	String	
30	ClientVerifiedService [MemberVerifiedService]	true/false	5	String	
31	ClientSignatureAvailable [MemberSignatureAvailable]	true/false The actual signature will not be transferred. The originating system will be considered the system of record.	5	String	
32	ClientVoiceRecording [MemberVoiceRecording]	true/false The actual voice recording will not be transferred. The originating system will be considered the system of record.	5	String	

XML Structure

```
<VisitGeneralInformation>
        <VisitOtherID></VisitOtherID>
        <SequenceID>98765</SequenceID>
        <EmployeeQualifier></EmployeeQualifier>
        <EmployeeOtherID></EmployeeOtherID>
        <EmployeeIdentifier>12345</EmployeeIdentifier>
        <GroupCode></GroupCode>
        <ClientIDQualifier></ClientIDQualifier>
```

```
            <ClientID></ClientID>
            <ClientOtherID></ClientOtherID>
            <ClientIdentifier>1234567</ClientIdentifier>
            <VisitCancelledIndicator>false</VisitCancelledIndicator>
            <PayerID>ABCDEF</PayerID>
            <PayerProgram>29</PayerProgram>
            <ProcedureCode>G0151</ProcedureCode>
            <Modifier1></Modifier1>
            <Modifier2></Modifier2>
            <Modifier3></Modifier3>
            <Modifier4></Modifier4>
            <VisitTimeZone>US/Eastern</VisitTimeZone>
            <ScheduleStartTime></ScheduleStartTime>
            <ScheduleEndTime></ScheduleEndTime>
            <AdjInDateTime></AdjInDateTime>
            <AdjOutDateTime></AdjOutDateTime>
            <BillVisit></BillVisit>
            <HoursToBill></HoursToBill>
            <HoursToPay></HoursToPay>
            <Memo></Memo>
            <ClientVerifiedTimes></ClientVerifiedTimes>
            <ClientVerifiedTasks></ClientVerifiedTasks>
            <ClientVerifiedService></ClientVerifiedService>
            <ClientSignatureAvailable></ClientSignatureAvailable>
            <ClientVoiceRecording></ClientVoiceRecording>
    </VisitGeneralInformation>
```

2.9. Calls

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.

Index	Column Name	Description	Max Length	Type	Required
1	CallExternalID	Call identifier in the external system	16	String	Yes
2	CallDateTime	Event date time. Must be at least to the second.	20	Date Time	Yes
3	CallAssignment	Values: Time In, Time Out, Other	10	String	Yes
4	GroupCode	This visit was part of a group visit. Group Code is used to reassemble all members of the group.	6	String	

Index	Column Name	Description	Max Length	Type	Required
5	CallType	The type of device used to create the event. Values: Telephony, Mobile, FVV, Manual, Other. Any call with GPS data collected should be identified as Mobile. FVV should be used for any type of Fixed verification device.	20	String	Yes
6	ProcedureCode	This is the billable procedure code if identified on the call. For most programs, it is the HCPCS number. The actual entered value should be provided.	5	String	Please see the Addendum for program specific values.
7	ClientIdentifierOnCall [PatientIdentifierOnCall]	If a client identifier was entered on the call, this value should be provided.	10	String	Conditional See description
8	MobileLogin	Log in used if a mobile application is in use for GPS calls. Required if CallType = 'Mobile'.	64	String	Conditional See description
9	CallLatitude	Latitude for GPS. Required for CallType = Mobile.	(99.999 99999999 9999)	Decimal	Conditional See description
10	CallLongitude	Longitude for GPS. Required for CallType = Mobile.	(99.999 99999999 9999)	Decimal	Conditional See description
11	Location	Specific values to be provided based on the program.	25	String	
12	TelephonyPIN	PIN for telephony. Identification for the employee using telephony. Required if CallType = Telephony.	9	Integer	Conditional See description
13	OriginatingPhoneNumber	Originating phone number for telephony. Required if CallType = Telephony.	10	String	Conditional See description

XML Structure

```
<Calls>
        <CallExternalID>7812</CallExternalID>
        <CallDateTime>2018-01-22T12:05:20Z</CallDateTime>
        <CallAssignment>TimeIn</CallAssignment>
        <GroupCode></GroupCode>
```

```
<CallType>Mobile</CallType>
<ProcedureCode>G0151</ProcedureCode>
<ClientIdentifierOnCall></ClientIdentifierOnCall>
<MobileLogin>user.email@domainname.com </MobileLogin>
<CallLatitude>38.898648</CallLatitude>
<CallLongitude>77.03769</CallLongitude>
<Location></Location>
<TelephonyPIN>123456</TelephonyPIN>
<OriginatingPhoneNumber>9170000000</OriginatingPhoneNumber>
</Calls>
```

2.10.   Visit Exception Acknowledgement

Index	Column Name	Description	Max Length	Type	Required
1	ExceptionID	ID for the exception being acknowledged. Exact values for exceptions implemented are based on program rules.	2	String	Please see the Addendum for program specific values.
2	ExceptionAcknowledged	true/false	5	String	

XML Structure

```
<Visit_Exception_Acknowledgement>
        <ExceptionID></ExceptionID>
        <ExceptionAcknowledged></ExceptionAcknowledged>
</Visit_Exception_Acknowledgement>
```

2.11.   Visit Changes

Index	Column Name	Description	Max Length	Type	Required
1	SequenceID	The Third-party visit sequence ID to which the change applied	16	String	Yes
2	ChangeMadeBy [ChangeMadeByEmail]	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
3	ChangeDateTime	Date and time when change is made. At least to the second.	20	Date Time	Yes
4	GroupCode	This visit was part of a group visit. Group Code is used to reassemble all members of the group.	6	String	

Index	Column Name	Description	Max Length	Type	Required
5	ReasonCode	Reason Code associated with the change.	4	String	Yes. Please see the Addendum for program specific values.
6	ChangeReasonMemo	Reason/Description of the change being made if entered. Required for some reason codes.	256	String	Conditional See description. Please see the Addendum for program specific values.
7	ResolutionCode	Resolution Codes if selected. Resolution Codes are specific to the program.	4	String	

XML Structure

```
<VisitChanges>
        <SequenceID>98765</SequenceID>
        <ChangeMadeBy>user.email@domainname.com</ChangeMadeBy>
        <ChangeDateTime>2018-02-15T10:34:25Z</ChangeDateTime>
        <GroupCode></GroupCode>
        <ReasonCode></ReasonCode>
        <ChangeReasonMemo>Time In and Time Out were modified</ChangeReasonMemo>
        <ResolutionCode></ResolutionCode>
</VisitChanges>
```

3. Appendix

3.1. Assumptions

There is no other external interface other than what is mentioned in this document.

3.2. Other Important Points to Note

Please note that this list will have periodic additions as new functionality is added and made available for transmission from Alternate EVV systems.

In the event of any required changes to the web services apart from the functionality covered in this document or the functionality already present in the code, it is recommended that a formal change control process be followed so as to ensure a set process for planning and scheduling, implementation of the same, verification and validation and roll-out for user testing.

3.3. Legend

LEGEND	
Field Name	*Other possible Naming*
Client	*Individual* *Member* *Patient* *Recipient*
Employee	*Caregiver* *Consumer Directed Worker* *Home Health Aide* *Staff* *Worker*
Provider	*Agency* *Third-party Admin (TPA)*
Payer	*Admission* *Contract* *Insurance Company* *Managed Care Organization (MCO)* *State*
Contract	*Program*

LEGEND	
Field Name	*Other possible Naming*
	Program Code
HCPCS	*Bill Code*
	Procedure Code
	Service

3.4. **Acronyms and Definitions**

Term	Definition
AKA	Also Known As
API	Application Programming Interface
GMT	Greenwich Mean Time
HTTP	Hypertext Transfer Protocol
JSON	JavaScript Object Notation
SOAP	Simple Object Access Protocol
SRS	System Requirement Specifications
TBD	To Be Determined
UTC	Universal Time Coordinated
XML	Extensible Markup Language

3.5. **Time Zone List**

This is the common list of time zones 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

Text Value	Daylight Saving
America/Indiana/Knox	Active
America/Indiana/Marengo	Active
America/Indiana/Petersburg	Active
America/Indiana/Vevay	Active
America/Indiana/Vincennes	Active
Canada/Atlantic	Active
Canada/Central	Active
Canada/East-Saskatchewan	Inactive
Canada/Eastern	Active
Canada/Mountain	Active
Canada/Newfoundland	Active
Canada/Pacific	Active
Canada/Saskatchewan	Active
Canada/Yukon	Active
America/Puerto_Rico	Inactive

4. Addendum Information Specific to Maine

The following Required data elements should be set specifically as needed for Maine.

4.1. Provider Identification

Index	Column Name	Description	Max Length	Type	Required
3	ProviderQualifier	Identifier being sent as the unique identifier for the provider. Values: NPI	20	String	Yes, Maine is expecting "NPI"
4	ProviderID [BusinessEntityMedicaidIdentifier]	Unique identifier for the agency.	50	String	Yes, Maine is expecting this to be the Provider's NPI, 1234567890

4.2. Client General Information

Index	Column Name	Description	Max Length	Type	Required
1	ClientQualifier	Value being sent to unique identify the client. Values: ClientCustomID.	20	String	Yes, Maine is expecting this to be "ClientCustomID"
2	ClientMedicaidID	Unique ID provided by the State Medicaid program to the client. This should be the Client/Members 9 character Medicaid ID	64	String	Yes, Maine is expecting this to be the client's Maine Medicaid number (MaineCare ID), 12345678A
3	ClientIdentifier [PatientOtherID]	Payer assigned client identifier identified by ClientQualifier. If client information is received from the payer, this information will be used to link the received 3rd party EVV information with the payer information provided. This should be the Client/Members 9 character Medicaid ID	64	String	Yes, Maine is expecting this to be the client's Maine Medicaid number (MaineCare ID), 12345678A

4.3. Employee General Information

Index	Column Name	Description	Max Length	Type	Required
1	EmployeeQualifier	Value being sent to uniquely identify the employee. Values: EmployeeSSN, EmployeeRegID, EmployeeCustomID.	20	String	Yes, EmployeeSSN
2	EmployeeSSN	Employee Social Security Number. Employee SSN may be required depending on the program rules. For Maine, please provide 4 leading zeroes and the last 5 digits of the Social Security number. Format: #########.	9	String	Yes, 000012345
3	EmployeePosition	Do not use. This value has not been defined for the Maine program.	3	String	Do Not Use

4.4. Visit General Information

Index	Column Name	Description	Max Length	Type	Required
1	ClientIDQualifier	Value being sent to unique identify the client. Values: ClientCustomID.	20	String	Yes, Maine is expecting this to be "ClientCustomID"
2	ClientIdentifier	Payer assigned client identifier identified by ClientQualifier. If client information is received from the payer, this information will be used to link the received 3rd party EVV information with the payer information provided. This should be the Client/Members 9 character Medicaid ID	64	String	Yes, Maine is expecting this to be the client's Maine Medicaid number (MaineCare ID), 12345678A
3	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes, MEDHHS

Index	Column Name	Description	Max Length	Type	Required
4	PayerProgram	If applicable, the program to which this visit belongs. See the Procedure Codes table at the end of this document.	9	String	Yes. Please see section 4.7 of this document.
5	ProcedureCode	This is the billable procedure code which would be mapped to the associated service. Valid values are listed. The value provided must be appropriate in combination with the program value. See the Procedure Codes table at the end of this document.	5	String	Yes. Please see section 4.7 of this document.

4.5. Visit Exception Acknowledgement

If a visit has exceptions which cannot be fixed, this segment should be provided. If provided, the exceptions which need to be acknowledged for a visit to be considered complete for the Maine program are as follows:

ExceptionID	Description
39	Client Signature Exception – signature does not exist for the member on the visit.
25	GPS Distance Exception – for a mobile call - in or out call was received more than ½ mile from any client address.
40	Service Verification Exception – member did not verify the service on the visit.
15	Unmatched Client ID / Phone – for a telephony call – the phone number used doesn't match the client id entered on the call.
28	Visit Verification Exception – member did not verify the time in and time out on the visit.

4.6. Segments Not in Use for the Maine Program

- For purposes of the Maine EVV program the following tables are not to be used/transmitted.
  - Client Payer Information
  - Responsible Party / Designated Signer

The following tables are Maine specific, and are intended to be a guide for acceptable values.

4.7. Payer Programs and Procedure Codes

This table contains the EVV applicable program codes (MaineCare Section of Policy) and procedure codes for the Maine program.

Program	Program Name	Procedure Code
12	Consumer Directed Attendant Services	S5125
18	Brain Injury Waiver	T2017
19	HCBS Elders & Adults with Disabilities Waiver	G0151
19	HCBS Elders & Adults with Disabilities Waiver	G0152
19	HCBS Elders & Adults with Disabilities Waiver	G0153
19	HCBS Elders & Adults with Disabilities Waiver	G0155
19	HCBS Elders & Adults with Disabilities Waiver	G0156
19	HCBS Elders & Adults with Disabilities Waiver	G0299
19	HCBS Elders & Adults with Disabilities Waiver	G0300
19	HCBS Elders & Adults with Disabilities Waiver	S5125
19	HCBS Elders & Adults with Disabilities Waiver	T1004
19	HCBS Elders & Adults with Disabilities Waiver	T1005
19	HCBS Elders & Adults with Disabilities Waiver	T1019
20	HCBS for Adults with Other Related Conditions	T1019
20	HCBS for Adults with Other Related Conditions	T2017
21	HCBS for Members with Intellectual Disabilities	T2017
28	Rehab & Community Support Services for Children	H2021
29	Support Services for Adults with Intellectual Disabilities	S5150
29	Support Services for Adults with Intellectual Disabilities	T2017
40	Home Health Services	G0151
40	Home Health Services	G0152
40	Home Health Services	G0153
40	Home Health Services	G0155
40	Home Health Services	G0156
40	Home Health Services	G0299
40	Home Health Services	G0300
40	Home Health Services	T1502

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Program	Program Name	Procedure Code
43	Hospice	G0155
43	Hospice	G0299
43	Hospice	T2042
43	Hospice	T2043
96	PDN & Personal Care Srvs	G0299
96	PDN & Personal Care Srvs	G0300
96	PDN & Personal Care Srvs	S5125
96	PDN & Personal Care Srvs	T1000
96	PDN & Personal Care Srvs	T1004
96	PDN & Personal Care Srvs	T1019
96	PDN & Personal Care Srvs	T1502

4.8. **Reason Codes**

Reason codes are required with all visit changes to identify the reason for the change. Resolving Exceptions will require a reason code.

Reason Code	Reason Code Description	Note/Memo Required?
10	Caregiver Error	Y
20	Member Unavailable/Unable	Y
30	Mobile Device Issue	Y
40	Telephony Issue	Y
50	Member Refused Verification/Use of Phone	Y
60	Service Outside the Home	Y
70	Other	Y
80	Administrative Delay	Y
90	Current Member Phone Number not on File	Y