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DELAWARE HEALTH
AND SOCIAL SERVICES

Alternate EVV Interface Specification v1.0

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Alternate EVV Vendor Data Transmission Interface

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 *7.15*

Alternate 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 vendor's discretion.*

File Delivery Notes

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 reject due to 'Unknown Client'.

Element	Description	Expected Value	Validation Rule
ProviderIdentification	*Required. This element is 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.*		*[Segment Required]*
ProviderQualifier	Unique identifier for the provider as determined by the program definition.	"MedicaidID"	String match = "MedicaidID"
ProviderID	Unique identifier for the agency.	MCD ID = up to 10 digits	Max Length 50
Client General Information	*Required data in the body of the transmission. Additional fields may be required depending on the program; fields below may be ignored if a Payer Client feed is implemented.*		*[Segment Required]*
ClientQualifier	Describes what type of identifier is being sent to identify the client.	"ClientMedicaidID"	String Match = "ClientMedicaidID"
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 value as the ClientMedicaidID. An additional state client Identifier should be provided in the ClientAltMedicaidID.	MID - (DE medicaid ID) format = 10 digits with leading zeros	MID - (DE medicaid ID) format = 10 digits with leading zeros
ClientFirstName	Client's First Name.	Client's First Name	Max Length 30 No Special Characters
ClientMiddleInitial	Client's Middle Initial	Client's Middle Initial	Max Length 1 Can be NULL No Special Characters
ClientLastName	Client's Last Name.	Client's Last Name	Max Length 30 No Special Characters
ClientMedicaidID	Unique ID provided by the State Medicaid program to the client. This identifier will be used for visit submission and must match the value submitted as the Client Identifier above.	MID - (DE medicaid ID) format = 10 digits with leading zeros	MID - (DE medicaid ID) format = 10 digits with leading zeros
ClientAltMedicaidID	Additional identifier for client as provided by the State Medicaid programs to the client. This value will not be associated with visit submission for the client visits.	Can be NULL	Can be NULL
SequenceID	The Third Party EVV visit sequence ID. Sandata recommends this be a timestamp (to the second) to ensure order of the client data updates.	Third Party EVV Vendor Visit Sequence ID	Max length 16 If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters
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.	MID - (DE medicaid ID) format = 10 digits with leading zeros	Max Length 24 Can be NULL No Special Characters

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Element	Description	Expected Value	Validation Rule
ClientTimezone	Client's primary time zone. Depending on the program, this value may be defaulted or automatically calculated. Please see the appendix for acceptable values.	US/Eastern - See Appendix A6	String match = See Appendix
ClientAddress	*At least one record for each client is required for the program.*		*[Segment Required]*
ClientAddressType	Values: Home, Business, Other. Note that multiple of the same type can be provided.	"Home"| "Business" | "Other"	String match = "Home"| "Business" | "Other"
ClientAddressIsPrimary	A value of true indicates the client address record is the primary address. A false value indicates that this is an additional address for the client.	"true" | "false"	String match = "true" | "false"
ClientAddressLine1	Street address line 1 associated with this client's address. PO Box may impact GPS reporting.	Address Line 1	Max Length 30 Special Characters _ . ' - # , / space supported
ClientAddressLine2	Street address line 2 associated with this address.	Address Line 2	Max Length 30 Can be NULL Special Characters _ . ' - # , / space supported
ClientCounty	County associated with this address	County	Max Length 25 Can be NULL Special Characters . ' - space supported
ClientCity	City associated with this address.	City	Max Length 30 Special Characters . - space supported
ClientState	State associated with this address. Two character standard abbreviations. Please see the appendix for acceptable values.	State abbreviation - See Appendix A8	Format: 2 char standard US state abbreviation
ClientZip	Zip Code associated with this address. Required for Billing. 9-digit primary address zip code. If additional 4 digits are not known, provide zeros.	Zip Code	Format: ######### Rules: This is the full nine digits of the zip code for a business mailing zip code. If the +4 cannot be provided, please send '0000'.
ClientPhone	*Optional segment. Provides the phone numbers associated with the client receiving care. Multiple phone numbers can be supplied for a client, each in its own segment.*		[Segment Optional]
ClientPhoneType	Location value for the phone number is this segment: Home, Mobile, Business and Other. Note that multiple of the same type can be provided.	"Home" | "Mobile" | "Business" | "Other"	String match = "Home" | "Mobile" | "Business" | "Other" Permitted values
ClientPhone	Client phone number including area code. (no country code, no dashes and no parentheses)	Client Phone Number	FORMAT: ##########
ClientPayerInformation	*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.*		*[Segment Optional]*
PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	Payer column - See Appendix A1	See Payer + Programs Appendix A1
PayerProgram	If applicable, the program to which this visit belongs	Program code column - See Appendix A1	See Payer + Programs Appendix A1
ProcedureCode	This is the billable procedure code which would be mapped to the associated service.	HCPCS code column - See Appendix A2	See Services + Modifiers Appendix A2
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.	Modifier 1 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
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.	Modifier 2 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
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.	Modifier 3 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
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.	Modifier 4 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL

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Element	Description	Expected Value	Validation Rule
ClientPayerID	Unique identifier sent by the payer.	Payer's Identifier for the Client	Max Length 20 Can be NULL No Special Characters
ClientStatus	The client's current status. Provide the 2 digit code including the 0. Available values: 02 = Active 04 = Inactive	"02" | "04"	String match = "02" | "04"
EffectiveStartDate	The effective start date for the client payer information.	Effective Start Date for the Client	Max Length 10 FORMAT: YYYY-MM-DD
EffectiveEndDate	The effective end date for the client payer information.	Effective End Date for the Client	Max Length 10 Can be NULL FORMAT: YYYY-MM-DD

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 reject due to 'Unknown Employee'.

Element	Description	Expected Value	Validation Rule
ProviderIdentification	*Required. This element is 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.*		*[Segment Required]*
ProviderQualifier	Identifier being sent as the unique identifier for the provider.	"MedicaidID"	String match = "MedicaidID"
ProviderID	Unique identifier for the agency.	MCD ID = up to 10 digits	Max Length 50
Employee General Information	*Required data in the body of the transmission. This segment provides the basic information about the employee.*		*[Segment Required]*
EmployeeQualifier	Descriptive reference of the value being sent to uniquely identify the employee.	"EmployeeCustomID"	String match = "EmployeeCustomID"
EmployeeIdentifier	Employee identifier identified by EmployeeQualifier. This value must equal the EmployeeIdentifier provided in the Visit transmission.	First 3 letters of last name + last 4 digits of SSN as unique identifier	Max Length 9 Format = ABC####
EmployeeOtherID	Unique employee identifier in the external system.	Other Employee Identifier	Max Length 64 Can be NULL No Special Characters
SequenceID	The Third Party EVV visit sequence ID to which the change applied	Third Party EVV Visit Sequence ID	Max Length 16 If TIMESTAMP is used: YYYYMMDDHHMMSS (Numbers only; no characters)
EmployeeLastName	Employee's Last Name	Employee's Last Name	Max Length 30 Special Characters . ' - space supported
EmployeeFirstName	Employee's First Name	Employee's First Name	Max Length 30 Special Characters . ' - space supported
EmployeeEndDate	Employee's HR recorded end date.	Employee End Date	FORMAT: YYYY-MM-DD Can be NULL

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 loaded, or else the visit record will error out.

Element	Description	Expected Value	Validation Rule
ProviderIdentification	*Required. This element is 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.*		*[Segment Required]*
ProviderQualifier	Identifier being sent as the unique identifier for the provider.	"MedicaidID"	String match = "MedicaidID"
ProviderID	Unique identifier for the agency.	MCD ID = up to 10 digits	MCD ID = up to 10 digits
VisitGeneralInformation	*This 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 VisitKey, 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 to a visit should also be accompanied by a Visit Change segment.*		*[Segment Required]*
VisitOtherID	Visit identifier in the external system	Visit Identifier	Max Length 50 No Special Characters
SequenceID	The Third Party EVV visit sequence ID to which the change applied	Third Party EVV Visit Sequence ID	Max length 16 If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters

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Element	Description	Expected Value	Validation Rule
EmployeeQualifier	Descriptive reference of the value being sent to uniquely identify the employee.	"EmployeeCustomID"	String match = "EmployeeCustomID"
EmployeeOtherID	Unique employee identifier in the external system, if any.	Provider Employee Identifier	Max Length 64 Can be NULL Format: #########
EmployeeIdentifier	Employee identifier identified by EmployeeQualifier. This information will be used to link the received Third Party EVV Employee information with the Visit information and should be the same value as the EmployeeIdentifier submitted in the Employee transmission.	First 3 letters of last name + last 4 digits of SSN as unique identifier	Max Length 9 Format: #########
GroupCode	Group visits are visits where a single caregiver that provides services to multiple clients during the same time span. If this visit was part of a group visit, the Group Code is used to reassemble all members of the group. This impacts state reporting and analytics for overlapping visits. Contact the Jurisdictional Entity for a GroupCode.	Group Code	Max Length 6 Can be NULL No Special Characters
ClientIDQualifier	Describes what type of identifier is being sent to identify the client.	"ClientMedicaidID"	String match = "ClientMedicaidID"
ClientID	Unique client identifier used by the state to reference the member data across all Medicaid activities. This value must be the same value used as the ClientMedicaidID in the Client transmission.	MID - (DE medicaid ID) format = 10 digits with leading zeros	MID - (DE medicaid ID) format = 10 digits with leading zeros
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.	MID - (DE medicaid ID) format = 10 digits with leading zeros	Max Length 24 Can be NULL FORMAT: ##########
VisitCancelledIndicator	true/false – Set to false as the default. Set to true if a future scheduled visit previously sent and accepted with no call in or call out is to be cancelled / deleted. Only applicable to future schedules only and scheduling is not in scope for this program.	"false"	String match = "true" | "false"
PayerID	Sandata EVV assigned ID for the payer.	Payer column - See Appendix A1	See Payer + Programs Appendix A1
PayerProgram	If applicable, the program to which this visit belongs.	Program code column - See Appendix A1	See Payer + Programs Appendix A1
ProcedureCode	This is the billable procedure code which would be mapped to the associated service.	HCPCS code column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
Modifier1	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed.	Modifier 1 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
Modifier2	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed.	Modifier 2 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
Modifier3	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed.	Modifier 3 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
Modifier4	Modifier for the HCPCS code for the 837. Up to 4 of these are allowed.	Modifier 4 column - See Appendix A2	See Services + Modifiers Appendix A2 Can be NULL
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. Please see the appendix for acceptable values.	US/Eastern See Appendix A6	String match = See Appendix A6
AdjinDateTime	Adjusted visit call in date/time if electronically collected call time has been adjusted manually. This value does not substitute for the Call segment and will set Cures Act exceptions for missing call in/call out on the visit if no call segment provided for visit. Add visit changes segment when submitting adjusted times.	Adjusted In Date and Time	Max Length 20 Can be NULL FORMAT: YYYY-MM-DDTHH:MM:SSZ
AdjOutDateTime	Adjusted visit call out date/time if electronically collected call time has been adjusted manually. This value does not substitute for the Call segment and will set Cures Act exceptions for missing call in/call out on the visit if no call segment provided for visit. Add visit changes segment when submitting adjusted times.	Adjusted Out Date and Time	Max Length 20 Can be NULL FORMAT: YYYY-MM-DDTHH:MM:SSZ
BillVisit	True is the expected value for all visits. False would be set if the visit is not to be considered for claims validation and reporting. False will also set the status of the visit to Omit.	"true"	String match = "true" | "false"
Memo	Associated free form text.	Memo	Max Length 512 Can be NULL Special Characters _ . ' - , space supported
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.	Schedule Start Date and Time for Service	Max Length 20 Can be NULL DateTime Format YYYY-MM-DDTHH:MM:SSZ
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.	Schedule End Date and Time for Service.	Max Length 20 Can be NULL DateTime Format YYYY-MM-DDTHH:MM:SSZ

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Element	Description	Expected Value	Validation Rule
Reschedule	Indicator if schedule is a "reschedule"	"true" | "false"	Max Length 5 Can be NULL
Calls	*Call segments are needed on the initial visit submission and if not provided can set an exception on the visit in the aggregator. If there is a change to the visit then this call segment does not need to be sent and adjusted times can 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. These calls are considered to be manually entered and should have a calls segment submitted. This is an OPTIONAL segment only when visit data is being adjusted.*		*[Segment Optional]*
CallExternalID	Call identifier in the external system	Call Identifier	Max Length 16 No Special Characters
CallDateTime	Event date time. Must be to the second.	Call Date and Time	Max Length 20 Can be NULL FORMAT: YYYY-MM-DDTHH:MM:SSZ
CallAssignment	This call segment information reference values: Time In, Time Out, Other	"Time In" | "Time Out" | "Other"	String match = "Time In" | "Time Out" | "Other"
GroupCode	Group visits are visits where a single caregiver that provides services to multiple clients during the same time span. If this visit was part of a group visit, the Group Code is used to reassemble all members of the group. This impacts state reporting and analytics for overlapping visits. Contact the Jurisdictional Entity for a GroupCode.	Group Code	Max Length 6 Can be NULL No Special Characters
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 verification device. Visit Changes segment required for CallType = Manual	"Telephony" | "Mobile" | "FVV" | "Manual" | "Other"	String match = Telephony | Mobile | FVV | Manual | Other
ProcedureCode	This is the billable procedure code which would be mapped to the associated service per the program definition.	HCPCS code column	See Services + Modifiers tab Can be NULL
ClientIdentifierOnCall	If a client identifier was entered on the call, this value should be provided.	Third Party EVV Client Identifier on Call	Max Length 10 No Special Characters
MobileLogin	Login used if a mobile application is in use for GPS calls. Required if CallType = Mobile.	Mobile Login	Max Length 64 Can be NULL if not a Mobile CallType No Special Characters
CallLatitude	GPS latitude recorded during event. Latitude has a range of -90 to 90 with a 15 digit precision. Required for CallType = Mobile	Lattitude	Decimal with sign if negative 2 primary.15 digit precision Can be NULL if not a Mobile CallType Decimal format with (-)XX . XXXXXXXXXXXXXXX digits
CallLongitude	GPS longitude recorded during event. Longitude has a range of -180 to 180 with a 15 digit precision. Required for CallType = Mobile.	Longitude	Decimal with sign if negative 3 primary.15 digit precision Can be NULL if not a Mobile CallType Decimal format with (-)XXX . XXXXXXXXXXXXXXX digits
TelephonyPIN	PIN for telephony. Identification for the employee using telephony. Required if CallType = Telephony.	Telephony Pin	Max Length 9 Can be NULL if not a Telephony CallType No Special Characters
OriginatingPhoneNumber	Originating phone number for telephony. Required if CallType = Telephony.	Originating Phone Number	Max Length 10 Can be NULL if not a Telephony CallType No Special Characters
VisitLocationType	Specific values to be provided based on the program. Values include: 1 = Home, 2 = Community	"1" | "2"	String match = "1" | "2" Can be NULL
VisitChanges	*Optional segment. This segment is not to be supplied for new visits that have call segments included. This segment is provided when a visit has been manually entered, altered 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.*		*[Segment Optional]*
SequenceID	The Third Party EVV visit sequence ID to which the change applied	Third Party EVV Visit Sequence ID	Max length 16 If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters
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.	Unique Identifier of Change Agent	Max Length 64 No Special Characters

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Element	Description	Expected Value	Validation Rule
ChangeDateTime	Date and time when change is made. At least to the second.	Date and Time When Change is Made	Max Length 20 Can be NULL FORMAT: YYYY-MM-DDTHH:MM:SSZ
GroupCode	Group visits are visits where a single caregiver that provides services to multiple clients during the same time span. If this visit was part of a group visit, the Group Code is used to reassemble all members of the group. This impacts state reporting and analytics for overlapping visits. Contact the Jurisdictional Entity for a GroupCode.	Group Code	Max Length 6 Can be NULL No Special Characters
ReasonCode	Reason Code associated with the change.	Reason Code column	See Reason codes tab Can be NULL
ChangeReasonMemo	Reason/Description of the change being made if entered. Required for some reason codes.	See Note Required? Column	Max Length 256 Can be NULL No Special Characters
Tasks	*Conditional segment. This segment contains the non-service specific details regarding activities the caregiver performed during the visit. These detailed activities are known as 'Tasks' and often align to the care plan designed for the individual receiving care. .*		*[Segment Optional]*
TaskID	TaskID, this TaskID must map to the Task IDs used for the agency in the Sandata system	See Tasks Tab, Task ID Column	Max Length 4
TaskReading	Task reading	Reading associated with the task if appliciable	Max Length 10 Can be NULL
TaskRefused	True if the task referenced was refused by client. False if task performed by caregiver.	"true" | "false"	Max Length 5 Can be NULL
VisitExceptionAcknowledgement	*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.*	*This is an OPTIONAL segment- it will not be supplied for new visits (delivered for the first time), but MUST be delivered for any updates or alterations to an existing visit where an acknowledgeable exception has been resolved. If provided, all required fields must be included*	*[Segment Optional]*
ExceptionID	ID for the exception being acknowledged.	See Appendix A3	Max Length 2
ExceptionAcknowledged	True to acknowledge exceptions that are indicated as acknowledgeable only. False by default.	"true" | "false"	Max Length 5

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Appendix 1: Payers + Programs

Payer ID	Department Program Name	Program ID	Program Type
DEDMMA	Division of Medicaid and Medical Assistance (DMMA)	DDDS	Lifespan Waiver (1959 c) (Self Directed)
DEDMMA	Division of Medicaid and Medical Assistance (DMMA)	PRMISE	Promoting Optimal Mental Health for individuals through Supports and Empowerment (PROMISE)
DEDMMA	Division of Medicaid and Medical Assistance (DMMA)	DSHP	Diamond State Health Plan
DEDMMA	Division of Medicaid and Medical Assistance (DMMA)	DSHPP	Diamond State Health Plan Plus - Self Directed services are available in this program
DEACDE	AmeriHealth Caritas	PRMISE	Promoting Optimal Mental Health for individuals through Supports and Empowerment (PROMISE)
DEACDE	AmeriHealth Caritas	DSHP	Diamond State Health Plan
DEACDE	AmeriHealth Caritas	DSHPP	Diamond State Health Plan Plus - Self Directed services are available in this program
DEHHO	Highmark	PRMISE	Promoting Optimal Mental Health for individuals through Supports and Empowerment (PROMISE)
DEHHO	Highmark	DSHP	Diamond State Health Plan
DEHHO	Highmark	DSHPP	Diamond State Health Plan Plus - Self Directed services are available in this program

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Appendix 2: Services + Modifiers

Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Service Description
DEDMMA	DSHP	G0151					Physical Therapy
DEACDE	DSHP	G0151					ACDE Physical Therapy
DEHHO	DSHP	G0151					HHO Physical Therapy
DEDMMA	DSHP	G0152					Occupational Therapy
DEACDE	DSHP	G0152					ACDE Occupational Therapy
DEHHO	DSHP	G0152					HHO Occupational Therapy
DEDMMA	DSHP	G0153					Speech Therapy
DEACDE	DSHP	G0153					ACDE Speech Therapy
DEHHO	DSHP	G0153					HHO Speech Therapy
DEDMMA	DSHP	G0156					Home Health Aide
DEACDE	DSHP	G0156					ACDE Home Health Aide
DEHHO	DSHP	G0156					HHO Home Health Aide
DEDMMA	DSHPP	G0157					PT assistant services
DEACDE	DSHPP	G0157					ACDE PT assistant services
DEHHO	DSHPP	G0157					HHO PT assistant services
DEDMMA	DSHPP	G0158					OT assistant services
DEACDE	DSHPP	G0158					ACDE OT assistant services
DEHHO	DSHPP	G0158					HHO OT assistant services
DEDMMA	DSHPP	G0159					PT services - maintenance program
DEACDE	DSHPP	G0159					ACDE PT services - maintenance program
DEHHO	DSHPP	G0159					HHO PT services - maintenance program
DEDMMA	DSHPP	G0160					OT services - maintenance program

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Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Service Description
DEACDE	DSHPP	G0160					ACDE OT services - maintenance program
DEHHO	DSHPP	G0160					HHO OT services - maintenance program
DEDMMA	DSHPP	G0161					SLP services - maintenance program
DEACDE	DSHPP	G0161					ACDE SLP services - maintenance program
DEHHO	DSHPP	G0161					HHO SLP services - maintenance program
DEDMMA	DSHP	G0299					Home Health Nursing - RN
DEACDE	DSHP	G0299					ACDE Home Health Nursing - RN
DEHHO	DSHP	G0299					HHO Home Health Nursing - RN
DEDMMA	DSHP	G0300					Home Health Nursing - LPN
DEACDE	DSHP	G0300					ACDE Home Health Nursing - LPN
DEHHO	DSHP	G0300					HHO Home Health Nursing - LPN
DEDMMA	DSHPP	G0493					HH Nursing, assess and observe - RN
DEACDE	DSHPP	G0493					ACDE HH Nursing, assess and observe - RN
DEHHO	DSHPP	G0493					HHO HH Nursing, assess and observe - RN
DEDMMA	DSHPP	G0494					HH Nursing, assess and observe - LPN
DEACDE	DSHPP	G0494					ACDE HH Nursing, assess and observe - LPN
DEHHO	DSHPP	G0494					HHO HH Nursing, assess and observe - LPN
DEDMMA	DSHPP	G0495					HH Nursing, train and educate - RN
DEACDE	DSHPP	G0495					ACDE HH Nursing, train and educate - RN
DEHHO	DSHPP	G0495					HHO HH Nursing, train and educate - RN
DEDMMA	DSHPP	G0496					HH Nursing, train and educate - LPN
DEACDE	DSHPP	G0496					ACDE HH Nursing, train and educate - LPN

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Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Service Description
DEHHO	DSHPP	G0496					HHO HH Nursing, train and educate - LPN
DEDMMA	DSHPP	S5120					Chore - Diamond State Plan Plus
DEDMMA	PRMISE	S5120					Chore - PROMISE
DEACDE	DSHPP	S5120					ACDE Chore - Diamond State Plan Plus
DEACDE	PRMISE	S5120					ACDE Chore - PROMISE
DEHHO	DSHPP	S5120					HHO Chore - Diamond State Plan Plus
DEHHO	PRMISE	S5120					HHO Chore - PROMISE
DEDMMA	DSHPP	S5125					Attendant
DEACDE	DSHPP	S5125					ACDE Attendant
DEHHO	DSHPP	S5125					HHO Attendant
DEDMMA	DSHPP	S5130	U2				Attendant Care – Self-Directed
DEDMMA	DSHPP	S5130					Homemaker
DEACDE	DSHPP	S5130	U2				ACDE Attendant Care – Self-Directed
DEACDE	DSHPP	S5130					ACDE Homemaker
DEHHO	DSHPP	S5130	U2				HHO Attendant Care – Self-Directed
DEHHO	DSHPP	S5130					HHO Homemaker
DEDMMA	DSHPP	S5135					Companion
DEACDE	DSHPP	S5135					ACDE Companion
DEHHO	DSHPP	S5135					HHO Companion
DEDMMA	DSHPP	S5150					Respite - Diamond State Plan Plus
DEDMMA	PRMISE	S5150					Respite - PROMISE
DEACDE	DSHPP	S5150					ACDE Respite - Diamond State Plan Plus

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Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Service Description
DEACDE	PRMISE	S5150					ACDE Respite - PROMISE
DEHHO	DSHPP	S5150					HHO Respite - Diamond State Plan Plus
DEHHO	PRMISE	S5150					HHO Respite - PROMISE
DEDMMA	DSHP	S9123					PDN Indep Nurse - RN State Plan
DEDMMA	PRMISE	S9123					PDN Indep Nurse - RN PROMISE
DEACDE	DSHP	S9123					ACDE PDN Indep Nurse - RN State Plan
DEACDE	PRMISE	S9123					ACDE PDN Indep Nurse - RN PROMISE
DEHHO	DSHP	S9123					HHO PDN Indep Nurse - RN State Plan
DEHHO	PRMISE	S9123					HHO PDN Indep Nurse - RN PROMISE
DEDMMA	DSHP	S9124					PDN Indep Nurse - LPN State Plan
DEDMMA	PRMISE	S9124					PDN Indep Nurse - LPN PROMISE
DEACDE	DSHP	S9124					ACDE PDN Indep Nurse - LPN State Plan
DEACDE	PRMISE	S9124					ACDE PDN Indep Nurse - LPN PROMISE
DEHHO	DSHP	S9124					HHO PDN Indep Nurse - LPN State Plan
DEHHO	PRMISE	S9124					HHO PDN Indep Nurse - LPN PROMISE
DEDMMA	DSHP	T1000					PDN
DEACDE	DSHP	T1000					ACDE PDN
DEHHO	DSHP	T1000					HHO PDN
DEDMMA	DDDS	T1005	U1				Respite - PASA agency
DEDMMA	DDDS	T1005	PC				Respite - HH agency
DEDMMA	DDDS	T1005					Respite - Easter Seals
DEDMMA	DDDS	T1005	U2				Respite - Self-Directed

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Payer	Program	HCPCS Code	Modifier 1	Modifier 2	Modifier 3	Modifier 4	Service Description
DEDMMA	DDDS	T1019					Waiver PC - Lifespan
DEDMMA	DDDS	T1019	U1				Waiver PC - PASA Agency Lifespan
DEDMMA	DDDS	T1019	PC				Waiver PC - HH
DEDMMA	DDDS	T1019	U2				Waiver PC - Self-Directed
DEDMMA	PRMISE	T1019					Waiver PC - PROMISE
DEDMMA	PRMISE	T1019	U1				Waiver PC - PASA Agency PROMISE
DEACDE	PRMISE	T1019					ACDE Waiver PC - PROMISE
DEACDE	PRMISE	T1019	U1				ACDE Waiver PC - PASA Agency PROMISE
DEHHO	PRMISE	T1019					HHO Waiver PC - PROMISE
DEHHO	PRMISE	T1019	U1				HHO Waiver PC - PASA Agency PROMISE
DEDMMA	DDDS	T2013					Supported Living

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Appendix 3: Exception Codes

Exception Code	Exception	Fix or Acknowlegde
0	Unknown Client	FIX
1	Unknown Employee	FIX
34	Unauthorized/Invalid Service	FIX
23	Missing Service	FIX
2	Visits Without Any Calls	FIX
3	Visits Without In-Call	FIX
4	Visits Without Out Call	FIX

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Appendix 4: Reason Codes

Reason Code	Reason	Note Required?
100	Member No Show	No
110	Member Unavailable	No
120	Member Refused Verification	No
130	Member Refused Service	No
140	Member Incapable, Designee Unavailable	No
150	Caregiver Failed to Call In - Verified Services Were Delivered	No
160	Caregiver Failed to Call Out - Verified Services Were Delivered	No
170	Caregiver Failed to Call In and Out - Verified Services Were Delivered	No
180	Caregiver Called Using an Alternate Phone	No
190	Caregiver Change	No
200	Mobile App Issue/Inoperable	No
210	Telephony Issue/Inoperable	No
230	Service Outside the Home	No
240	Unsafe Environment	YES
999	Other	YES

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Appendix 5: Task List

Task ID	Task Description
100	Lifting/Transferring
110	Bathing
120	Grooming
130	Toileting
140	Dressing/Undressing
150	Mobility
160	Housekeeping
170	Meal Preparation
180	Support with medications
190	Laundry
200	Assistance with feeding
210	Skin care
220	Shopping
230	Chores
240	Errands

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Appendix 6: Valid Timezones

Time Zone Code	Daylight Savings Time Observed?
US/Alaska	Active
US/Aleutian	Active
US/Arizona	Inactive
US/Central	Active
US/East-Indiana	Active
US/Pacific	Active
US/Hawaii	Inactive
US/Indiana-Starke	Active
US/Michigan	Active
US/Mountain	Active
US/Eastern	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
America/Puerto_Rico	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

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Appendix 7: Valid Languages

Valid Language Preference
English
Spanish

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Appendix 8: US State Abbreviations

US State	State Abbreviation	US State	State Abbreviation
Alabama	AL	Nebraska	NE
Alaska	AK	Nevada	NV
Arizona	AZ	New Hampshire	NH
Arkansas	AR	New Jersey	NJ
California	CA	New Mexico	NM
Colorado	CO	New York	NY
Connecticut	CT	North Carolina	NC
Delaware	DE	North Dakota	ND
Florida	FL	Ohio	OH
Georgia	GA	Oklahoma	OK
Hawaii	HI	Oregon	OR
Idaho	ID	Pennsylvania	PA
Illinois	IL	Rhode Island	RI
Indiana	IN	South Carolina	SC
Iowa	IA	South Dakota	SD
Kansas	KS	Tennessee	TN
Kentucky	KY	Texas	TX
Louisiana	LA	Utah	UT
Maine	ME	Vermont	VT
Maryland	MD	Virginia	VA
Massachusetts	MA	Washington	WA
Michigan	MI	West Virginia	WV
Minnesota	MN	Wisconsin	WI
Mississippi	MS	Wyoming	WY
Missouri	MO		
Montana	MT		

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