

Arizona AHCCCS

Alternate EVV Vendor Specification v1.15

Sandata Technologies, LLC

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Version History

| Version | Name | Title | Changes | Date |
|---------|---------------|---------------------------|--|------------|
| V1.0 | Pamela Brooks | Product Delivery Owner | Initial Draft | 08.08.2019 |
| V1.0a | Pamela Brooks | Product Delivery Owner | Update based on changes to the business rules | 11.15.2019 |
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| V1.0e | Pamela Brooks | Product Delivery Owner | Removed Exception 19 "Visit Without Calls" | 01.08.2020 |
| V1.1 | Pamela Brooks | Product Delivery Owner | Added Contingency Plan reason/resolution codes; new field ProviderAssentContPlan | 01.16.2020 |
| V1.2 | Pamela Brooks | Product Delivery Owner | Updated Exception Table / Exception IDs | 01.22.2020 |
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| V1.8 | Ruth Sewell | Implementation Director | Updated version in header and footer to align with most recent, added service code S5125 U7 back to services list. | 6/1/2020 |
| V1.9 | Pamela Brooks | Product Delivery Owner | Added new Schedule segment Changed EmployeeEmail from required to optional Updated description for ProviderAssentContPlan to review with member 'annually' (this was previously set to every 90 days) | 09.25.2020 |
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|-------|---------------|---------------------------|--|------------|
| | | | | |
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| V1.13 | Tessie Austin | Technical Account Manager | Updated information on descriptions and expected values Added new service codes that will be updated in future release Removed Short Visit Exception | 07.27.2022 |
| V1.14 | Tessie Austin | Technical Account Manager | Updated formatting Added service codes that will be added for hard claims edits Aligned information to AZ EVV Policy documents Removed Schedule Segment per AZ EVV Policy Guidelines Removed "H2014" service codes and modifiers | 09.19.2022 |
| V1.15 | Tessie Austin | Technical Account Manager | Removed "MissingMedicaidID" (Marked as DO NOT PROVIDE) | 11.04.2022 |

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

Base Version 7.6

1 EVV Vendor Interface Transmission Guidelines

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

2 Overview

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

2.1 Intended Audience

The intended audience of this document is:

Project Management and Technical teams at Sandata.

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

2.2 Transmission Frequency

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

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

2.3 Transmission Limits

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

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

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

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

2.4 Data Type Format Details

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

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

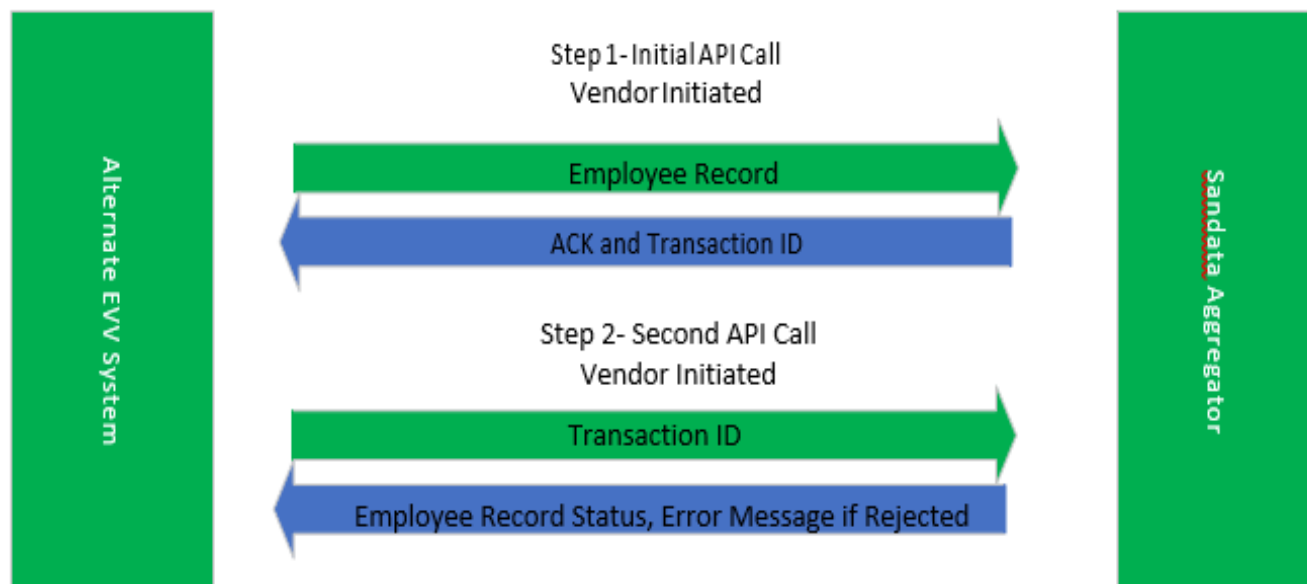
XML format should be string. The data type provided in the specification is based on the following field definitions.

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

| Data Type | Description | Example |
|---------------------|---|---|
| DateTime | The date and time are represented as a string with the following format: YYYY-MM-DDTHH:MM:SSZ All times will be provided in UTC. If time is not material, it will be provided as is expected. | 2016-12-20T16:10:28Z |
| Date (Only Date) | The data is represented as a string with the following format: YYYY-MM-DD Date only will be sent in UTC format. | 2016-12-20 |
| Timezone | All time for tracking visits will be in UTC. All time zone values will be derived from the Internet Assigned Numbers Authority (IANA) time zone database, which contains data that represents the history of local time for locations around the globe. It is updated periodically to reflect changes made by political bodies to time zone boundaries, UTC offsets, and daylight-saving rules. The time zone name expected in each transaction is the actual time zone where the event took place. i.e., US/Eastern. | A complete list of time zones can be found at: https://www.iana.org/time-zones See Appendix for the list of time zones. |
| Data Type | Description | Example |
| String | A string is a row of zero or more characters that can include letters, numbers, or other types of characters as a unit, not an array of single characters. (e.g., plain text). | "This is a string" |
| Integer | An integer is a numeric value without a decimal. Integers are whole numbers and can be positive or negative. | 52110 (positive) -87721 (negative) |
| Decimal | A floating-point number is referred to as a decimal . Can be positive or negative. | 8221.231 (positive) -71.214 (negative) |
| Boolean | A logic predicate indicator that can be either true or false. | true false |

3 Rejected Record Process

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



3.1 New Record and Updates

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

4 Transmission Method

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

4.1 Rules

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

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

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

- Clients
- Employees (Field Staff)
- Visit Information

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

THE ALTERNATE DATA COLLECTION SYSTEM WILL BE RESPONSIBLE FOR:

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

Complete transmissions:

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

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

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

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

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

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

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

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

GENERAL PROCESSING RULES:

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

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

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

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

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

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

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

CLIENT RULES:

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

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

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

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

EMPLOYEE RULES:

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

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

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

VISIT RULES:

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

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

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

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

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

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

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

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

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

It is assumed that there are some exceptions that cannot be “fixed” in the Alternate Data Collection System by their nature. They are configured for the Payer/State program as requiring acknowledgement by the system user. One of the included visit elements provides the ability for the user to send their acknowledgement. These exceptions require attestation that the exception has been reviewed/acknowledged in the system along with the appropriate reason code and attestation that appropriate documentation exists. Exceptions are specific to a given Payer/Program and will be noted in the associated appendix.

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

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

5 Sequencing

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

not be reused. The next update should increment to the next number in the sequence. Failure to do so will cause the new record to be rejected as a duplicate.

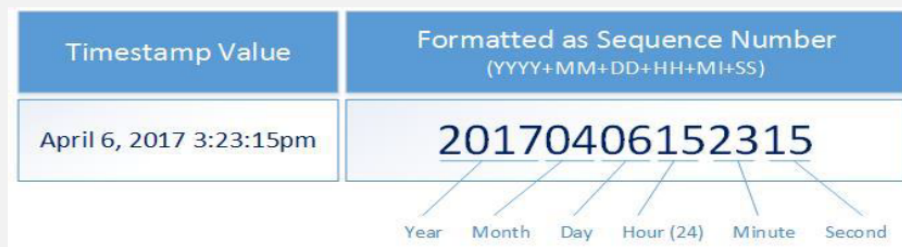
Sequence Rules:

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

Please Note:

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

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



6 Message Acknowledgement (ACK) and Transaction ID

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

7 Response for Record Status

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

8 AZ AHCCCS Specific Requirements

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

8.1 EVV- Element- Activity

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

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

8.2 Client Data Endpoint

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

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|--|---------------------|--|----------------|----------------|----------------|--|
| ProviderIdentification - Required | | | | | | |
| 1 | ProviderQualifier | Unique identifier for the provider as determined by the program definition. | 20 | String | Yes | "MedicaidID" |
| 2 | ProviderID | Unique identifier for the agency. ID type must match to the ProviderQualifier value being passed for Provider validation and lookup. | 50 | String | Yes | 6 character string ProviderID Format: ##### May be left padded with zeros |
| ClientGeneralInformation - Required | | | | | | |
| 1 | ClientID | Assigned client_id | Do Not Provide | Do Not Provide | Do Not Provide | Do Not Provide - Sandata Assigned |
| 2 | ClientFirstName | Client's First Name. | 30 | String | Yes | Client's First Name (See Field Level Errors in Appendix 9.7) |
| 3 | ClientMiddleInitial | Client's Middle Initial. | 1 | String | Optional | Client's Middle Initial |
| 4 | ClientLastName | Client's Last Name. | 30 | String | Yes | Client's Last Name |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|--|------------------------|---|----------------|----------------|----------------|--|
| | | | | | | (See Field Level Errors in Appendix 9.7) |
| 5 | ClientQualifier | Value being sent uniquely identify the client | 20 | String | Yes | "ClientCustomID" |
| 6 | ClientMedicaidID | Unique ID provided by the State Medicaid program to the client. | 64 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 7 | ClientIdentifier | Payer assigned client identifier identified by ClientQualifier | 64 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 8 | MissingMedicaidID | Indicator that a patient is a newborn. If this value is provided, ClientMedicaidID will be ignored and will be valid as null. | Do Not Provide | Do Not Provide | Do Not Provide | Do Not Provide |
| 9 | SequenceID | The Third-Party EVV visit sequence ID. Sandata recommends this be a timestamp (to the second) to ensure the order of the client data updates. For HHA System users, the value is the system-generated key. | 16 | Integer | Yes | Third-Party EVV Vendor Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters. |
| 10 | ClientCustomID | Unique client identifier used by the state to reference the member data across all Medicaid activities. This value will need to be the same as the ClientIdentifier. | 24 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 11 | ClientOtherID | Additional client user-defined ID. Commonly used to store client's ID from another system. Used to match client to an existing record during import. | 24 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 12 | ClientTimezone | Client's primary time zone. Depending on the program, this value may be defaulted or automatically calculated. | 64 | String | Yes | See Appendix 9.8 for Time Zone Values |
| 13 | Coordinator | The staff member assigned to the client in a specific agency as the coordinator for an employee. | 3 | String | Optional | "###" |
| 14 | ProviderAssentContPlan | Indicator to capture provider's attestation that the member's contingency plan provided will be reviewed with the member annually and documentation will be provided. | 5 | Boolean | Yes | Yes No Default = No Please refer to the AHCCCS Alternate EVV Vendor Interface Policy Crosswalk for specific attestation. |
| ClientAddress – Required | | | | | | |
| Required segment. At least one record for each client is required for the program. Multiple addresses are accepted with different address types. | | | | | | |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|--|------------------------|--|------------|---------|------------|---|
| 1 | ClientAddressType | This field designates the client address type. Note that multiple of the same type can be provided. Default to Other if not available. | 12 | String | Yes | "Home" "Business" "Other" |
| 2 | ClientAddressesPrimary | One address must be designated as primary by sending true. Additional addresses will be false. | 5 | String | Yes | "true" "false" |
| 3 | ClientAddressLine1 | Street address line 1 associated with this address. PO Box may be used for Safe at Home participants. PO Box may impact GPS reporting. | 30 | String | Yes | Address Line 1 |
| 4 | ClientAddressLine2 | Street address line 2 associated with this address. | 30 | String | Optional | Address Line 2 |
| 5 | ClientCounty | County associated with this address. | 25 | String | Optional | County |
| 6 | ClientCity | City associated with this address. | 30 | String | Yes | City |
| 7 | ClientState | State associated with this address. | 2 | String | Yes | Two-character standard state abbreviation. (Must be capitalized) |
| 8 | ClientZip | Zip Code associated with this address. If additional 4 digits are not known, provide zeros. | 9 | String | Yes | Zip Code Format: ##### |
| 9 | ClientAddressLongitude | Calculated for each address. | 20 | Decimal | Optional | Longitude Value Decimal with sign if negative 3 primary.15digit precision. Decimal format with (-) XXX.XXXXXXXXXXXXXXX digits |
| 10 | ClientAddressLatitude | Calculated for each address. | 19 | Decimal | Optional | Latitude Value Decimal with sign if negative 2 primary.15digit precision. Decimal format with (-)XX.XXXXXXXXXXXXXXX digits |
| ClientPhone - Conditional | | | | | | |
| The fields in this segment marked as required "Yes" are only needed when this segment is sent. | | | | | | |
| 1 | ClientPhoneType | This is the client phone type. Note that multiple of the same type can be provided. | 12 | String | Yes | "Home" "Mobile" "Business" "Other" |
| 2 | ClientPhone | Client phone number including area code. | 10 | String | Yes | Client Phone Number Format: ##### |
| ClientDesignee - Optional | | | | | | |
| The fields in this segment marked as required "Yes" are only needed when this segment is sent. | | | | | | |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|-------|----------------------------|--|------------|--------|-------------|--|
| 1 | ClientDesigneeFirstName | First Name of the Client Designee. | 30 | String | Yes | Designee's First Name |
| 2 | ClientDesigneeLastName | Last Name of the Client Designee. | 30 | String | Yes | Designee's Last Name |
| 3 | ClientDesigneeEmail | Email address of the Client Designee. | 50 | String | Yes | Format: xxx@yyy.zzz Note: @ and extension (.zzz) are required to validate email address. |
| 4 | ClientDesigneeStatus | Status of the Client Designee pertaining to Sandata system access. If the ClientDesigneeStatus is sent, ClientDesigneeStartDate and ClientDesigneeEndDate are not required. (Provide the 2-digit code including the 0) Sandata System can either populate the start or end date based on the date of receipt of the status or the source system can send the activation and termination date. | 2 | String | Conditional | "02" "04" Available Values: 02 = Active, 04 = Inactive. (Please note Activation and termination dates cannot be backdated or future dated) |
| 5 | ClientDesigneeStartDate | The date Client Designee was assigned. Future date is not acceptable. If the ClientDesigneeStartDate is sent, ClientDesigneeStatus is not required. | 10 | Date | Conditional | Format: YYYY-MM-DD |
| 6 | ClientDesigneeEndDate | The date Client Designee was terminated. Future date and Back date is not acceptable. If the ClientDesigneeEndDate is sent, ClientDesigneeStatus is not required. | 10 | Date | Conditional | Format: YYYY-MM-DD |
| 7 | ClientDesigneeRelationship | Relationship of the Designee to the client | 30 | String | Optional | "Mother" "Father" "Spouse" "Partner" "Sibling" "Grandparent" "Other" "Relative" "Legal Guardian" "Court Appointed Rep" "Other" |

8.3 [Employee Data Endpoint](#)

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

EmployeeGeneralInformation - Required

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|--|--------------------|--|------------|---------|------------|---|
| Required data in the body of the transmission. This segment provides the basic information about the employee. | | | | | | |
| 1 | EmployeeQualifier | Descriptive reference of the value being sent to uniquely identify the employee. | 20 | String | Yes | "EmployeeSSN" (See Field Level Errors in Appendix 9.7) |
| 2 | EmployeeIdentifier | Employee identifier identified by EmployeeQualifier. If employee information is received from the payer, this information will be used to link the received Third Party EVV information with the payer information provided and should be defined as the same value. | 9 | String | Yes | Full SSN - Format: ##### |
| 3 | SequenceID | The Third-Party EVV visit sequence ID to which the change applied. | 16 | Integer | Yes | Third-Party EVV Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters. |
| 4 | EmployeeSSN | Employee Social Security Number. | 9 | String | Yes | Format: ##### |
| 5 | EmployeeLastName | Employee's last name. | 30 | String | Yes | Employee's Last Name (See Field Level Errors in Appendix 9.7) |
| 6 | EmployeeFirstName | Employee's first name. | 30 | String | Yes | Employee's First Name (See Field Level Errors in Appendix 9.7) |
| 7 | EmployeeEmail | Employee's email address. | 64 | String | Optional | Employee's Email Address Format: "@" and extension (.xxx) are required to validate as an email address |
| 8 | EmployeeHireDate | Employee's Date of Hire. | 10 | Date | Optional | Hire Date Format: YYYY-MM-DD |
| 9 | EmployeeEndDate | Employee's HR recorded end date. | 10 | Date | Optional | Hire Date Format: YYYY-MM-DD |

8.4 [Visit Data Endpoint](#)

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

VisitGeneralInformation - Required

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

| | | | | | | |
|---|--------------|--|----|--------|-----|------------------|
| 1 | VisitOtherID | Visit identifier in the external system. | 50 | String | Yes | Visit Identifier |
|---|--------------|--|----|--------|-----|------------------|

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|-------|-------------------------|--|------------|---------|------------|--|
| 2 | SequenceID | The Third-Party EVV visit sequence ID to which the change applied. | 16 | Integer | Yes | Third-Party EVV Visit Sequence ID If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters. |
| 3 | EmployeeQualifier | Descriptive reference of the value being sent to uniquely identify the employee. | 20 | String | Yes | "EmployeeSSN" |
| 4 | EmployeeIdentifier | Employee identifier identified by EmployeeQualifier. If employee information is received from the payer, this information will be used to link the received Third Party EVV information with the payer information provided and should be defined as the same value. | 9 | String | Yes | Format: ##### Full EmployeeSSN |
| 5 | GroupCode | This visit was part of a group visit. GroupCode is used to reassemble all members of the group. | 6 | String | Optional | GroupCode |
| 6 | ClientIDQualifier | Describes what type of identifier is being sent to identify the client. | 20 | String | Yes | "ClientCustomID" |
| 7 | ClientID | Unique client identifier used by the state to reference the member data across all Medicaid activities. | 64 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 8 | ClientOtherID | Additional client user-defined ID. This value is used to match the client to an existing record during import. RULE: Provide this value if also included in the Client_General segment. | 24 | String | Yes | Format: A##### (9-digit ID) Starting w/UpperCase "A" followed by 8 digits (0-9) |
| 9 | VisitCancelledIndicator | Set to false as the default. Set to true if a future scheduled visit previously sent and accepted with NO "CallIn", "CallOut" or "Adjusted" times to be cancelled / deleted. Can only be applicable to future schedules. | 5 | String | Yes | "true" "false" Can only be true or false. |
| 10 | PayerID | Sandata EVV assigned ID for the payer. | 64 | String | Yes | See Appendix 9.1 PayerID column |
| 11 | PayerProgram | If applicable, the program to which this visit belongs. | 9 | String | Yes | See Appendix 9.1 ProgramID column |
| 12 | ProcedureCode | This is the billable procedure code which would be mapped to the associated service. | 5 | String | Yes | HCPSC Code as listed. See Appendix 9.1.1 |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|-------|-------------------|--|------------|----------|-------------|---|
| 13 | Modifier1 | Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix. | 2 | String | Conditional | Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1 |
| 14 | Modifier2 | Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix. | 2 | String | Conditional | Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1 |
| 15 | Modifier3 | Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix. | 2 | String | Conditional | Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1 |
| 16 | Modifier4 | Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. It is required to apply modifier values in the order specifically listed in the Appendix. | 2 | String | Conditional | Service Code modifiers as listed in Appendix. Value must match distinct values from reference tables and modifiers must be in order as defined. Should be "NULL" if nothing is provided. See Appendix 9.1.1 |
| 17 | VisitTimeZone | Visit primary time zone. Depending on the program, this value may be defaulted or automatically calculated. | 64 | String | Yes | See Appendix 9.8 for Time Zone Values |
| 18 | ScheduleStartTime | Activity/Schedule start date and time. Note: Schedules are required in all cases. Lack of a schedule is on an exception basis. <i>Reference AZ EVV Business Rules for policy requirements</i> | 20 | DateTime | Optional | FORMAT: YYYY-MM-DDTHH:MM:SSZ MUST send an exception code when "NULL" is sent in ScheduleStartTime. See Appendix 9.3 for Exceptions |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|-------|------------------|---|------------|----------|------------|--|
| 19 | ScheduleEndTime | Activity/Schedule end date and time. Note: Schedules are required in all cases. Lack of a schedule is on an exception basis. <i>Reference AZ EVV Business Rules for policy requirements</i> | 20 | DateTime | Optional | FORMAT: YYYY-MM-DDTHH:MM:SSZ MUST send an exception code when "NULL" is sent in ScheduleEndTime. See Appendix 9.3 for Exceptions |
| 20 | Contingency Plan | Indicator of member's contingency plan selected by member. Valid values include: CP01 - Reschedule within 2 Hours CP02 - Reschedule within 24 Hours CP03 - Reschedule within 48 Hours CP04 - Next Scheduled Visit CP05 - Non-Paid Caregiver | 64 | String | Optional | CP01 CP02 CP03 CP04 CP05 |
| 21 | Reschedule | Indicator if schedule is a "reschedule" | 5 | Boolean | Optional | "Yes" "No" If left blank, defaults to "No" |
| 22 | AdjInDateTime | Adjusted in date/time if entered manually. Otherwise, the actual date/time received. The VisitChanges segment is required when this is sent. | 20 | DateTime | Optional | Adjusted In Date and Time Format: YYYY-MM-DDTHH:MM:SSZ |
| 23 | AdjOutDateTime | Adjusted out date/time if entered manually. Otherwise, the actual date/time received. The VisitChanges segment is required when this is sent. | 20 | DateTime | Optional | Adjusted Out Date and Time Format: YYYY-MM-DDTHH:MM:SSZ |
| 24 | BillVisit | True for all visits to be billed. False is only sent if the visit is not to be considered for claims validation and set to omit status. If no value is sent, this defaults to "false" | 5 | String | Optional | "true" "false" |
| 25 | HoursToBill | Hours that are going to be billed. | 99.999 | Decimal | Optional | Actual hours in decimal |
| 26 | HoursToPay | If payroll is in scope for the payer program, the hours to pay. | 99.999 | Decimal | Optional | Actual hours in decimal |
| 27 | Memo | Associated free form text. | 512 | String | Optional | May be required based on AZ EVV Business Rules for Exceptions |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|---|--------------------------|--|------------|--------|------------|------------------|
| 28 | ClientVerifiedTimes | ClientVerifiedTimes, ClientVerifiedTasks, ClientVerifiedService - all three fields work together in the Sandata system and generate an exception if the client validation and signature are not captured at the time of visit. The agency would need to provide details why the client did not confirm the visit times, tasks and/or why a signature was not obtained. Often, this gets triggered when the member receiving service is not available at the time the visit ends. | 5 | String | Optional | "true" "false" |
| 29 | ClientVerifiedTasks | ClientVerifiedTimes, ClientVerifiedTasks, ClientVerifiedService - all three fields work together in the Sandata system and generate an exception if the client validation and signature are not captured at the time of visit. The agency would need to provide details why the client did not confirm the visit times, tasks and/or why a signature was not obtained. Often, this gets triggered when the member receiving service is not available at the time the visit ends. | 5 | String | Optional | "true" "false" |
| 30 | ClientVerifiedService | ClientVerifiedTimes, ClientVerifiedTasks, ClientVerifiedService - all three fields work together in the Sandata system and generate an exception if the client validation and signature are not captured at the time of visit. The agency would need to provide details why the client did not confirm the visit times, tasks and/or why a signature was not obtained. Often, this gets triggered when the member receiving service is not available at the time the visit ends. | 5 | String | Optional | "true" "false" |
| 31 | ClientSignatureAvailable | The actual signature will not be transferred. The originating system will be considered the system of record. | 5 | String | Optional | "true" "false" |
| 32 | ClientVoiceRecording | The actual voice recording will not be transferred. The originating system will be considered the system of record. | 5 | String | Optional | "true" "false" |
| Calls – Conditional | | | | | | |
| Conditional segment if calls are not provided, adjusted times must be included in the parent visit element. Visit first instance expected to include calls with actual captured clock in and clock out, with appropriate CallType. All time adjustments must be in the adjusted time fields, in the parent visit. Note that some vendor systems may not record some visit activity as calls. If this is the case, the call element can be omitted. Sandata will treat visit information without calls as manually entered. The fields in this segment marked as required "Yes" are only needed when this segment is sent. | | | | | | |
| | | | | | | |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|-------|------------------------|---|------------|----------|-------------|--|
| 1 | CallExternalID | Call identifier in the external system. | 16 | String | Yes | Call Identifier |
| 2 | CallDateTime | Event date time. Must be to the second. | 20 | DateTime | Yes | Call Date Time Format: YYYY-MM-DDTHH:MM:SSZ |
| 3 | CallAssignment | This identifies the call assignment type. | 10 | String | Yes | "Time In" "Time Out" "Other" |
| 4 | GroupCode | This visit was part of a group visit. GroupCode is used to reassemble all members of the group. | 6 | String | Optional | GroupCode |
| 5 | CallType | The type of device used to create the event. Any call with GPS data collected should be identified as Mobile. FVV should be used for any type of fixed visit verification device. NOTE: VisitChanges segment is required for CallType = Manual or Other | 20 | String | Yes | "Telephony" "Mobile" "FVV" "Manual" "Other" |
| 6 | ProcedureCode | This is the billable procedure code which would be mapped to the associated service. | 5 | String | Yes | HCPCS Code See Appendix 9.1.1 |
| 7 | ClientIdentifierOnCall | If a client identifier was entered on the call, this value should be provided. | 10 | String | Conditional | Format: ##### |
| 8 | MobileLogin | Login used if a mobile application is in use for GPS calls. Required if CallType = Mobile. | 64 | String | Conditional | Mobile Login Only special characters allowed are "@" and "." Example: XXXXXXXX@XXXX.XXX |
| 9 | CallLatitude | GPS latitude recorded during event. Latitude has a range of -90 to 90 with a 15-digit precision. Required for CallType = Mobile | 19 | Decimal | Conditional | Latitude Value Decimal with sign if negative 2 primary.15digit precision. Decimal format with (-)XX.XXXXXXXXXXXXXXX digits |
| 10 | CallLongitude | GPS longitude recorded during event. Longitude has a range of -180 to 180 with a 15-digit precision. Required for CallType = Mobile | 20 | Decimal | Conditional | Longitude Value Decimal with sign if negative 3 primary.15digit precision. Decimal format with (-)XXX.XXXXXXXXXXXXXXX digits |
| 11 | Location | Location of the visit | 25 | String | Optional | This is a free text field. Characters allowed: Alphanumeric_.'-#,/space |
| 12 | TelephonyPIN | Identification for the employee using telephony. Required if CallType = Telephony. | 9 | Integer | Conditional | Telephony PIN Numbers only |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|---|------------------------|--|------------|----------|-------------|---|
| 13 | OriginatingPhoneNumber | Originating phone number for telephony. Required if CallType = Telephony. | 10 | String | Conditional | Originating Phone Number Format: ##### No Special Characters |
| 14 | VisitLocationType | Self-Reported visit location for all call types. 1=Home, 2=Community | 2 | String | Optional | "1" "2" |
| VisitExceptionAcknowledgement – Conditional | | | | | | |
| <p>Conditional segment provided for a visit when it has corrections, alterations, or updates in the source system that caused exceptions, which have been acknowledged by the provider agency. Every exception that is acknowledgeable (versus exceptions that require a fix- or alteration of the visit data) must have an acknowledgement for the visit to be fully verified and compliant with the EVV program's rules. The fields in this segment marked as required "Yes" are only needed when this segment is sent.</p> <p style="text-align: center;">** Reference AZ EVV Business Rules for policy requirements for memos **</p> | | | | | | |
| 1 | ExceptionID | ID for the exception being acknowledged. | 2 | String | Yes | See Appendix 9.3 for values |
| 2 | ExceptionAcknowledged | True to acknowledge exceptions that are indicated as acknowledgeable only. False by default. | 5 | String | Yes | "true" or "false" |
| VisitChanges – Conditional | | | | | | |
| <p>Conditional segment provided when a visit has been manually entered, adjusted, or updated (this includes visits with exceptions) 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. When the VisitChanges segment is used, the visit is considered Manually Verified. The fields in this segment marked as required "Yes" are only needed when this segment is sent.</p> | | | | | | |
| 1 | SequenceID | The Third-Party EVV visit sequence ID to which the change applied | 16 | String | Yes | Third-Party EVV Visit Sequence ID. If TIMESTAMP is used: YYYYMMDDHHMMSS Numbers only; no other characters. |
| 2 | ChangeMadeBy | The unique identifier of the user, system, or process that made the change. This could be a system identifier for the user or an email. Could also be a system process, in which case it should be identified. | 64 | String | Yes | Unique Identifier of Change Agent Required - Username or User Identifier who completed the change to the visit information (Audit) |
| 3 | ChangeDateTime | Date and time when change is made. At least to the second. | 20 | DateTime | Yes | Date and Time When Change is Made Format: YYYY-MM-DDTHH:MM:SSZ |
| 4 | GroupCode | This visit was part of a group visit. GroupCode is used to reassemble all members of the group. | 6 | String | Optional | Group Code |
| 5 | ReasonCode | Reason Code associated with the change. | 4 | String | Yes | See Appendix 9.2 Reason Code Column Format: ## |

| Index | Element | Description | Max Length | Type | Required ? | Expected Value |
|--|------------------|--|------------|--------|-------------|--|
| 6 | ChangeReasonMemo | Reason/Description of the change being made if entered. Required for some reason codes and CallType "Manual" or "Other" or if "Adjusted" times are included. | 256 | String | Conditional | See Appendix 9.2 Note Required column to determine if required |
| 7 | ResolutionCode | Resolution codes, if selected. Resolution Codes are specific to the program. | 4 | String | Optional | See Appendix 9.2.1 Resolution Code ID Column |
| Tasks- Conditional | | | | | | |
| If you wish to match tasks from the original system to those allowed from the Task Appendix you can transfer those using this section. This is an OPTIONAL segment. The fields in this segment marked as required "Yes" are only needed when this segment is sent. | | | | | | |
| 1 | TaskID | TaskID must map to Task ID's used for the agency in the Sandata System | 4 | String | Yes | See Appendix 9.4 - Task ID column |
| 2 | TaskRefused | True if task refused, False if not refused | 5 | String | Optional | "true" or "false" |

Appendices

9.1 Payers & Programs

| PayerID | Payer Program | Payer Name | ProgramID |
|---------|---------------|---------------------------------|-----------|
| AZCCCS | 1115 Waiver | AHCCCS | AHCCCS |
| AZDDD | 1115 Waiver | AZ-DDD | AHCCCS |
| AZACH | 1115 Waiver | Arizona Complete Health | AHCCCS |
| AZBUFC | 1115 Waiver | Banner- University Family Care | AHCCCS |
| AZCHP | 1115 Waiver | Care1st Health Plan | AHCCCS |
| AZMCC | 1115 Waiver | Magellan Complete Care | AHCCCS |
| AZMYC | 1115 Waiver | Mercy Care | AHCCCS |
| AZSHC | 1115 Waiver | Steward Health Choice Arizona | AHCCCS |
| AZUCP | 1115 Waiver | UnitedHealthcare Community Plan | AHCCCS |
| AZCDMP | 1115 Waiver | Dental and Medical Plan | AHCCCS |

9.1.1 HCPCS Procedure Codes

Payers, Program, Services, & Modifiers:

****Codes in red will be active at hard claims edit date. If sent before then, visits will be rejected and claims not paid.**

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|---|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0151 | | | | | [G0151]: Services performed by a qualified physical therapist in the home health or hospice setting, each 15 minutes | CP04 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0152 | | | | | [G0152]: Services performed by a qualified occupational therapist in the home health or hospice setting, each 15 minutes | CP04 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0153 | | | | | [G0153]: Services performed by a qualified speech-language pathologist in the home health or hospice setting, each 15 minutes | CP04 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0299 | | | | | [G0299]: Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0299 | UN | | | | [G0299]: Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes; Two patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0299 | UP | | | | [G0299]: Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes; Three patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0300 | | | | | [G0300]: Direct skilled nursing services of a licensed practical nurse (lpn) in the home health or hospice setting, each 15 minutes | CP01 | Rule 1 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|--|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0300 | UN | | | | [G0300]: Direct skilled nursing services of a licensed practical nurse (lpn) in the home health or hospice setting, each 15 minutes; Two patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | G0300 | UP | | | | [G0300]: Direct skilled nursing services of a licensed practical nurse (lpn) in the home health or hospice setting, each 15 minutes; Three patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U7 | U4 | | | [S5125]: Attendant care services; per 15 minutes; Agency with Choice; Family member or non-spouse not residing at home | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U7 | U5 | | | [S5125]: Attendant care services; per 15 minutes; Agency with Choice; Family member or non-spouse residing in member's home | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U7 | U3 | | | [S5125]: Attendant care services; per 15 minutes; Agency with Choice; Spouse - limit to 160 units per week | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | | | | | [S5125]: Attendant care services; per 15 minutes | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | UN | | | | [S5125]: Attendant care services; per 15 minutes; Two patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | UP | | | | [S5125]: Attendant care services; per 15 minutes; Three patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U2 | | | | [S5125]: Attendant care services; per 15 minutes; Unskilled Self-directed care | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U3 | | | | [S5125]: Attendant care services; per 15 minutes; Spouse - limit to 160 units per week | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U4 | | | | [S5125]: Attendant care services; per 15 minutes; Family member or non-spouse not residing at home | CP01 | Rule 1 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|--|---------------|--------------|------------|------------|------------|------------|---|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U5 | | | | [S5125]: Attendant care services; per 15 minutes; Family member or non-spouse residing in member's home | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U6 | | | | [S5125]: Attendant care services; per 15 minutes; Skilled Self-directed care | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5125 | U7 | | | | [S5125]: Attendant care services; per 15 minutes; Agency with Choice | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5130 | | | | | [S5130]: Homemaker service, nos; per 15 minutes | CP04 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5130 | U7 | | | | [S5130]: Homemaker service, nos; per 15 minutes; Agency with Choice | CP04 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5135 | | | | | [S5135]: Companion care, adult (e.g. iadl/adl); per 15 minutes | CP04 | Rule 1 |
| <i>AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP</i> | <i>AHCCCS</i> | <i>S5136</i> | | | | | <i>[S5136]: Companion Care, adult, per diem</i> | <i>CP01</i> | <i>Rule 2</i> |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | HQ | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Group setting | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | UN | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Two patients served | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | UP | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Three patients served | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | UQ | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Four patients served | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | US | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Six or more patients served | CP02 | Rule 1 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|---|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | U3 | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Spouse - limit to 160 units per week | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | U4 | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Family member or non-spouse not residing at home | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | U5 | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Family member or non-spouse residing in member's home | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5150 | U7 | | | | [S5150]: Unskilled respite care, not hospice; per 15 minutes; Agency with Choice | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | U7 | | | | [S5151]: Unskilled respite care, not hospice; per diem; Agency with Choice | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | | | | | [S5151]: Unskilled respite care, not hospice; per diem | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | UN | | | | [S5151]: Unskilled respite care, not hospice; per diem; Two patients served | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | UP | | | | [S5151]: Unskilled respite care, not hospice; per diem; Three patients served | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | UQ | | | | [S5151]: Unskilled respite care, not hospice; per diem; Four patients served | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | UR | | | | [S5151]: Unskilled respite care, not hospice; per diem; Five patients served | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | US | | | | [S5151]: Unskilled respite care, not hospice; per diem; Six or more patients served | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | U3 | | | | [S5151]: Unskilled respite care, not hospice; per diem; Spouse - limit to 160 units per week | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | U4 | | | | [S5151]: Unskilled respite care, not hospice; per diem; Family member or non- | CP02 | Rule 2 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|--|--------------------------------|------------------------|
| | | | | | | | spouse not residing at home | | |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5151 | U5 | | | | [S5151]: Unskilled respite care, not hospice; per diem; Family member or non-spouse residing in member's home | CP02 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S5181 | | | | | [S5181]: Home health respiratory, nos, per diem | CP01 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9123 | | | | | [S9123]: Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used) | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9123 | UN | | | | [S9123]: Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used); Two patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9123 | UP | | | | [S9123]: Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used); Three patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9123 | UF | | | | [S9123]: Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used); Services provided, Morning | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9123 | UG | | | | [S9123]: Nursing care, in the home; by registered nurse, per hour (use for general nursing care only, not to be used when cpt codes 99500-99602 can be used); Services provided, Afternoon | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9124 | | | | | [S9124]: Nursing care, in the home; by licensed practical nurse, per hour | CP01 | Rule 1 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|--|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9124 | UN | | | | [S9124]: Nursing care, in the home; by licensed practical nurse, per hour; Two patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9124 | UP | | | | [S9124]: Nursing care, in the home; by licensed practical nurse, per hour; Three patients served | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9128 | | | | | [S9128]: Speech therapy, in the home, per diem | CP04 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9129 | | | | | [S9129]: Occupational therapy, in the home, per diem | CP04 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | S9131 | | | | | [S9131]: Physical therapy; in the home, per diem | CP04 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T1019 | U7 | | | | [T1019]: Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, icf/mr or imd, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant); Agency with Choice | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T1019 | | | | | [T1019]: Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, icf/mr or imd, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) | CP01 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T1021 | U4 | | | | [T1021]: Home Health Aide (Family Member not residing at home) | CP04 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T1021 | U5 | | | | [T1021]: Home Health Aide (Family Member residing in member's home) | CP04 | Rule 2 |

| Payer | Program | HCPCS Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description | Contingency Plan Default Value | Claims Validation Rule |
|---|---------|------------|------------|------------|------------|------------|---|--------------------------------|------------------------|
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T1021 | | | | | [T1021]: Services performed by a home health aide or certified nurse assistant, per visit | CP04 | Rule 2 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T2017 | U7 | | | | [T2017]: Habilitation, residential, waiver; 15 minutes; Agency with Choice | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T2017 | | | | | [T2017]: Habilitation, residential, waiver; 15 minutes | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T2017 | UP | | | | [T2017]: Habilitation, residential, waiver; 15 minutes; Three patients served | CP02 | Rule 1 |
| AZCCCS, AZDDD, AZACH, AZBUFC, AZCHP, AZMCC, AZMYC, AZSHC, AZUCP, AZCDMP | AHCCCS | T2017 | UN | | | | [T2017]: Habilitation, residential, waiver; 15 minutes; Two patients served | CP02 | Rule 1 |

Reason Codes

| Reason Code | Description | Memo Required |
|-------------|---------------------------------------|---------------|
| 1 | Caregiver Error | No |
| 2 | Member/Designee Unavailable to Verify | No |
| 3 | Mobile Device Issue | No |
| 4 | Telephony Issue | No |
| 5 | Member/Designee Refused Verification | No |
| 6 | Unsafe Environment | No |
| 7 | Member Refused Service | No |
| 8 | Member No Show | No |
| 9 | Other | No |
| 10 | Caregiver No Show | No |
| 11 | Clinical Need | No |
| 12 | Live In/Onsite Caregiver | No |
| 13 | Member Preference | No |

9.2.1 Resolution Codes

| Resolution Code ID | Description |
|--------------------|----------------------------|
| 2 | Reschedule within 2 Hours |
| 3 | Reschedule within 24 Hours |
| 4 | Reschedule within 48 Hours |
| 5 | Next Scheduled Visit |
| 6 | Non-Paid Caregiver |
| 7 | Non-EVV Service Provided |

| | |
|------|--|
| 8 | Contacted Case Manager and/or Reconvened Treatment/Planning Team |
| DAF | Designee Attestation on File |
| TSF | Timesheet with Signature on File |
| None | None |

9.3 Exceptions

Any visit changes and exception acknowledgement should reference these valid exception values when submitting data above. When visits are sent to Sandata via the Alt-EVV API, the Sandata system will calculate “exceptions” based on the incoming data. Business rules are applied to the visit based on the configuration for the program. These rules may trigger visits to be flagged with exceptions, denoting business rules that are not being met. Visits with exceptions will not be “Approved” or “Verified”, and thus may be excluded from additional processing, such as claims validation or data exports. Users of the Alt-EVV API have the opportunity to “Acknowledge” certain exceptions. This tells the Sandata system that the exception has been handled in the source system. Thus, the visit can be treated as “Approved” or “Verified”, so long as all calculated exceptions are marked as “Acknowledged”.

| Exception Code | Acknowledge/Fix | Exception Name | Description |
|----------------|---------------------|---------------------------|---|
| 0 | Fix: Resubmit visit | Unknown Client | Exception for a visit that was performed for a recipient of care that is not yet entered or not found in the EVV system. Note: Visit data will reject on intake. Client on visit must match to an existing client within the distinct Provider Agency Account. |
| 1 | Fix: Resubmit visit | Unknown Employee | (Telephony only) Exception for a visit that was performed by a caregiver who was not yet entered or not found in the EVV system (At the time the visit was recorded). Note: Visit data will reject on intake. Client on visit must match to an existing client within the distinct Provider Agency Account. |
| 3 | Fix: Resubmit visit | Visits Without In-Calls | Exception thrown when a visit is recorded without an "in" call that began the visit. Note: All visits will require the Call segment to be provided. |
| 4 | Fix: Resubmit visit | Visits Without Out-Calls | Exception thrown when a visit is recorded without an "out" call that completed the visit. Note: All visits will require the Call segment to be provided. |
| 5 | Acknowledgeable | Unscheduled Visits | (Scheduling only) This occurs when a visit is started or completed without a schedule in place for that member+service+caregiver. |
| 15 | Acknowledgeable | Unmatched Client ID/Phone | (Telephonic only) Exception when the visit was recorded from a phone number that was not matched to a recipient of care in the EVV system. This exception is directly related to the OriginatingPhoneNumber field in the Calls segment. |

| 18 | Acknowledgeable | Late In Call | (Scheduling only) This occurs when the start of a visit is received and recorded as having begun over 60 minutes AFTER the scheduled start time for that visit. |
|----------------|---------------------|--------------------------------|---|
| Exception Code | Acknowledge/Fix | Exception Name | Description |
| 21 | Acknowledgeable | No Show | (Scheduling only) This exception occurs when a visit has been scheduled, but no calls have been received for that visit. |
| 23 | Fix: Resubmit visit | Missing Service | Exception when the service provided during a visit is not recorded or present in the system. Note: Visit data will reject if the inbound service (ProcedureCode) does not match a record defined in the specification Appendix. |
| 26 | Acknowledgeable | Employee Speaker Verification | (Telephonic only) Only used when the Employee Speaker Verification feature is enabled. This exception indicates that the speaker verification evaluation did not match the voice making the call with a known caregiver in the EVV account that the phone number is associated with. |
| 28 | Acknowledgeable | Visit Verification Exception | Exception occurs when the program has the 'client verification of the visit' enabled and is triggered when the client indicates that the DURATION of the EVV visit does not reflect the amount of time that care was actually provided for. This exception is directly related to the ClientVerifiedTimes field in the Visit General segment. If ClientVerifiedTimes is marked FALSE, this exception will be triggered. |
| 34 | Fix: Resubmit visit | Invalid Service | Exception when the service selected for a visit is not valid for the program / recipient of care. |
| 39 | Acknowledgeable | Client Signature Verification | Exception occurs when the program has the 'client verification of the visit' enabled, and is triggered when the visit does not have a signature or client voice recording captured at the time of service. . This exception is directly related to the ClientVoiceRecording and the ClientSignatureAvailable fields in the Visit General segment. If both fields are FALSE, this exception will be triggered. |
| 40 | Acknowledgeable | Service Verification Exception | Exception occurs when the program has the 'client verification of the visit' enabled and is triggered when the client indicates that the SERVICE RECORDED in the EVV visit does not reflect the actual activity performed during that visit. This exception is directly related to the ClientVerifiedService field in the Visit |

| | | | |
|--|--|--|--|
| | | | General segment. If ClientVerifiedService is marked FALSE, this exception will be triggered. |
|--|--|--|--|

9.4 Tasks

| TaskID | Task Description |
|--------|--|
| 110 | Shopping |
| 120 | Meal/Snack Preparation and Clean Up |
| 130 | Errand |
| 140 | Medical Appointment |
| 150 | Self-Administration of Medication |
| 160 | Bathing |
| 170 | Eating |
| 180 | Assisting with Mail |
| 190 | Dressing and Grooming |
| 200 | Housekeeping - Bedroom |
| 210 | Housekeeping - Bathroom |
| 220 | Housekeeping - Kitchen |
| 230 | Housekeeping – Common Living Areas |
| 240 | Laundry |
| 250 | General Supervision |
| 260 | Turning, Positioning or Transferring |
| 270 | Toileting |
| 280 | Cognitive/Academic |
| 290 | Communication |
| 300 | Continence Support and Hygiene(bowel, bladder, catheter) |
| 310 | Emergency and Safety Skills |
| 320 | Health/Medical |
| 330 | Independent Living Skills |
| 340 | Leisure Time Recreation Skills |
| 350 | Medication Administration |
| 360 | Mobility |
| 370 | Personal Health Care |
| 380 | Range of motion/exercise |
| 390 | Sensorimotor |
| 400 | Socialization |
| 410 | Vital Signs |

9.5 Acronyms & Definitions

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

9.6 Terminology

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

9.7 Field Level Errors

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

9.8 Time Zone List

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

| Text Value |
|------------------------------|
| US/Alaska |
| US/Aleutian |
| US/Arizona |
| US/Central |
| US/East-Indiana |
| US/Eastern |
| US/Hawaii |
| US/Indiana-Starke |
| US/Michigan |
| US/Mountain |
| US/Pacific |
| US/Samoa |
| America/Indiana/Indianapolis |
| America/Indiana/Knox |
| America/Indiana/Marengo |
| America/Indiana/Petersburg |
| America/Indiana/Vevay |
| America/Indiana/Vincennes |
| America/Puerto_Rico |
| Canada/Atlantic |
| Canada/Central |
| Canada/East-Saskatchewan |
| Canada/Eastern |
| Canada/Mountain |
| Canada/Newfoundland |
| Canada/Pacific |
| Canada/Saskatchewan |
| Canada/Yukon |