AZ AHCCCS Authorization Addendum v1.0

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Addendum to

Authorization Specification v7.3

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Version Update

Name	Title	Changes	Date
Pamela Brooks	Product Delivery Owner	Initial Draft	08.08.2019
Pamela Brooks	Product Delivery Owner	Final updates based upon review sessions	12.18.2019
Pamela Brooks	Product Delivery Owner	Update appendix 1 & 2	12.19.2019
Pamela Brooks	Product Delivery Owner	Update field 17 name => MedicalNecessityDeterminationDate	12.31.2019

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1 Overview

The OpenEVV Authorization interface specification is intended for a payer or provider to provide authorization information to Sandata regarding which clients are receiving specified services, the amount and the period during which the services are to be provided. This may also be referred to as Prior Authorization or Service Plan.

This addendum to the generic specification is intended to document the full file layout and attributes that have values specific for your program pertaining to the Authorization interface. All expected values, formatting and validation rules should be identified for each element, where applicable.

Complete Authorization interface transmission guidelines may be found in the generic specification provided during Implementation.

1.1 Intended Audience

The intended audience of this document is:
- Project Management and Technical teams at Sandata.
- Project Management and Technical teams at AZ AHCCCS who will be implementing this interface.

1.2 Authorization Interface Transmission Guidelines

- File Format: Delimiter separated values
- File Delimiter: Pipe (|); ASCII 124
- Headers: Required using the "Column Name" below
- File Extension: 'DSV'
- File Encryption: Will NOT be encrypted since files are being picked up via secure FTP
- Control File: Will be included per the specifications
- SFTP site: State of AZ will host; EVVAZ is folder name (exact location TBD)
- File Name: <PAYER>_EVV_Auth_20180817.dsv
- File Compression: Zipped
- File Delivery: Initial FULL data file, followed by incremental on DAILY basis. If no changes, empty file will be provided

File Delivery Notes:
- Data will be received in all CAPS; Header row will be mixed case
- For Optional fields provided with no data, send nothing between pipe delimiters (e.g. |||||). While it is possible to accept |""|, this will only work for string values. Any other type of data field with no value must be provided as ||.

2 Data File Layout

Required Segment Definitions:

- Data segments may be required or optional. When sending data included in a particular segment, all required fields must be provided.
- If a data segment is optional and will not be sent, you may disregard all data fields including those that are required. The concept of required fields only applies when any given data segment is being sent to Sandata.

Required Field Definitions:

- Required – data element *must* be provided on the import file, otherwise, the record will be rejected.
- Optional – vendor may choose to send data element or not. If an optional field is being sent, ensure it is included in the header record. Record will not be rejected if this field is null.
- Conditional – specific scenarios exist where this field is required, other scenarios exist where this field may not apply and should not be sent. Conditional rules (or scenarios) will be detailed in the field description.

Index	Element	Description	Max Length	Type	Required	Expected Value(s) Format / Validation Rules
1	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes	See Appendix 1 PayerID column
2	PayerRegion	If applicable, the region in which this client is being provided services. Potential use and list of values to be determined during implementation.	2	String	Optional	Do Not Provide
3	ClientQualifier	Value being sent to unique identify the client. Values: ClientSSN; ClientOtherID, ClientCustomID.	30	String	Yes	ClientCustomID
4	ClientIdentifier	ID used to uniquely identify the client. ID type identified by ClientQualifier.	64	String	Yes	MedicaidID Format: A00000000; 9 char, starting w/ 1 UC letter [A-Z], followed by 8 digits [0-9]
5	ProviderQualifier	Identifier being sent as the unique identifier for the provider. Values:	30	String	Yes	MedicaidID

Index	Element	Description	Max Length	Type	Required	Expected Value(s) Format / Validation Rules
		SandataID, NPI, API, MedicaidID, TaxID, Taxonomy, Legacy, Other.				
6	ProviderID	ID to uniquely identify the provider. ID type identified by ProviderQualifier.	64	String	Yes	FORMAT: 6 character string [000000], left padded with zeros
7	AuthorizationReferenceNumber	Unique identifier for the authorization generated by the payer's source system.	30	String	Yes	LIVE DATA
8	AuthorizationAmountType	The type of authorized amounts being supplied. Values: H = Hourly, V = Visit, U = Unit, M = Monetary.	1	String	Yes	H | V | U | M
9	AuthorizationMaximum	The maximum number of the specified type to allow. If the authorization is active, 0 in this field indicates unlimited. This is the overall limit and may be further limited by the Authorization Limits fields below.	6	Integer	Optional	LIVE DATA
10	AuthorizationStartDate	Start date for the authorization.	10	Date	Yes	FORMAT: YYYY-MM-DD
11	AuthorizationEndDate	End date for the authorization. Preference is to provide this value, if available.	10	Date	Required for AZ	FORMAT: YYYY-MM-DD Note that if no end date is available, MMIS will use rule to future date this 100 years
12	AuthorizationShared	To be used, shared authorizations must be part of the program specifications. Denotes that the authorization being provided is part of a shared authorization set.	1	String	Optional	Default = N Values Y, N
13	AuthorizationComments	Free text comments. Used by the payer to include additional information. If value provided is greater than the maximum, the text will be truncated to the maximum size allowed.	256	String	Optional	LIVE DATA
14	AuthorizationLimitType	If the authorization has sub limits, the type of sub limits being detailed. Values: N = None, S = Specified Schedule, D = Day, W = Week, M = Month, Y = Year. Default = N.	1	String	Yes	N | S | D | W | M | Y
15	AuthorizationStatus	The status of the authorization. Values: A = Active, I = Inactive, V = Voided, 4 = Suspended. Default = A.	1	String	Yes	A | I | V | 4
16	ServiceAuthorizedDate	Date the service was authorized/created.	10	Date	Optional	FORMAT: YYYY-MM-DD

Index	Element	Description	Max Length	Type	Required	Expected Value(s) Format / Validation Rules
17	MedicalNecessityDeterminationDate	This is the medical necessity determination date.	10	Date	Optional	FORMAT: YYYY-MM-DD
18	CaseManagerLastName	Case manager's last name	30	String	Optional	LIVE DATA
19	CaseManagerFirstName	Case manager's first name	30	String	Optional	LIVE DATA
20	CaseManagerEmail	Case manager's email address. This individual, using their email address, will have the ability to view data and reports specific to the identified payer and client.	64	String	Optional	FORMAT: xxx@yyy.zzz RULES: @ and extension (.zzz) are required to validate email address.
21	SegmentName	If this is a child segment, the name of the segment. Valid values are found above. NOTE: Field should be omitted when using the REST API.	30	String	Conditional	AuthorizationLimit | DiagnosisCode
Segment: AuthorizationLimit - Sub limits within the Authorization. If AuthorizationLimitType = N this section will be ignored. Allows specification of monthly sub limits as well as limits based on day of week, time of day or specific schedules. This is an optional segment.						
22	AuthorizationServiceID	The procedure or service to be performed. This will correspond to a HCPCS code to be used in billing. These values will be established as part of the implementation process.	5	String	Yes	See Appendix 2 HCPCS column
23	PayerProgram	If applicable, the program to which this client belongs. Potential use and list of values to be determined during implementation.	9	String	Yes	See Appendix 1 ProgramID column
24	AuthorizationBillingType	Optional information which may control additional mapping including determining billing information including HCPCS code and modifiers. Potential use and values to be determined during the implementation process. Client may send this attribute but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	64	String	Optional	DO NOT PROVIDE
25	AuthorizationLimit	The limit value for the sublimit being specified. Required if this segment is provided. Client may send this attribute	5	String	Optional	DO NOT PROVIDE

Index	Element	Description	Max Length	Type	Required	Expected Value(s) Format / Validation Rules
		but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well. Claims and encounters editing should remain unchanged.				
26	AuthorizationWeekStart	Required if AuthorizationLimitType is W.	3	String	Conditional	MON | TUE | WED | THU | FRI | SAT | SUN
27	AuthorizationLimitDayOfWeek	Required if AuthorizationLimitType is S or D.	3	String	Conditional	MON | TUE | WED | THU | FRI | SAT | SUN
28	AuthorizationLimitStartTime	Required if AuthorizationLimitType is S. Optional if AuthorizationLimitType is D. If AuthorizationLimitType = S, the schedule MUST start at the time specified. If AuthorizationLimitType = D, the start and end times provide a range in which services are to be delivered. Does not apply for other AuthorizationLimitTypes. Client or Account time zone is assumed.	4	String	Conditional	FORMAT: HHMM assuming a 24-hour clock.
29	AuthorizationLimitEndTime	Optional if AuthorizationLimitType is S. Optional if AuthorizationLimitType is D. If AuthorizationLimitType = S, the service is scheduled to end at the time specified. If AuthorizationLimitType = D, the start and end times provide a range in which services are to be delivered. Does not apply for other AuthorizationLimitTypes. Client or Account time zone is assumed.	4	String	Conditional	FORMAT: HHMM assuming a 24-hour clock.
30	Modifier1	First modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Conditional	See Appendix 2 Modifier columns
31	Modifier2	Second modifier if applicable. Authorizations may include modifier information to be used for service provision and billing	2	String	Conditional	See Appendix 2 Modifier columns
32	Modifier3	Third modifier if applicable. Authorizations	2	String	Conditional	See Appendix 2 Modifier columns

Index	Element	Description	Max Length	Type	Required	Expected Value(s) Format / Validation Rules
		may include modifier information to be used for service provision and billing				
33	Modifier4	Fourth modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Conditional	See Appendix 2 Modifier columns
Segment DiagnosisCode: Diagnosis codes for the client. This is a repeating element. Only one diagnosis code can be indicated as primary. This is an optional segment.						
34	ClientDiagnosisCodeIsPrimary	Indicates that the diagnosis code is the primary code for the client. If more than one code is primary, first value designated as primary will be assumed to be primary. Required if segment is provided. Client may send this attribute but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	1	String	Optional	Y | N Default = N
35	ClientDiagnosisCode	The client's diagnosis code in ICD -10 format. Client may send this attribute but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	10	String	Optional	FORMAT: ICD-10
36	ClientDiagnosisCodeBeginDate	The beginning date associated with the specified diagnosis code. Format YYYY-MM-DD. Client may send this attribute but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	10	Date	Optional	FORMAT: YYYY-MM-DD
37	ClientDiagnosisCodeEndDate	The ending date associated with the specified diagnosis code. Format YYYY-MM-DD. Client may send this attribute but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	10	Date	Optional	FORMAT: YYYY-MM-DD

Appendices

1   Payers & Programs

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

2   Services & Modifiers

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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
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
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014					[H2014]: Skills training and development, per 15 minutes
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	GT				[H2014]: Skills training and development, per 15 minutes; Via interactive audio and video telecommunication systems
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	GT	HQ			[H2014]: Skills training and development, per 15 minutes; Via interactive audio and video telecommunication systems ; Group setting
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	GT	HQ	H9		[H2014]: Skills training and development, per 15 minutes; Via interactive audio and video telecommunication systems ; Group setting; Court-ordered
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	HQ				[H2014]: Skills training and development, per 15 minutes; Group setting
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	HQ	H9			[H2014]: Skills training and development, per 15 minutes; Group setting; Court-ordered
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	H2014	H9				[H2014]: Skills training and development, per 15 minutes; Court-ordered
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5125					[S5125]: Attendant care services; per 15 minutes

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5125	UN				[S5125]: Attendant care services; per 15 minutes; Two patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5125	UP				[S5125]: Attendant care services; per 15 minutes; Three patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5125	U2				[S5125]: Attendant care services; per 15 minutes; Unskilled Self-directed care
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
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
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
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5125	U6				[S5125]: Attendant care services; per 15 minutes; Skilled Self-directed care
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5130					[S5130]: Homemaker service, nos; per 15 minutes
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5150					[S5150]: Unskilled respite care, not hospice; per 15 minutes
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5150	HQ				[S5150]: Unskilled respite care, not hospice; per 15 minutes; Group setting
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
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
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
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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
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
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5151					[S5151]: Unskilled respite care, not hospice; per diem
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5151	UN				[S5151]: Unskilled respite care, not hospice; per diem; Two patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5151	UP				[S5151]: Unskilled respite care, not hospice; per diem; Three patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5151	UQ				[S5151]: Unskilled respite care, not hospice; per diem; Four patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S5151	UR				[S5151]: Unskilled respite care, not hospice; per diem; Five patients served
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
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
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-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
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)

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	S9124					[S9124]: Nursing care, in the home; by licensed practical nurse, per hour
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
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
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)
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	T2017					[T2017]: Habilitation, residential, waiver; 15 minutes
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	T2017	UP				[T2017]: Habilitation, residential, waiver; 15 minutes; Three patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	T2017	UN				[T2017]: Habilitation, residential, waiver; 15 minutes; Two patients served
AZCCCS ,AZDDD ,AZACH ,AZBUFC ,AZCHP ,AZMCC ,AZMYC ,AZSHC ,AZUCP ,AZCDMP	AHCCCS	T2021					[T2021]: Day habilitation, waiver; per 15 minutes

3 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

4 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 Home Health Aide Consumer Directed Worker Staff

Sandata Terminology	Other Possible References
	Worker Individual Provider Scheduler
HCPCS	Bill Code Procedure Code Service Code
Payer	Admission Insurance Company Contract Managed Care Organization (MCO) State
Provider	Agency Third Party Administrator (TPA)