AZ AHCCCS Claims Validation Addendum v1.3

_____

Addendum to

Claims Validation Specification v7.6

Version Update

Name	Title	Changes	Date
Pamela Brooks	Product Delivery Owner	Initial Draft	08.14.2019
Pamela Brooks	Product Delivery Owner	Update due to changes in business rules	11.15.2019
Pamela Brooks	Product Delivery Owner	Document cleanup; updated Appendix 1&2	12.09.2019
Pamela Brooks	Product Delivery Owner	Updated file naming convention	01.21.2020
Pamela Brooks	Product Delivery Owner	Updated Appendix 1 & 2	01.28.2020
Pamela Brooks	Product Delivery Owner	Updated FFS file delivery to "weekly" Added clarifying statement to ProviderID	01.29.2020
Pamela Brooks	Product Delivery Owner	Added clarifying language to Claims Validation Transmission Guidelines section in support of Response files	02.06.2020

Table of Contents

1 Overview

This addendum should be used along with the generic specification for Claims Validation, as it provides customer specific values and formats that will be required for the request and will be returned as part of the claims validation process.

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 Claims Validation Transmission Guidelines

There are two processes by which the claims interface will receive requests: real-time RESTful API or batched files. If using batched files, complete the transmission specifications in this section.

- File Delimiter: Pipe (|); ASCII 124
- Headers: Required using the "Column Name" below
- File Extension: 'DSV'
- File Encryption: Will Not encrypted using GPG
- Control File: Will be included per the specifications
- SFTP site: AZ will host. Details of the site and directories to be determined.
- Arizona FFS Claims
    - Request File Name: [PayerID]_Req_ClaimsValidation_YYYYMMDD_HHMMSS.SSS_[BatchID].dsv
        - Example: AZCCCS_Req_ClaimsValidation_20181001_235959.000_9982147.dsv
    - Response File Name: [PayerID]_Rsp_ClaimsValidation_YYYYMMDD_HHMMSS.SSS_[BatchID].dsv
        - Example: AZCCCS_Rsp_ClaimsValidation_20181001_235959.000_9982147.dsv
    - File Compression: zipped
    - File Delivery Frequency: Weekly
- Arizona MCO Encounters
    - Request File Name: [PayerID]_Req_ClaimsValidation_YYYYMMDD_HHMMSS.SSS_[BatchID].dsv
        - Example: AZACH_Req_ClaimsValidation_20181001_235959.000_9982147.dsv
    - Response File Name: [PayerID]_Rsp_ClaimsValidation_YYYYMMDD_HHMMSS.SSS_[BatchID].dsv
        - Example: AZACH_Rsp_ClaimsValidation_20181001_235959.000_9982147.dsv

o   File Compression: zipped
o   File Delivery Frequency: 2-cycles per month – will send to Sandata after processing

2   Data File Layout

Reference the generic specification for a listing of all the fields that will be included in the claims validation request and response services. The data utilized in this interface will mirror the program specific data captured on intake interfaces and via other means, such as the EVV user interface.

This addendum should be utilized to reference program specific values and formats for AZ AHCCCS that will be included in the full claims validation interface.

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.

2.1 Claims Request Data Points

NOTE: ALL elements are REQUIRED to be provided, with exception of Units (which has a conditional rule noted in the description).

Index	Element	Description	Max Length	Type	Expected Value(s)
1	BusinessEntityMedicaidIdentifier	Unique identifier for the provider. Each individual request must include the business entity Medicaid identifier or value agreed to between the payer and Sandata. It is assumed that for real time transactions, the ID will always be the same within a single batch. For batch files, they can vary per transaction.	50	String	Provider NPI (If no NPI, then AHCCCS Registration ID) NPI Format: ########## AHCCCS RegID FORMAT:6 character string [000000], left padded with zeros.
2	RequestType	**Model1** = Single Visit **Model2** Visits – Detail for each visit found returned **Model3** = Rolled-up Single summarized response returned	6	String	Model2
3	BatchID	Unique identifier for the group of requests. Created and assigned by the Payer. IDs cannot be reused within a payer. These IDs do not recycle nor do they have a life-span. For REST API, must be the same for every request included in a single call to the API. For Batch API, records will only be processed if they match the BatchID provided in the control file.	19	Integer	LIVE DATA
4	TransactionID	Unique identifier for the request generated by Payer IDs cannot be reused within the same batch (BatchID).	19	Integer	LIVE DATA
5	Payer	Identifier for the Payer sending the request. Value will be assigned to the payer by Sandata.	64	String	See Appendix 1 for valid values.
6	ICN	The assigned Claim Identifier or Internal Control Number (ICN) is a unique value assigned to every claim in order to distinguish it from all other claims received by the system.	25	String	LIVE DATA
7	DLN	Detail Line Number. A sequential and unique line number of each detail line within the claim.	99	String	LIVE DATA
8	ProviderQualifier	Defines what ID is being sent for the Provider. Values include: SandataID, MedicaidID, NPI, TaxID	10	String	MedicaidID

Index	Element	Description	Max Length	Type	Expected Value(s)
9	ProviderID	Identifier sent must be paired with the ProviderQualifier. This is the "rendering" or service provider.	64	String	AHCCCS RegID FORMAT:6 character string [000000], left padded with zeros.
10	PatientQualifier	Defines what ID is being sent for the Client. Values include: MedicaidID, PayerID (custom identifier associated with the payer for the client).	10	String	MedicaidID
11	PatientID	Identifier for the client. Must be paired with the PatientQualifier.	15	String	Format: A00000000; 9 char, starting w/ 1 UC letter [A-Z], followed by 8 digits [0-9]
12	ServiceStartDate	The date when the services started.	10	Date	FORMAT: YYYY-MM-DD
13	ServiceEndDate	If there is a range of dates that are being requested, the last start date of the service and must be greater than the 'ServiceStartDate'. Otherwise, this will be assumed to be equal to the start date of service "ServiceStartDate". Note that requesting more than one day in a request has the potential to substantially increase processing time. It is recommended that the range be limited to no more than 31 days.	10	Date	FORMAT: YYYY-MM-DD
14	ProcedureCode	Service identifier. HCPCS Code or other identifier determined during implementation. Code used for billing the procedure.	5	String	See Appendix 2 HCPCS Code for valid values.
15	Units	Units requested by and being returned to the adjudication system, see the table below with the units calculation rules as applied. Value can handle a fraction with up to 2 decimal places format #####.##. Decimal place and the decimal values are optional. **NOTE**: Units are required if the request requires units for matching purposes.	10	Decimal	LIVE DATA
16	UnitsRule	Valid for models 2 and 3. Whether units should be calculated for individual visits and added or units should be calculated based on the total time of all visits.	10	String	AddUnits

Index	Element	Description	Max Length	Type	Expected Value(s)
		AddUnits = Individual visit units added together then evaluated against the request. AddTime= Add together total time for all visits found then calculate the total units to compare to the request.			
17	Modifier1	Modifiers indicate the order to associate with the visit. This field can also be used to identify if this is considered a group visit, if applicable. Note that modifiers can be provided in any order, but it is assumed that they will be provided in Modifier1, then Modifier2, etc. It is not expected that one of the modifiers in sequence will be missing (e.g. provide Modifier1 and Modifier3 with Modifier2 null).	2	String	See Appendix 2 Modifier columns for valid values.
18	Modifier2	Modifiers indicate the order to associate with the visit. This field can also be used to identify if this is considered a group visit, if applicable. Note that modifiers can be provided in any order, but it is assumed that they will be provided in Modifier1, then Modifier2, etc. It is not expected that one of the modifiers in sequence will be missing (e.g. provide Modifier1 and Modifier3 with Modifier2 null).	2	String	See Appendix 2 Modifier columns for valid values.
19	Modifier3	Modifiers indicate the order to associate with the visit. This field can also be used to identify if this is considered a group visit, if applicable. Note that modifiers can be provided in any order, but it is assumed that they will be provided in Modifier1, then Modifier2, etc. It is not expected that one of the modifiers in sequence will be missing (e.g. provide Modifier1 and Modifier3 with Modifier2 null).	2	String	See Appendix 2 Modifier columns for valid values.
20	Modifier4	Modifiers indicate the order to associate with the visit. This field can also be used to identify if this is considered a group visit, if applicable. Note that modifiers can be provided in any order, but it is assumed that they will be provided in Modifier1, then Modifier2, etc. It is not expected that one of	2	String	See Appendix 2 Modifier columns for valid values.

Index	Element	Description	Max Length	Type	Expected Value(s)
		the modifiers in sequence will be missing (e.g. provide Modifier1 and Modifier3 with Modifier2 null).			
21	MatchingRule	When finding visits, whether the units should be matched exactly. Three possible options: • ExactMatch – Return exact matched visit(s) only. • EqualOrGreaterThan – Return visit(s) if total units are equal to or greater than the value requested. • ExcludeUnits – Return all visits matching other criteria regardless of total units. Note that if the user is looking for a single visit and the exact match is set to EqualOrGreaterThan or ExcludeUnits, the system will return the visit with the units that are closest to the units requested that has not already been returned. If all visits have already been returned, the same cycling logic will be used as for ExactMatch.	20	String	EqualOrGreaterThan

2.2 Claims Response Data Points

Index	Element	Description	Max Length	Type	Expected Value(s)
1	BusinessEntityMedicaidIdentifier	The response will return the same value that was received in the request.	50	String	Provider NPI (If no NPI, then AHCCCS Registration ID) NPI Format: ########## AHCCCS RegID FORMAT:6 character string [000000], left padded with zero's.
2	RequestType	The response will return the same value that was received in the request.	6	String	Model1 | Model2 | Model3
3	BatchID	The response will return the same value that was received in the request.	19	Integer	LIVE DATA
4	TransactionID	The response will return the same value that was received in the request.	19	Integer	LIVE DATA
5	Payer	The response will return the same value that was received in the request.	64	String	See Appendix 1 for valid values.
6	ICN	The response will return the same value that was received in the request.	25	String	LIVE DATA
7	DLN	The response will return the same value that was received in the request.	99	String	LIVE DATA
8	ProviderQualifier	The response will return the same value that was received in the request.	10	String	MedicaidID
9	ProviderID	The response will return the same value that was received in the request.	64	String	AHCCCS RegID FORMAT:6 character string [000000], left padded with zero's.
10	PatientQualifier	The response will return the same value that was received in the request.	10	String	MedicaidID
11	PatientID	The response will return the same value that was received in the request.	15	String	Format: A00000000; 9 char, starting w/ 1 UC letter [A-Z], followed by 8 digits [0-9]
12	ServiceStartDate	The response will return the same value that was received in the request.	10	Date	FORMAT: YYYY-MM-DD
13	ServiceEndDate	If there is a range of dates that are being requested, the last start date of service. Otherwise, this will be assumed to be equal to the start date of service "ServiceStartDate".	10	Date	FORMAT: YYYY-MM-DD

Index	Element	Description	Max Length	Type	Expected Value(s)
14	ProcedureCode	The response will return the same value that was received in the request.	5	String	See Appendix 2 HCPCS Code for valid values.
15	Units	Units calculated for the visit(s) being returned. For model 2, each visit provided will include the calculated units for that visit. For model 3 this will be the total units for all visits based on the units rule.	10	Decimal	LIVE DATA
16	UnitsRule	The response will return the same value that was received in the request.	10	String	AddUnits
17	Modifier1	The response will return the same value that was received in the request.	2	String	See Appendix 2 Modifier columns for valid values.
18	Modifier2	The response will return the same value that was received in the request.	2	String	See Appendix 2 Modifier columns for valid values.
19	Modifier3	The response will return the same value that was received in the request.	2	String	See Appendix 2 Modifier columns for valid values.
20	Modifier4	The response will return the same value that was received in the request.	2	String	See Appendix 2 Modifier columns for valid values.
21	MatchingRule	The response will return the same value that was received in the request.	20	String	ExactMatch | EqualOrGreaterThan | ExcludeUnits
22	AdjInDateTime	The value returned will be the visit's in time. If the in time has been adjusted, the Adjusted In will be returned. If the time has not been adjusted, the actual in call will be returned. NOTE: This value will be omitted for model 3.	20	DateTime	FORMAT: YYYY-MM-DDTHH:MM:SSZ
23	AdjOutDateTime	The value returned will be the visit's out time. If the in time has been adjusted, the Adjusted Out will be returned. If the time has not been adjusted, the actual out call will be returned. NOTE: This value will be omitted for model 3.	20	DateTime	FORMAT: YYYY-MM-DDTHH:MM:SSZ
24	GroupCode	If the visit was designed as a group visit, the group code will be returned if available. If a visit is returned that includes a group code, the group code will be included on the response. For model 3, this value will only be returned if it is the same on all identified visits.	6	String	LIVE DATA

Index	Element	Description	Max Length	Type	Expected Value(s)
25	VisitTimeZone	Time zone information for visit times specified in the response.	64	String	US/Arizona See Appendix 3 for other valid values.
26	VisitFound	Indicator denoting whether the visit was found or not. Values: true, false	5	Boolean	True | False
27	VisitKey	Visitkey(s) returned. Unique identifier for the visit being returned in the Sandata system. Value will be returned if a single visit is found with or without a units match. For models 2 and 3, if multiple visits are found all visitkeys will be provided in the batch format as a comma separated list. The Visitkey is never reused within the Sandata system.	19 (per visitkey – Note this field will be much larger if there are multiple visitkeys)	String	LIVE DATA
28	RecordsFound	For Models 2, the number of records found and being returned. For Model 3, the number of records found and being summarized. Will always be 1 for Model 1.	19	Integer	LIVE DATA
29	Details	When applicable, information about rejected batches, records, or multiple records will be populated in this field. Only one 'detail' will be returned. Possible Values: Null – No error was detected for the given transaction. "Incorrectly formatted batch" "Incorrectly formatted record" "Unmatched Units" "No Visit Found"	100	String	NULL | Incorrectly formatted batch | Incorrectly formatted record | Unmatched Units | No Visit Found
30	DetailsReason	This field will contain the details for the failure. Only the first edit reason for the failure will be returned.	200	String	If Details is set to "Incorrectly formatted batch", then possible values Include: "Duplicate BatchID" "Duplicate TransactionID" "Inconsistent BusinessEntityMedicaidID"

AZ AHCCCS Claims Validation Addendum v1.3
Proprietary & Confidential
P a g e | 12

Index	Element	Description	Max Length	Type	Expected Value(s)
					"Non-Sequential DLN"
					If Details is set to "Incorrectly formatted record", then possible values Include:
					"BatchID is Null "
					"BusinessEntityMedicaidIdentifier is NULL"
					"Incorrectly formatted record. The BusinessEntityMedicaidIdentifier (%S) is not valid. It must be a String with max length of 50."
					"TransactionID is NULL"
					"TransactionID is a negative value"
					"Incorrectly formatted record. The TransactionID value (%S) is not valid. It must be a positive integer."
					"ProviderQualifier is NULL"
					"Incorrectly formatted record. The ProviderQualifier value (%S) is invalid. It must be one of these values (SandataID|MedicaidID|NPI|TaxID)."
					"ProviderID is NULL"
					"Incorrectly formatted record. The ProviderID value (%S) is not valid. It must be a String with max length of 64."
					"Payer is NULL"
					"ServiceSartDate is NULL"
					"Incorrectly formatted record. The ServiceStartDate value (%S) is invalid. It must be in yyyy-mm-dd format."
					"Incorrectly formatted record. ServiceEndDate (%D2) is before ServiceStartDate (%D1)."

Index	Element	Description	Max Length	Type	Expected Value(s)
					"Incorrectly formatted record. The gap between ServiceEndDate (%D2) and ServiceStartDate (%D1) is greater than 31 days."
					"ProcedureCode is Null"
					"Incorrectly formatted record. The ProcedureCode value (%S) is invalid. It must be a string up to 5 alphanumeric characters."
					"RequestType is NULL"
					"Incorrectly formatted record. The RequestType (%S)) is invalid. It must be one of these three values (Model1 Model2 Model3)."
					"UnitsRule is NULL"
					"Incorrectly formatted record. The UnitsRule value (%S) is invalid. It must be one of these two values (AddUnits AddTime)."
					"MatchingRule is NULL"
					"Incorrectly formatted record. The MatchingRule value (%S) is invalid. It must be one of these three values (ExactMatch EqualOrGreaterThan ExcludeUnits)."
					"Incorrectly formatted record. The Modifier1 value (%S) is invalid. It must be a alphanumeric value with length of two."
					"Incorrectly formatted record. The Modifier2 value (%S) is invalid. It must be a alphanumeric value with length of two."
					"Incorrectly formatted record. The Modifier3 value (%S) is invalid. It must be

Index	Element	Description	Max Length	Type	Expected Value(s)
					a alphanumeric value with length of two."
					"Incorrectly formatted record. The Modifier4 value (%S) is invalid. It must be a alphanumeric value with length of two."
					"Incorrectly formatted record. The PatientQualifier is null."
					"Incorrectly formatted record. The PatientQualifier value (%S) is invalid. It must be one of these values (MedicaidID|PayerID)."
					"PatientID is NULL"
					"Incorrectly formatted record. The PatientID value (%S) is not valid. It must be a String with max length of 15."
					"ICN is NULL"
					"Incorrectly formatted record. The ICN value (%S) is not valid. It must be a string with a maximum length of 13, which will be increased to 25 in 8.1.14 release."
					"DLN is NULL"
					"Incorrectly formatted record. The DLN value (%S) is invalid. It must be a positive number up to 99."
					"Units is NULL"
					"Incorrectly formatted record. The Units value (%S) is invalid. It must be a decimal value less than 100000."

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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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)
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

Payer	Program	HCPCS	Mod1	Mod2	Mod3	Mod4	Description
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   Time Zones

Time Zone Code
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

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 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)