



Minnesota Department of Human Services

Electronic Visit Verification (EVV) Data Aggregator Specification



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Introduction

This specification provides guidance and instructions in preparing data for import to HHAXchange (HHAX). Herein are the various API endpoint definitions indicating required fields and proper format for a successful import.

This guide is updated on an ongoing basis as system capacities are implemented and additional functionality becomes available. The guide is intended for project management and technical teams at designated providers and/or EVV vendors who are implementing this interface.

General inquiries related to the Minnesota (MN) EVV aggregation project can be submitted via a ticket to [3rd Party Integration Support Desk](#) with the subject line 'MN EVV General Inquiry'. Cases are escalated to the Integration Support queue where an available team member will contact you directly to assist.

Transmission Method and Environment Access

HHAX provides an API for third party providers and EVV vendors to use. Providers and EVV vendors must reach out to [3rd Party Integration Support Desk](#) with the subject line 'MN API Onboarding Request' to commence the onboarding process.

Transmission Frequency and Limits

For optimal system performance, HHAX recommends that visit data is sent in near real time. The expectation is that data is sent by the provider or EVV vendor to HHAX as it is added, changed, and/or deleted in the third party EVV system. Data that is unchanged should not be resent to HHAX. HHAX provides transaction statuses on a separate API call that is initiated by the third party EVV system. HHAX allows maximum five (5) calls per second per consumer.

Record Processing Workflow and Endpoints

There are two types of messages provided to HHAX by the third-party provider or EVV vendor: (1) caregiver demographic data and (2) visit information. Note that caregiver data is to be sent to HHAX first as a record is required in HHAX for visit data to load successfully. The provider and/or EVV vendor provides data to HHAX in JSON format only.

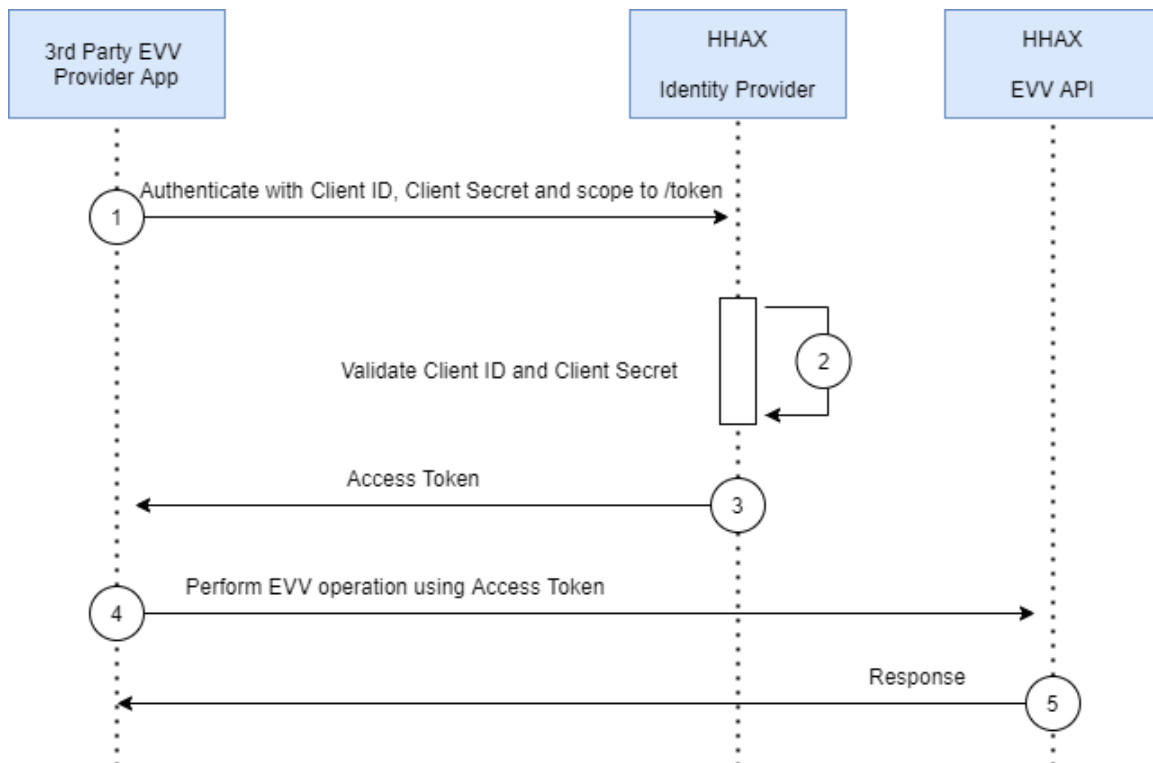
Security

The EVV APIs are exposed as a RESTful secure HTTP (HTTPS) web service for the third party EVV system. The API leverages the following HTTP Methods: POST, PUT, DELETE, and GET. The security approach for EVV interfaces incorporate "Encryption" and "Authentication and Authorization".

The EVV APIs:



- Use HTTPS with Security Socket Layer (SSL) encryption and Transport Layer Security (TLS) version 1.2. All communications with EVV APIs should be on TLS 1.2.
- Leverage OAuth2 (client id, client secret and scope) for authentication and authorization to enforce identity verification and authorization.
- Accept the data of those providers which are mapped with client ID.



Authentication Endpoint

Use Case	HTTP Verb	URI	Request Parameter			Response
			Type	Param	Value	
Generate Access Token before calling Caregiver / EVV API	POST	/identity/connect/token	BODY	client_id	Provided by HHAX	access_token
			BODY	client_secret	Provided by HHAX	
			BODY	scope	Provided by HHAX	

1. The third party EVV system sends a request to the HHAExchange Identity Server for an Access Token (OAuth 2.0) using the “client id”, “client secret” and “scope”.
2. The HHAExchange Identity Server validates the request.
3. The HHAExchange Identity Server then generates an Access Token if the request passes validation.
4. The third party EVV system then initiates the EVV API call using the Access Token (set as bearer token in HTTP Header).
5. The HHAExchange EVV API validates the Access Token and sends a response back.



6. The Access Token expires in 30 minutes. If the token expires, then the API returns 401 (Unauthorized) response. The third party EVV system must then generate a new access token.
7. The third party EVV system must reuse the generated token until its expiration. The integration does not require a new token for each request.

Caregiver Information

When the third party EVV system sends a Caregiver record, the Caregiver API processes it (creates new record or updates existing record) and returns a status along with the transaction ID for reference. The Caregiver API might overwrite an existing record if found in the system. All data sent to HHAX is loaded as-is; there is no data manipulation when processing.



API consumers must follow the rules below:

- Adhere to REST design principles while interacting with the API.
- Protocol: secure HTTP (HTTPS)
- Communication Method: Use the appropriate URI patterns along with HTTP verb (POST)
- Message Format (Request/Response): application/json
- Produce JSON payloads that meet the API specification (Refer to Appendix D).
- The API leverages the HTTP response status codes to inform the consumer (Refer to Appendix C).

Caregiver Endpoint

Use Case	HTTP Verb	URI	Request Parameter			Response
			Type	Param	Value	
Caregiver Request: This can be used to create a new or update an existing caregiver record.	POST	/api/v{version}/caregivers	HEAD	Authorization	Bearer {value of token}	HTTP status code and Transaction ID
			BODY	Caregiver	Caregiver record	

Note: Refer to Appendix D for sample messages



Caregiver Data Structure

Caregiver Demographics Interface					
Index	Element	Description	Max Length	Type	Required
1	providerTaxID	Provider Tax ID - Unique Identifier for the Provider. Format: 999999999	9	String	Required
2	qualifier	Identifier being sent as the unique identifier for the Caregiver. Possible Values: ExternalID	50	String	Required
3	externalID	Unique Caregiver identifier in the external system.	20	String	Required
4	ssn	Provider and EVV vendors should only send a default value of '999999999' for the social security number field Format: 999999999	9	String	Required
5	dateOfBirth	Caregiver's Date of Birth. Format: YYYY-MM-DD Cannot be greater than the current date.	10	Date	Required
6	lastName	Caregiver's Last Name.	30	String	Required
7	firstName	Caregiver's First Name.	30	String	Required
8	gender	Caregiver's Gender. This is an HHAX application requirement. If you do not wish to send this, please default to 'Other'. Possible Values: Male, Female, Other	20	String	Required
9	email	Caregiver's Email Address. If the value is empty, then the existing value of caregiver's email address in HHAExchange is removed	100	String	Optional
10	phoneNumber	Caregiver's Phone Number. Format: 9999999999 If the value is empty, then the existing value of caregiver's phone number in HHAExchange is removed	10	String	Optional
11	type	Caregiver's Type. Possible Values: Skilled, Non-Skilled or Both Select 'Both' to reduce conflict rejections in the Visits endpoint when the Procedure Code attribute or skill type is unknown.	15	String	Required



12	stateRegistrationID	Unique ID provided to Caregiver once credentialed by state. If the value is empty, then the existing value of caregiver's state registration ID in HHAExchange is removed	20	String	Optional
13	professionalLicenseNumber	Possible Values: UMPI Required when: Unique ID is provided by State of MN Caregiver Registration System. If providing self-directed services and license number is not available, please default to '999999999999'.	50	String	Required
14	hireDate	Date on which caregiver hired by Provider. This is an HHAX application requirement. Providers and EVV vendors should default to sending 1900-01-02 Format: YYYY-MM-DD	10	Date	Required
15	Address				
	addressLine1	Individual's street address.	100	String	Optional
	addressLine2	Individual's additional street address information if applicable.	50	String	Optional
	city	City	50	String	Optional
	state	State abbreviation (2 letter state code) e.g. MN	2	String	Required
	zipcode	Zip Code (5 or 9-digit format i.e., 12345). Format: 99999 OR 999999999	9	String	Required

Notes: Optional fields are not required

Caregiver Record Validation Rules

- If data is received and any required elements are missing, distorted, or incomplete, then the record is rejected.
- Records are processed in the order they are received.
- For any field listed as data type 'string', if the field is longer than the maximum allowed in the specification, then HHAX truncates to the maximum length for that specific field.
- The API allows an update of a Caregiver record if the Authentication Endpoint ClientID used when creating the record matches.
- The Provider should be linked with the Authentication Endpoint ClientID to create or update Caregiver records via the API.
- Refer to Appendix E for detailed error messages.



Electronic Visit Verification (EVV) Information

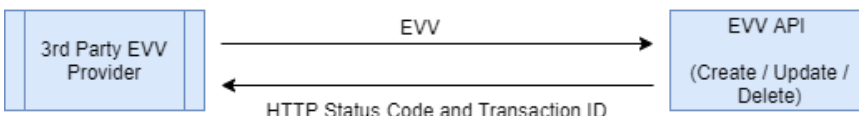
When the third party EVV system sends EVV records, the EVV API returns a transaction ID. This transaction ID can be queried by the caller to get status of the EVV records. Upon successful submission of an EVV record, an EVVMSID is returned along with status. The EVVMSID can be used to update or delete that EVV record in the future. All data sent to HHAX is loaded as-is; there is no data manipulation when processing.

- Third party EVV systems can submit multiple EVV records (new or update) per request. Currently a maximum of 100 EVV records are allowed per request.
- Third party EVV systems can submit EVV records from multiple providers.calltype
- If the EVV data does not pass validations, the records are rejected with the appropriate error code and message. The EVV Provider can react by resubmitting corrected EVV records.

An option exists for the 3rd party EVV submitter to provide the EVVMSID. The external EVVMSID must be unique across agencies if the 3rd party is sending on behalf of multiple agencies using same Client ID.

- This value must be prefixed with a tilde ("~") sign to differentiate it from the HHAX derived EVVMSID.
- The EVV submitter will be responsible to pass a Unique Visit Identifier as the EVVMSID for each new visit created in the system.
- When selecting this option use the same EVVMSID **with the prefixed tilde** when calling the PUT and DELETE endpoints.
- Using this option, the HHAX EVVMSID will still be returned in the transactions endpoint and can be used interchangeably.

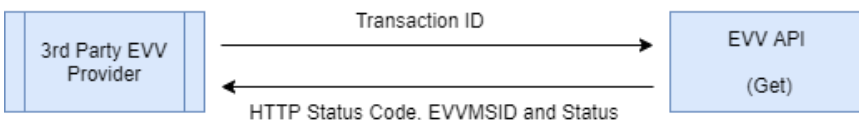
Stage 1



Step 1.1: The client app calls to the EVV endpoint.

Step 1.2: The endpoint responds with a 202, and callback url.

Stage 2



Step 2.1: The client app calls to the callback url.

Step 2.2: The callback endpoint responds with the information of the transaction done after Step 1 call.

API consumers must adhere to the following rules:

- Adhere to REST design principles while interacting with the API.
- Protocol: secure HTTP (HTTPS)
- Communication Method: Use the appropriate URI patterns along with HTTP verb (POST, PUT, DELETE, and GET)



- Message Format (Request/Response): application/json
- Produce JSON payloads that meet the API specification (Refer to Appendix D).
- API leverages the HTTP response status codes to inform the consumer (Refer to Appendix C).

Electronic Visit Verification (EVV) Endpoints

Use Case	HTTP Verb	URI	Request Parameter			Response
			Type	Param	Value	
Batch EVV Request: This can be used for submitting one or many visit records (New or Update EVV record).	POST	/api/v{version}/visits	HEAD	Authorization	Bearer {value of token}	HTTP status code and Transaction ID
			BODY	Visits	Array of visit records	
Update EVV Request: This can be used to update specific visit record.	PUT	/api/v{version}/visits/{evvmsid}	HEAD	Authorization	Bearer {value of token}	HTTP status code and Transaction ID
			BODY	Visit	visit record	
Delete EVV Request: This can be used to delete specific visit record.	DELETE	/api/v{version}/visits/{evvmsid}	HEAD	Authorization	Bearer {value of token}	HTTP status code and Transaction ID
Check Transaction Status: This can be used to get status of transaction which was submitted earlier.	GET	/api/v{version}/visits/transactions/{transactionId}	HEAD	Authorization	Bearer {value of token}	HTTP status code, EVVMSID and Status

Note: Refer to Appendix D for sample messages

EVV Request Data Structure

POST and PUT Operation

EVV Interface					
Index	Element	Description	Max Length	Type	Required?
1	providerTaxID	Provider Tax ID - Unique Identifier for the Provider. Format: 999999999	9	String	Required
2	Office				
	qualifier	Value being sent to uniquely identify the member. Possible Values: FederalTaxID, NPI or UMPI <ul style="list-style-type: none"> • If agency operates in a single office location, same tax ID can be submitted as 'providerTaxID' above. • If agency has multiple locations, submit office-level NPI, or UMPI. • If service code is configured for auto-placement, submit office-level NPI, or UMPI. 	50	String	Required
	identifier	Office identifier identified by Office Qualifier.	64	String	Required
3	Member				



	qualifier	Value being sent to uniquely identify the member. Possible Values: MedicaidID	50	String	Required
	identifier	Member identifier identified by Member Qualifier. *Length of this field will be based on the qualifier (For MedicaidID, it will be 50 characters)	*64	String	Required
	admissionId	Secondary Member identifier. If patient has multiple profiles in HHAX, send both Member qualifier and Admission ID.	80	String	Optional
4	Caregiver				
	qualifier	Value being sent to unique identify the Caregiver. Possible Values: ExternalID	50	String	Required
	identifier	Caregiver identifier identified by Caregiver Qualifier. *Length of this field will be based on the qualifier (For ExternalID, it will be 20 characters)	*64	String	Required
5	residingCaregiver	Possible Values: Yes or No Required When: If Caregiver is Live-in	50	String	Optional
6	payerID	HHAX assigned ID for the payer. Payer ID is determined during the implementation process. Refer to Appendix B for code information.	50	String	Required
7	externalVisitID	Unique Visit identifier in the external system.	30	String	Required
8	evvmsId	Unique Visit identifier in the HHAX aggregator system. HHAX EVVMSID: <ul style="list-style-type: none"> Required for updates to the EVV record. External EVVMSID: <ul style="list-style-type: none"> Required for creation and updates to the EVV record. If externally sourced, must start with a "~" and contain alphanumeric, the "_" or "-" characters. 	64	String	Situational
9	procedureCode	This is the billable procedure code which would be mapped to the associated service. Refer to Appendix B for code information.	50	String	Required
10	procedureModifierCode	Two characters Modifier for the HCPCS code for the 837. Up to 4 of these are allowed. Please consult specific program requirements for exact usage. Refer to Appendix B for code information.	2	Array of String	Optional



11	timezone	<p>Time zone visit data is captured in. Required timezone: US/Central All time sent to HHAX from third party provider will be in UTC.</p> <p>Time zone values are based on 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.</p>	20	String	Required
12	scheduleStartTime	<p>Schedule Start Time in UTC Time. Format: YYYY-MM-DDThh:mm If the schedule already exists in HHAExchange, the Schedule Start Time is overwritten.</p> <p><i>MN DHS does not require an agency to have a pre-determined schedule. HHAExchange system behavior requires data in the schedule fields, so to fulfill this requirement, visit data can be copied into schedule data. This configuration will not have an impact on EVV compliance as it supports MN DHS requirements.</i></p>		DateTime	Required
13	scheduleEndTime	<p>Schedule End Time in UTC Time. Format: YYYY-MM-DDThh:mm If the schedule already exists in HHAExchange, the Schedule Start Time is overwritten.</p> <p><i>MN DHS does not require an agency to have a pre-determined schedule. HHAExchange system behavior requires data in the schedule fields, so to fulfill this requirement, visit data can be copied into schedule data. This configuration will not have an impact on EVV compliance as it supports MN DHS requirements.</i></p>		DateTime	Required
14	visitStartDateTime	<p>When Required: When “Visit End Date Time” OR “EVV Clock In Time” is provided. Visit Start Time in UTC Time. Format: YYYY-MM-DDThh:mm If a value is provided in this field, then the schedule is confirmed with the start time provided. Cannot be greater than current date. If the value is empty, then the existing value of Visit Start Time in HHAExchange is removed</p>		DateTime	Situational
15	visitEndDateTime	<p>When Required: When “EVV Clock Out Time” is provided. Visit End Time in UTC Time. Format: YYYY-MM-DDThh:mm If a value is provided in this field, then the Schedule is confirmed with the End Time provided. Must be greater than Visit Start Date Time. Cannot be greater than current date. If the value is empty, then the existing value of Visit End Time in HHAExchange is removed.</p>		DateTime	Situational



16	timesheetRequired	<p>Timesheet Required. Possible Values: True or False</p> <p>An empty value is considered as "False". If the value is empty, then the existing value of Timesheet Required in HHAExchange is removed.</p>		Boolean	Optional
17	timesheetApproved	<p>Timesheet Approved. Possible Values: True or False</p> <p>An empty value is considered as "False". If the value is empty, then the existing value of Timesheet Approved in HHAExchange is removed.</p> <p>If timesheetRequired is set as "False", then this field's value is ignored.</p>		Boolean	Optional
Evv					
clockIn: When Required: if EVV Clock In Time is confirmed via EVV					
1	callDateTime	<p>When Required: if EVV Clock In Time is confirmed via EVV EVV Clock In Time in UTC Time. Format: YYYY-MM-DDThh:mm If a value is provided in this field, then the Visit Start Time is marked as confirmed via EVV; otherwise, it is considered manually confirmed if visitStartDateTime is provided.</p>		DateTime	Situational
2	callType	<p>When Required: if EVV Clock In Time is confirmed via EVV The type of device used to create the event. Values: Telephony, Mobile and FOB. Any call with GPS data collected should be identified as Mobile. If callDateTime is not provided, then API will ignore value in this field.</p>	20	String	Situational
3	callLatitude	<p>When Required: - If EVV Clock In Time is confirmed by GPS (i.e. CallType = Mobile) GPS Latitude recorded during event. Latitude has a range of -90 to 90 with a 6-digit precision. If callDateTime is not provided, then API will ignore value in this field.</p>		Decimal (8,6)	Situational
4	callLongitude	<p>When Required: - If EVV Clock In Time is confirmed by GPS (i.e. CallType = Mobile) GPS Longitude recorded during event. Longitude has a range of -180 to 180 with a 6-digit precision. If callDateTime is not provided, then API will ignore value in this field.</p>		Decimal (9,6)	Situational
5	originatingPhoneNumber	<p>When Required: - If EVV Clock In Time is confirmed by Telephony (i.e. CallType = Telephony) Originating Phone Number (Caller ID) for telephony. Format: 9999999999 If a value is provided in this field, then it is considered as a Telephony confirmation and</p>	10	String	Situational



		this phone number is imported into HHAExchange. If callDateTime is not provided, then API will ignore value in this field.			
6	locationType	Possible values: Home or Community Send when: if visit is confirmed or billed.	9	String	Optional
7	serviceAddress				
	addressLine1	Individual's street address. If callDateTime is not provided, then API will ignore value in this field.	100	String	Situational
	addressLine2	Individual's additional street address information if applicable. If callDateTime is not provided, then API will ignore value in this field.	50	String	Optional
	city	City If callDateTime is not provided, then API will ignore value in this field.	50	String	Situational
	state	State abbreviation (2 letter state code). If callDateTime is not provided, then API will ignore value in this field.	2	String	Situational
	zipcode	Zip Code (5 or 9-digit format i.e., 12345). Format: 99999 OR 999999999 If callDateTime is not provided, then API will ignore value in this field.	9	String	Situational
clockOut: When Required: if EVV Clock Out Time is confirmed via EVV					
1	callDateTime	When Required: if EVV Clock Out Time is confirmed via EVV EVV Clock Out Time in UTC Time. Format: YYYY-MM-DDThh:mm If a value is provided in this field, then the Visit End Time is marked as confirmed via EVV; otherwise, it is considered manually confirmed if visitEndDateTime is provided.		DateTime	Situational
2	callType	When Required: if EVV Clock Out Time is confirmed via EVV The type of device used to create the event. Values: Telephony, Mobile and FOB. Any call with GPS data collected should be identified as Mobile. If callDateTime is not provided, then API will ignore value in this field.	20	String	Situational
3	callLatitude	When Required: - If EVV Clock In Time is confirmed by GPS (i.e. CallType = Mobile) GPS Latitude recorded during event. Latitude has a range of -90 to 90 with a 6-digit precision. If callDateTime is not provided, then API will ignore value in this field.		Decimal (8,6)	Situational
4	callLongitude	When Required: - If EVV Clock Out Time is confirmed by GPS (i.e. CallType = Mobile) GPS Longitude recorded during event. Longitude has a range of -180 to 180 with a 6-digit precision. If callDateTime is not provided, then API will ignore value in this field.		Decimal (9,6)	Situational



5	originatingPhoneNumber	When Required: - If EVV Clock Out Time is confirmed by Telephony (i.e. CallType = Telephony) Originating Phone Number (Caller ID) for telephony. Format: 9999999999 If callDateTime is not provided, then API will ignore value in this field.	10	String	Situational
6	locationType	Possible values: Home or Community Send when: if visit is confirmed or billed.	9	String	Optional
7	performedTasks	List of performed task codes. Refer to Appendix B for code information.		Array of String	Optional
8	refusedTasks	List of refused task codes. Refer to Appendix B for code information. If callDateTime is not provided, then API will ignore value in this field.		Array of String	Optional
8	serviceAddress				
	addressLine1	Individual's street address. If callDateTime is not provided, then API will ignore value in this field.	100	String	Situational
	addressLine2	Individual's additional street address information if applicable. If callDateTime is not provided, then API will ignore value in this field.	50	String	Optional
	city	City If callDateTime is not provided, then API will ignore value in this field.	50	String	Situational
	state	State abbreviation (2 letter state code). If callDateTime is not provided, then API will ignore value in this field.	2	String	Situational
	zipcode	Zip Code (5 or 9-digit format i.e., 12345). Format: 99999 OR 999999999 If callDateTime is not provided, then API will ignore value in this field.	9	String	Situational
missedVisit: When Required: When Visit is marked as Missed					
1	missed	When Required: When Visit is marked as Missed Possible Values: True or False An empty value is considered as False. If the value is True, then the Visit is marked as a 'Missed' Visit. If False, then the Missed Visit is removed from HHAX if Visit was previously marked as missed and schedule reappears (if the Visit is not yet billed in HHAX). If the Visit is already billed in HHAX, then this flag is ignored.		Boolean	Situational
2	reasonCode	When Required: When Missed Visit = True Missed Visit Reason Code If the value is empty, then the existing value of Reason in HHAExchange is not removed. Refer to Appendix B for code information. If missed flag is not true, then API will ignore value in this field	4	String	Situational



3	actionCode	When Required: When Missed Visit = True Missed Visit Action Code. If the value is empty, then the existing value of Action Taken in HHAExchange is not removed. Refer to Appendix B for code information. If missed flag is not true, then API will ignore value in this field	4	String	Situational
4	notes	Free Text Notes - Data in this field is imported as Visit Notes. Reason/Description of the change being made if entered. If the value is empty, then the existing value of Notes in HHAExchange is not removed. If missed flag is not true, then API will ignore value in this field	256	String	Optional
editVisit					
1	edited	When Required: When Visit is updated after confirmation Possible Values: True or False If the value is True, then the Visit is considered as manually updated. An empty value is considered as False.		Boolean	Situational
2	reasonCode	When Required: When Edit Visit = True Edit Visit Reason Code. If the value is empty, then the existing value of Reason in HHAExchange is not removed. Refer to Appendix B for code information. If edited flag is not true, then API will ignore value in this field.	4	String	Situational
3	actionCode	When Required: When Edit Visit = True Edit Visit Action Code. If the value is empty, then the existing value of Action Taken in HHAExchange is not removed. Refer to Appendix B for code information. If edited flag is not true, then API will ignore value in this field.	4	String	Situational
4	Notes	Free Text Notes - Data in this field is imported as Visit Notes. Reason/Description of the change being made if entered. If the value is empty, then the existing value of Notes in HHAExchange is not removed. If edited flag is not true, then API will ignore value in this field.	256	String	Optional
Billing					
1	externalInvoiceNumber	When Required: Visit is Billed in the Provider's third party EVV System If a value is provided in this field, it is considered a Billed Visit in the Provider's third party EVV System. This invoice number is imported into HHAExchange and the Visit is billed in HHAExchange via the overnight process. If the value is empty, then the existing value of Invoice Number in HHAExchange is removed	18	String	Situational



2	totalBilledAmount	When Required: When Visit is billed; this field should be sent along with externalInvoiceNumber. Total billed amount in third party system.		Decimal (8,2)	Situational
3	totalUnitsBilled	When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Total units billed in third party system	5	Integer	Situational
4	contractRate	When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Hourly contract rate.		Decimal (8,2)	Situational
5	diagnosisCodes	When Required: When visit is billed; this field should be sent along with externalInvoiceNumber. Diagnosis Code Up to 26 of these are allowed.	50	Array of String	Situational
billSecondaryPayer : When Required: When Visit has secondary bill info					
1	enableSecondaryBilling	When Required: When Visit has secondary billing info. Possible Values: True or False If the value is True, then the Visit is considered to have secondary billing info. An empty value is considered as False.		Boolean	Situational
2	otherSubscriberId	When Required: When enableSecondaryBilling = true Other Subscriber ID If enableSecondaryBilling flag is not true, then API will ignore value in this field.	80	String	Situational
3	primaryPayerId	When Required: When enableSecondaryBilling = true Primary Payer ID If enableSecondaryBilling flag is not true, then API will ignore value in this field.	80	String	Situational
4	primaryPayerName	When Required: When enableSecondaryBilling = true Primary Payer Name If enableSecondaryBilling flag is not true, then API will ignore value in this field.	60	String	Situational
5	relationshipToInsured	Relationship to Insured If the value is empty, then the existing value of Reason in HHAExchange is removed. Refer to Appendix B for code information. If enableSecondaryBilling flag is not true, then API will ignore value in this field.	2	String	Optional
6	primaryPayerPolicyOrGroupNumber	When Required: When enableSecondaryBilling = true Primary payer policy or Group number If enableSecondaryBilling flag is not true, then API will ignore value in this field.	3	String	Situational
7	primaryPayerProgramName	Primary Payer Program Name If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.	2	String	Optional



8	planType	Plan Type If the value is empty, then the existing value of Reason in HHAExchange is removed. Refer to Appendix B for code information. If enableSecondaryBilling flag is not true, then API will ignore value in this field.	2	String	Optional
9	totalPaidAmount	When Required: When enableSecondaryBilling = true Total Paid Amount If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
10	paidDate	When Required: When enableSecondaryBilling = true Paid Date If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Situational
11	Deductible	Deductible If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
12	Coinsurance	Coinsurance. If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
13	Copay	Copay If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
14	contractedAdjustments	Contracted Adjustments If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
15	notMedicallyNecessary	Not Medically Necessary If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
16	nonCoveredCharges	Non-Covered Charges If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional
17	maxBenefitExhausted	Max Benefit Exhausted If the value is empty, then the existing value of Reason in HHAExchange is removed. If enableSecondaryBilling flag is not true, then API will ignore value in this field.		Decimal (7,2)	Optional

Note: Optional fields are not required. Situational fields are dependent on other fields and may be required as indicated. For example, if a Missed Visit is marked as True, then the Situational fields Missed Visit Reason Code and Missed Visit Action Code are required.



EVV Record Validation Rules

- All timestamp data is to be sent in UTC (Coordinated Universal Time).
- If data is received and any required elements are missing, distorted, or incomplete, then the record is rejected.
- Records are processed in the order they are received.
- EVVMSID:
 - This element is unique and is assigned to each visit record sent to HHAX by the third party EVV system once the record enters HHAX's aggregator.
 - This element is shared with the third party EVV system with the expectation that this is loaded and stored in the third party EVV system.
 - This element should be sent by the third party EVV system to HHAX each time an update occurs on an existing record that is being resent to HHAX.
- External EVVMSID (alternative):
 - The external EVVMSID must be a combination of alphanumeric characters and can include dashes ("-") or underscores ("_"). The maximum length of the external EVVMSID is 64 characters (excluding the tilde).
- For any field listed as data type 'string', if the field is longer than the maximum allowed in the specification, then HHAX truncates to the maximum length for that specific field.
- The API allows an update of the EVV record if the following fields match within the HHAX system:
 - ClientID
 - EVVMSID or External EVVMSID
 - Provider Federal Tax ID
 - Payer ID
- The API allows deletion of an EVV record if the following fields match within the HHAX system:
 - ClientID
 - EVVMSID or External EVVMSID
- If EVV Clock In is provided, then the EVV Clock Out is not mandatory. If the EVV Clock Out is provided, then the EVV Clock In is mandatory.
- If visit start and end times are provided without EVV Clock In and Clock Out, then the visit is considered manually confirmed.
- Once the visit is confirmed manually, then EVV Clock In/Out is not allowed in subsequent requests.
- Once the EVV Clock In/Out is completed, then a change to an EVV Clock In/Out is not allowed in subsequent requests.
- If the Provider sends visit data with missed visit information and Clock In/Out information, then the API rejects this request.
- If the visit has already been marked as a missed visit and a provider sends an updated record with Clock In/Out information as well as the missed visit marked as 'false', then the API removes the original missed visit flag and capture the new Clock In/Out and missed visit 'false' information.



- Provider should be linked with Authentication Endpoint Client ID to create or update EVV records via API.
- Refer to Appendix F for detailed error messages.

Appendix A- Acronyms

Acronym	Literal Translation
API	Application Programming Interface
EVV	Electronic Visit Verification
JSON	JavaScript Object Notation
REST	Representational State Transfer
SSL/TSL	Secure Sockets Layer/Transport Layer Security
URL/URI	Uniform Resource Locator/Uniform Resource Identifier

Appendix B - Code Information

MCO Portal Initials (PayerID field on Visit)	
MCO/Payer	Initials
Blue Cross MN	BCMP
Community First Services and Support (PCA) FFS	MICS
Financial Management Services FFS	MINN
HealthPartners MN	HPMP
Hennepin Health MN	HHMP
HomeHealth FFS	MIHH
IMCare Itasca MN	ICMP
Medica MN	MDMP
PrimeWest MN	PWMP
South Country Health Alliance MN	SCMP
UCare MN	UCMP
United Healthcare MN	UHMP
Waiver Services FFS	MIWS

Missed Visit Edit Reason Codes	
Code	Description
600	Agency unable to provide replacement coverage (no show, no replacement)
601	Attendant failed to report to Member's home
602	Member requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the Member's services being suspended
603	Member Refused Service
604	Member Refused Service - original aide on vacation



605	COVID-19: All other cases where the agency could not staff due to COVID-19
606	COVID-19: Member refused, receiving service through informal supports
607	COVID-19: Member refused, self-isolating, not receiving service
608	Hospitalization unplanned
609	Other

Missed Visit Action Taken	
Code	Description
501	Confirmed with the Member or the Member's family member/representative and documented (this service cannot be billed)
502	New attendant assigned to member (this service cannot be billed)
503	Other (this service cannot be billed)
504	Service(s) cancelled or suspended until further notice (this service cannot be billed)
505	Unverified visit; this service cannot be billed
506	Visit rescheduled (this service cannot be billed)

Visit Edit Reason Codes	
Code	Description
200	Phone number did not link to the Member
201	Member won't let attendant use phone
202	Member doesn't have a phone in home
203	Phone in use by member or individual in member's home
204	Member received services outside of the home
205	Member's phone line not working (technical issue or natural disaster)
206	Member requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the Member's services being suspended
207	Address did not link to the Member (GPS)
208	Attendant failed to call in
209	Attendant failed to call out
210	Attendant failed to call in and out
211	Attendant called in to or out of the EVV system early or late
212	Attendant's identification number (s) does not match the scheduled shift or task discrepancy/task does not match plan of care



213	Attendant entered invalid fixed location device code(s)
214	Attendant failed to report to Member's home
215	Fixed location device on order or pending placement in the home
216	Fixed location device malfunctioned
217	Attendant unable to use mobile device
218	Attendant unable to connect to internet or EVV system down
219	Data Entry Error
220	Agency unable to provide replacement coverage (no show, no replacement)
221	Timesheet Received
222	Other

Visit Edit Action Taken	
Code	Description
101	Confirmed visit with outside entity and documented
103	New attendant assigned to Member
104	Visit rescheduled
105	Service(s) cancelled or suspended until further notice
106	Updated Member's address and documented
107	Updated Member's phone number and documented
108	Changed verification collection method and documented
109	Timesheet received and signed by supervisor
110	Mutual Case/ or Cluster Case/ or Live-in Case
111	Change in schedule
122	Unverified visit; this service cannot be billed
123	Supervisor approved change
124	Confirmed with the Member or the Member's family member/representative and documented (this service cannot be billed)
125	Timesheet Verified
126	Other



Duties			
Code	Task Name	HHAX Category	Payer
300	Dressing	Personal Care	MICS & MINN
301	Grooming	Personal Care	MICS & MINN
302	Bathing	Personal Care	MICS & MINN
303	Toileting	Personal Care	MICS & MINN
304	Eating	Personal Care	MICS & MINN
305	Mobility	Personal Care	MICS & MINN
306	Transferring	Personal Care	MICS & MINN
307	Positioning	Personal Care	MICS & MINN
308	Meal preparation	Personal Care	MICS & MINN
309	Meal planning	Personal Care	MICS & MINN
310	Housecleaning	Personal Care	MICS & MINN
311	Laundry	Personal Care	MICS & MINN
312	Personal paperwork	Personal Care	MICS & MINN
313	Finances	Personal Care	MICS & MINN
314	Community Participation	Personal Care	MICS & MINN
315	Shopping	Personal Care	MICS & MINN
316	Communicating	Personal Care	MICS & MINN
317	Transportation	Personal Care	MICS & MINN
318	Behavioral support	Personal Care	MICS & MINN
319	Health-related tasks	Personal Care	MICS & MINN
320	Crisis respite	Waiver	MIWS
321	Homemaker w/ personal cares	Waiver	MIWS
322	Individual community living support (ICLS)	Waiver	MIWS
323	Night Supervision	Waiver	MIWS
324	Individualized home supports w/ training	Waiver	MIWS



325	Individualized home supports w/o training	Waiver	MIWS
326	Home health aide	Home Health	MIHH
327	Skilled nursing	Home Health	MIHH
328	Occupational therapy	Home Health	MIHH
329	Physical therapy	Home Health	MIHH
330	Respiratory therapy	Home Health	MIHH
331	Speech therapy	Home Health	MIHH



Blue Cross Procedure Code Table

Procedure Code	Description	Rate Type
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1019	1:1 PCA Services	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waier services)	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly



T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:U6	Temporary Increase in Units	Hourly



T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
T2028	CDCS Personal Assistance, Decremental	Daily



Health Partners Procedure Code Table		
Procedure Code	Description	Rate Type
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
H0043:UC:U3	Individualized Home Supports with training, Daily	Daily
H2014:UC:U3	Individualized Home Supports with training, 15 minutes	Hourly
H2014:UC:UN:U3	Individualized Home Supports with training (1:2)	Hourly
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5125:UC	Individualized Home Supports with family training	Hourly
S5125:UC:UN	Individualized Home Supports with family training (1:2)	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5135:UA	Night Supervision, 15 Minutes	Hourly
S5135:UC	Individualized Home Supports without training	Hourly
S5135:UC:UN	Individualized Home Supports without training (1:2)	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9125	Crisis Respite, Daily	Daily
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1005	Crisis Respite, 15 Minutes	Hourly
T1005:TG	Crisis Respite, Specialized, 15 Minutes	Hourly
T1019	1:1 PCA Services	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HQ	1:3 PCA Services	Hourly



T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waier services)	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly



T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:UA	Supervision of PCA Services	Hourly
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1021	Home Health Aide, Per Visit	Visit



T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
T2028	CDCS Personal Assistance, Decremental	Daily

Hennepin Health Procedure Code Table

Procedure Code	Description	Rate Type
S5181	Respiratory Therapy, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
S5181	Respiratory Therapy, Per Visit	Visit

IMCare Procedure Code Table

Procedure Code	Description	Rate Type
S5135:UA	Night Supervision, 15 Minutes	Hourly
S5135:UC	Individualized Home Supports without training	Hourly
S5135:UC:UN	Individualized Home Supports without training (1:2)	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019	1:1 PCA Services	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly



T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily



T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly



T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T2028:U1	CDCS Personal Assistance, Decremental	Daily
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly

Medica Procedure Code Table

Procedure Code	Description	Rate Type
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019	1:1 PCA Services	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waier services)	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily



T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily



T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T2028	CDCS Personal Assistance, Decremental	Daily
H2015	Base Code - Not in Service	Hourly
S5135	Base Code - Not in Service	Hourly
S5130	Base Code - Not in Service	Hourly
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
T1019:HQ:U6	Personal Care Assistance (PCA), 1:3, Temporary 45 Day Increase	Hourly
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly



T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily

PrimeWest Procedure Code Table		
Procedure Code	Description	Rate Type
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019	1:1 PCA Services	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly



T1019:U5	Notice of Reduction	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly



T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily



T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
S5181	Respiratory Therapy, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
BND01	Skilled Nursing Bundled Service Code	Visit
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly



T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T2028:U1	CDCS Personal Assistance, Decremental	Daily
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily

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South Country Procedure Code Table		
Procedure Code	Description	Rate Type
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
T1019	1:1 PCA Services	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly



T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:UC	Extended PCA Services (waiver services)	Hourly
T2025	Consumer Support Grant, Decremental	Daily
T2028:U1	CDCS Personal Assistance, Decremental	Daily
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP:	CFSS, Budget, Extended, 1:3	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily



T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit



S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
T1019:TG	1:1 PCA Complex	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly



T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily

UCare Procedure Code Table		
Procedure Code	Description	Rate Type
T1019	1:1 PCA Services	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly



T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily



T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
BND01	Skilled Nursing Bundled Service Code	Visit



H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly

United Healthcare Procedure Code Table		
Procedure Code	Description	Rate Type
T1005	Crisis Respite, 15 Minutes	Hourly
T1005:TG	Crisis Respite, Specialized, 15 Minutes	Hourly
T1019	1:1 PCA Services	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:HQ:TG:UC	1:3 Extended PCA Services (waiver services), Complex	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:TT:U6	Personal Care Assistance (PCA), 1:2, Temporary 45 Day Increase	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly
T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly



T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily



T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
S5181	Respiratory Therapy, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit
S9125	Crisis Respite, Daily	Visit
H0043:UC:U3	Individualized Home Supports with training, Daily	Daily
H2014:UC:U3	Individualized Home Supports with training, 15 minutes	Hourly
H2014:UC:UN:U3	Individualized Home Supports with training (1:2)	Hourly
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
S5125:UC	Individualized Home Supports with family training	Hourly
S5125:UC:UN	Individualized Home Supports with family training (1:2)	Hourly



S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5135:UA	Night Supervision, 15 Minutes	Hourly
S5135:UC	Individualized Home Supports without training	Hourly
S5135:UC:UN	Individualized Home Supports without training (1:2)	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly
T2025	Consumer Support Grant, Decremental	Daily
T2028:U1	CDCS Personal Assistance, Decremental	Daily
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily

Community First Services and Support Procedure Code Table

Procedure Code	Description	Rate Type
T1019	1:1 PCA Services	Hourly
T1019:HQ	1:3 PCA Services	Hourly
T1019:HQ:TG	1:3 PCA Complex	Hourly
T1019:HQ:UC	1:3 Extended PCA Services (waiver services)	Hourly
T1019:TG	1:1 PCA Complex	Hourly
T1019:HQ:TG:U6	Temporary Increase in Units PCA Complex 1:3	Hourly
T1019:TG:TT:U6	Temporary Increase in Units PCA Complex 1:2	Hourly
T1019:TG:U6	Temporary Increase in Units PCA Complex 1:1	Hourly
T1019:TT	1:2 PCA Services	Hourly
T1019:TG:TT	1:2 PCA Complex	Hourly
T1019:TT:UC	1:2 Extended PCA Services (waiver services)	Hourly
T1019:U5	Notice of Reduction	Hourly
T1019:HQ:U5	Notice of Reduction, 1:3	Hourly
T1019:HQ:TG:U5	Notice of Reduction, 1:3, complex	Hourly
T1019:TG:U5	Notice of Reduction, complex	Hourly
T1019:TT:U5	Notice of Reduction, 1:2	Hourly
T1019:TG:TT:U5	Notice of Reduction, 1:2, complex	Hourly
T1019:U6	Temporary Increase in Units	Hourly
T1019:U8	CFSS, Agency, 45 Day Temporary Start	Hourly



T1019:TG:U8	CFSS, Agency, Complex, 45 Day Temporary Start	Hourly
T1019:U9	CFSS, Agency, 1:1	Hourly
T1019:TG:U9	CFSS, Agency, Complex, 1:1	Hourly
T1019:U4:U9	CFSS, Agency, Continuation of Benefits, 1:1	Hourly
T1019:TG:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:1	Hourly
T1019:U5:U9	CFSS, Agency, Reduction, 1:1	Hourly
T1019:TG:U5:U9	CFSS, Agency, Complex, Reduction, 1:1	Hourly
T1019:UN:U5:U9	CFSS, Agency, Reduction, 1:2	Hourly
T1019:TG:UN:U5:U9	CFSS, Agency, Complex, Reduction, 1:2	Hourly
T1019:UP:U5:U9	CFSS, Agency, Reduction, 1:3	Hourly
T1019:TG:UP:U5:U9	CFSS, Agency, Complex, Reduction, 1:3	Hourly
T1019:U6:U9	CFSS, Agency, Temporary Increase, 1:1	Hourly
T1019:TG:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:1	Hourly
T1019:TG:UN:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:2	Hourly
T1019:TG:UP:U6:U9	CFSS, Agency, Complex, Temporary Increase, 1:3	Hourly
T1019:UC:U9	CFSS, Agency, Extended, 1:1	Hourly
T1019:TG:UC:U9	CFSS, Agency, Complex, Extended, 1:1	Hourly
T1019:UC:UN:U9	CFSS, Agency, Extended, 1:2	Hourly
T1019:TG:UC:UN:U9	CFSS, Agency, Complex, Extended, 1:2	Hourly
T1019:UC:UP:U9	CFSS, Agency, Extended, 1:3	Hourly
T1019:TG:UC:UP:U9	CFSS, Agency, Complex, Extended, 1:3	Hourly
T1019:UN:U9	CFSS, Agency, 1:2	Hourly
T1019:TG:UN:U9	CFSS, Agency, Complex, 1:2	Hourly
T1019:UN:U4:U9	CFSS, Agency, Continuation of Benefits, 1:2	Hourly
T1019:TG:UN:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:2	Hourly
T1019:UN:U6:U9	CFSS, Agency, Temporary Increase, 1:2	Hourly
T1019:UP:U9	CFSS, Agency, 1:3	Hourly
T1019:TG:UP:U9	CFSS, Agency, Complex, 1:3	Hourly
T1019:UP:U4:U9	CFSS, Agency, Continuation of Benefits, 1:3	Hourly
T1019:TG:UP:U4:U9	CFSS, Agency, Complex, Continuation of Benefits, 1:3	Hourly
T1019:UP:U6:U9	CFSS, Agency, Temporary Increase, 1:3	Hourly
T1019:UA	Supervision of PCA Services	Hourly
T1019:UC	Extended PCA Services (waiver services)	Hourly
T1019:HG:UC	Extended PCA Services (waiver services) 1:3	Hourly
T1019:HG:TG:UC	Extended PCA Services (waiver services) 1:3 complex	Hourly
T1019:TG:UC	Extended PCA Services (waiver services), complex	Hourly
T1019:TG:TT:UC	Extended PCA Services (waiver services) 1:2 complex	Hourly



Financial Management Services Procedure Code Table

Procedure Code	Description	Rate Type
T2025	Consumer Support Grant, Decremental	Daily
T2028	CDCS Personal Assistance, Decremental	Daily
T1019:UB:UC	CFSS, Budget, Extended, 1:1	Daily
T1019:UB:UC:UN	CFSS, Budget, Extended, 1:2	Daily
T1019:UB:UC:UP	CFSS, Budget, Extended, 1:3	Daily
T1019:TG:UB:UC	CFSS, Budget, Complex, Extended, 1:1	Daily
T1019:TG:UB:UC:UN	CFSS, Budget, Complex, Extended, 1:2	Daily
T1019:TG:UB:UC:UP	CFSS, Budget, Complex, Extended, 1:3	Daily
T1019:UB:U5	CFSS, Budget, Reduction, 1:1	Daily
T1019:UB:UN:U5	CFSS, Budget, Reduction, 1:2	Daily
T1019:UB:UP:U5	CFSS, Budget, Reduction, 1:3	Daily
T1019:TG:UB:U5	CFSS, Budget, Complex, Reduction, 1:1	Daily
T1019:TG:UB:UN:U5	CFSS, Budget, Complex, Reduction, 1:2	Daily
T1019:TG:UB:UP:U5	CFSS, Budget, Complex, Reduction, 1:3	Daily
T1019:UB	CFSS, Budget, 1:1	Daily
T1019:UB:UN	CFSS, Budget, 1:2	Daily
T1019:UB:UP	CFSS, Budget, 1:3	Daily
T1019:TG:UB	CFSS, Budget, Complex, 1:1	Daily
T1019:TG:UB:UN	CFSS, Budget, Complex, 1:2	Daily
T1019:TG:UB:UP	CFSS, Budget, Complex, 1:3	Daily
T1019:UB:U6	CFSS, Budget, Temporary Increase, 1:1	Daily
T1019:UB:UN:U6	CFSS, Budget, Temporary Increase, 1:2	Daily
T1019:UB:UP:U6	CFSS, Budget, Temporary Increase, 1:3	Daily
T1019:TG:UB:U6	CFSS, Budget, Complex, Temporary Increase, 1:1	Daily
T1019:TG:UB:UN:U6	CFSS, Budget, Complex, Temporary Increase, 1:2	Daily
T1019:TG:UB:UP:U6	CFSS, Budget, Complex, Temporary Increase, 1:3	Daily
T1019:UB:U4	CFSS, Budget, Continuation of Benefits, 1:1	Daily
T1019:UB:UN:U4	CFSS, Budget, Continuation of Benefits, 1:2	Daily
T1019:UB:UP:U4	CFSS, Budget, Continuation of Benefits, 1:3	Daily
T1019:TG:UB:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:1	Daily
T1019:TG:UB:UN:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:2	Daily
T1019:TG:UB:UP:U4	CFSS, Budget, Complex, Continuation of Benefits, 1:3	Daily
T2028:U1	CDCS Personal Assistance, Decremental	Daily

Home Health Procedure Code Table



Procedure Code	Description	Rate Type
G0299	Direct Skilled Nursing, RN, Home or Hospice, 15 Minutes	Hourly
G0300	Direct Skilled Nursing, LPN, Home or Hospice, 15 Minutes	Hourly
S5181	Respiratory Therapy, Per Visit	Visit
S5181:UC	Respiratory Therapy, Extended, Per Visit	Visit
S9128	Speech Therapy, Per Visit	Visit
S9128:UC	Speech Therapy, Extended, Per Visit	Visit
S9129	Occupational Therapy, Per Visit	Visit
S9129:TF	Occupational Therapy Assistant, Per Visit	Visit
S9129:TF:UC	Occupational Therapy Assistant, Extended, Per Visit	Visit
S9129:UC	Occupational Therapy, Extended, Per Visit	Visit
S9131	Physical Therapy, Per Visit	Visit
S9131:TF	Physical Therapy Assistant, Per Visit	Visit
S9131:TF:UC	Physical Therapy Assistant, Extended, Per Visit	Visit
S9131:UC	Physical Therapy, Extended, Per Visit	Visit
T1004	Home Health Aide, Extended, 15 Minutes	Hourly
T1021	Home Health Aide, Per Visit	Visit
T1030	Skilled Nurse Visit, RN, Per Visit	Visit
T1031	Skilled Nurse Visit, LPN, Per Visit	Visit

Waiver Services Procedure Code Table

Procedure Code	Description	Rate Type
H0043:UC:U3	Individualized Home Supports with training	Hourly
H2014:U3	Individualized Home Supports, 15 Minutes	Hourly
H2014:UC:U3	Individualized Home Supports with training	Hourly
H2014:UC:UN:U3	Individualized Home Supports with training (1:2)	Hourly
H2015:U3	Individual Community Living Support, In Person, 15 Minutes	Hourly
H2032:TF	Independent Living Skills (ILS) Training, 15 Minutes (1:1)	Hourly
H2032:TF:TT	Independent Living Skills (ILS) Training, 15 Minutes (1:2)	Hourly
S5125	In-Home Family Support, 15 Minutes	Hourly



S5125:UC	Individualized Home Supports with family training	Hourly
S5125:UC:UN	Individualized Home Supports with family training (1:2)	Hourly
S5130:TG	Homemaker, Assistance with Personal Cares, 15 Minutes	Hourly
S5135	Personal Support/Adult Companion, 15 Minutes	Hourly
S5135:U4	Personal Support, 15 Minutes	Hourly
S5135:UA	Night Supervision, 15 Minutes	Hourly
S5135:UC	Individualized Home Supports without training	Hourly
S5135:UC:UN	Individualized Home Supports without training (1:2)	Hourly
S5150	Respite Care Services, In Home, 15 Minutes	Hourly
S5151	Respite Care Services, In Home, Daily	Daily
T1005	Crisis Respite, 15 Minutes	Hourly
T1005:TG	Crisis Respite, Specialized, 15 Minutes	Hourly
S9125	Crisis Respite, Daily	Visit

Appendix C - HTTP Response Status Codes

The APIs follow REST design principles and return an HTTP response status code. The following series of status codes can be categorized:

- 2xx: Success – This status code class indicates that the client's request was successfully received, understood, and accepted.
- 4xx: Client Error – This status code class indicates that the client seems to have erred. The EVV Providers must take an action to resolve the returned error.
- 5xx: Server Error – This status code class indicates that the server is responsible for the status code errors. HHAExchange must take an action to resolve the error.

The following are the HTTP Response Status Codes returned by the APIs and their meaning.

HTTP Status Code	Result	Status	Description
200	Success	OK	Standard response for successful HTTP requests.
201		Created	The request has been fulfilled and resulted in a new resource being created.
202		Accepted	The request has been accepted for processing, but the processing has not been completed. The request might or might not eventually be acted upon, as it might be disallowed when processing takes place.
204		No Content	The request has been fulfilled and result has returned nothing based on input values
400	Client Error	Bad Request	The request cannot be fulfilled due to bad syntax. General error when fulfilling the request would cause an invalid



			state. Domain validation errors, missing data, etc. are some examples.
401		Unauthorized	The request requires user authentication information. The response must include a WWW-Authenticate header field containing a challenge applicable to the requested resource.
403		Forbidden	The client does not have access rights to the content. Unlike 401, the client's identity is known to the server. Contact HHAExchange at 3rd Party Integration Support Desk to gain permission to access the API.
404		Not Found	The requested resource could not be found but may be available again in the future. Subsequent requests by the client are permissible.
429		Too Many Requests	The user has sent too many requests in a given amount of time. Intended for use with rate limiting schemes.
500	Server Error	Internal Server Error	The server encountered an unexpected condition which prevented it from fulfilling the request. The request can be tried again once the API issues have been resolved.



Appendix D - YAML Specification

YAML

```
openapi: 3.0.1
info:
  title: Electronic Visit Verification Aggregator API
  description: This HHAExchange service will enable Providers and Vendors in
the HealthCare space to upload their Electronic Visit Verification
information to the selected State Aggregator to achieve compliance with the
21st Century Cures Act.
  version: v1
paths:
  '/api/v{version}/caregivers':
    post:
      tags:
        - Caregivers
      parameters:
        - name: version
          in: path
          required: true
          schema:
            type: string
      requestBody:
        content:
          application/json:
            schema:
              $ref: '#/components/schemas/Caregiver'
      responses:
        '200':
          description: Success
        '400':
          description: Bad Request
          content:
            application/json:
              schema:
                $ref: '#/components/schemas/ProblemDetails'
        '500':
          description: Server Error
  '/api/v{version}/visits':
    post:
      tags:
        - Visits
      summary: Create/Update visit in batch.
      parameters:
        - name: version
          in: path
          required: true
          schema:
            type: string
      requestBody:
        description: Visit Information.
        content:
          application/json:
            schema:
              $ref: '#/components/schemas/Visits'
```



```
responses:
  '202':
    description: Success
  '400':
    description: Bad Request
    content:
      application/json:
        schema:
          $ref: '#/components/schemas/ProblemDetails'
  '500':
    description: Server Error
'/api/v{version}/visits/{evvmsid}':
  put:
    tags:
      - Visits
    summary: Update existing visit.
    parameters:
      - name: version
        in: path
        required: true
        schema:
          type: string
      - name: evvmsid
        in: path
        required: true
        schema:
          type: string
    requestBody:
      description: Visit Information.
      content:
        application/json:
          schema:
            $ref: '#/components/schemas/Visit'
    responses:
      '202':
        description: Success
      '500':
        description: Server Error
  delete:
    tags:
      - Visits
    summary: Delete existing visit.
    parameters:
      - name: evvmsid
        in: path
        description: The Unique Visit identifier in the HHAX Aggregator.
        required: true
        schema:
          maxLength: 64
          type: string
          description: The Unique Visit identifier in the HHAX Aggregator.
          example: BA505E35-B6BD-4895-B93C-A63127A6BB99
      - name: version
        in: path
        required: true
        schema:
          type: string
```



```
responses:
  '202':
    description: Success
  '500':
    description: Server Error
'/api/v{version}/visits/transactions/{transactionId}':
  get:
    tags:
      - Visits
    summary: Get transaction details.
    parameters:
      - name: transactionId
        in: path
        description: Gets or Sets The Unique Visit transactionId in the
HHAX Aggregator.
        required: true
        schema:
          maxLength: 64
          type: string
          description: Gets or Sets The Unique Visit transactionId in the
HHAX Aggregator.
      - name: version
        in: path
        required: true
        schema:
          type: string
    responses:
      '200':
        description: Success
      '204':
        description: Success
      '500':
        description: Server Error
components:
  schemas:
    Address:
      required:
        - state
        - zipcode
      type: object
      properties:
        addressLine1:
          maxLength: 100
          type: string
          description: Individual's street address.
          nullable: true
          example: 0 Airport 200 Riser Rd
        addressLine2:
          maxLength: 50
          type: string
          description: Individual's additional street address information if
applicable.
          nullable: true
          example: Little Ferry
        city:
          maxLength: 50
          type: string
```



```
description: city.
nullable: true
example: Montclair
state:
  maxLength: 2
  type: string
  description: State abbreviation.
  example: MN
zipcode:
  maxLength: 9
  type: string
  description: 'Zip Code (5 or 9-digit format i.e., 12345). Format:
99999 OR 999999999.'
  example: '07643'
additionalProperties: false
Caregiver:
  required:
    - dateOfBirth
    - externalID
    - firstName
    - gender
    - hireDate
    - lastName
    - professionalLicenseNumber
    - providerTaxId
    - qualifier
    - ssn
    - type
  type: object
  properties:
    providerTaxId:
      maxLength: 9
      type: string
      description: Provider Tax ID - Unique Identifier for the Provider.
      example: '999999999'
    qualifier:
      maxLength: 50
      type: string
      description: 'Identifier being sent as the unique identifier for
the Caregiver. Values: NPI.'
      example: ExternalID
    externalID:
      maxLength: 20
      type: string
      description: Unique Caregiver identifier in the external system.
    npi:
      type: string
      description: Unique Caregiver identifier in the external system.
      example: '1234'
    ssn:
      maxLength: 9
      type: string
      description: 'Social Security Number of the Caregiver (Format:
999999999) '
      example: 999999999
    dateOfBirth:
      type: string
```



```
    description: 'Caregiver's Date of Birth (Format: YYYY-MM-DD) '
    format: date
  lastName:
    maxLength: 30
    type: string
    description: Caregiver's Last Name
  firstName:
    maxLength: 30
    type: string
    description: Caregiver's First Name
  gender:
    maxLength: 20
    type: string
    description: 'Caregiver's Gender Values: Male, Female, Other'
    example: Male
  email:
    maxLength: 100
    type: string
    description: Caregiver's Email Address
    nullable: true
  phoneNumber:
    maxLength: 10
    type: string
    description: Caregiver's Phone Number.
    nullable: true
  type:
    maxLength: 15
    type: string
    description: 'Caregiver's Type. Value: Both'
    example: Both
  stateRegistrationID:
    maxLength: 20
    type: string
    description: Unique ID provided by State of MN Caregiver
Registration System.
    nullable: true
  professionalLicenseNumber:
    maxLength: 50
    type: string
    description: Unique ID provided to Caregiver once credentialed by
state.
  hireDate:
    type: string
    description: 'Date on which caregiver hired by Provider (Format:
YYYY-MM-DD) '
    format: date
  address:
    $ref: '#/components/schemas/Address'
  additionalProperties: false
  ProblemDetails:
    type: object
    properties:
      type:
        type: string
        nullable: true
      title:
        type: string
```



```
    nullable: true
  status:
    type: integer
    format: int32
    nullable: true
  detail:
    type: string
    nullable: true
  instance:
    type: string
    nullable: true
  additionalProperties: {}
Office:
  required:
    - identifier
    - qualifier
  type: object
  properties:
    qualifier:
      maxLength: 50
      type: string
      description: Value being sent to uniquely identify the Office.
      example: NPI
    identifier:
      maxLength: 64
      type: string
      description: Office identifier identified by Office Qualifier.
      example: '123456789'
    additionalProperties: false
  description: Unique Identifier for the Provider and Office.
Member:
  required:
    - identifier
    - qualifier
  type: object
  properties:
    qualifier:
      maxLength: 50
      type: string
      description: Value being sent to uniquely identify the member.
      example: MedicaidID
    identifier:
      maxLength: 64
      type: string
      description: Member identifier identified by Member Qualifier.
      example: 1EG4TE5NL74
  admissionId:

    maxLength: 80

    type: string

    description: Patient admissionId and this field required to
    identify unique patient even if medicaidId are same.
```



example: AB0001

```
additionalProperties: false
description: Value being sent to uniquely identify the member.
CaregiverInfo:
  required:
    - identifier
    - qualifier
  type: object
  properties:
    qualifier:
      maxLength: 50
      type: string
      description: 'Value being sent to unique identify the Caregiver.
Values:NPI.'
      example: NPI
    identifier:
      maxLength: 64
      type: string
      description: Caregiver identifier identified by Caregiver
Qualifier.
  example: '1001'
  additionalProperties: false
  description: Value being sent to unique identify the Caregiver.
ServiceAddress:
  type: object
  properties:
    addressLine1:
      type: string
      description: Individual's street address.
      nullable: true
      example: 0 Airport 200 Riser Rd
    addressLine2:
      type: string
      description: Individual's additional street address information if
applicable.
      nullable: true
      example: Little Ferry
    city:
      type: string
      description: Individual's city.
      nullable: true
      example: Minnesota
    state:
      type: string
      description: Individual's State abbreviation.
      nullable: true
      example: MN
    zipcode:
      type: string
      description: 'Individual's Zip Code (5 or 9-digit format i.e.,
12345). Format: 99999 OR 999999999.'
      nullable: true
      example: '07643'
  additionalProperties: false
ClockIn:
  type: object
```



```
properties:
  callDateTime:
    type: string
    description: 'EVV Call Time in UTC Time.(Format: YYYY-MM-DDThh:mm) '
    format: date-time
    nullable: true
    example: '2020-09-23T13:16:00.0000000'
  callType:
    maxLength: 20
    type: string
    description: 'The type of device used to create the event. Values:
Telephony, Mobile. Any call with GPS data collected should be identified as
Mobile.'
    nullable: true
    example: Mobile
  callLatitude:
    type: number
    description: GPS Latitude recorded during event. Latitude has a
range of of -90 to 90 with a 6-digit precision.
    format: double
    example: 89.125345
  callLongitude:
    type: number
    description: GPS Longitude recorded during event. Longitude has a
range of -180 to 180 with a 6-digit precision.
    format: double
    example: 90.125345
  originatingPhoneNumber:
    maxLength: 10
    type: string
    description: 'Originating Phone Number (Caller ID) for
telephony.(Format: 9999999999).'
    nullable: true
    example: '1234567890'
  LocationType:
    maxLength: 20
    type: string
    description: Individual's LocationType'
    nullable: true
    example: 'Home'
  serviceAddress:
    $ref: '#/components/schemas/ServiceAddress'
  additionalProperties: false
  description: Contains properties related to Clock In/Clock Out
operation.
  Task:
    type: object
    properties:
      code:
        type: string
        description: Gets or Sets task code.
        nullable: true
        example: '101'
      additionalProperties: false
      description: Contains task related properties.
  ClockOut:
    type: object
```




```
properties:
  callDateTime:
    type: string
    description: 'EVV Call Time in UTC Time.(Format: YYYY-MM-DDThh:mm) '
    format: date-time
    example: '2020-09-23T13:16:00.0000000'
  callType:
    maxLength: 20
    type: string
    description: 'The type of device used to create the event. Values:
Telephony, Mobile. Any call with GPS data collected should be identified as
Mobile.'
    nullable: true
    example: Mobile
  callLatitude:
    type: number
    description: GPS Latitude recorded during event. Latitude has a
range of of -90 to 90 with a 6-digit precision.
    format: double
    example: 89.125345
  callLongitude:
    type: number
    description: GPS Longitude recorded during event. Longitude has a
range of -180 to 180 with a 6-digit precision.
    format: double
    example: 90.125345
  originatingPhoneNumber:
    maxLength: 10
    type: string
    description: 'Originating Phone Number (Caller ID) for
telephony.(Format: 9999999999).'
    nullable: true
    example: '1234567890'
  LocationType:
    maxLength: 20
    type: string
    description: Individual's LocationType'
    nullable: true
    example: 'Home'
  serviceAddress:
    $ref: '#/components/schemas/ServiceAddress'
  performedTasks:
    type: array
    items:
      $ref: '#/components/schemas/Task'
    description: List of performed task codes.
    nullable: true
  refusedTasks:
    type: array
    items:
      $ref: '#/components/schemas/Task'
    description: List of refused task codes.
    nullable: true
  additionalProperties: false
  description: Contains properties regarding to Clock In operation.
EVV:
  type: object
```



```
properties:
  clockIn:
    $ref: '#/components/schemas/ClockIn'
  clockOut:
    $ref: '#/components/schemas/ClockOut'
  additionalProperties: false
  description: Contains properties related to EVV Clock In/Clock Out.
MissedVisit:
  type: object
  properties:
    reasonCode:
      maxLength: 4
      type: string
      description: Reason Code for the change.
      nullable: true
      example: '1234'
    notes:
      maxLength: 256
      type: string
      description: Reason/Description of the change being made if
entered.
      nullable: true
      example: ''
    missed:
      type: boolean
      description: The Visit is marked as a 'Missed' Visit.
      example: true
    actionCode:
      maxLength: 4
      type: string
      description: Missed Visit Action Code.
      nullable: true
      example: '1234'
  additionalProperties: false
  description: Contains properties related to missed visit.
EditVisit:
  type: object
  properties:
    reasonCode:
      maxLength: 4
      type: string
      description: Reason Code for the change.
      nullable: true
      example: '1234'
    notes:
      maxLength: 256
      type: string
      description: Reason/Description of the change being made if
entered.
      nullable: true
      example: ''
    edited:
      type: boolean
      description: The Visit is considered as manually updated.
      example: true
    actionCode:
      maxLength: 4
```



```
    type: string
    description: Edit Visit Action Code.
    nullable: true
    example: '1234'
  additionalProperties: false
  description: Contains properties related to edit visit.
Billing:
  type: object
  properties:
    externalInvoiceNumber:
      maxLength: 18
      type: string
      description: Invoice number in Agency's Management System.
      nullable: true
      example: 12FD34GH67
    totalBilledAmount:
      type: number
      description: Total billed amount in third party system.
      format: double
      example: 20.4
    totalUnitsBilled:
      type: integer
      description: Total units billed in third party system.
      format: int
      example: 2
    contractRate:
      type: number
      description: Hourly contract rate.
      format: double
      example: 10.2
    diagnosisCodes:
      type: array
      items:
        type: string
        description: Diagnosis Code.Up to 26 of these are allowed.
        nullable: true
    additionalProperties: false
    description: Value being sent to uniquely identify the member.
BillSecondaryPayer:
  type: object
  properties:
    enableSecondaryBilling:
      type: boolean
      description: Gets or sets a value indicating whether to Enable
Secondary Billing.
    otherSubscriberId:
      type: string
      description: Gets or sets Other Subscriber ID.
      nullable: true
    primaryPayerId:
      type: string
      description: Gets or sets Primary Payer ID.
      nullable: true
    primaryPayerName:
      type: string
      description: Gets or sets Primary Payer Name.
      nullable: true
```



```
relationshipToInsured:
  type: string
  description: "Gets or sets Relationship To Insured.\r\n01 =
Spouse\r\n18 = Self\r\n19 = Child\r\nG8 = Other"
  nullable: true
  example: '01'
primaryPayerPolicyOrGroupNumber:
  type: string
  description: Gets or sets Primary Payer Policy Or Group Number.
  nullable: true
primaryPayerProgramName:
  type: string
  description: Gets or sets Primary Payer Program Name.
  nullable: true
planType:
  type: string
  description: "Gets or sets PlanType.\r\nBL = Blue Cross/Blue
Shield\r\nCH = Champus\r\nCI = Commercial Insurance Co.\r\nMB = Medicare Part
\r\nBMC = Medicaid"
  nullable: true
  example: BL
totalPaidAmount:
  type: number
  description: Gets or sets Total Paid Amount.
  format: double
  nullable: true
paidDate:
  type: string
  description: Gets or sets PaidDate.
  format: date-time
  nullable: true
deductible:
  type: number
  description: Gets or sets Deductible.
  format: double
  nullable: true
coinsurance:
  type: number
  description: Gets or sets Coinsurance.
  format: double
  nullable: true
copay:
  type: number
  description: Gets or sets Copay.
  format: double
  nullable: true
contractedAdjustments:
  type: number
  description: Gets or sets Contracted Adjustments.
  format: double
  nullable: true
notMedicallyNecessary:
  type: number
  description: Gets or sets Not Medically Necessary.
  format: double
  nullable: true
nonCoveredCharges:
```



```
    type: number
    description: Gets or sets Non-Covered Charges.
    format: double
    nullable: true
  maxBenefitExhausted:
    type: number
    description: Gets or sets Max Benefit Exhausted.
    format: double
    nullable: true
  additionalProperties: false
  description: Contains properties related to Bill Secondary Payer.
Visit:
  required:
    - externalVisitId
    - payerId
    - procedureCode
    - providerTaxId
    - scheduleEndTime
    - scheduleStartTime
    - timezone
  type: object
  properties:
    providerTaxId:
      maxLength: 9
      type: string
      description: 'Provider Tax ID - Unique Identifier for the
Provider.(Format: 999999999)'
      example: '999999999'
    office:
      $ref: '#/components/schemas/Office'
    member:
      $ref: '#/components/schemas/Member'
    caregiver:
      $ref: '#/components/schemas/CaregiverInfo'
    residingCaregiver:
      type: string
      description: If the caregiver is Live-in then it is Yes, otherwise
it is No.
      example: 'Yes'
    payerId:
      maxLength: 50
      type: string
      description: HHAX assigned ID for the payer. Payer ID is determined
during the implementation process.
      example: ACS
    externalVisitId:
      maxLength: 30
      type: string
      description: Unique Visit identifier in the external system.
      example: '101'
    evvmsid:
      maxLength: 64
      type: string
      description: Unique Visit identifier in the HHAX aggregator system.
      nullable: true
      example: ffa4e144-1ba3-49b8-a41f-6ed777412a8d
    procedureCode:
```



```
    maxLength: 50
    type: string
    description: This is the billable procedure code which would be
mapped to the associated service.
    example: T019
    procedureModifierCode:
      maxItems: 4
      type: array
      items:
        type: string
        description: Two characters Modifier for the HCPCS code for the
837. Up to 4 of these are allowed. Please consult specific program
requirements for exact usage.
      nullable: true
    timezone:
      maxLength: 20
      type: string
      description: "Time zone visit data is captured in. Value:
US/Eastern."
      example: US/Eastern
    scheduleStartTime:
      type: string
      description: 'Schedule Start Time in UTC Time. (Format: YYYY-MM-
DDThh:mm) '
      format: date-time
      example: '2020-09-23T12:16:00.0000000'
    scheduleEndTime:
      type: string
      description: 'Schedule End Time in UTC Time. (Format: YYYY-MM-
DDThh:mm) '
      format: date-time
      example: '2020-09-23T13:16:00.0000000'
    visitStartDateTime:
      type: string
      description: 'Visit Start Time in UTC Time. (Format: YYYY-MM-
DDThh:mm) '
      format: date-time
      nullable: true
      example: '2020-09-23T12:16:00.0000000'
    visitEndDateTime:
      type: string
      description: 'Visit End Time in UTC Time. (Format: YYYY-MM-
DDThh:mm) '
      format: date-time
      nullable: true
      example: '2020-09-23T13:16:00.0000000'
    timesheetRequired:
      type: boolean
      description: Timesheet Required.
      example: true
    timesheetApproved:
      type: boolean
      description: Timesheet is Approved.
      example: true
    evv:
      $ref: '#/components/schemas/EVV'
    missedVisit:
```



```
$ref: '#/components/schemas/MissedVisit'
editVisit:
  $ref: '#/components/schemas/EditVisit'
billing:
  $ref: '#/components/schemas/Billing'
billSecondaryPayer:
  $ref: '#/components/schemas/BillSecondaryPayer'
additionalProperties: false
description: Create new visit command.
Visits:
  type: object
  properties:
    visits:
      type: array
      items:
        $ref: '#/components/schemas/Visit'
      description: Gets or sets list of visit info.
      nullable: true
    additionalProperties: false
    description: Create new bulk visit command.
securitySchemes:
  oauth2:
    type: oauth2
    flows:
      clientCredentials:
        tokenUrl:
'https://implementation.hhaexchange.com/identity/connect/token'
      scopes:
        'write:aggregator': Aggregator API Access
security:
  - oauth2:
    - 'write:aggregator'
```

Sample Transactions

POST Request - Caregiver Request

Use Case: I want to create a new caregiver record.

<BASE URI>/api/v {version}/caregivers

Test	https://implementation.hhaexchange.com/api/v1/caregivers
Production	https://cloud.hhaexchange.com/api/v1/caregivers

```
{
  "providerTaxId": "242342342",
  "qualifier": "ExternalID",
  "externalID": "123456",
  "ssn": "123456789",
  "dateOfBirth": "1985-09-19",
  "lastName": "Doe",
```



```

"firstName": "John",
"gender": "Male",
"email": "jd@axyz.com",
"phoneNumber": "9898878776",
"type": "Both",
"stateRegistrationID": "1234565",
"professionalLicenseNumber": "12344321",
"hireDate": "2019-01-19",
"address": {
  "addressLine1": "30 Fremont Ave ",
  "addressLine2": "Street Two",
  "city": "Newark",
  "state": "MN",
  "zipcode": "071011111"
}
}

```

POST Request – Batch EVV Request

Use Case: I want to submit a batch EVV request (one or more visit records).

<BASE URI>/api/v v{version}/visits

Test	https://implementation.hhaexchange.com/api/v1/visits
Production	https://cloud.hhaexchange.com/api/v1/visits

```

{
  "visits": [
    {
      "providerTaxId": "912347893",
      "office": {
        "qualifier": "NPI",
        "identifier": "1234567890"
      },
      "member": {
        "qualifier": "MedicaidID",
        "identifier": "1EG4TE5NL74"
      },
      "admissionId": "AB0001"
    },
    {
      "caregiver": {
        "qualifier": "ExternalID",
        "identifier": "123456"
      },
      "payerId": "",
      "externalVisitId": "101",
      "evvmsid": "ffa4e144-1ba3-49b8-a41f-6ed777412a8d",
      "procedureCode": "T019",
      "procedureModifierCode": [
        "HQ"
      ],
    },
  ],
}

```




```
"timezone": "US/Eastern",
"scheduleStartTime": "2020-09-23T12:16:00.00",
"scheduleEndTime": "2020-09-23T13:16:00.00",
"visitStartDateTime": "2020-09-23T12:16:00.00",
"visitEndDateTime": "2020-09-23T13:16:00.00",
"timesheetRequired": true,
"timesheetApproved": true,
"evv": {
  "clockIn": {
    "callDateTime": "2020-09-23T13:16:00.00",
    "callType": "Mobile",
    "callLatitude": 90.125345,
    "callLongitude": 90.125345,
    "originatingPhoneNumber": "1234567890",
"LocationType": "Home",
    "serviceAddress": {
      "addressLine1": "O Airport 200 Riser Rd",
      "addressLine2": "Little Ferry",
      "city": "Montclair",
      "state": "MN",
      "zipcode": "07042"
    }
  },
  "clockOut": {
    "callDateTime": "2020-09-23T13:16:00.0000000",
    "callType": "Mobile",
    "callLatitude": 90.125345,
    "callLongitude": 90.125345,
    "originatingPhoneNumber": "",
"LocationType": "Home",
    "serviceAddress": {
      "addressLine1": "O Airport 200 Riser Rd",
      "addressLine2": "Little Ferry",
      "city": "Montclair",
      "state": "MN",
      "zipcode": "07042"
    }
  },
  "performedTasks": [
    {
      "code": "115"
    }
  ],
  "refusedTasks": [
    {
      "code": "116"
    }
  ]
}
},
"missedVisit": {
  "missed": false,
  "reasonCode": "",
  "actionCode": "",
  "notes": ""
},
"editVisit": {
```



```
"edited": true,
"reasonCode": "200",
"actionCode": "100",
"notes": ""
},
"billing": {
  "externalInvoiceNumber": "",
  "totalBilledAmount": 0,
  "totalUnitsBilled": 0,
  "contractRate": 0,
"diagnosisCodes": []
},
"billSecondaryPayer": {
  "enableSecondaryBilling": true,
  "otherSubscriberId": "Insurance",
  "primaryPayerId": "",
  "primaryPayerName": "Minnesota Primary Payer",
  "relationshipToInsured": "01",
  "primaryPayerPolicyOrGroupNumber": "John Group",
  "primaryPayerProgramName": "",
  "planType": "BL",
  "totalPaidAmount": 100.10,
  "paidDate": "2021-02-10T05:41:00",
  "deductible": 0,
  "coinsurance": 0,
  "copay": 0,
  "contractedAdjustments": 0,
  "notMedicallyNecessary": 0,
  "nonCoveredCharges": 0,
  "maxBenefitExhausted": 0
}
},
{
  "providerTaxId": "912347893",
  "office": {
    "qualifier": "NPI",
    "identifier": "1234567890"
  },
  "member": {
    "qualifier": "MedicaidID",
    "identifier": "1EG4TE5NL74"
    "admissionId": "AB0001"
  },
  "caregiver": {
    "qualifier": "ExternalID",
    "identifier": "123456"
  },
},
"residingCaregiver": "No",
"payerId": "",
"externalVisitId": "101",
"evvmsid": "",
"procedureCode": "T019",
"procedureModifierCode": [],
"timezone": "US/Eastern",
"scheduleStartTime": "2020-09-24T12:16:00.00",
"scheduleEndTime": "2020-09-24T13:16:00.00",
"visitStartDateTime": "2020-09-24T12:16:00.00",
```



```
"visitEndDateTime": "2020-09-24T13:16:00.00",
"timesheetRequired": true,
"timesheetApproved": true,
"evv": {
  "clockIn": {
    "callDateTime": "2020-09-24T13:16:00.00",
    "callType": "Mobile",
    "callLatitude": 90.125345,
    "callLongitude": 90.125345,
    "originatingPhoneNumber": "",
  },
  "LocationType": "Home",
  "serviceAddress": {
    "addressLine1": "O Airport 200 Riser Rd",
    "addressLine2": "Little Ferry",
    "city": "Montclair",
    "state": "MN",
    "zipcode": "07042"
  },
},
"clockOut": {
  "callDateTime": "2020-09-24T13:16:00.0000000",
  "callType": "Mobile",
  "callLatitude": 90.125345,
  "callLongitude": 90.125345,
  "originatingPhoneNumber": "1234567890",
  "LocationType": "Home",
  "serviceAddress": {
    "addressLine1": "O Airport 200 Riser Rd",
    "addressLine2": "Little Ferry",
    "city": "Montclair",
    "state": "MN",
    "zipcode": "07042"
  },
},
"performedTasks": [
  {
    "code": "115"
  }
],
"refusedTasks": [
  {
    "code": "116"
  }
]
},
"missedVisit": {
  "missed": false,
  "reasonCode": "",
  "actionCode": "",
  "notes": ""
},
"editVisit": {
  "edited": false,
  "reasonCode": "",
  "actionCode": "",
  "notes": ""
},
},
```



```

"billing": {
  "externalInvoiceNumber": "",
  "totalBilledAmount": 0,
  "totalUnitsBilled": 0,
  "contractRate": 0,
"diagnosisCodes": []
},
"billSecondaryPayer": {
  "enableSecondaryBilling": true,
  "otherSubscriberId": "Insurance",
  "primaryPayerId": "",
  "primaryPayerName": "Minnesota Primary Payer",
  "relationshipToInsured": "01",
  "primaryPayerPolicyOrGroupNumber": "John Group",
  "primaryPayerProgramName": "",
  "planType": "BL",
  "totalPaidAmount": 100.10,
  "paidDate": "2021-02-10T05:41:00",
  "deductible": 0,
  "coinsurance": 0,
  "copay": 0,
  "contractedAdjustments": 0,
  "notMedicallyNecessary": 0,
  "nonCoveredCharges": 0,
  "maxBenefitExhausted": 0
}
}
]
}

```

POST Request – Update EVV Request

Use Case: I want to update a single visit record.

<BASE URI>/api/v v{version}/visits/{evvmsid}

Test	https://implementation.hhaexchange.com/api/v1/visits/ffa4e144-1ba3-49b8-a41f-6ed777412a8d
Production	https://cloud.hhaexchange.com/api/v1/visits/ffa4e144-1ba3-49b8-a41f-6ed777412a8d

```

{
  "providerTaxId": "912347893",
  "office": {
    "qualifier": "NPI",
    "identifier": "1234567890"
  },
  "member": {
    "qualifier": "MedicaidID",
    "identifier": "1EG4TE5NL74"
    "admissionId": "AB0001"
  },
  "caregiver": {
    "qualifier": "ExternalID",

```



```
    "identifier": "123456"
  },
  "residingCaregiver": "No",
  "payerId": "",
  "externalVisitId": "101",
  "evvmsid": "ffa4e144-1ba3-49b8-a41f-6ed777412a8d",
  "procedureCode": "T019",
  "procedureModifierCode": [
    "HQ"
  ],
  "timezone": "US/Eastern",
  "scheduleStartTime": "2020-09-23T12:16:00.00",
  "scheduleEndTime": "2020-09-23T13:16:00.00",
  "visitStartDateTime": "2020-09-23T12:16:00.00",
  "visitEndDateTime": "2020-09-23T13:16:00.00",
  "timesheetRequired": true,
  "timesheetApproved": true,
  "evv": {
    "clockIn": {
      "callDateTime": "2020-09-23T13:16:00.00",
      "callType": "Mobile",
      "callLatitude": 90.125345,
      "callLongitude": 90.125345,
      "originatingPhoneNumber": "1234567890",
    },
    "LocationType": "Home",
    "serviceAddress": {
      "addressLine1": "O Airport 200 Riser Rd",
      "addressLine2": "Little Ferry",
      "city": "Montclair",
      "state": "MN",
      "zipcode": "07042"
    }
  },
  "clockOut": {
    "callDateTime": "2020-09-23T13:16:00.0000000",
    "callType": "Mobile",
    "callLatitude": 90.125345,
    "callLongitude": 90.125345,
    "originatingPhoneNumber": "1234567890",
  },
  "LocationType": "Home",
  "serviceAddress": {
    "addressLine1": "O Airport 200 Riser Rd",
    "addressLine2": "Little Ferry",
    "city": "Montclair",
    "state": "MN",
    "zipcode": "07042"
  },
  "performedTasks": [
    {
      "code": "115"
    }
  ],
  "refusedTasks": [
    {
      "code": "116"
    }
  ]
}
```



```
    },
    },
    "missedVisit": {
      "missed": false,
      "reasonCode": "",
      "actionCode": "",
      "notes": ""
    },
    "editVisit": {
      "edited": true,
      "reasonCode": "200",
      "actionCode": "100",
      "notes": ""
    },
    "billing": {
      "externalInvoiceNumber": "",
      "totalBilledAmount": 0,
      "totalUnitsBilled": 0,
      "contractRate": 0,
      "diagnosisCodes": []
    },
    "billSecondaryPayer": {
      "enableSecondaryBilling": true,
      "otherSubscriberId": "Insurance",
      "primaryPayerId": "",
      "primaryPayerName": "Primary Payer",
      "relationshipToInsured": "01",
      "primaryPayerPolicyOrGroupNumber": "John Group",
      "primaryPayerProgramName": "",
      "planType": "BL",
      "totalPaidAmount": 100.10,
      "paidDate": "2021-02-10T05:41:00",
      "deductible": 0,
      "coinsurance": 0,
      "copay": 0,
      "contractedAdjustments": 0,
      "notMedicallyNecessary": 0,
      "nonCoveredCharges": 0,
      "maxBenefitExhausted": 0
    }
  }
}
```

Appendix E – Caregiver Error Messages

Element	Error Code	Error Message	Action
providerTaxID	102001	Provider Tax ID is required	Include the Provider Federal Tax ID and call API.
providerTaxID	102002	Provider is not found based on Provider Tax ID	The Provider was not found. Provide the correct federal Tax ID and call API.
providerTaxID	102003	Provider is not active	Use a Provider that is active and call API.



Element	Error Code	Error Message	Action
providerTaxID	102004	Invalid Provider Tax ID format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
qualifier	102005	Invalid Qualifier value	Correct the Caregiver's Qualifier and call API.
qualifier	102006	Multiple Caregiver records found based on Qualifier value. Please provide unique identifier	Use a Caregiver Qualifier that is unique for this Caregiver and call API.
externalID	102007	Unique Caregiver identifier in the external system is required	Include the External ID and call API.
ssn	102008	Caregiver's SSN is required	Include the Caregiver's SSN and call API.
ssn	102009	Invalid Caregiver's SSN format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
dateOfBirth	102010	Caregiver's Date of Birth is required	Include the Caregiver's Date of Birth and call API.
dateOfBirth	102011	Caregiver's Date of Birth value should be less than current date	The Caregiver's Date of Birth is using a date in the future. Resolve issue and call API.
lastName	102012	Caregiver's Last Name is required	Include the Caregiver's Last Name and call API.
firstName	102013	Caregiver's FirstName is required	Include the Caregiver's First Name and call API.
gender	102014	Caregiver's Gender Is required	Include the Caregiver's Gender and call API.
gender	102015	Invalid Caregiver's Gender value	Correct the Caregiver's Gender and call API.
email	102016	Invalid Caregiver's Email Format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
phoneNumber	102017	Invalid Caregiver's Phone Number Format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
type	102018	Caregiver's Type is required	Include the Caregiver's Type and call API.
type	102019	Invalid Caregiver's Type value	Correct the Caregiver's Type and call API.
type	102020	You cannot change the type of a Caregiver that has been previously assigned to a visit.	Correct the Caregiver's Type and call API.



Element	Error Code	Error Message	Action
professionalLicense Number	102021	Caregiver's Professional License Number is required	Include the Caregiver's Professional License Number and call API.
hireDate	102022	Caregiver's Hire Date is required	Include the Caregiver's Hire Date and call API.
state	102023	State is required	Include the Caregiver's State and call API.
zipcode	102024	Zip Code is required	Include the Caregiver's Zip Code and call API.
zipcode	102025	Invalid Zip Code format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
client_id	102026	Records that are created with a specific ClientID must be updated using the same ClientID	Call API with correct ClientID.
client_id	102027	ClientID does not have access permission to update the Provider's Caregiver record	Resolve permission issue.
ssn	102028	Caregiver with same SSN already exists.	Provide unique Caregiver SSN or default SSN value (999999999) and call API.
externalID	102029	Length of the External ID cannot exceed 20 characters	Correct the External ID value and call API.
Unknown	102999	Can occur if there is an interruption in service.	Contact HHAExchange to inquire and to determine the resolution.

If you require assistance with interpreting these error messages or the action that is required to rectify the issue, please contact [3rd Party Integration Support Desk](#) with the subject 'MN API Technical Support Request'.



Appendix F – EVV Error Messages

Element	Error Code	Error Message	Action
providerTaxID	101001	Provider Tax ID is required	Include the Provider Federal Tax ID and call API.
providerTaxID	101002	Provider is not found based on Provider Tax ID	The Provider was not found. Provide the correct federal Tax ID and call API.
providerTaxID	101003	Provider is not active	Contact HHAExchange to rectify this issue.
providerTaxID	101004	Invalid Provider Tax ID format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
office	101005	Office (qualifier and identifier) is required	Include Office (qualifier and identifier) and call API.
office	101006	Invalid Office's Qualifier value	Correct the Office's Qualifier and call API.
office	101007	Office is not found based on Qualifier value	Office was not found. Provide the correct Qualifier value and call API.
office	101008	Office is not active	Contact HHAExchange to rectify this issue.
office	101009	Multiple Office records found based on Qualifier value. Please provide unique identifier.	Use an Office Qualifier that is unique for this Office and call API.
member	101010	Member (qualifier and identifier) is required	Include Member (qualifier and identifier) and call API.
member	101011	Invalid Member's Qualifier value	Correct the Member's Qualifier and call API.
member	101012	Member is not found based on Qualifier value	Member was not found. Provide the correct Qualifier value and call API.
member	101013	Member is not active	Contact MCO and determine why Member is not active. Once the issue is resolved call API.
member	101014	Multiple Member records found based on Qualifier value. Please provide unique identifier.	Use a Member Qualifier that is unique for this Member and call API.
caregiver	101015	Caregiver (qualifier and identifier) is required	Include Caregiver (qualifier and identifier) and call API.
caregiver	101016	Invalid Caregiver's Qualifier value	Correct the Caregiver's Qualifier and call API.
caregiver	101017	Caregiver is not found based on Qualifier value	Provide the correct Qualifier value and call API.
caregiver	101018	Caregiver is not active	Change the Caregiver status to Active and call API.
caregiver	101019	Caregiver is not linked with Provider	Link the Caregiver to the Provider and call API.



Element	Error Code	Error Message	Action
caregiver	101020	Multiple Caregiver records found based on Qualifier value. Please provide unique identifier.	Use a Caregiver Qualifier that is unique for this Caregiver and call API.
caregiver	101021	Visit cannot be greater than 25 hours	Change the Visit duration to be less than or equal to 25 hours and call API.
caregiver	101022	Caregiver is restricted. No Schedule can be created.	Caregiver cannot provide services until Payer removes Caregiver from the Restriction List. Resolve the issue and call API.
caregiver	101023	Caregiver was previously declined by the patient	Resolve the issue with the Caregiver and call API.
caregiver	101024	Caregiver is marked as absent	Resolve the issue with the Caregiver and call API.
payerID	101025	Payer ID is required	Include the Payer ID and call API.
payerID	101026	Invalid Payer ID value	Correct the Payer ID and call API.
payerID	101027	Payer is not active	Contact HHAExchange to rectify this issue.
payerID	101028	There is no active contract for this visit	If Member is Active for the time period for which you are billing, then contact the MCO and request to Start of Care plan date and/or Discharge date.
externalVisitID	101029	External VisitID is required	Include External Visit ID and call API.
evvmsid	101030	EVVMSID is required when EVV record needs to be updated	Include EVVMSID and call API.
evvmsid	101031	EVVMSID is not found	Confirm that the EVVMSID submitted matches the EVVMSID in the HHAExchange system and call API.
evvmsid	101032	EVVMSID does not belong to this payer	Use a EVVMSID that is linked with this Payer and call API.
evvmsid	101033	EVVMSID does not belong to this provider	Use a EVVMSID that is linked with this Provider and call API.
procedureCode	101034	Procedure Code is required	Include Service/Procedure Code and call API.
procedureCode	101035	Procedure Code is not found	Confirm that the Service/Procedure Code submitted matches the Service/Procedure Code in HHAExchange. Correct the issue and call API.
procedureCode	101036	Procedure Code is not active	Contact HHAExchange to rectify this issue.
procedureCode	101037	The service type was set to either Skilled or Non-Skilled for this visit when created and cannot be changed.	The incorrect Service Type was used for the EVVMSID. Correct the issue and call API.



Element	Error Code	Error Message	Action
procedureCode	101038	Procedure Code is not mapped to Caregiver's Discipline	Contact HHAExchange to rectify this issue.
procedureModifier Code	101039	Maximum 4 Procedure Modifier codes are allowed.	Correct the Procedure Modifier Codes and call API.
timezone	101040	Timezone is required	Include Timezone and call API.
timezone	101041	Invalid Timezone value	Correct the Timezone and call API.
scheduleStartTime	101042	Schedule Start Time is required	Include the Schedule Start Time and call API.
scheduleEndTime	101043	Schedule End Time is required	Include Schedule End Time and call API.
scheduleStartTime/EndTime	101044	Schedule cannot be greater than 24 hours	Change the Schedule duration to be less than or equal to 24 hours and call API.
scheduleStartTime/EndTime	101045	Schedule duration is 0	Schedule Start and End Time should not have the same value. Correct the issue and call API.
visitStartDateTime	101046	Visit Start Time is required when "Visit End Date Time" OR "EVV Clock In Time" is provided	Include Visit Start Time and call API.
visitStartDateTime	101047	Visit Start Time cannot be greater than current date	The Visit Start Time is using a time in the future. Resolve issue and call API.
visitEndDateTime	101048	Visit End Time is required when "EVV Clock Out Time" is provided	Include Visit End Time and call API.
visitEndDateTime	101049	Visit End Time cannot be greater than current date	The Visit End Time is using a time in the future. Resolve issue and call API.
visitEndDateTime	101050	Visit End Time must be greater than Visit Start Date Time	Resolve the issue and call API.
visitStartDateTime/EndDateTime	101051	Visit duration is 0	EVV Start and End Time should not have the same value; this might be an export issue. Consult with your 3rd party provider and advise of the issue. Make the required changes and call API.
evv > clockIn/Out	101052	Once EVV Clock In/Out is completed, then change in EVV Clock In/Out is not allowed in subsequent requests	Delete the visit and resubmit.
evv > clockIn/Out	101053	If the EVV Clock Out is provided, then the EVV Clock In is mandatory	Add the EVV Clock In to the Visit with Clock Out and call API.
evv > clockIn/Out	101054	Once visit is confirmed manually, then EVV Clock In/Out is not allowed in subsequent requests	Delete the visit and resubmit.
evv > clockIn/Out > callType	101055	Call Type is required when EVV Clock In/Out Time is confirmed via EVV	Include Call Type and call API.
evv > clockIn/Out > callType	101056	Invalid Call Type value	Correct the Call Type and call API.



Element	Error Code	Error Message	Action
evv > clockIn/Out > callLatitude	101057	Call Latitude is required when EVV Clock In/Out Time is confirmed by GPS (i.e. CallType = Mobile)	Include Call Latitude and call API.
evv > clockIn/Out > callLatitude	101058	Invalid Call Latitude value	Correct the Call Latitude and call API.
evv > clockIn/Out > callLongitude	101059	Call Longitude is required when EVV Clock In/Out Time is confirmed by GPS (i.e. CallType = Mobile)	Include Call Longitude and call API.
evv > clockIn/Out > callLongitude	101060	Invalid Call Longitude value	Correct the Call Longitude and call API.
evv > clockIn/Out > originatingPhoneNumber	101061	Originating Phone Number is required when EVV Clock In/Out Time is confirmed by Telephony (i.e. CallType = Telephony)	Include Originating Phone Number and call API.
evv > clockIn/Out > originatingPhoneNumber	101062	Invalid Originating Phone Number format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
evv > clockIn/Out > serviceAddress	101063	Service Address is required when EVV Clock In/Out Time is confirmed via EVV	Include Service Address and call API.
evv > clockIn/Out > serviceAddress > addressLine1	101064	AddressLine1 is required when EVV Clock In/Out Time is confirmed via EVV	Include Address Line 1 and call API.
evv > clockIn/Out > serviceAddress > city	101065	City is required when EVV Clock In/Out Time is confirmed via EVV	Include City and call API.
evv > clockIn/Out > serviceAddress > state	101066	State Code is required when EVV Clock In/Out Time is confirmed via EVV	Include State Code and call API.
evv > clockIn/Out > serviceAddress > zipcode	101067	Zip Code is Required when EVV Clock In/Out Time is confirmed via EVV	Include Zip Code and call API.
evv > clockIn/Out > serviceAddress > zipcode	101068	Invalid Zip Code format	Review the EVV Data Aggregator Specification and confirm that your data is in the required format. Make the required changes and call API.
evv > clockOut > performedTasks	101070	Invalid Duties (Performed Task/Refused Task) field value	Correct the value in the Duties field and call API.
missed	101071	A missed visit request must not contain Clock In/Out information	Remove Clock In/Out information and call API.
missedVisit > reasonCode	101072	Missed Visit Reason Code is required when Missed flag is marked as True	Include Missed EVV Reason Code and call API.



Element	Error Code	Error Message	Action
missedVisit > reasonCode	101073	Invalid Missed Visit Reason Code value	Correct the Missed Visit Reason Code and call API.
missedVisit > reasonCode	101074	Missed Visit Reason Code is not active	Contact HHAExchange to rectify this issue.
missedVisit > actionCode	101075	Missed Visit Action Code is required when Missed flag is marked as True	Include Missed EVV Action Code and call API.
missedVisit > actionCode	101076	Invalid Missed Visit Action Code value	Correct the Missed Visit Action Code and call API.
missedVisit > actionCode	101077	Missed Visit Action Code is not active	Contact HHAExchange to rectify this issue.
editVisit > reasonCode	101078	Edit Visit Reason Code is required	Include Edit Visit Reason Code and call API.
editVisit > reasonCode	101079	Invalid Edit Visit Reason Code value	Correct the Edit Visit Reason Code and call API.
editVisit > reasonCode	101080	Edit Visit Reason Code is not active	Contact HHAExchange to rectify this issue.
editVisit > actionCode	101081	Edit Visit Action Code is required	Include Edit Visit Action Code and call API.
editVisit > actionCode	101082	Invalid Edit Visit Action Code value	Correct the Edit Visit Action Code and call API.
editVisit > actionCode	101083	Edit Visit Action Code is not active	Contact HHAExchange to rectify this issue.
billing > externalInvoiceNumber	101084	External Invoice Number, Total Billed Amount, Total Units Billed, Contract Rate and Diagnosis Codes fields are required when visit is billed in the Provider's third party EVV System	Include External Invoice Number, Total Billed Amount, Total Units Billed, Contract Rate and Diagnosis Codes fields and call API.
Shift Overlap	101085	Another Visit is using the same time in full or in part	Overlapped Shift times are not allowed. Correct the times so they are not sharing the same time.
Visit	101086	Visit is already billed	If you are attempting to edit the visit, and the visit has been billed in HHAExchange, this action is not allowed. Adjustments would need to be re-billed to the Payer.
Batch Visits	101087	The number of input records exceed the max limit per submission	Reduce the records being submitted in batch to be less than or equal to 100 and call API.
Visit	101088	Visit date is not in range of Eligibility Start and End date	Call API with correct date.
client_id	101089	Records that are created with a specific ClientID must be updated using the same ClientID	Call API with correct ClientID.



Element	Error Code	Error Message	Action
client_id	101090	ClientID does not have access permission to update the Provider's Visit record	Resolve permission issue.
Visit	101091	Schedule Date should be the visit day or the next day of the visit (inclusive of EVV)	Correct the Schedule, Visit and EVV Start/End date and/or time and call API
member	101092	Length of the Member's Identifier cannot exceed max characters of the Qualifier. Refer to the endpoint description for this field	Correct the Member's Identifier value and call API.
caregiver	101093	Length of the Caregiver's Identifier cannot exceed max characters of the Qualifier. Refer to the endpoint description for this field	Correct the Caregiver's Identifier value and call API.
externalVisitID	101094	Length of the External Visit ID cannot exceed 30 characters	Correct the External Visit ID value and call API.
EVVMSID	101095	Length of the EVVMSID cannot exceed 64 characters	Correct the EVVMSID value and call API.
EVVMSID	101096	The external evvmsid contains invalid characters. Please only use alphanumeric characters in addition to '-' and '_'	Correct the EVVMSID value and call API.
Unknown	101999	Can occur if there is an interruption in service	Contact HHAExchange to inquire and to determine the resolution.
residingCaregiver	101121	Invalid ResidingCaregiver value	Correct the ResidingCaregiver value and call API.

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