

# **New York State Medicaid**

## **Electronic Visit Verification Technical User Guide**

### **Instructions for Working with the New York State Data Aggregator and Reporting Electronic Visit Verification Data**

**Instructions Guide Version Number: 2.2**  
**References: 21st Century Cures Act, §.12006**

April 2022

## Introduction

This guide was developed to assist NY Medicaid Managed Care Organizations, Home Health Providers providing Personal Care (Personal Care Attendant and/or Home Health Aide) services in patient homes, and their contracted business associates in preparing for and conducting Electronic Visit Verification (EVV) as required under federal law (*21<sup>st</sup> Century Cures Act H.R. 114-255<sup>1</sup>*).

## Disclosure Statement

This document and the transaction specification described herein can be reproduced and/or distributed, however, its ownership by New York State Medicaid must be acknowledged and the contents must not be modified.

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<sup>1</sup> <https://www.congress.gov/114/plaws/publ255/PLAW-114publ255.pdf>

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## 1 Electronic Visit Verification Overview

The [\*21st Century Cures Act\*](#), is a federal law, passed by Congress in December 2016, that in part requires all state Medicaid programs to implement an Electronic Visit Verification (EVV) system for Personal Care Services (PCS) and Home Health Care Services (HHCS). All states must implement an EVV system to avoid a reduction in federal Medicaid funding. States must require EVV use for all Medicaid-funded PCS by January 1, 2020<sup>2</sup>, and HHCS by January 1, 2023, or demonstrate a "good-faith effort" to implement EVV.

Information about NY Medicaid's response can be found at:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/](https://www.health.ny.gov/health_care/medicaid/redesign/evv/)

The following are the compliance deadlines established by the Cures Act:

- Personal Care Services – 1/1/2021
- Home Health Care Services – 1/1/2023

Failure to meet these deadlines will result in decreased federal funding to the State Medicaid program from Centers for Medicare and Medicaid Services (CMS).

### 1.1 EVV Choice Model

The *21st Century Cures Act* gave State Medicaid Agencies the flexibility to choose from several models to support EVV implementation. In response to an outreach effort involving providers, EVV solution vendors, NY Medicaid clients, Managed Care Organizations, and New York State Department of Health (NYSDOH) staff the decision was made to implement the "Choice Model" as best suited to meet the varying needs of NY Medicaid providers. The Choice Model allows providers to select and self-fund their EVV system of choice or modify their current system to meet federal and state requirements.

New York State Department of Health (NYSDOH) is providing statewide EVV aggregation through the New York Medicaid Management System (MMIS) known as eMedNY.

### 1.2 EVV Data Requirements

The *21st Century Cures Act* identifies the following data elements that must be captured in an EVV record:

- Type of service performed
- Individual receiving the service
- Time the service begins and ends (clock in and clock out)
- Location of the service
- Date of the service
- Individual providing the service

In addition to the six (6) required data points above, providers and provider agencies will be required to transmit additional visit related data elements to the EVV aggregator (eMedNY) in order for the record to be successfully pass into and be stored in the eMedNY system.

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<sup>2</sup> For States that have submitted a Good Faith Effort Exemption, the compliance date is January 1, 2021 for personal care services. New York State Medicaid applied for and received a Good Faith extension for Personal Care Services. The previous deadline for compliance was 1/1/2020. The new deadline is 1/1/2021.

It is important that this document, as well as the *Interface Control Document (ICD)* are used in tangent to submit the EVV data to eMedNY. This guide, the Electronic Visit Verification User Guide, details much of how to get started with submitting the EVV record (enrolling and using the API Dashboard). And then the *Interface Control Document* is where the technical specifications to create the EVV record are located.

To view the mandatory data fields and technical specifications required in the EVV record, please go to the technical specifications in the *Interface Control Document*:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

It is solely the responsibility of the submitter utilizing the eMedNY API web interface, to develop their own compliant API application. eMedNY will be unable to support the end user’s API application; therefore, it is strongly recommended that submitters take appropriate action to have available technical support.

### 1.3 Future Considerations

At this time, the EVV record will not be matched to a claim as part of initial adjudication. However, providers should make sure that their systems are flexible enough to match claims data to an EVV record for future Federal or State policies with regard to EVV claims matching. Providers are encouraged to work with their EVV vendors and their claim system vendors on a flexible solution.

Provider Type	<u>Possible</u> Future Claim Matching Data
<b>Fee-For-Service Providers</b>	<ul style="list-style-type: none"> <li>• Billing NPI or MMIS ID</li> <li>• Member ID (CIN)</li> <li>• Service Start/End Date</li> <li>• Service Start/End Time</li> <li>• Rate Code</li> <li>• Billed Units</li> </ul>
<b>Managed Care</b>	<ul style="list-style-type: none"> <li>• Billing NPI or MMIS ID</li> <li>• Member ID (CIN)</li> <li>• Service Start/End Date</li> <li>• Service Start/End Time</li> <li>• Procedure Codes</li> <li>• Billed Units</li> </ul>

## 1.4 References

- New York State Medicaid's implementation of EVV reporting  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/](https://www.health.ny.gov/health_care/medicaid/redesign/evv/)
- The statutory requirement to implement EVV is found in the *21<sup>st</sup> Century Cures Act*  
<https://www.congress.gov/bill/114th-congress/house-bill/34/text>

## 2 Who is using Electronic Visit Verification (EVV)?

EVV requirements apply to Medicaid-funded Personal Care Services (PCS) and Home Health Care Services (HHCS). These services are defined in the state regulations as follows:

"Personal Care Services shall mean assistance to the patient with personal hygiene, dressing, feeding, and household tasks essential to his/her health." 10 NYCRR 700.2(c) (17)

"Home Health Care Services shall mean health care tasks, personal hygiene services, housekeeping and other related supportive services essential to the patient's health." 10 NYCRR 700.2(c) (15)

### 2.1 Services

For a complete listing of services that require an EVV submission, please see the codes provided by the NYS DOH here:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/app\\_billing\\_codes.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/app_billing_codes.htm)

### 2.2 Impacted NYS Programs and Services

Medicaid Providers that provide services under one or more of the following waiver authorities are subject to EVV.

1905(a)(24) State Plan Personal Care Benefit
<ul style="list-style-type: none"><li>▪ Consumer Directed Personal Assistance (CDPA)</li><li>▪ Personal Care Assistance (PCAI &amp; II)</li></ul>

1915(c) Home and Community Based Services Waivers
<ul style="list-style-type: none"><li>▪ Children's' Waiver</li><li>▪ Nursing Home Transition and Diversion (NHTD)</li><li>▪ Traumatic Brain Injury (TBI)</li><li>▪ Office for People with Developmental Disabilities (OPWDD) comprehensive</li></ul>

1115 Demonstration
<ul style="list-style-type: none"><li>▪ CDPA</li><li>▪ PCAI &amp; II</li></ul>

### 2.3 Who is a Provider and Who is a Submitter?

A **Billing Provider** entity is a Medicaid provider who bills personal care and home health services to NYS Medicaid and are required to use an EVV system.

A **Submitter** is the entity that is submitting the EVV record to the Data Aggregator – eMedNY on behalf of the Billing Provider. The Submitter ID will always be the eight-digit MMIS ID on the EVV record.



- An Agency that submits EVV records on their own behalf is both the Billing Provider and the Submitter
- An Agency that utilizes an EVV Vendor is the 'Billing Provider' and the EVV vendor is the 'Submitter'
- A Vendor that submits data on behalf of any other entity is the Submitter
- A Verification Organization (VO) that submits EVV data on behalf of any other entity is the Submitter
- A Managed Care Organization (MCO) that submits EVV data on behalf of a Provider is the Submitter
- An EVV Aggregator submitting data for multiple agencies is a Submitter

See the [Interface Control Document \(ICD\)](#) for the anatomy of the API and EVV record structure.

## 2.4 Submitter/Provider IDs

There are five provider types identified in the EVV data construct: the Submitter, Billing Provider, Fiscal Intermediary, Caregiver and Service Bureau. Once enrolled all provider types will have an eight (8) digit MMIS ID and an NPI. Note that there are 'Atypical' providers who do not enroll with an NPI. See FAQID PR05 in the [eMedNY FAQ's](#) for a listing of those provider types.

**Submitter ID** is an eight-digit Medicaid number that is assigned to the entity that will submit the EVV data on behalf of billing providers. If the billing provider submits the EVV data without the use of an external entity, then the Submitter ID for this provider is the same as their eight-digit Billing Medicaid (MMIS ID) number.

**Billing Provider ID** identifies the Medicaid provider who is billing NYS Medicaid for personal care and home health services provided to members. Any provider that has a National Provider ID (NPI) enrolled with NYS Medicaid must use their NPI on the EVV record for Billing Provider ID. In certain cases where the provider does not have an NPI, known as an "Atypical" provider, the Billing Provider ID will be the eight-digit MMIS ID.

**Caregiver** is the individual who will perform the service. For home health and personal care services, caregivers generally do not have an NPI, and some who are not eligible to enroll in Medicaid therefore they may also not have a MMIS ID. The Caregiver ID will be the ID assigned in the EVV system that can be traced back to the individual rendering the service.

**Fiscal Intermediary** is an entity that provides fiscal intermediary services for the Consumer Directed Personal Assistance Program (CDPAP) and has a contract for providing such services with a local department of social services and is required to use an EVV system. A Fiscal Intermediary will only have an eight-digit MMIS ID; they will not be enrolled with an NPI.

**Service Bureau** is an entity that processes and submits healthcare transactions including EVV transactions on behalf of a Billing Provider or Fiscal Intermediary. A Service Bureau may enroll and be issued an eight-digit MMIS ID; they will not be enrolled with an NPI.

## 2.5 References

- New York State Medicaid's implementation of EVV reporting  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/](https://www.health.ny.gov/health_care/medicaid/redesign/evv/)
- The statutory requirement to implement EVV is found in the *21<sup>st</sup> Century Cures Act*  
<https://www.congress.gov/bill/114th-congress/house-bill/34/text>

### 3 Important Things to Know about EVV

The following considerations should be kept in mind regarding the EVV program in New York at this time:

- Global Positioning System (GPS) is not currently required for EVV in the New York State – your vendor may offer this, but NYSDOH will not be collecting GPS data at this time
- DOH will not endorse, approve or recommend EVV systems, or provide a list of systems from which providers must select
- Entities already using an EVV system are not required to find or use a new EVV system, as long as it meets the NYS and Cures Act Requirements
- NYS will not endorse, approve or recommend EVV Vendor solutions
- NYS will not endorse, approve or recommend one method of data gathering over another (i.e., mobile phone versus telephone call). Providers are advised to select systems that offer **alternative methods** for collecting data electronically in the event of system failure, natural disaster, or services provided in geographic areas with limited or no internet or cellular connectivity.
- Providers cannot opt out of submitting EVV data

## 4 Getting Started

For successful submission of EVV Data, the following requirements must be met.

- 1  
•Enroll with NYS Medicaid
- 2  
•Determine who will be your 'submitter' (you can be your own submitter)
- 3  
•If the 'submitter' is not yet enrolled as a Medicaid Provider, have them enroll too
- 4  
•Submit EVV Attestation Form Electronically

Once an enrollment status is confirmed, and a submitter is chosen then:

- 5  
•The 'submitter' obtains login credentials for the eMedNY API Developer Dashboard from the eMedNY Web Portal
- 6  
•Log into the **eMedNY API Developer Portal** to obtain API Keys

Steps to  
send EVV  
to eMedNY

### 4.1 Enrollment with NYS Medicaid

#### Getting Started Step 1

NYS DOH requires the EVV submission source to enroll with New York Medicaid. All enrolled entities receive an eight (8) digit NY Medicaid Provider ID (MMIS ID) upon successful enrollment.

Providers currently rendering services to the Medicaid population are already enrolled, and just needs to determine who will be the 'submitter' of the EVV data. Providers already enrolled, please skip to Getting Started Step 2.

For those not already enrolled:

- Please visit the website at [www.emedny.org](http://www.emedny.org)
- Click on the Provider Enrollment tab to get the process started
- The Provider Enrollment Guide can also be accessed to help with choosing the correct enrollment in NYS Medicaid

Support staff for enrollment with NYS Medicaid can be reached by calling **eMedNY Provider Enrollment** at (800) 343-9000.

## 4.2 Determine the ‘Submitter’

### Getting Started Step 2

NYSDOH is not prescribing how the EVV submitter will be determined. Providers must work with their internal resources (IT department, billing departments, Project Management, etc.) to determine how the EVV data will be submitted to the New York State data aggregator (eMedNY).

## 4.3 Determine if the ‘Submitter’ is Enrolled with NYS Medicaid

### Getting Started Step 3

Once the ‘Submitter’ is determined, and it is determined that the submitter is not actively enrolled in NYS Medicaid, please refer to *Section 4.1 [Enrollment with NYS Medicaid](#)*. Submitters that are not a Billing provider should enroll as a Service Bureau Provider Type.

If the submission source is already enrolled in NYS Medicaid, please skip to *Section 4.4 [Submit an EVV Attestation Form](#)*

## 4.4 Submit an EVV Attestation Form

### Getting Started Step 4

Providers are responsible for ensuring that their systems meet the intent of the *21st Century Cures Act* and adhere to New York State state-specific requirements outlined on the NY Medicaid Electronic Visit Verification Program (EVV) website, in this EVV User Manual, and in the Interface Control Document. To that end, New York Medicaid will require that each EVV provider must annually submit an EVV Attestation Form. This is done using the Provider Enrollment Portal.

Instructions on how to create a Provider Enrollment Portal Account and how to use the portal are located here: <https://www.emedny.org/portal>

Email reminders that the Attestation Form is about to expire will be sent 60 days before the Attestation expiration. A second email notice will be sent if the form is still not on record as of 30 days before the expiration.

## 4.5 Registering in the eMedNY Web Portal

### Getting Started Step 5

Once enrollment with NYS Medicaid has been established, all EVV submitters must take the next step and register their NPI or MMIS ID in the eMedNY Web Portal to obtain the credentials that will be used to log in to the Developer Portals.

Key items for this step:

- If the EVV submitter is already registered in the eMedNY Web Portal please skip to [Getting Started Step 6 Obtaining the API Keys](#).

**NOTE: Already using CORE Web Services? You have a Web Portal ID.**

- If the submission source needs to register in the eMedNY Web Portal, please click this direct link to register in the [eMedNY Web Portal](#)
- Please follow the [eMedNY Web Portal Enrollment Guide](#) for instructions on registering to the eMedNY Web Portal

Once eMedNY Web Portal credentials are obtained, the eMedNY API Developer Portal is now available for API Keys.

## 4.6 Obtaining API Keys

### Getting Started Step 6

An API Key is required to access the EVV API web service outlined in Section 6 of the *Interface Control Document*:

[https://health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

To obtain and manage API Keys, log into the **eMedNY API Developer Portal**. There are two different URLs for the **eMedNY API Developer Portal**; a production gateway, and a test gateway.

API Developer Portal - Production<sup>3</sup> <https://developer.emedny.io>

API Developer Portal - Test <https://developer.emednytest.io>

#### **IMPORTANT NOTE about API Keys:**

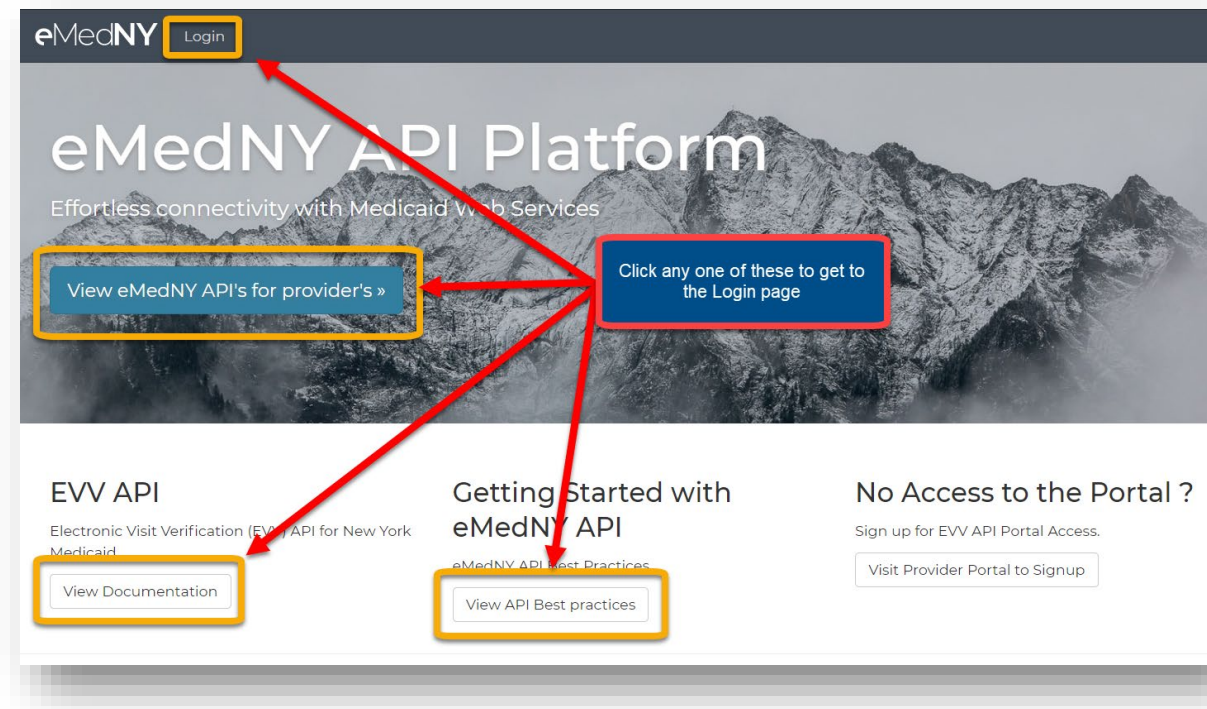
- ✓ API Keys issued in the **Production** API Developer Portal can only be used on the production URL for production submission
- ✓ API Keys issued in the **Test** API Developer Portal can only be used on the test URL for test submissions

The **eMedNY Web Portal** credentials, obtained from [Getting Started Step 5](#), are used for login to both the production and the test **eMedNY API Developer Portal**.

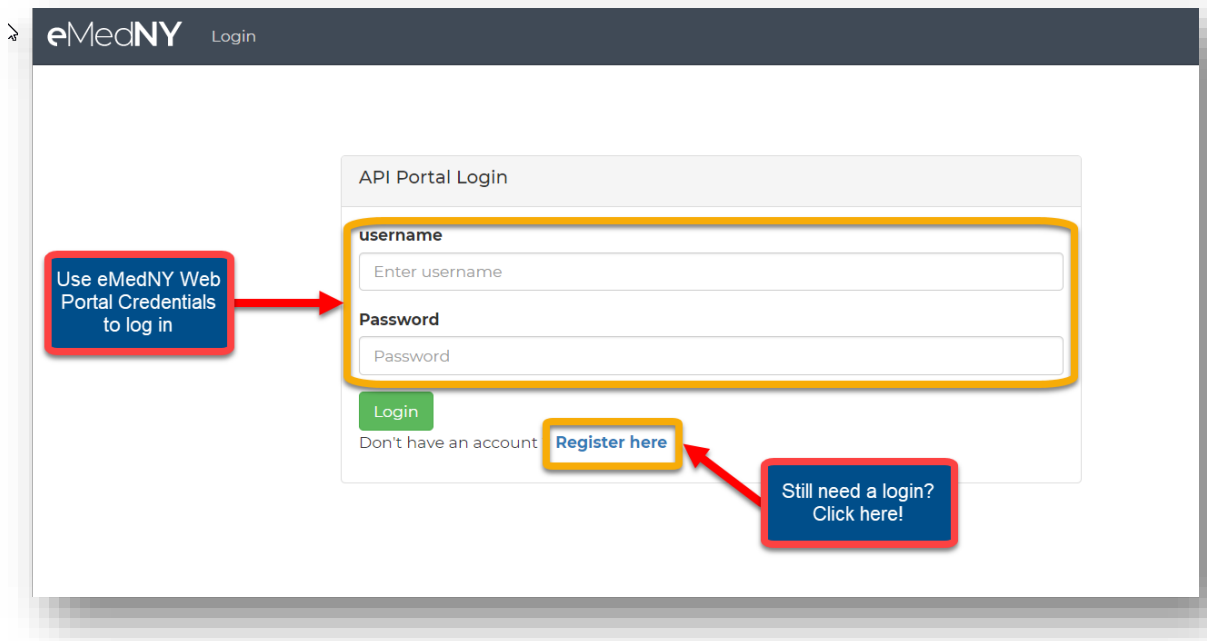
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<sup>3</sup> **Production** API Developer Portal will not be available for use until December 2020

After choosing the Production or the Test URL, log into the **eMedNY API Developer Portal**:

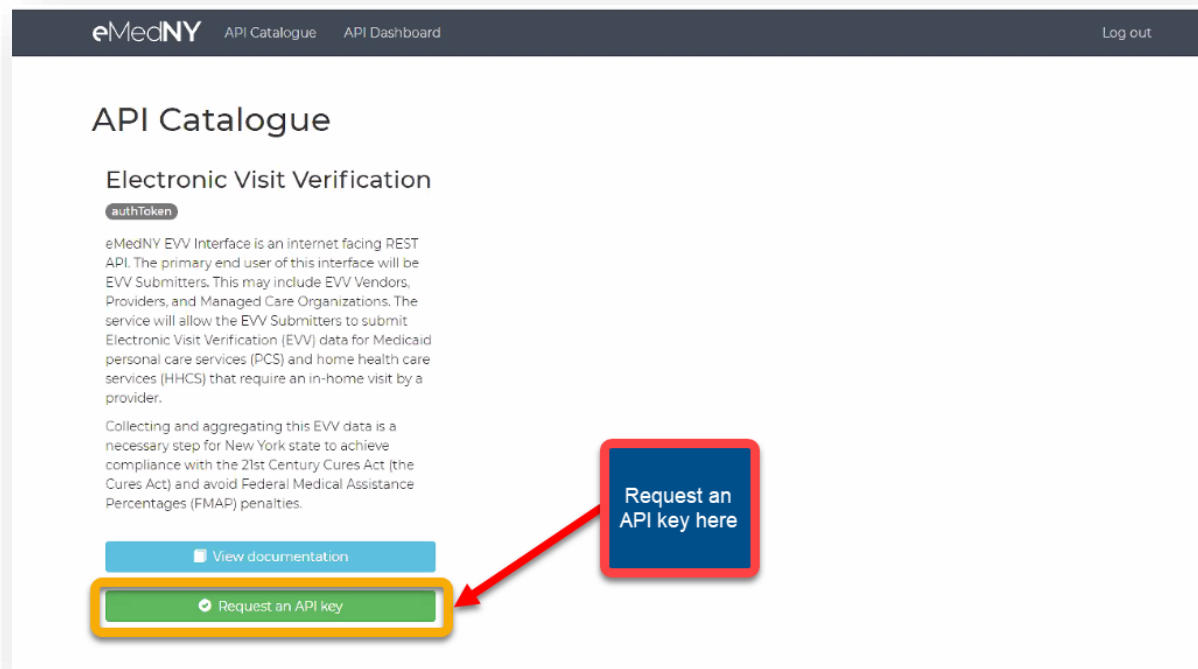
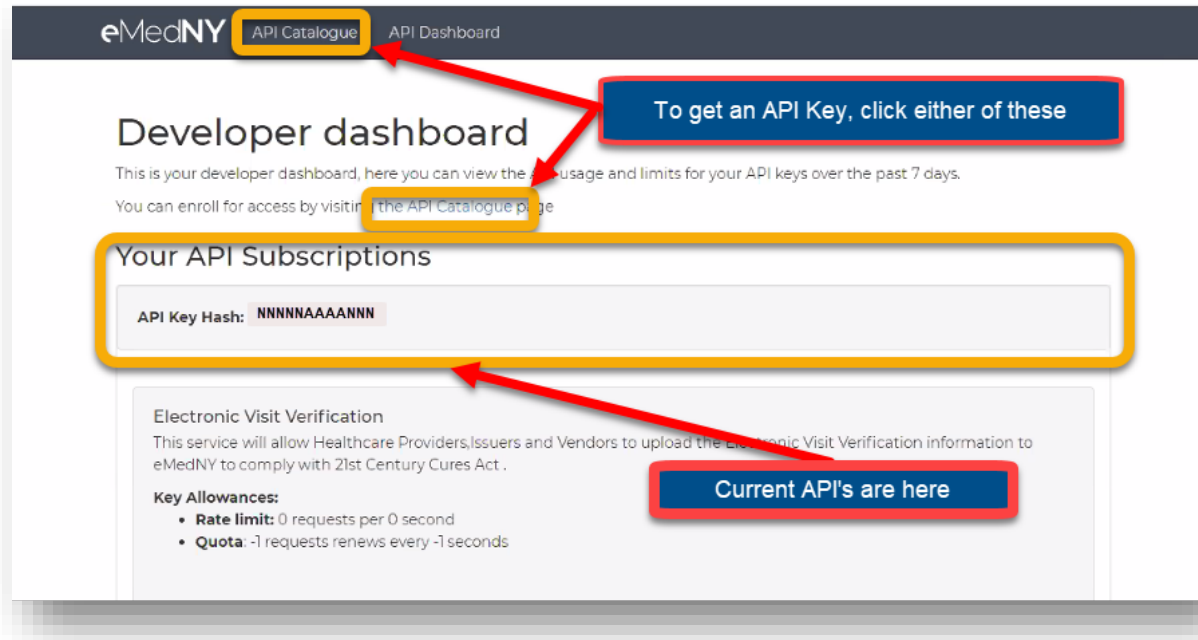


Login Screen. Here the credentials issued to the submitter in the eMedNY Web Portal in the [Getting Started Step 5](#), will be used to login to BOTH the test and production dashboards.



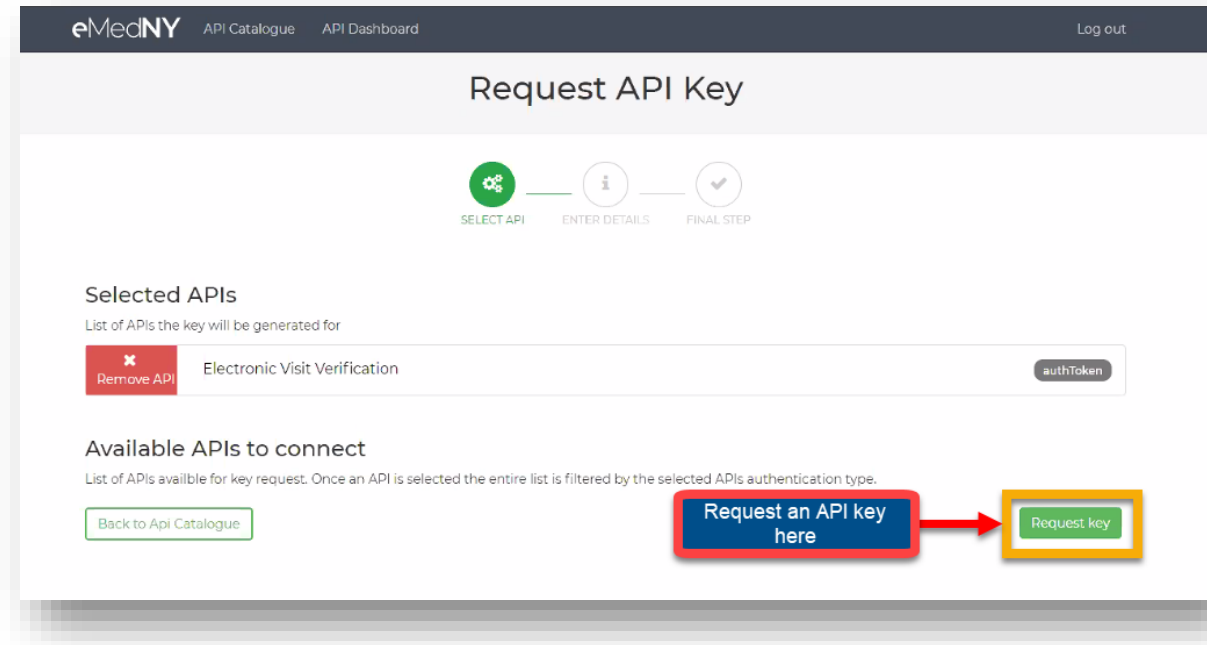
Once logged into the API Developer Portal (Test or Production), to generate a new API Key, click on the link that says **API Catalogue**:

On the next screen, click on **Request an API Key**.

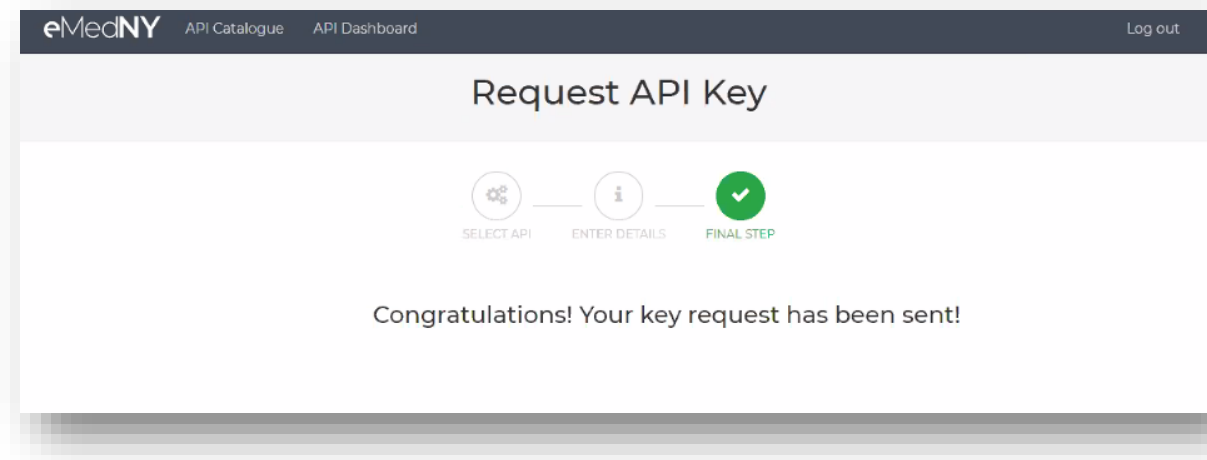




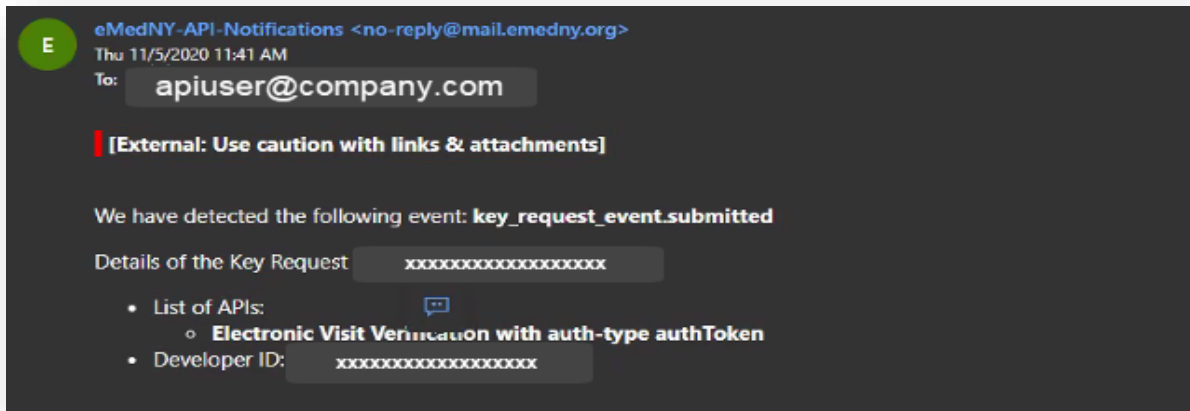
This screen displays the available programs an API Key can be generated for. Click/highlight Electronic Visit Verification, and then click the green Request Key button.



The following message will appear once the Request Key button is clicked.

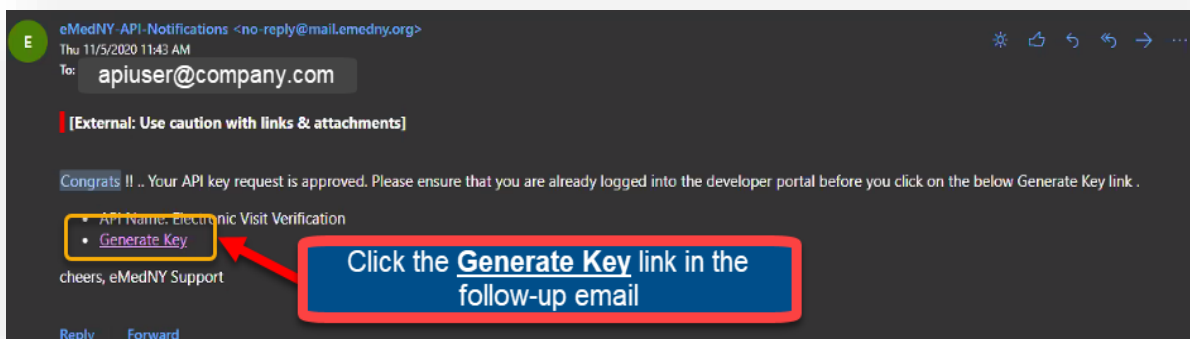


Next, eMedNY will generate an email to the requester's associated email address. The email is as follows:



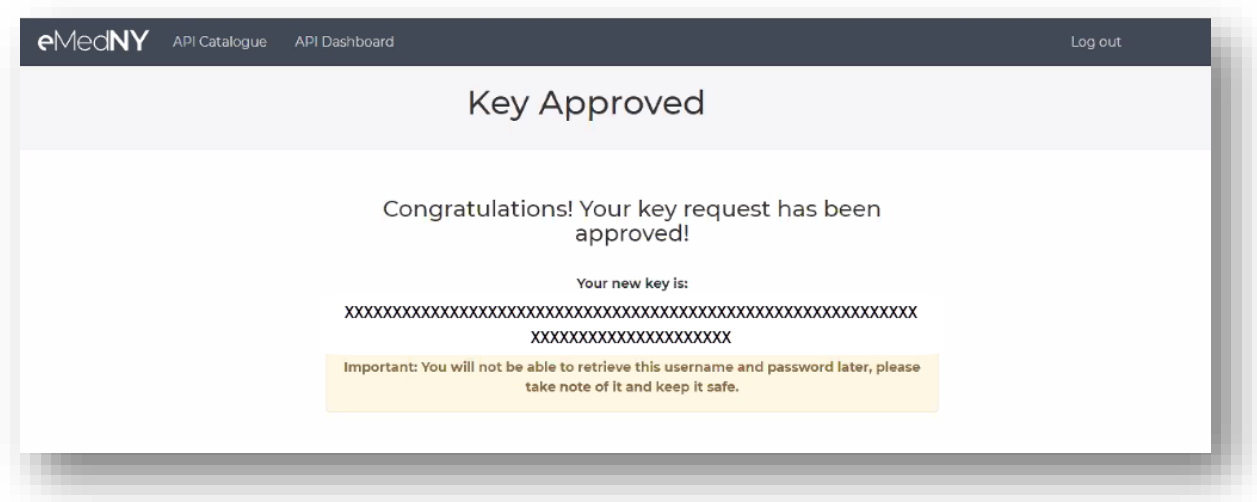
There is nothing for the requester to do with this email. The key request must be approved by eMedNY operations staff.

**Once an eMedNY staff member approves the key request**, then a second email will be generated to the requester. That email will have a link to generate the new Key. Request approval can take up to 24 hours.



**Important to note:** Before clicking the link in the second email, the requester must be logged into the **eMedNY API Developer Portal**. If not logged in, the requester will be required to log back in before generating the key.

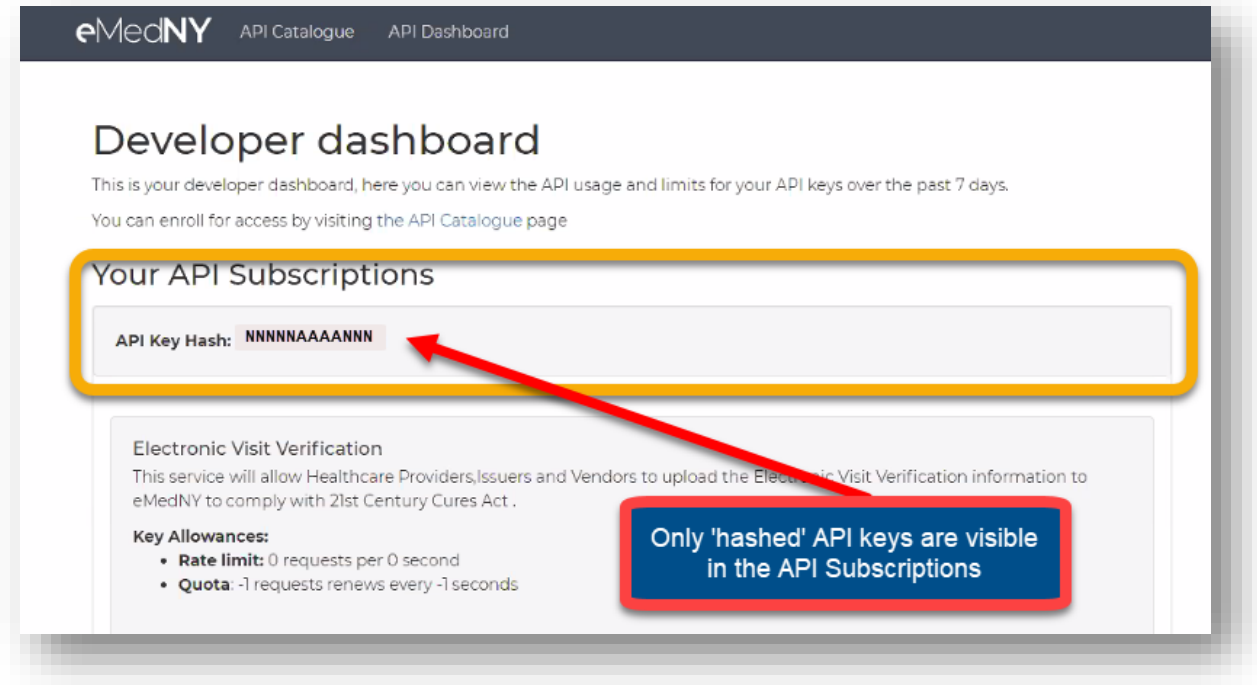
Once the Generate Key link is clicked, it will take the requester to the **eMedNY API Developer Portal** where the following message will appear:



This is the API Key that is used to access the eMedNY API web interface as described in Section 6 of the *Interface Control Document*:  
[https://health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

**\*\*\*\*\*This will be the ONLY time that this key will be visible to the requester\*\*\*\*\***

Once the requester navigates away from this page, the Key will not be visible; only the 'hashed' key will be visible in the API Subscriptions.



Once API Keys are obtained, the following URL's will be used as the base Uniform Resource Identifier (URI) for submission of the EVV data to the eMedNY EVV web service for production and test environments:

Production: <https://api.emedny.io>

Test: <https://api.emednytest.io>

See the [Interface Control Document \(ICD\)](#) for the anatomy of the API and EVV record structure.

## 5 Other EVV Requirements

### 5.1 Recommendations and Limitations

The Department recommends that EVV Data be submitted after the service has been rendered and before the claim is billed. This will ensure that eMedNY has the latest EVV data available when claim matching is done in future phases of EVV implementation.

It is important to note – it is solely the responsibility of the submitter utilizing the eMedNY API architecture, to develop their own compliant API application. eMedNY will be unable to support the end user's API Application; therefore, it is strongly recommended that trading partners take appropriate action to have available technical support.

**Reminder:** All Covered Entities and their trading partners using protected health information (PHI) are responsible to ensure that preservation, privacy, and security of Medicaid Client data in their possession is handled in compliance with the Health Insurance Portability and Accountability Act (HIPAA).

### 5.2 Testing Requirements

NYSDOH strongly encourages all Billing Providers and EVV Submitters to review the provided documentation on the EVV [Document Repository](#), provide feedback to NYSDOH, and test with eMedNY before implementation. Testing should include monitoring for successful connectivity, properly structured JSON payload that meets the Open API Specification, sending and receiving transactions, checking the accuracy of the data submitted, following up on and remediating rejection messages.

The test URL used as the base URI for the eMedNY EVV web service for the test environment is: <https://api.emednytest.io>

See the [Interface Control Document \(ICD\)](#) for the anatomy of the API and EVV record structure.

### 5.3 Interface Protocol Requirements

NYSDOH has implemented a RESTful Application Program Interface (API) developed according to the REST application development protocol.

- Users of the eMedNY EVV API are expected to adhere to REST Best Practices when accessing and conducting operations with eMedNY
- EVV API users must be REST Enabled and have the ability to read and produce JSON data (Content-Type/application/json)
- The JSON payload produced must meet the service specifications described in the Open API Specification in Appendix G of the *Interface Control Document*:  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)
- EVV submitters must conform to the recommended URI patterns for each transaction request type

## 6 Data Submission Workflows

Providers submitting EVV data for their Medicaid enrolled clients can use one or more of the following workflows that suits their needs. The Choice Model allows for the maximum flexibility for providers to integrate their EVV data capture into their workflow as well as use their existing technology and existing trading partners to submit that data.

The purpose of this section is to help Billing Providers and EVV Submitters identify possible workflows that providers may use.

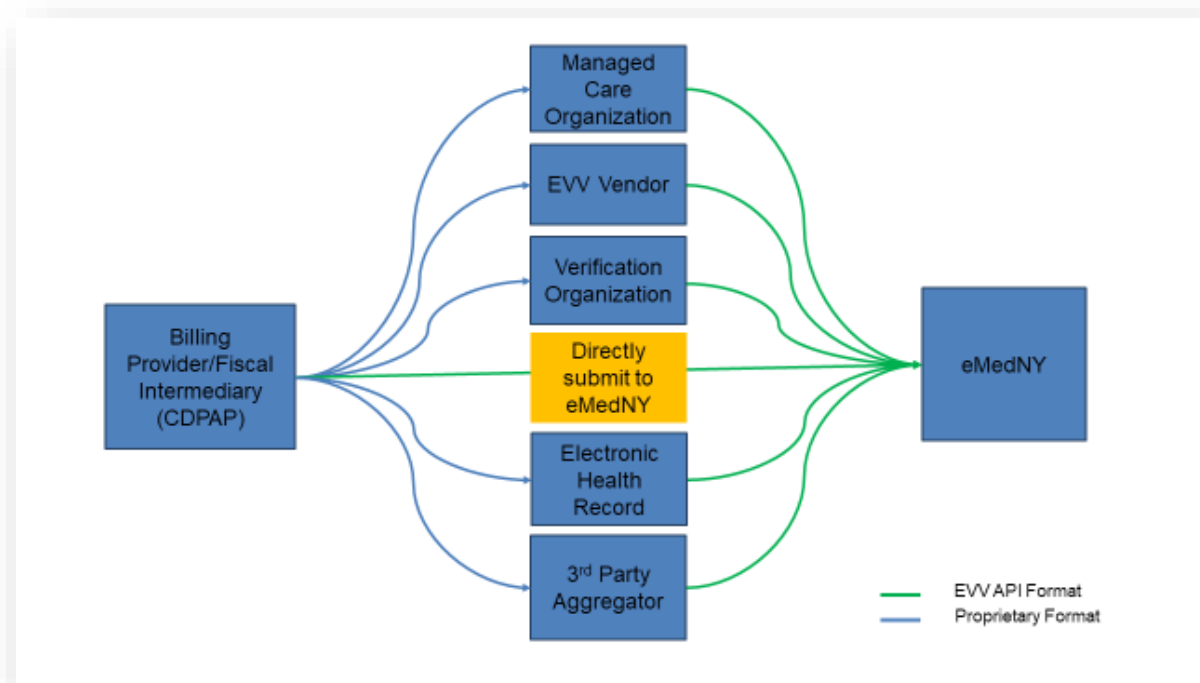
NYSDOH cannot recommend any one workflow over another. Nor is this section a representation of every possible workflow scenario. Billing Providers and EVV Submitters are expected to work with their trading partners to develop solutions that work best for them.

Please see the [Interface Control Document \(ICD\)](#) for the anatomy of the API and the EVV Record.

### 6.1 Workflow Overview

Multiple paths to submit EVV to eMedNY

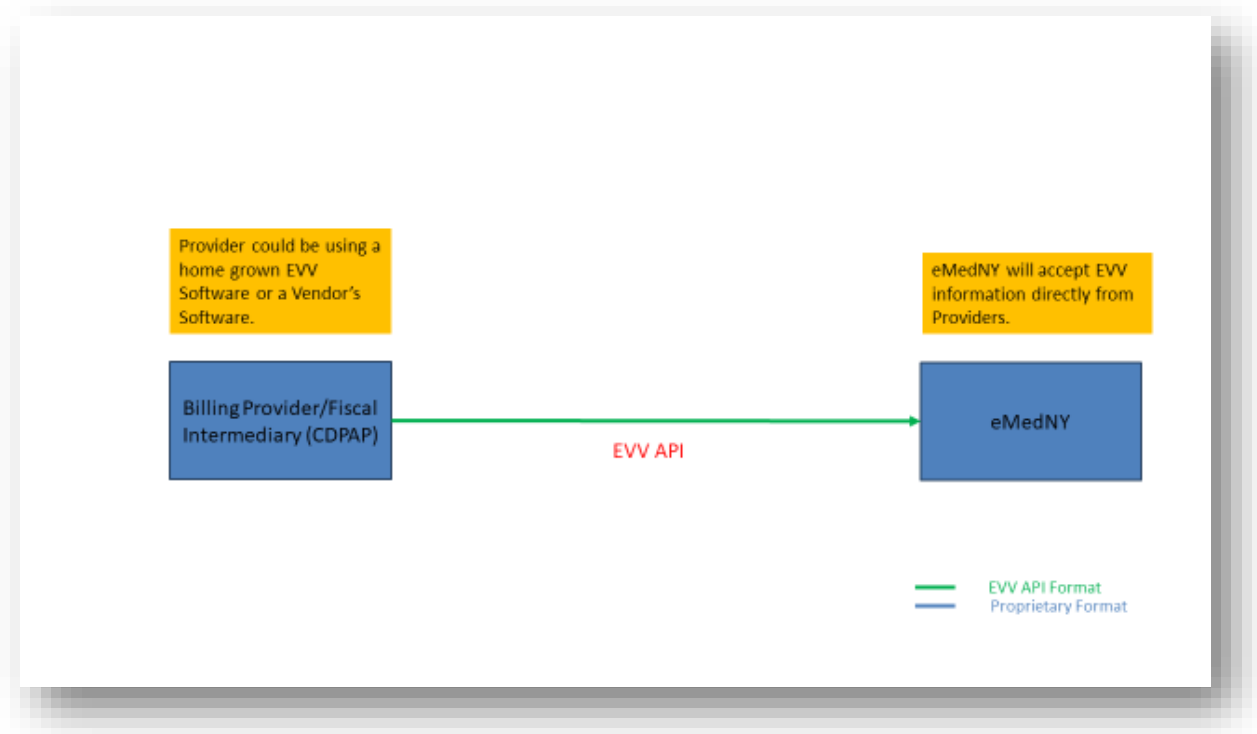
There are many ways a provider or a submitter can submit their EVV data to the data aggregator. It is important for the Provider to work with their trading partners, whether that is an MCO, a Vendor, a VO, another Aggregator, an in-house solution, or any combination of these, to develop data flow and partnerships that will work for the Provider and their submission of the EVV data.



## 6.2 Workflow Scenario 1

Workflow – Providers leveraging their own solution to submit to eMedNY directly.

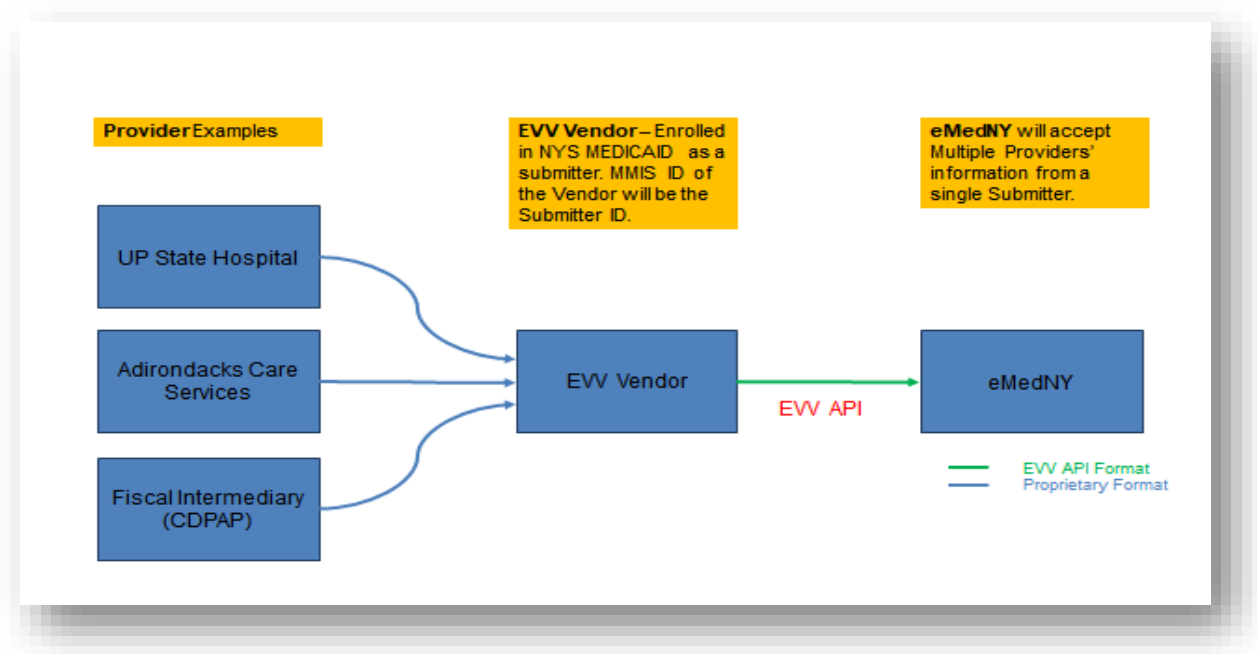
In this workflow, the Billing Provider will directly access the EVV API and submit their own transactions. This workflow is available to any entity that uses an in-house EVV solution, purchased software, or any other solution maintained in-house to submit using the EVV API.



### 6.3 Workflow Scenario 2

Workflow – Providers leveraging an EVV Vendor to submit on their behalf.

In this workflow, the EVV Vendor collects the EVV data from the Providers in a variety of ways. Providers who have a vendor currently, or in the selection process, will need to work with the vendor on developing a partnership for this activity. Then the EVV Vendor will use the eMedNY EVV API to transmit EVV records on provider's behalf.

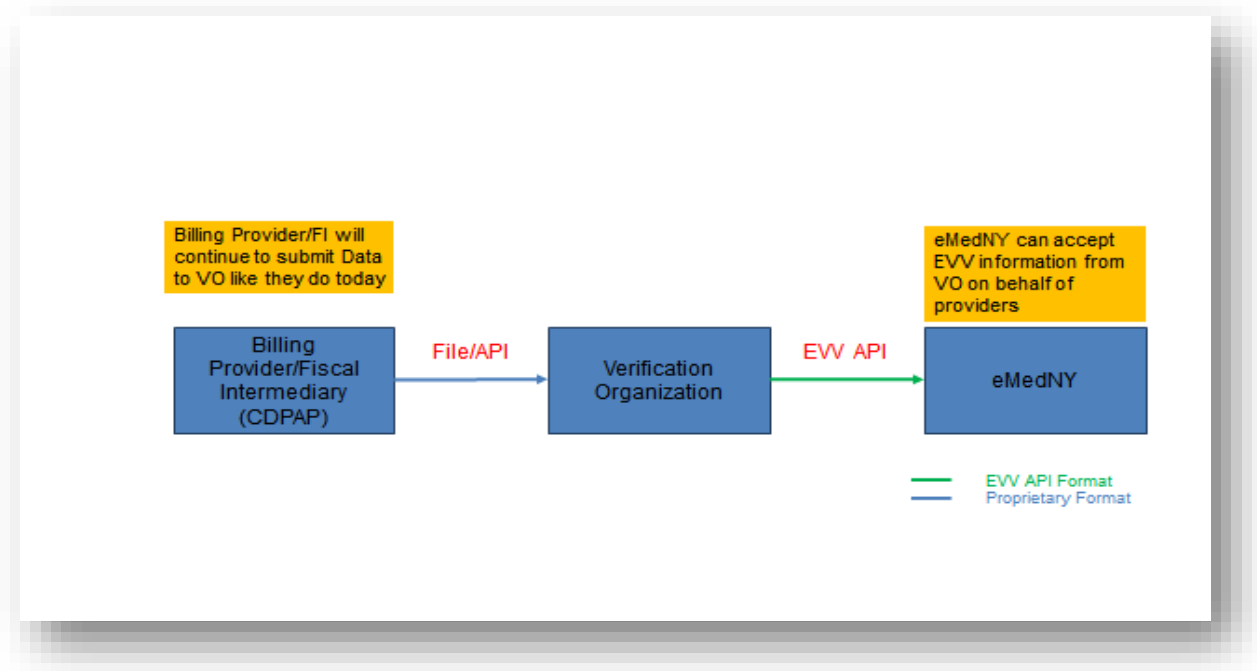




### 6.4 Workflow Scenario 3

Workflow – Providers currently working with a Verification Organization (VO).

A VO submits EVV information on behalf of a provider, if the VO agency is willing to do so. Providers who are working with a VO currently will need to develop a partnership for this activity.



### 6.5 Workflow Scenario 4

Workflow - A submitter **not** currently associated to a Billing Provider, **is enrolled with NYS Medicaid**, but would like to test connectivity and test transactions.

- **The aggregator processing system will not accept ‘dummy’ data** – an enrolled submitter may only test their connection to the eMedNY API in this scenario. Submitting a transaction with dummy data is allowed, but will be rejected for invalid data.

### 6.6 Workflow Scenario 5

Workflow – A submitter **not** currently associated to a Billing Provider, is **NOT enrolled** with NYS Medicaid, but would like to test connectivity and test transactions.

Workflow – A submitter **is currently** associated to a Billing Provider, is **NOT enrolled** with NYS Medicaid and would like access to test connectivity and test transactions.

- All entities submitting data to NYS Medicaid must be enrolled as a Medicaid Provider. See [Section 4](#) to get started.

## 7 EVV Visit Scenarios

Providers submitting EVV data can use the following information as a guide to visit scenarios.

### 7.1 Visit with a Single Service

For Fee-For Service based providers – Single service is submitted with only rate codes.

For the MCO submitting encounters – Single service is submitted with procedure codes.

Review the *Interface Control Document* for all required fields for a single service EVV record:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

To review a listing of all covered rate and procedure code, please see the document *EVV Applicable Billing Codes*:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/app\\_billing\\_codes.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/app_billing_codes.htm)

### 7.2 Visit with Multiple Services

For Institutional Rate based providers – there will only be one Rate code submitted on the EVV record. Follow the same guidance as single service. Institutional Rate based providers who wish to submit both Rate and Procedure Codes, follow the instructions for the MCO.

For the MCO submitting encounters – Single service and multi service can be differentiated with procedure codes. The MCO will submit multiple EVV records by submitting a separate record for each service with a unique Transaction ID and different procedure codes.

### 7.3 Visit with Services provided to more than One Client

Each client must have a separate EVV record.

For Institutional Rate based providers – follow the ICD for the required fields; they are the same as a single service.

For the MCO submitting encounters – Single service and multi service can be differentiated with procedure codes.

### 7.4 Visit in a Community Location

NYS DOH will require that EVV visits performed by a covered provider, and performed in a Community location, must be submitted to the Aggregator.

Service Start Location and/or Stop Location must be populated as “Community”.

### 7.5 Visit Started & Stopped in Two Different Locations

The ICD record requires both start and stop locations.

Service Start Location and Stop Location must be appropriately populated as “Home” or “Community”.

### 7.6 Visit with a Time Change (Daylight Saving Time)

The clock-in/clock-out times reported in the EVV Transaction should reflect the actual timestamp in Eastern Standard Time (EST) without adjustment for visit duration. Below are example timestamps for an 8-hour visit representing begin and end of Daylight Saving Time (DST).

	<b>serviceStartDateTime</b>	<b>serviceEndDateTime</b>
<b>DST Begins</b>	2020-03-08T20:00:00	2020-03-09T05:00:00
<b>DST Ends</b>	2020-11-01T20:00:00	2020-11-02T03:00:00

## 8 EVV Data Submission Scenarios

The Electronic Visit Verification (EVV) Data API service will be exposed as a RESTful secure HTTP (HTTPS) web service for the EVV Submitter system to consume. The service will leverage the HTTP Methods POST, PUT, DELETE, and GET.

Please see the [Interface Control Document \(ICD\)](#) for the anatomy of the API and the EVV Record.

### 8.1 Timing & Frequency of EVV Data Submission

NYSDOH requests that submission of the EVV record is done in a real-time or a near real-time approach as close to the service date as possible. This will ensure that eMedNY has the latest EVV data available.

### 8.2 Resubmit a Rejected EVV Record

EVV records that fail validation will be rejected.

Submitters can review the rejection codes in Appendix A and determine if the record has been rejected correctly.

Records that have been previously rejected may be corrected and resubmitted via batch or a single-entry method.

### 8.3 Editing an Accepted EVV Record

The system will allow editing of a previously accepted EVV record. When a PUT transaction comes in with a Transaction ID and Submitter ID, and a record exists that matches, then the original record will be overwritten with the new record details.

Providers will need to edit an accepted record as soon as any discrepancy is noted.

### 8.4 Rejection of Duplicate Record

Rejection of a duplicate record will occur when the Transaction ID and the Submitter ID match exactly to an already existing record on a POST request.

### 8.5 Deleting an EVV Record

NYSDOH will allow an EVV record to be deleted using the DELETE request. In the DELETE request, the only data necessary in this request is the Transaction ID and the Submitter ID of the original record.

For a sample of a DELETE request see the *Interface Control Document*:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

## 9 EVV Data Specification

For the EVV record layout, see Table 1 – EVV Request Model Table in section 6.1.5.2 of the *Interface Control Document*:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

## 10 Sample Transactions

To review sample transactions, see Appendix G-Additional Appendices in the *Interface Control Document*:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

## 11 Web resources

### 11.1 NYSDOH

The NYSDOH has the following resources available:

Interface Control Document

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

Published Rate Codes and Procedure Codes subject to EVV

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/app\\_billing\\_codes.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/app_billing_codes.htm)

Document Repository

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/index.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/index.htm)

Technical Assistance Information

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/tech\\_assist/index.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/tech_assist/index.htm)

Technical FAQs

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/tech\\_assist/2020-07-02\\_faqs.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/tech_assist/2020-07-02_faqs.htm) – 7.2.2020
- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/tech\\_assist/2020-06-09\\_faqs.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/tech_assist/2020-06-09_faqs.htm) – 6.9.2020

EVV LISTSERV®

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/contact.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/contact.htm)

General Information

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/faqs.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/faqs.htm)

CMS guidance on DOH website—FAQs

- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/2018-05-16\\_faqs.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/2018-05-16_faqs.htm)
- [https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/2018-08-09\\_add\\_guide.htm](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/2018-08-09_add_guide.htm)

### 11.2 eMedNY

eMedNY Web Portal

Login/Register

- <https://portal.emedny.org/provider/portal/login?execution=e1s1>

Enrollment Instructions

- [https://www.emedny.org/selfhelp/ProviderPortal/Enrolling\\_in\\_Web\\_Portal.pdf](https://www.emedny.org/selfhelp/ProviderPortal/Enrolling_in_Web_Portal.pdf)

API URLs for base URI web service

TEST URL for EVV submission

- <https://api.emednytest.io>

PRODUCTION URL for EVV submission<sup>4</sup>

- <https://api.emedny.io>

eMedNY API Developer Portal

API Developer Portal - Production <sup>5</sup>

- <https://developer.emedny.io>

API Developer Portal - Test

- <https://developer.emednytest.io>

Provider Enrollment

New Provider? Get started here

- <https://www.emedny.org/info/ProviderEnrollment/index.aspx>

A 'How do I?' guide

- <https://www.emedny.org/info/ProviderEnrollment/HowDoIDo.pdf>

Provider Enrollment System

- <https://pe.emedny.org/>

eMedNY LISTSERV®

- [https://www.emedny.org/Listserv/eMedNY\\_Email\\_Alert\\_System.aspx](https://www.emedny.org/Listserv/eMedNY_Email_Alert_System.aspx)

### 11.3 External

HIPAA Privacy Rule

- [HIPAA Privacy Rule](#)

CMS EVV information

- <https://www.medicaid.gov/medicaid/home-community-based-services/guidance/electronic-visit-verification-evv/index.html>

API

- <https://restfulapi.net/>

GUID/UUID

- [GUID/UUID https://tools.ietf.org/html/rfc4122](https://tools.ietf.org/html/rfc4122)

RAML

- RAML [www.raml.org](http://www.raml.org)

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<sup>4</sup> Production URL for EVV submission will not be available for use until December 2020

<sup>5</sup> Production API Developer Portal will not be available for use until December 2020



## 12 Contacts

### 12.1 NYSDOH

All questions, comments and concerns regarding EVV can be directed to [EVVHelp@health.ny.gov](mailto:EVVHelp@health.ny.gov)

### 12.2 eMedNY

- All support services can be accessed through the eMedNY Call Center at (800) 343-9000
- Connectivity assistance with the API Developer Portal, or other technical issues contact eMedNY Tier 2 Operations at [emednyproviderservices@gdit.com](mailto:emednyproviderservices@gdit.com)

## 13 Appendices

### 13.1 Appendix A – Data Validation Error Codes

The following table contains information that will assist the end user in resolving an error message returned on an EVV record. For the inbound transaction specifications, see the *Interface Control Document*

[https://www.health.ny.gov/health\\_care/medicaid/redesign/evv/repository/docs/evv\\_data\\_api\\_icd.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/evv/repository/docs/evv_data_api_icd.pdf)

Validated Property	Property Required?	Error Code	Error Condition
transactionId	Yes	4000	Property is missing. Transaction ID is required.
		4001	Transaction ID length is invalid.
		4002	Transaction ID in the URL does not match the submitted Transaction ID in the payload.
memberId	Yes	4003	Property is missing. Member ID is required.
		4004	Property fails check digit validation. Member ID is invalid.
		4005	Property not found. Member ID does not exist on eMedNY.
dateOfBirth	Yes	4006	Property is missing. Date of birth is required.
		4007	Property does not adhere to format. Date of birth format is invalid.
		4008	Property fails validation. Date of birth cannot be greater than the current date.
		4045	Property fails validation. Date of birth does not match the date of birth on eMedNY.
nationalProviderId	Situational  The National Provider ID must be sent if Medicaid Provider ID was not sent.	4009	Property is missing. National Provider ID (NPI) or MMIS Provider ID is required.
		4010	Property does not adhere to format. National Provider ID (NPI) format is invalid.
		4011	Property fails check digit validation. National Provider ID (NPI) is invalid.
		4046	Combination of property values is invalid. National Provider ID (NPI) and MMIS Provider ID combination does not exist on eMedNY.
providerId	Situational  The Medicaid Provider ID must be sent if National Provider ID was not sent.	4009	Property is missing. National Provider ID (NPI) or MMIS Provider ID is required.
		4012	Property does not adhere to format. MMIS Provider ID format is invalid.
		4013	Property fails check digit validation. MMIS Provider ID format is invalid.
		4014	Entity is inactive. MMIS Provider ID is not active on date of service.

		4046	Combination of property values is invalid. National Provider ID (NPI) and MMIS Provider ID combination does not exist on eMedNY.
taxPayerId	Yes	4015	Property is missing. Taxpayer ID is required.
		4016	Property does not adhere to format. Taxpayer ID format is invalid.
providerRateCode	Situational The Rate Code must be present if Procedure Code is not sent.	4017	Property does not adhere to format. Rate code format is invalid.
		4018	Property is not a valid. Rate code is invalid.
		4019	Neither Rate Code nor Procedure Code is present. Rate Code or Procedure Code is required.
procedureCode	Situational The Procedure Code must be present if Rate Code is not sent.	4019	Neither Rate Code nor Procedure Code is present. Rate Code or Procedure Code is required.
		4020	Property does not adhere to specified length. Procedure Code length is invalid.
		4021	Property is not valid. Procedure code is invalid.
procedureModCode	No	4022	Property does not adhere to specified length. Modifier length is invalid.
		4023	Property is not valid. Modifier is invalid.
serviceStartDateTime	Yes	4024	Property is missing. Service start date/time is required.
		4025	Property does not adhere to format. Service start date/time format is invalid.
		4026	Service Start Date and Time are invalid. Service start date/time cannot be greater than the current date.
serviceEndDateTime	Yes	4027	Property is missing. Service end date/time is required.
		4028	Property does not adhere to format. Service end date/time format is invalid.
		4029	Property is invalid. Service end date/time must be greater than Service start date/time.
		4030	Property is invalid. Service end date/time cannot be greater than the current date.
serviceStartLocation	Yes	4031	Property is missing. Service start location code is required.
		4047	Property is invalid. Service start location code is invalid.
serviceEndLocation	Yes	4048	Property is missing. Service end location code is required.
		4049	Property is invalid. Service end location code is invalid.
serviceProviderFirstName	Yes	4032	Property is missing. Service provider first name is required.

serviceProviderLastName	Yes	4033	Property is missing. Service provider last name is required.
serviceProviderPhoneNumber	No	4034	Property does not adhere to format. Service provider phone number format is invalid.
caregiverId	Yes	4035	Property is missing. Caregiver ID is required.
		4036	Caregiver ID length is invalid.
address1	Yes	4039	Property is missing. Address Line 1 is required.
city	Yes	4040	Property is missing. City is required.
state	Yes	4041	Property is missing. State Code is required.
		4042	Property does not adhere to format. State Code format is invalid.
zip	Yes	4043	Property is missing. Zip Code is required.
		4044	Property does not adhere to format. Zip Code format is invalid.

### 13.2 Appendix B – Other Error Codes

Codes in this section are messages sent to the submitter that are not related to specific field level data validation.

Code	Error Message	Message Trigger
4054	The JSON submitted is invalid. Please check	Data interchange format
4080	No Electronic Visit Verification (EVV) record found.	GET/DELETE Operation: Submitter/Transaction ID combination not found
4090	An Electronic Visit Verification (EVV) record already exists on eMedNY.	POST operation: Submitter/Transaction ID already exists

### 13.3 Appendix C – Acronym Glossary

Acronym/Term	Meaning
API	Application Programming Interface
CIN	Client Identification Number
CMS	Centers for Medicare and Medicaid Services
DST	Daylight Savings Time
eMedNY	Electronic Medicaid of New York
EST	Eastern Standard Time
EVV	Electronic Visit Verification
GDIT	General Dynamics Information Technology Corp. - Data Aggregator and eMedNY

Acronym/Term	Meaning
GPS	Global Positioning System
GUID	Globally Unique Identifier
HIPAA	Health Insurance Portability & Accountability Act
ICD	Interface Control Document
JSON	JavaScript Object Notation
MCO	Managed Care Organization
MMIS ID	Medicaid Management Information Systems Identification Number
NYSDOH	New York State Department of Health
PES	eMedNY Provider Enrollment System
RAML	RESTful API Modeling Language
REST	Representational State Transfer
URI	Uniform Resource Identifier
URL	Uniform Resource Locator
UUID	Universally Unique Identifier
VO	Verification Organization

## 14 Document Modification Tracking

Date	Modification
11/4/2020	V2.1 Public <u>Summary of changes</u> <ul style="list-style-type: none"> <li>• 4.4 Removed all references to error code 4052</li> <li>• 4.6 Updated screenshots and added more detail/steps in the process</li> <li>• 5.2 Corrected RAML to Open API Specifications</li> <li>• 5.3 Corrected RAML to Open API Specifications</li> <li>• 5.3 Corrected URL to URI</li> <li>• Appendix B - Removed Error Code 4052</li> </ul>
10/23/20	V2.0 Public <u>Summary of changes</u> <ul style="list-style-type: none"> <li>• 4.4 NEW Completed Section Submit an EVV Attestation Form</li> <li>• 4.5 Added statement about CORE Web Services</li> <li>• 4.6 Added clarifying statement about the different URLs for testing; Added a footnote to clarify that the Production API Developer Portal is not currently available; Cleaned up graphics</li> <li>• 6.1 Cleaned up graphics</li> <li>• 11.2 Added a footnote to clarify that the Production URL for EVV submission is not currently available; Added a footnote to clarify that the Production API Developer Portal is not currently available; Added URL to the Provider Enrollment System (PES)</li> <li>• 13.1 Removed eVisit Method</li> <li>• 13.2 NEW Repurposed 13.2 to add error messages that are not data level validation</li> <li>• 13.3 Glossary moved from 13.2 to 13.3; Added acronyms: DST, EST &amp; PES</li> </ul>
09/16/20	V1.0 Initial Public Draft Version