Electronic Visit Verification

Phase 2: Provider Workgroup Meeting #5

Thursday April 21, 2022
3:00 pm – 4:00 pm
Zoom Meeting
Today’s Agenda

• Welcome and Introductions
• EVV Phase 2
  • New Jersey EVV Implementation
  • Timeline for Provider Onboarding and Implementation
  • NJ EVVMS Data Model
  • Member Authorization Management
  • Certification/Licensing Number Policy
• Follow Up Questions
• Open Discussion
• Next Steps
EVV Phase 2
New Jersey EVV Implementation

- New Jersey HHCS providers must implement EVV by **January 1st, 2023**
- New Jersey is an **Open Model state**
- HHAeXchange has been selected as the **State Aggregator**
- The State has adopted a **“No Wrong Door Path”** approach to EVV aggregation
HHAeXchange (EVV vendor)
Implementation Details

• HHAX Implementation is broken into the following two stages/groups:
  – Group 1 with Go Live Onboard of 7/1:
    • Cohort 1 Skilled Nursing Services
    • Cohort 2 Therapies
  – Group 2 with Go Live Onboard of 8/19:
    • Cohort 3 ABA Therapies
MCOs send out provider letter with questionnaire
Providers complete the questionnaire and choose the best option which applies to their Agency
Providers sign up for the Information Sessions

April

- Providers receive their Welcome Packet
- Providers attend Information Sessions to understand the next steps and timeline for their options
- EDI providers sign up and attend additional information sessions specific to their next steps
- Cohort 3 detailed Welcome Letters to go out

May

- Providers receive communication from HHAeXchange for their specified training
- Providers work on completing the training via LMS
- Providers work on EDI Integration
- Providers receive their HHAX portal credentials/access to the system by logging in
- Providers build internal workflows and prepare for go-live
- Cohort 3 Info Sessions occur along and Welcome Packets are sent to all providers

June

- COHORT 1 & 2 GO LIVE
- Cohort 3 Providers review training on LMS
- Cohort 3 Providers continue to work with EDI Team for integration needs along with attending EDI Training Sessions

July

- COHORT 3 GO LIVE
- Providers ensure EVV compliance
- All EVV mandated services are being collected and reported to NJ DMAHS

August
HHAeXchange provides path to ensure all visit data submitted reaches the applicable payer. 

New Jersey DMAHS will provide consistent configurations, specifications, and policies to cohorts.

Cohorts can continue existing/add new provider integrations and offer free EVV tools.

Aggregated Data Set – Access to HHAX Free Tools and Single Third-Party Integration

New Jersey Medicaid
HHAeXchange

Visit Data Flow

NJ Medicaid Policy Oversight of Cohorts
HHAeXchange
CareBridge

Phase 2
January 2023
Member Authorization Management

- Providers will be receiving member authorizations for the payers listed below and they will be displayed in HHAeXchange
  - NJ DMAHS FFS
  - NJ DDD FFS
  - Aetna
  - United Healthcare
  - WellCare of NJ

- Providers will receive member authorizations from Amerigroup in CareBridge
- Providers will need manage authorizations and members for Horizon manually
- Providers have the option to input member related information (authorization, schedule) into HHAeXchange as well.
Member Authorization Management continued

- Providers can manage additional member phone and address sections on the member profile page within HHAX to reflect where services are provided.
- Providers cannot update or change the phone number and address sent by the payers with the member profile.
Caregiver Setup

- Required field
- Caregiver’s SSN# (on the Caregiver Profile) – Provider and EVV vendors should only send a default value of ‘999999999’ for the social security number field
- Employment types – Home Health Care
- Assigning Secondary Offices
Caregiver Setup continued

• Caregiver’s Professional License Number is required when billing on the HHAeXchange portal.
• This can be entered on the caregiver's profile page under “Employment Info” as seen below.
Certification/Licensing Number Policy

• The DMAHS requires the license or certification number information in the EVV aggregation system for rendering service providers of personal care services (PCS) and home health care services (HHCS).
• The certification/licensing requirement is intended to ensure NJ FamilyCare members are receiving care from qualified providers.
• **Compliance timeline:** Providers have until 12/31/22 to add this information to rendering providers’ profiles.
• Provider training will be offered to walk through this process.
Follow Up Questions
Open Discussion & Next Steps

• Open Discussion

• Next Steps:
  • Next Meeting: May 5, 2022 3-4pm
  • Resources:

  DMAHS: https://www.state.nj.us/humanservices/dmahs/info/evv.html
  DDD: https://www.nj.gov/humanservices/ddd/providers/federalrequirements/verification

Contact Information:

General EVV e-mailbox: Mahs.Evv@dhs.nj.gov
CSOC EVV mailbox: dcf.evvcsoc@dcf.nj.gov
DDD EVV mailbox: DDDEVV@dhs.nj.gov
Becky Thomas: Rebecca.Thomas@dhs.nj.gov
Geralyn Molinari: Geralyn.Molinari@dhs.nj.gov
Amy Hoffmaster: ahoffmaster@chcs.org
HHAeXchange NJ EVVMS Support

Support
NJsupport@hhaexchange.com
Edisupport@hhaexchange.com

NJ Support Phone Number
(866) 245-8337
EVV RESOURCES

Contents:

• The Federal Mandate
• EVV Vision & North Star Principles
• NJ EVVMS – Provider Onboarding
• Provider Outreach to DMAHS EVV
• EVV Inquiry Form
• EVV Payer Contacts
• When to Contact HHAeXchange
• Provider Outreach to HHAeXchange
• Support Center in HHAeXchange
• Client Support Portal in HHAeXchange
• EVV Rounding Rules
• 2023 Codes
The Federal EVV Mandate

Section 12006 of the Twenty First Century Cures Act (Cures Act) and The Centers for Medicare & Medicaid Services (CMS) has mandated that Electronic Visit Verification (EVV) will be required for all Personal Care Services by January 1, 2020 and all Home Health Care Services by January 1, 2023.

NJ DMAHS received approval from CMS for a good faith effort exemption to the January 2020 implementation mandate. The new implementation deadline was January 1, 2021.

**Mandate Requirements:**
1. Type of service performed;
2. Individual receiving the service;
3. Date of the service;
4. Location of service delivery;
5. Individual providing the service;
6. Time the service begins and ends.

Future focus to include program integrity, CM/missed visits, data completeness.
### EVV Vision & North Star Principles

**Vision:** To implement an EVV system that meets state and federal requirements with broad public support and a strong/enthusiastic stakeholder process.

| We will serve people the best way possible. | We will create an electronic visit verification system that ensures New Jersey FamilyCare members receive the home care services authorized in their care plans. |
| We will keep communication clear and simple. | We will communicate to build understanding as we respond to the federal mandate and roll out this new technology. |
| We will support accurate and efficient data exchange. | The new system will support data exchange between providers and MCOs to promote strong collaboration, timely claims processing, and accurate payment. |
| We will use data to solve real-life problems | We will work with health plans and providers to use EVV data to reduce missed visits, address trends, and improve our program in measurable ways. |
| We will support our community through this change. | Empathy, positive energy, and collaborative focus will be our hallmark, internally and externally. |
NJ EVVMS – Provider Onboarding

- Visit the New Jersey Home Health Information Center: *to go live next week on 4/11/2022*
  - [www.hhaexchange.com](http://www.hhaexchange.com) > Resources > Provider Information Center > NJ Home Health

**New Providers**

- **Welcome Letter for Phase 2: Week of 4/11/2022**
- Complete the Provider Portal Survey – under the “Overview” tab
- Sign up for the Provider Information Sessions and attend the webinar to learn next steps/details
- Be on the lookout for additional communication regarding training and implementation timelines
- For 3rd Party / EDI Providers ONLY:
  - Review the BRD and API specifications
  - Complete the attestation
  - Contact HHAX Provider Integration team to begin onboarding process [edisupport@hhaexchange.com](mailto:edisupport@hhaexchange.com)
  - Register for EDI Training Session – link will be sent via email

**Existing Providers**

- Complete the Provider Portal Survey – under the “Overview” tab & sign up for Info Sessions
- **Welcome Letter for Phase 2: Week of 4/11/2022**
- Ensure you are training any staff that handle home health services for Phase 2 on the EVV tools you selected
- 3rd Party / EDI Providers ONLY:
  - Consult with your EVV vendor to ensure the solution you have implemented can support EVV for the additional service
  - Keep your vendor informed of any implementation timelines communicated
Provider Outreach to DMAHS EVV

Addressing Provider Issues /Concerns

1. Provider contact Payer (MCOs and/or FFS)

2. If issue is not resolved and/or payment is interrupted contact DMAHS using the EVV Mailbox and /or Provider Resource account
   - mahs.evv@dhs.nj.gov
   - mahs.provider-inquiries@dhs.nj.gov

3. DMAHS Providers must submit detail that EVV guidelines were followed and MCO and/or EVV Vendor was contacted prior to outreach to DMAHS - (Refer to the EVV Inquiry Form)
# EVV Inquiry Form

## Provider:
(email/phone number of individual making the inquiry):

### Service Information

<table>
<thead>
<tr>
<th>MCO/Health Plan if applicable</th>
<th>EVV Implementation/Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Inquiry</td>
<td></td>
</tr>
<tr>
<td>Service Provider</td>
<td></td>
</tr>
<tr>
<td>Service</td>
<td></td>
</tr>
</tbody>
</table>

### Contact at MCO:

Specify if existing inquiry or email sent to HHAx and/or DMAHS

### Summary of follow-up with HHAx:
Specify Ticket Number:

### Member’s Impacted if Prior Authorization:

### Member’s Impacted if Prior Authorization Notes (if needed):

### NOTES:

[Image: NJFAMILYCARE logo]

Affordable health coverage. Quality care.
# Provider Issues Reporting – EVV Payer Contacts

<table>
<thead>
<tr>
<th>Payer</th>
<th>Payer Contact information for EVV Questions</th>
<th>EVV Solution for Data Submission and Technical Support</th>
<th>Claims submission Portal for services after *July 1, 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>FFS Medicaid</td>
<td><a href="mailto:EVV@dhs.nj.gov">EVV@dhs.nj.gov</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021</td>
</tr>
<tr>
<td>FFS Medicaid DDD</td>
<td><a href="mailto:DDDEVV@dhs.nj.gov">DDDEVV@dhs.nj.gov</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021</td>
</tr>
<tr>
<td>FFS Medicaid CSOC</td>
<td><a href="mailto:dcf.evvcsoc@DCF.nj.gov">dcf.evvcsoc@DCF.nj.gov</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of *10/8/2021</td>
</tr>
<tr>
<td>Aetna</td>
<td>Joseph Manger <a href="mailto:MangerJ@aetna.com">MangerJ@aetna.com</a> Namrata Sood: <a href="mailto:SoodN@aetna.com">SoodN@aetna.com</a> Constance Offer: <a href="mailto:OfferC@aetna.com">OfferC@aetna.com</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021</td>
</tr>
<tr>
<td>Amerigroup</td>
<td>Eyreny Mekhaiel: <a href="mailto:eyreny.mekhaiel@amerigroup.com">eyreny.mekhaiel@amerigroup.com</a> Lynelle Steele: <a href="mailto:fannie.steele@amerigroup.com">fannie.steele@amerigroup.com</a> Keisha J Woodson: <a href="mailto:keisha.woodson@amerigroup.com">keisha.woodson@amerigroup.com</a></td>
<td>CareBridge: <a href="mailto:njevv@carebridgehealth.com">njevv@carebridgehealth.com</a></td>
<td>All EVV mandated services will be submitted and billed through CareBridge as of 7/1/2021</td>
</tr>
<tr>
<td>Horizon</td>
<td>Denaire Johnson: <a href="mailto:Denaire_Johnson@horizonblue.com">Denaire_Johnson@horizonblue.com</a> Stephen Fitch: <a href="mailto:Stephen_Fitch@horizonblue.com">Stephen_Fitch@horizonblue.com</a></td>
<td>CareBridge: <a href="mailto:njevv@carebridgehealth.com">njevv@carebridgehealth.com</a></td>
<td>All EVV mandated services to be billed directly to Horizon. No Change to claims submission - Refer to Section 9.3 – Electronic Billing Guide in the Provider Manual</td>
</tr>
<tr>
<td>United HealthCare</td>
<td><a href="mailto:nj_hcbs_pr@uhc.com">nj_hcbs_pr@uhc.com</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021</td>
</tr>
<tr>
<td>WellCare</td>
<td>Marjorie Forgang: <a href="mailto:Marjorie.Forgang@wellcare.com">Marjorie.Forgang@wellcare.com</a> Elaine M Aguirre: <a href="mailto:Elaine.Aguirre@wellcare.com">Elaine.Aguirre@wellcare.com</a> Joan Cosme: <a href="mailto:Joan.Cosme@wellcare.com">Joan.Cosme@wellcare.com</a></td>
<td>HHAeXchange: <a href="mailto:Njsupport@hhaexchange.com">Njsupport@hhaexchange.com</a> 866-245-8337</td>
<td>All EVV mandated services will be submitted and billed through HHAeXchange as of 7/1/2021</td>
</tr>
</tbody>
</table>
When to Contact HHAeXchange

✓ Issues/questions regarding system functionality or anything relating to your HHAeXchange portal – Reach out to HHAeXchange Support.

✓ Issues/questions regarding your 3rd Party EDI Integration- Reach out to edisupport@hhaexchange.com

➢ Missing Authorizations and or members and information relating to Claims Payments—Reach out to your Payer directly.

Link to NJ DMAHS Provider Resource Page: https://hhaexchange.com/nj-dmahs/
• In the FAQ section you can access a NJ Specific FAQ document for more details on commonly asked questions and scenarios.
Provider Outreach to HHAeXchange

How to access HHAeXchange Support:
• Within your HHAeXchange Portal select the Support Center Link:

Here you can select multiple options:
• **Support Center** – this is where you can find job aides, process guides, and videos on specific functionality within the HHAeXchange portal.
• **Live Chat Support** – this will connect you with a live support agent via a chat box while you continue to work in your portal.
• **Client Support Portal** – Allows a user to create and track system issues and questions in one portal.
• **Email Support** – you can also email directly to njsupport@hhaexchange.com
  • EDI Provider should reach out to edisupport@hhaexchange.com

You can also call our NJ specific Support Line at (866) 245-8337.

*Any time you reach out to Support via email, phone or chat a support ticket will be generated. Please make sure out support emails are not blocked by your SPAM filters.*
Support Center in HHAeXchange

Once in the Support Center search: “Provider Resource”
• Select “Provider Portal Resource Page”
Within the Provider Portal Resource Page, you can access:

- **Process Guides**: Provide full details and instructions of a particular system function
- **Job Aides**: Concentrated instructions of a specific function
- **Training Videos**: Video playlists providing step-by-step system function instructions

### Process Guides –
- System Introduction
- Patient Placement & Management*
- Communications (Linked Contracts)
- Caregiver Management
- Scheduling Visits*
- Visit Confirmation*
- Quick Visit Entry
- EVV Management*
- Mobile App (Agency)
- Mobile App (Caregiver)
- Reporting
- Prebilling*
- Billing*
- Admin Functions*

### Job Aids –
- EVV Provider Resources (Includes links to EVV documentation and videos for Caregivers)*
- EVV Phone Instructions
- EVV Phone Instructions (Spanish)
- Call Dashboard Resolutions*
- Mobile App Clock In/Out – Linked and Mutual Patients
- Mobile App Consecutive Shifts
- Mobile App Language Options
- Creating a New Patient and TEMP Authorization*

### Videos
- HHAX System Overview*
- HHAeXchange Management Playlist
- Scheduling and Visit Management Playlist *
- Billing Processes Playlist*
- EDI Integration Playlist*
- HHAX Administration

* Most frequently used resources
The Client Support Portal is designed to allow clients to submit and track all questions and system issues submitted by the user to the Client Support Team.

The link below provide instructions on how to set up access to your own Client Support Portal:

Client Support Portal Job Aide
EVV Rounding Rules

DMAHS Newsletter Volume 28 No. 1 Rounding of Service Units – ‘Home Care: Home care has explicit time requirements listed in N.J.A.C. 10:60. If a unit of service is defined as a 15 minute interval of face-to-face service, the provider must provide the required 15 minutes and rounding up is not allowed. For example, one unit of service shall be billed for services provided from the first minute through 29 minutes. The second unit of service shall be billed for services provided from 30 minutes through 44 minutes. The third unit of service shall be billed for services provided from 45 minutes to 59 minutes, etc.’

EVV Rounding Rules

DMAHS Newsletter Volume 29 No. 19 PCA Rounding and EVV - This policy speaks to PCS and ABA services ‘Beyond the initial unit, service times less than half of the unit shall be rounded down while service time equal to or greater than half shall be rounded up. For example, with a 15 minute unit of billing, 53 minutes would consist of 3 full fifteen minute units and a partial unit of 8 minutes. Eight minutes is greater than half. This total may be rounded up to 4 full units. A total of 52 minutes would consist of 3 full fifteen minute units and a partial unit of 7 minutes. Seven minutes is less than half of the unit. This total would be rounded down to 3 full units. The total used for rounding may only include services provided that calendar day. The same process applies for an hourly unit. If 85 minutes are provided, the provider can bill for the first full 60 minute unit but the second 25 minutes would be less than half and would be rounded down. If 100 minutes is provided, the first full 60 minutes is payable as a full unit and the remaining 40 minutes, which is greater than half, would be billable as a second unit.’

## EVV Cohort 1

### COHORT 1 Skilled Nursing / Private Duty Nursing / Home Health

<table>
<thead>
<tr>
<th>Codes</th>
<th>Procedure Name</th>
<th>Unit of Measure</th>
<th>Service Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>97597</td>
<td>Debridement, open wound, wound assessment, use of a whirlpool, when performed and instruction(s) for ongoing care, total wound(s) surface area; first 20 sq cm or less</td>
<td>Per visit</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>99601</td>
<td>Infusion- Skilled nursing</td>
<td>Up to 2 hours</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>99602</td>
<td>Infusion- Skilled nursing-additional hour(s)</td>
<td>Each additional hour</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>G0299</td>
<td>Direct skilled nursing services of a registered nurse (run) in the home health or hospice setting</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9122</td>
<td>Home Health Aide/Certified Nurse Assistant</td>
<td>Per hour</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9123</td>
<td>Nursing care, in the home; by registered nurse,</td>
<td>Per hour</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9124</td>
<td>Nursing care, in the home; by licensed practical nurse</td>
<td>Per hour</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9127</td>
<td>Social work visit, in the home</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>T1000</td>
<td>Private duty / independent nursing service(s)</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>T1002</td>
<td>Private duty / independent nursing service(s) / RN</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>T1003</td>
<td>LPN/LVN SERVICES</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>T1030</td>
<td>Nursing care, in the home, by registered nurse</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>T1031</td>
<td>Nursing care, in the home, by licensed practical nurse</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>Codes</td>
<td>Procedure Name</td>
<td>Unit of Measure</td>
<td>Service Requirements</td>
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<tr>
<td>92507</td>
<td>Speech, Language and Hearing Therapy Individual</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97110</td>
<td>Physical Therapy, Therapeutic procedure, 1 or more areas; therapeutic exercises to develop strength and endurance, range of motion and flexibility</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97129</td>
<td>Cognitive Therapy, Individual</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97130</td>
<td>Therapeutic interventions that focus on cognitive function and compensatory strategies to manage the performance of an activity, direct (one-on-one) patient contact (List separately in addition to code for primary procedure)</td>
<td>Each additional 15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97535</td>
<td>Occupational Therapy, Individual - Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>G0151</td>
<td>Services performed by a qualified physical therapist in the home health or hospice setting</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>G0152</td>
<td>Services performed by a qualified physical therapist in the home health or hospice setting</td>
<td>15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9128</td>
<td>Speech therapy, in the home</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9129</td>
<td>Occupational therapy, in the home</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>S9131</td>
<td>Physical therapy; in the home</td>
<td>Per diem</td>
<td>PA - REQUIRED POS 12</td>
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## EVV Cohort 3

### COHORT 3 Applied Behavioral Analysis (ABA) Services

<table>
<thead>
<tr>
<th>Codes</th>
<th>Procedure Name</th>
<th>Unit of Measure</th>
<th>Service Requirements</th>
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</thead>
<tbody>
<tr>
<td>97151</td>
<td>Behavior assessment by physician, QHP</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97152</td>
<td>Supporting assessment by Tech</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97153</td>
<td>Adaptive treatment by tech</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97154</td>
<td>Group adaptive treatment by tech</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>97155</td>
<td>Adaptive treatment with modification by QHP</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
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<tr>
<td>97156</td>
<td>Family adaptive treatment by QHP with or without patient present</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
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<tr>
<td>97157</td>
<td>Multiple family group adaptive guidance by QHP</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
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<tr>
<td>97158</td>
<td>Group adaptive treatment by QHP</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>0362T</td>
<td>Behavior identification assessment requiring administration by QHP,</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
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<tr>
<td></td>
<td>assistance of two or more techs, to address destructive behavior, in a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>customized environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0373T</td>
<td>Adaptive treatment with modifications by QHP,</td>
<td>15 min units</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td></td>
<td>assistance of two or more techs, to address destructive behavior, in a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>customized environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>96156_EP</td>
<td>DIR Health behavior assessment or re-assessment</td>
<td>Per diem, updated per SME</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96158_EP</td>
<td>DIR Health behavior intervention</td>
<td>Initial 30 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96159_EP</td>
<td>DIR Health behavior intervention</td>
<td>Each additional 15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96164_EP</td>
<td>DIR Health behavior intervention</td>
<td>Initial 30 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96165_EP</td>
<td>DIR Health behavior intervention</td>
<td>Each additional 15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96167_EP</td>
<td>DIR Health behavior intervention, family</td>
<td>Initial 30 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96168_EP</td>
<td>DIR Health behavior intervention, family</td>
<td>Each additional 15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96170_EP</td>
<td>DIR Health behavior intervention</td>
<td>Initial 30 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
<tr>
<td>96171_EP</td>
<td>DIR Health behavior intervention</td>
<td>Each additional 15 mins</td>
<td>PA - REQUIRED POS 12</td>
</tr>
</tbody>
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