## **KanTime Home Health Data Dictionary (v-5.1)**



Project	DAAS (Home Health)
Version	V-5.1
Release Date	1/24/2024
Database	KANTIME_PROD_DB
Schema	HH_REPORT_DS

#### **Data Source List**

	Data Source	Secure View Name	Release Version	Update Version
1	Schedule Master	SCHEDULEMASTER_SVW	V-2.0	V-4.0
2	Client Master	CLIENTMASTER_SVW	V-2.0	V-5.0
3	LOBMASTER	LOBMASTER_SVW	V-2.0	NA
4	CAREGIVER MASTER	CAREGIVERMASTER_SVW	V-2.0	V-4.2
5	HOMEHEALTH AGENCY MASTER	HOMEHEALTHAGENCYMASTER_S VW	V-2.0	NA
6	HOMEHEALTHAGENCIESBR ANCHLIST	HOMEHEALTHAGENCIESBRANCH LIST_SVW	V-2.0	NA
7	CLAIMSMASTER	CLAIMSMASTER_SVW	V-2.0	V-5.0
8	SALESPERSON	SALESPERSON_SVW	V-2.0	NA
9	PAYMENTSOURCEMASTER	PAYMENTSOURCEMASTER_SVW	V-2.0	NA
10	SERVICECODESMASTER	SERVICECODESMASTER_SVW	V-2.0	V-5.1
11	TEAMMASTER	TEAMMASTER_SVW	V-2.0	NA
12	ADMISSIONSOURCEMASTER	ADMISSIONSOURCEMASTER_SVW	V-2.0	NA



13	CLAIMDETAILS	CLAIMDETAILS_SVW	V-2.0	V-5.1
14	CLIENTCENSUSBYDATE	CLIENTCENSUSBYDATE_SVW	V-2.0	NA
15	CLIENTDISCHARGEREASON S	CLIENTDISCHARGEREASONS_SV W	V-2.0	NA
16	AuthorizationMaster	AUTHORIZATIONMASTER_SVW	V-2.0	V-4.4
17	AuthorizationMonthlyUtilization	AUTHORIZATIONMONTHLYUTILIZ ATION_SVW	V-2.0	NA
18	OASISDischargedPatients	OASISDISCHARGEDPATIENTS_SV W	V-2.0	NA
19	OASISPatientClinicalOutComes	OASISPATIENTCLINICALOUTCOME S_SVW	V-2.0	NA
20	EpisodeMaster	EPISODEMASTER_SVW	V-2.0	V-4.0
21	HomeHealthAgencyBranchDSCo nfigurations	HOMEHEALTHAGENCYBRANCHDS CONFIGURATIONS_SVW	V-2.0	NA
22	OASISAssessments	OASISASSESSMENTS_SVW	V-2.0	V-4.1
23	OASISADLIADL	OASISADLIADL_SVW	V-2.0	NA
24	PayrollMaster	PAYROLLMASTER_SVW	V-2.0	NA
25	PayrollDetails	PAYROLLDETAILS_SVW	V-2.0	NA
26	ClientPaymentSources	CLIENTPAYMENTSOURCES_SVW	V-2.0	V-4.1
27	CaregiverTeams	CAREGIVERTEAMS_SVW	V-2.0	NA
28	PhysicianMaster	PHYSICIANMASTER_SVW	V-2.0	V-4.4.1
29	OrderMaster	ORDERMASTER_SVW	V-3.0	V-4.0
30	ClaimPayments	CLAIMPAYMENTS_SVW	V-2.0	V-4.4.1
31	PPSPricerMaster	PPSPRICERSUMMARY_VW	V-4.0	NA
32	ClientEmergencyContactsMaster	CLIENTEMERGENCYCONTACTS_V W	V-4.0	NA
33	ClaimAdjustmentMaster	CLAIMSADJUSTMENTS_VW	V-4.0	V-5.0
34	UserMaster	USERMASTER_VW	V-4.0	NA
35	ClaimDenials	CLAIMDENIALS_VW	V-4.1	NA
36	PaymentMaster	PAYMENTMASTER_VW	V-4.1	NA
37	EmployeeTimeSheets	EMPLOYEETIMESHEET_VW	V-4.1	NA
38	AuthorizationServices	AUTHORIZATIONSERVICE_VW	V-4.1	NA
39	ReferralSources	REFERRALSOURCE_VW	V-4.1	NA



40	HomeHealthAgenciesDSConfigu rations	AGENCYDSCONFIG_VW	V-4.1	NA
41	ClaimDeniedVisits	CLAIMDENIEDVISITS_VW	V-4.1	NA
42	HHALocationBIPolicyParameterGo als	BRANCHDSPOLICY_VW	V-4.1	NA
43	PaymentDepositReceiptdetails	PAYMENTDEPOSITRECEIPTS_VW	V-4.1	NA
44	DepositReceipts	DEPOSITRECEIPTS_VW	V-4.1	NA
45	AuthorizationWeeklyUtilization	AUTHORIZATIONWEEKLYUTILIZATIO N_VW	V-4.1	NA
46	ClaimDetailPayments	CLAIMDETAILPAYMENT_VW	V-4.1	V-5.1
47	ServiceRateHistoryMaster	SERVICERATEHISTORY_VW	V-4.1	NA

## **Schedule Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	S_SCEDULE_CREATO R_ID	NUMERIC	User ID for Employee who has created this schedule	Ex:6776	V-2.0
3	S_HHA_BRANCH_ID	NUMERIC	unique ID for the Branch/Location	Ex:43	V-2.0
4	SCHEDULE_ID	NUMERIC	Unique ID of Schedule for a Schedule Type	Ex: 1001	V-3.0
5	SCHEDULE_UNIQUE_ IDENTIFIER	STRING	combination of SCHEDULE_ID,IS_CHILD_VI SIT and IS_MISCVISIT field will uniquely Identify a Schedule but Schedule ID alone can have duplicate value	Ex: S-1001 (Clinical Visit) C-1001 (Clinical Child Visit) M-1001 (Misc. visit)	V-3.0
6	S_CLIENT_ID	NUMERIC	client ID for the Schedule. if the Schedule Doesn't belong to any Patient then it will be null	Ex:29514	V-2.0
7	S_CAREGIVER_ID	NUMERIC	Caregiver ID of the Schedule	Ex:24441	V-2.0
8	S_PAYER_SOURCE_ID	NUMERIC	Payer ID of the schedule	Ex:259	V-2.0
9	S_SERVICE_CODE_ID	NUMERIC	Service Code ID of the schedule	Ex:8452	V-2.0



10	S_PLANNED_START	DATETIME	Planned Start Date of the Schedule	Ex:2020-09-23 19:00:00.000	V-2.0
11	S_PLANNED_END	DATETIME	Planned End Date of the Schedule	Ex:2020-09-24 00:00:00.000	V-2.0
12	S_ACTUAL_START	DATETIME	Actual Start Date of the Schedule	Ex:2020-09-23 19:00:00.000	V-2.0
13	S_ACTUAL_END	DATETIME	Actual End Date of the Schedule	Ex:2020-09-24 00:00:00.000	V-2.0
14	S_PLANNED_HOURS	NUMERIC	Planned Hours of the Schedule	Ex:5.00	V-2.0
15	S_ACTUAL_HOURS	NUMERIC	Actual Hours of the Schedule	Ex:5.00	V-2.0
16	S_HOURS	NUMERIC	this value will be S_PLANNED_HOURS when S_SCHEDULE_STATUS will be either 'Planned' or 'InProgress' else it will be S_ACTUAL_HOURS	Ex:5.00	V-2.0
17	S_SCHEDULE_STATU S	STRING	current Status of the Schedule	Ex: Planned, Approved, MissedVisit	V-2.0
18	S_ECHART_STATUS	STRING	current Status of E-chart	Ex: Approved, Submitted, Planned	V-2.0
19	S_MILES	NUMERIC	Mileage value of the Schedule	Ex:0,5.5	V-2.0
20	S_IS_AUTH_REQUIRE D	BOOLEAN	Whether Authorizations required for Schedule or Not False: Not Required True: Required	Ex: TRUE, FALSE	V-2.0
21	S_AUTHORIZATIONS	STRING	Authorization Type	NA, Real Auth, Office Auth	V-2.0
22	S_PAYBLE_HOURS	NUMERIC	Payable Hours for the Schedule	Ex:05.00	V-2.0
23	REASON_FOR_MISSE D_VISIT	STRING	Missed Visit Reason	EX: Patient/Family declined	V-2.0
24	S_WEEKSTART	Date	Week Start Date of the Schedule	EX:2020-06-21 00:00:00.000	V-2.0
25	EPISODE_ID	NUMERIC	Episode ID for which this Schedule Belongs to. This value will be unique for a client Episode Period	EX:46744	V-2.0
26	S_IS_PRN_VISIT	BOOLEAN	this flag identifies whether the schedule is a PRN visit or not False - Planned Visit True - PRN Visit	Ex: TRUE, FALSE	V-2.0



27	C DEVENITE CODE	STRING	Revenue Code of the Schedule	EX:0551	V-2.0
	S_REVENUE_CODE				
28	S_GCODE	STRING	G-Code of the schedule	EX:S9123	V-2.0
29	MODIFIER_1	STRING	Modifier 1	EX:95,HQ	V-2.0
30	MODIFIER_2	STRING	Modifier 2	EX:U5,TD	V-2.0
31	MODIFIER_3	STRING	Modifier 3	EX:TE,95	V-2.0
32	MODIFIER_4	STRING	Modifier 4		V-2.0
33	S_UNITS	NUMERIC	Billable Units for the Schedule	EX:10,1.5	V-2.0
34	S_HAS_CHILD	BOOLEAN	this Boolean flag determines whether this schedule has any child schedule False: No True: Yes	Ex: TRUE, FALSE	V-2.0
35	IS_CHILD_VISIT	BOOLEAN	this Boolean flag determines whether this schedule is child schedule or not False: No True: Yes	Ex: TRUE, FALSE	V-2.0
36	PARENT_SCHEDULE_ ID	NUMERIC	if this is a child schedule then this field will have its parent Schedule ID	EX:7941824	V-2.0
37	IS_SCHEDULE_BILLA BLE	BOOLEAN	this flag will determine if this schedule is billable or not	Ex: TRUE, FALSE	V-2.0
38	IS_SCHEDULE_PAYAB LE	BOOLEAN	this flag will determine where this field is payable or not	Ex: TRUE, FALSE	V-2.0
39	IS_SCHEDULE_BILLE D	BOOLEAN	this flag will determine if the schedule is billed	Ex: TRUE, FALSE	V-2.0
40	IS_SCHEDULE_PAID	BOOLEAN	this flag will determine if the schedule is Paid or not	Ex: TRUE, FALSE	V-2.0
41	S_BILL_RATE	NUMERIC	Bill Rate of the Schedule	EX:15.6000	V-2.0
42	S_PAY_RATE	NUMERIC	Pay Rate of the Schedule	EX:10.3300	V-2.0
43	S_BILL_MODE	STRING	Bill Mode of the Schedule	Example : Fixed, Unit Based , Hourly	V-2.0
44	S_PAY_MODE	STRING	Pay Mode of the Schedule		V-2.0
45	S_BILLED_AMOUNT	NUMERIC	Billed Amount of the Schedule	EX:56.40	V-2.0
46	S_PAYROLLED_AMO UNT	NUMERIC	Payrolled Amount of the Schedule	EX:56.40	V-2.0
47	S_REGULARAMOUNT	NUMERIC	Total Payroll amount when the Payroll Rate Type is 'Shift' or Not Applicable	EX:199.50	V-2.0



48	S_OT_AMOUNT	NUMERIC	total OT Payrolled Amount	EX:38.70	V-2.0
49	S_BONUS_AMOUNT	NUMERIC	Bonus Amount	EX:0.00	V-2.0
50	S_BASE_RATE	NUMERIC	Base Rate of the Schedule	EX:37.3700	V-2.0
51	REASON_FOR_CANEL LATION	STRING	Schedule Cancellation Reason	EX: Schedule deleted due to Transfer/Discharge	V-2.0
52	S_CONTRACTUAL_R ATE	NUMERIC	Contractual Rate	EX:0.0000	V-2.0
53	S_CONTRACTUAL_M ODE	STRING	Contractual Mode of the Schedule	Example : Fixed, Unit Based , Hourly	V-2.0
54	S_CONTRACTUAL_A MOUNT	NUMERIC	Contractual Amount of the Schedule	EX:0.00	V-2.0
55	NON_BILLABLE_REA SON	STRING	Non Billable Reason	EX: Budget Exhausted	V-2.0
56	S_REGULAR_HOURS	NUMERIC	Total Payroll Hours when the Payroll Rate Type is 'Shift' or Not Applicable	EX:0.00	V-2.0
57	S_OT_HOURS	NUMERIC	Total Overtime Payroll Hours	EX:0.00	V-2.0
58	IS_MISCVISIT	BOOLEAN	this Boolean flag determines whether this schedule is Miscellaneous schedule or not False: No True: Yes	Ex: TRUE, FALSE	V-2.0
59	S_COST	NUMERIC	Actual/ Estimated Payroll Amount based on Payroll and Schedule Status	EX: 0,17.5	V-2.0
60	S_REVENUE	NUMERIC	Actual/Estimated Revenue of the Schedule	EX: 0,171.05	V-2.0
61	S_CONTRACTUAL_RE VENUE	NUMERIC	Contractual Revenue of the Schedule	EX: 0,171.05	V-2.0
62	SCHEDULE_DATE	DATETIME	Schedule Date	EX: 2022-08-02 00:00:00.000	V-2.0
63	S_PROFIT	NUMERIC	Actual/Estimated Profit from the Schedule	EX: 0,17.5	V-2.0
64	S_PROFIT_CONTRAC TUAL	NUMERIC	Contractual Profit from the Schedule	EX: 0,17.5	V-2.0
65	S_MARGIN	NUMERIC	Profit Margin ('%') of the schedule	EX: 0,17.5	V-2.0
66	S_MARGIN_CONTRA CTUAL	NUMERIC	Contractual Profit Margin ('%') of the schedule	EX: 0,17.5	V-2.0



67	S_BILLED_HOURS	NUMERIC	Billed Hours of the Schedule	EX:0,17.5	V-2.0
68	S_SCHEDULE_PRODU CTIVITY_POINTS	NUMERIC	Schedule Productivity Points	EX:0,17.5	V-2.0
69	S_PAYROLL_WEEK_S TARTDATE	DATETIME	Week Start Date of the Payroll Date	EX:2022-07-31 00:00:00.000	V-2.0
70	S_WEEK_NO	NUMERIC	Week No of the Schedule	EX:243	V-2.0
71	S_CLINICIAN_PRODU CTIVITY_PER_WEEK	NUMERIC	Average Productivity Point Per Schedule based on his total weekly Schedule and Weekly Productivity Point of the Caregiver	EX:0.555555556	V-2.0
72	MISC_VISIT_ID	NUMERIC	if this Schedule is a Miscellaneous Schedule then this value will be Non Zero/Null	EX:138500	V-2.0
73	SUBMITTEDON_DATE	DATETIME	Submission Date of the Schedule	Ex:2021-04-21 02:00:20.607	V-2.0
74	APPROVED_DATE	DATETIME	Date on which Schedule was approved	EX:2017-03-09 08:57:30.717	V-2.0
75	SCHEDULE_INVOICE EDDATE	DATETIME	Schedule Invoiced Date	EX:2017-03-17 00:00:00.000	V-2.0
76	S_PAYMENT_RECIEV ED_ON	DATETIME	Date on which Schedule Payment was Received	EX:2017-03-17 00:00:00.000	V-2.0
77	PRIMARY_DIAGNOSI S_CODE	STRING	Primary Diagnosis Code (ICD) of the Schedule	EX:Q05.4	V-2.0
78	SURGCICAL_DIAGNO SIS_CODE	STRING	Surgical Diagnosis Code of the Schedule	EX:0D16074	V-2.0
79	OTHER_DIAGNOSIS_ CODE	STRING	Other Diagnosis Code (ICD) of the Schedule. this can be empty, single or comma Separated Value	EX:J45.42, N39.0	V-2.0
80	S_HOLIDAY_HOURS	NUMERIC	Total Holiday Payroll Hours	EX:0.00	V-2.0
81	S_HOLIDAY_PAYROL L_AMOUNT	NUMERIC	Total Holiday Payroll Amount	EX:0.00	V-2.0
82	S_HOLIDAY_PAYROL L_RATE	NUMERIC	Holiday Payroll Rate	EX:0.00	V-2.0
83	S_OT_PAYROLL_RAT E	NUMERIC	Overtime Payroll Rate	EX:0.00	V-2.0
84	SCHEDULE_ADDED_ ON	DATETIME	Date on Which Schedule was Added	EX:2016-12-09 12:31:31.900	V-2.0



85	SECONDARY_PAYERS OURCE	NUMERIC	Secondary Payer of the Schedule. this can be comma separated values if there are multiple payers	EX:1795,1836	V-2.0
86	TERTIARY_PAYERSO URCE	NUMERIC	Tertiary Payer of the Schedule. this can be comma separated values if there are multiple payers		V-2.0
87	S_MISSEDVISIT_REA SONTYPE	STRING	Missed Visits Reason Type for Missed Visit Schedules	EX: Client Related, Clinician Related	V-2.0
88	S_MISSEDVISIT_NOT E	STRING	Missed Visit Note		V-2.0
89	S_MISC_VISITREASO N	STRING	miscellaneous Visit Reason	Y C Y	V-2.0
90	S_IS_EVV_SCHEDULE	BOOLEAN	this Boolean flag determines whether this schedule is EVV schedule or not False: No True: Yes		V-3.0
91	S_ECC_AGGREGATOR STATUS	STRING	EVV Aggregator Status		V-3.0
92	DAAS_LAST_MODIFI ED_TIMESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0
93	S_REFERENCETYPE	STRING	Type of Visit Chart	EX : E, P	V-4.0
94	S_CHARTTYPE	STRING	Type of Visit Chart (Long Text)	Ex: Echart, Pchart	V-4.0
95	S_EPISODE_NUMBER	NUMERIC	Episode Number		V-4.0
96	S_EPISODE_STARTDA TE	DATETIME	Episode Start Date		V-4.0
97	S_EPISODE_ENDDATE	DATETIME	Episode End Date		V-4.0
98	S_SERVICENAME	STRING	Service Name		V-4.0
99	S_DISCIPLINE	STRING	Service Discpline		V-4.0
100	S_INSURANCEID	STRING	Insurance No		V-4.0
101	S_IS_CLINICIANCONF IRMED	BOOLEAN	Flag to Determin whether Clinician Confirmed or Not	True, False	V-4.0
102	S_AUTH_TYPE	NUMERIC	Authorization Type	1 → Not Required, 2 → Not Available 3 → Office Auth. 4 → Authorized 5 → Auto Auth. 6 → Partial Auth.	V-4.0



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103	S_AUTHORIZATION_ NO	STRING	Authorization Number		V-4.0
104	S_NOTES	STRING	Schedule Notes		V-4.0
105	S_SHIFT_NAME	STRING	Shift Name		V-4.0
106	S_AUTH_REQUESTED	STRING	Authorization Requested Description	Yes, No, NA	V-4.0
107	S_CHECKIN_SOURCE _DESCRIPTION	STRING	Check in Source Description	Manual,	V-4.0
108	S_CHECKOUT_SOUR CE_DESCRIPTION	STRING	checkout Source Description	Manual,	V-4.0
109	S_EVV_UNIQUESCHE DULE_ID	STRING	EVV Unique Schedule ID		V-4.0
110	S_IS_APPROVEDFORP AYROLL	BOOLEAN	Schedule Approved for Payroll	True, False	V-4.0
111	S_APPROVEDFOR_BO NUSPAYRATE	NUMERIC	Schedule Approved For Bonus Payrate or not	$0 \rightarrow \text{No}$ $1 \rightarrow \text{Yes}$ $2 \rightarrow \text{NA}$	V-4.0
112	S_POS_NAME	STRING	Place of Service Name		V-4.0
113	S_COSIGNSTAFF_NA ME	STRING	Cosign Staff Name		V-4.0
114	S_IS_REQUIRECOSIG N	BOOLEAN	Whether Schedule Require cosign	True, False	V-4.0
115	S_DOCTIME_INMINU TES	NUMERIC	Documentation Time (Minutes)		V-4.0
116	S_TRAVELTIME_HRS	NUMERIC	Travel Time in Hours		V-4.0
117	S_IS_AIDEDAILYTAS K_APPROVED	BOOLEAN	whether Aide Daily Task Approved or Not	True, False	V-4.0
118	S_CLINICIAN_TELEP HONYID	STRING	Clinician Telephony ID		V-4.0
119	S_PAYROLLID	STRING	Payroll No		V-4.0
120	S_ELIGIBILITY_STAT US	STRING	Eligibility Status	Not Eligible, Not Verified	V-4.0
121	S_HOCPERCENTAGE	STRING	HOC Percentage		V-4.0
122	S_WEEK_ENDDATE	DATETIME	Week End Date		V-4.0
123	S_INVOICE_NO	STRING	Invoice Number		V-4.0
124	S_ORDERNO	STRING	Order No		V-4.0
125	S_ORDER_DATE	DATETIME	Order Date		V-4.0
126	S_ORDER_STATUS	DATETIME	Order Status	Open, Submitted,	V-4.0



127	S_ORDER_IS_SENT	BOOLEAN	whether order Sent or Not	True, False	V-4.0
128	S_ORDER_SENTDATE	DATETIME	Order Sent Date		V-4.0
129	S_ORDER_ISFAXED	BOOLEAN	Whether Order Faxed or Not	True, False	V-4.0
130	S_ORDER_FAXEDDAT E	DATETIME	Order Faxed Date		V-4.0
131	S_ORDER_PHYSICIA N_FIRSTNAME	STRING	Order Physician First Name		V-4.0
132	S_ORDER_PHYSICIA N_LASTNAME	STRING	Order Physician Last Name	_	V-4.0
133	S_ORDER_PHYSICIA N_SIGNDATE	DATETIME	Order Physician Signed Date		V-4.0
134	S_ORDER_RECEIVED DATE	DATETIME	Order Received Date		V-4.0
135	S_INVOICE_STATUS	STRING	Invoice Status		V-4.0
136	S_KICESYNC_DATE	DATETIME	KICE Sync Date		V-4.0
137	S_CHART_SUBMISSIO NSOURCE	STRING	Chart Submission Source		V-4.0
138	S_CLINICIAN_CONFI RMEDDATE	DATETIME	Clinician Confirmed Date		V-4.0
139	S_SCHEDULE_CREAT OR_NAME	STRING	Schedule Creator Employee Name		V-4.0
140	S_TIMESHEET_APPR OVEDDATE	DATETIME	Timesheet approved Date		V-4.0
141	S_TIMESHEET_APPR OVER_NAME	STRING	Timesheet Approver Name		V-4.0
142	S_NONBILLABLE_HO URS	NUMERIC	Non Billable Hours		V-4.0
143	S_NON_BILLABLE_A MOUNT	NUMERIC	Non Billable Amount		V-4.0
144	S_ACTUALHOURS_MI NUTES	NUMERIC	Actual Hours (Minutes)		V-4.0
145	S_PLANNEDHOURS_ MINUTES	NUMERIC	Planned Hours (Minutes)		V-4.0
146	S_AUTHORIZED_HOU RS	NUMERIC	Authorized Hours		V-4.0
147	S_PAYROLL_BATCHI D	STRING	Payroll Batch ID		V-4.0
148	S_ADJUSTMENT_AM OUNT	NUMERIC	Adjustment Amount		V-4.0



149	S_PROFITPERCENTA	STRING	Expected Profit Percentage		V-4.0
117	GE_EXPECTED	BIIdivo	Expected Front Ferentiage		V 1.0
150	S_PROFITPERCENTA GE_BILL	STRING	Billed Profit Percentage		V-4.0
151	S_CHECKIN_LOCVER IFICATIONCODE	NUMERIC	Check In Location Verification Code		V-4.0
152	S_CHECKOUT_LOCV ERIFICATIONCODE	NUMERIC	Checkout Location Verification Code		V-4.0
153	S_CHECKIN_TREATM ENTLOCATION	STRING	Checkin Treatment Location	C	V-4.0
154	S_CHECKOUT_TREAT MENTLOCATION	STRING	Checkout Treatment Location		V-4.0
155	S_CLIENT_IS_SIGNED	STRING	whether Client Signed or not	True, False	V-4.0
156	S_CLIENT_SIGNEDDA TE	DATETIME	Client Signed Date		V-4.0
157	S_CHECKIN_DISATAN CE	NUMERIC	Check-in Distance		V-4.0
158	S_CHECKOUT_DISTA NCE	NUMERIC	Checkout Distance		V-4.0
159	S_CHECKIN_GEOCOD E	STRING	Check-in Geo Location		V-4.0
160	S_CHECKOUT_GEOC ODE	STRING	Checkout Geo Location		V-4.0
161	S_IS_OVERRIDEPAYM ODE	BOOLEAN	Whether to Override Pay Mode	True, False	V-4.0
162	S_ISOVERRIDEPAYRA TE	BOOLEAN	Whether to Override Pay Rate	True, False	V-4.0
163	S_PAYRATE_PREVIOU S	NUMERIC	Pay Rate (Prior Overriding)		V-4.0
164	S_PAYMODE_PREVIO US	STRING	Pay Mode (Prior Overriding)		V-4.0
165	S_MILEAGERATE	NUMERIC	Mileage Rate		V-4.0
166	S_MILEAGERATE_PR EVIOUS	NUMERIC	Mileage Rate (Before Overriding)		V-4.0
167	S_LOSTREVENUE	NUMERIC	Lost Revenue		V-4.0
168	S_IS_SPLITFORPAYRO LL	BOOLEAN	Whether Split For Payroll	True, False	V-4.0
169	S_SPLITTYPE	STRING	Split Type	Invoice, Payroll	V-4.0



170	S_EVV_CONTIGENCY PLAN	STRING	EVV Contingency Plan		V-4.0
171	S_EVV_VENDORNAM E	STRING	EVV Vendor Name		V-4.0
172	S_EVV_VISITCONTIG ENCYCHOICE	STRING	EVV Visit Contingency Choice		V-4.0
173	S_VISITTYPE	STRING	Visit Type	Billable Misc Visit, Normal, Clinician Misc Visit	V-4.0
174	S_CHECKIN_FOBCOD E	STRING	Checkin Fob Code		V-4.0
175	S_CHECKOUT_FOBC ODE	STRING	Checkout Fob Code		V-4.0
176	S_PAYROLL_DATE	DATETIME	Payroll Date	1	V-4.0
177	S_BONUSAMOUNT_D EFAULT	DATETIME	Default Bonus Amount	) <sup>y</sup>	V-4.0
178	S_DIRECTLABORPER CENT	NUMERIC	Direct Labor Percentage		V-4.0
179	S_PAYROLL_BRANCH ID	NUMERIC	Payroll Branch ID		V-4.0
180	S_OT_PAYROLLAMO UNT	NUMERIC	OT Payroll amount		V-4.0

## **Client Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0
2	CLIENT_ID	NUMERIC	Unique ID of a Client		V-2.0
3	CLIENT_PATIENT_ID	STRING	Patient ID	C-1003	V-2.0
4	CLIENT_PRIMARY_PAY ER_TYPE	STRING	Identifies Primary Payer Type for the Client	E : Episodic M : Managed Care	V-2.0
5	CLIENT_PRIMARY_PR OGRAM	STRING	Payer Program Type	Medicare, Medicaid, Private Pay	V-2.0
6	CLIENT_PRIMARY_PAY ER_GROUP	STRING	Payer Group Name	Athena, BCBS	V-2.0



7	CLIENT_PRIMARY_PAY ER_ID	NUMERIC	Unique ID for a Payer	1001,1002	V-2.0
8	CLIENT_SALUTATION	STRING	salutation	Mr., Mrs.	V-2.0
9	CLIENT_FIRST_NAME	STRING	First Name	John	V-2.0
10	CLIENT_MIDDLE_NAM E	STRING	Middle Name	Doe	V-2.0
11	CLIENT_GENDER	STRING	Gender	Male, Female	V-2.0
12	CLIENT_CITY	STRING	City	Dallas, Houston	V-2.0
13	CLIENT_STATE	STRING	State Code	NY,CA	V-2.0
14	CLIENT_CASEMANAG ER_ID	NUMERIC	User ID of Case Manager	10835,7087	V-2.0
15	CLIENT_STATUS	STRING	Current Status of Client	Non-Admit, Active	V-2.0
16	CLIENT_INTAKE_ID	NUMERIC	Unique Intake ID of Client	73974	V-2.0
17	CLIENT_ATTENDING_P HYSICIAN_ID	NUMERIC	Attending Physician ID of Client. The Corresponding Physician ID will refer to CG_EMPLOYEEID	37970	V-2.0
18	CLIENT_PRIMARY_CLI NICIAN_ID	NUMERIC	Attending Clinician ID of Client. The Corresponding ID will refer to CG_EMPLOYEEID	10835	V-2.0
19	CLIENT_PRIMARY_OT	NUMERIC	Primary OT Clinician of Client. The Corresponding ID will refer to CG_EMPLOYEEID	4793,0	V-2.0
20	CLIENT_PRIMARY_ST	NUMERIC	Primary ST Clinician of Client. The Corresponding ID will refer to CG_EMPLOYEEID	430,0	V-2.0
21	CLIENT_PRIMARY_PT	NUMERIC	Primary PT Clinician of Client. The Corresponding ID will refer to CG_EMPLOYEEID	4304,0	V-2.0
22	CLIENT_IS_LATESTAD MIT	BOOLEAN	This Boolean flag will identify if this record belongs to latest Admit of the Client	Ex: FALSE, TRUE	V-2.0
23	CLIENT_ADMIT_NO	NUMERIC	Client Admit Number	20104	V-2.0
24	CLIENT_GROUP_NO	NUMERIC	Client Group Number	58903	V-2.0
25	CLIENT_SOC_DATE	DATETIME	Client Start of Care Date	2022-07-08 00:00:00.000	V-2.0
26	CLIENT_PRIMARY_MS W_CLINICIAN_ID	NUMERIC	Primary MSW Clinician of Client. The Corresponding ID will refer to CG_CLINICIAN_ID	0	V-2.0



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27	CLIENT_PRIMARY_AID E_CLINICIAN_ID	NUMERIC	Primary Aide Clinician of Client. The Corresponding ID will refer to CG_CLINICIAN_ID	0	V-2.0
28	CLIENT_DISCHARGE_ DATE	NUMERIC	Client Discharge Date	2020-04-08 00:00:00.000	V-2.0
29	CLIENT_TRANSFER_D ATE	DATETIME	Client Transfer Date	2020-02-22 00:00:00.000	V-2.0
30	CLIENT_PRIMARY_LV N_CLINICIAN_ID	NUMERIC	Primary Aide Clinician of Client. The Corresponding ID will refer to CG_CLINICIAN_ID	4633	V-2.0
31	CLIENT_REFERRAL_S OURCETYPE	NUMERIC	Referral Source ID of the Client	0,1,2	V-2.0
32	CLIENT_PHYSICIAN_I D	NUMERIC	Physician ID of the Client	0	V-2.0
33	CLIENT_PRIMARYCAR E_PHYSICIAN_ID	NUMERIC	Primary Care Physician ID of the Client	37970	V-2.0
34	CLIENT_ADMIT_SEQU ENCE	NUMERIC	Client Admit Sequence Number	0	V-2.0
35	CLIENT_REFERRAL_P HYSICIAN_ID	NUMERIC	Referral Physician ID of Client. The Corresponding ID will refer to CG_EMPLOYEEID	37970	V-2.0
36	CLIENT_OASIS_CLINIC IAN_ID	NUMERIC	OASIS Clinician of Client. The Corresponding ID will refer to CG_CLINICIAN_ID	10835	V-2.0
37	CLIENT_IS_CHILDCAR E	BOOLEAN	This Boolean Field will identify whether the Client belongs to Child Care or Not	True False	V-2.0
38	CLIENT_REFERRAL_D ATE	DATETIME	Client Referral Date	2022-07-07 00:00:00.000	V-2.0
39	CLIENT_IS_LONGTER MCARE	BOOLEAN	This Boolean Field will identify whether the Client belongs to Child Care or Not	True False	V-2.0
40	CLIENT_QA	NUMERIC	QA ID of Client. The Corresponding ID will refer to CG_EMPLOYEEID	5961	V-2.0
41	CLIENT_COUNTIES	STRING	County name of the Client	Maricopa	V-2.0
42	CLIENT_INITIAL_SOC_ DATE	DATETIME	Client Initial SOC Date		V-2.0
43	CLIENT_FINAL_DISCH ARGE_DATE	DATETIME	Client Final Discharge Date	2019-01-21 00:00:00.000	V-2.0
44	CLIENT_DISCHARGE_ REASON	STRING	Client Discharge Reason	Transferred to Another HHA	V-2.0



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45	CLIENT_FIRST_EPISOD EDATE	DATETIME	First Episode Start Date	2018-10-26 00:00:00.000	V-2.0
46	CLIENT_ADMIT_GROU P_NO	NUMERIC	Client Admit Group Number	16284	V-2.0
47	CLIENT_IS_NON_ADMI T	BOOLEAN	This Boolean Field will identify whether the Client is Non Admit	True False	V-2.0
48	CLIENT_IS_INTAKE	BOOLEAN	This Boolean Field will identify whether the Client is under Intake	True False	V-2.0
49	CLIENT_INTAKE_DATE	DATETIME	Client Intake Date	2022-07-07 00:00:00.000	V-2.0
50	CLIENT_ACCEPTED_D ATE	DATETIME	Client Accepted Date	2022-07-07 16:01:08.017	V-2.0
51	CLIENT_ADMIT_DATE	DATETIME	Client Admit Date	2022-06-29 00:00:00.000	V-2.0
52	CLIENT_INITIAL_SOC_ FIRSTADMIT_DATE	DATETIME	Client Initial SOC First Admit Date	2022-07-08 00:00:00.000	V-2.0
53	CLIENT_INITIAL_SOC_ CURR_ADMIT_DATE	DATETIME	Client Initial SOC Current Admit Date	2022-07-08 00:00:00.000	V-2.0
54	CLIENT_LICENSE_CAT EGORY	STRING	Client License Category		V-2.0
55	CLIENT_LENGTH_OF_ STAY	DATETIME	Client Length of Stay	0,19	V-2.0
56	CLIENT_SALESPERSO N_ID	NUMERIC	Client Sales Person ID The Corresponding ID will refer to SALESPERSONID from "Sales Persons" table View	0,441	V-2.0
57	CLIENTA_ADMISSIONS OURCE_ID	NUMERIC	Client Admission Source ID	283	V-2.0
58	CLIENT_SCHEDULER_I D	NUMERIC	Client Scheduler ID The Corresponding ID will refer to CG_EMPLOYEEID	20139	V-2.0
59	CLIENT_CURRENT_ST ATUS	STRING	Client Current Status	Active, Inactive, Discharged	V-2.0
60	CLIENT_EVV_CONTAC TREFERENCE	STRING	EVV Contact Reference	10005	V-2.0
61	CLIENT_REFERRAL_FA CILITY_ID	NUMERIC	Client Referral Source ID	1177,0	V-2.0
62	CLIENT_INTAKE_ADD EDBY	NUMERIC	Employee Who Added this Client The Corresponding ID will refer to CG_EMPLOYEEID	17280	V-2.0
63	CLIENT_PRIMARY_DIA GNOSIS	STRING	Client Primary Diagnosis Code	F80.9,I10	V-2.0



64	LOB_ID	NUMERIC	Unique Line of Business ID	1006,4	V-2.0
65	LOBNAME	NUMERIC	Line of Business Name	Adult, Pediatric Therapy	V-2.0
66	CLIENT_PREFERENCE LIST	STRING	Preferences item delimited by comma		V-3.0
67	CLIENT_DRIVING_DIR ECTION	STRING	Driving Direction		V-3.0
68	CLIENT_CARECOORDI NATOR2	NUMERIC	Care Coordinator 2 ID		V-3.0
69	CLIENT_LANGUAGES	STRING	Language delimited by comma		V-3.0
70	CLIENT_SOC_CLINICI AN_ID	NUMERIC	SOC Clinician ID		V-3.0
71	CLIENT_INTAKE_STAT US	STRING	Intake Status		V-3.0
72	CLIENT_CLASSIFICATI ON	STRING	Classification		V-3.0
73	CLIENT_ORDERRECEI VED	BOOLEAN	This Boolean Field will identify whether the Client order Received	True False	V-3.0
74	CLIENT_TREATMENTA DDRESS_NAME	STRING	Client Treatment Address Name		V-3.0
75	CLIENT_TREATMENTA DDRESS_LINE1	STRING	Treatment Address Line 1		V-3.0
76	CLIENT_TREATMENTA DDRESS_LINE2	STRING	Treatment Address Line 2		V-3.0
77	CLIENT_TREATMENTA DDRESS_CITY	STRING	Treatment Address City		V-3.0
78	CLIENT_TREATMENTA DDRESS_STATE	STRING	Treatment Address State		V-3.0
79	CLIENT_TREATMENTA DDRESS_EMAIL	STRING	Treatment Address email		V-3.0
80	CLIENT_TREATMENTA DDRESS_ZIP	STRING	Treatment Address Zip		V-3.0
81	CLIENT_TREATMENTA DDRESS_PHONE	STRING	Treatment Address Phone		V-3.0
82	CLIENT_TREATMENTA DDRESS_CELLPHONE	STRING	Treatment Address Cell		V-3.0
83	CLIENT_CARECOORDI NATOR1	NUMERIC	Care Coordinator 1 Internal ID		V-3.0



84	CLIENT_CARECOORDI NATOR3	NUMERIC	Care Coordinator 3 Internal ID		V-3.0
85	CLIENT_ATTENDINGP HY_NAME	STRING	Attending Physician Full Name		V-3.0
86	CLIENT_PRIMARYPHY _NAME	STRING	Primary Physician Full Name		V-3.0
87	CLIENT_REFPHY_NAM E	STRING	Referring Physician Full Name		V-3.0
88	CLIENT_SALESPERSO N_NAME	STRING	Sales Person Full Name		V-3.0
89	CLIENT_SCHEDULER_ NAME	STRING	Schedule Full Name		V-3.0
90	CLIENT_CARECOORDI NATOR1_NAME	STRING	Care coordinator 1 Full Name		V-3.0
91	CLIENT_CARECOORDI NATOR2_NAME	STRING	Care Coordinator 2 Full Name	) <del>Y</del>	V-3.0
92	CLIENT_CARECOORDI NATOR3_NAME	STRING	Care Coordinator 3 Full Name		V-3.0
93	CLIENT_CASEMANAG ER_NAME	STRING	Case Manager Full Name		V-3.0
94	CLIENT_SOC_CLINICI AN_NAME	STRING	SOC Clinician Full Name		V-3.0
95	DAAS_LAST_MODIFIE D_TIMESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0
96	CLIENT_TEAMNAME	STRING	Team Name		V-4.0
97	CLIENT_PRIMARYLVNI D	NUMERIC	Primary LVN EmployeeID		V-4.0
98	CLIENT_ATTENDINGP HY_OFFICEID	NUMERIC	Attending Physician Office ID		V-4.0
99	CLIENT_REFERPHY_O FFICEID	NUMERIC	Referring Physician Office ID		V-4.0
100	CLIENT_PRIMARYCAR EPHY_OFFICEID	NUMERIC	Primary Physician Office ID		V-4.0
101	CLIENT_CODEID	NUMERIC	Client Code ID		V-4.0
102	CLIENT_CODERGROUP ID	NUMERIC	Client Code Group ID		V-4.0
103	CLIENT_MBI	STRING	MBI		V-4.0
104	CLIENT_NOTES	STRING	Client Notes		V-4.0



105	CLIENT_EPISODE_DUR ATION	STRING	Episode Duration		V-4.0
106	CLIENT_NICKNAME	STRING	Nick Name		V-4.0
107	CLIENT_BILLINGACUI TY	STRING	Billing Acuity	Low, High,	V-4.0
108	CLIENT_TRANSPORTL EVELASSISTANCE	STRING	Transport Assistance Level	Non-ambulatory [TAL-1]	V-4.0
109	CLIENT_HEIGHT	NUMERIC	Height		V-4.0
110	CLIENT_WEIGHT	NUMERIC	Weight		V-4.0
111	CLIENT_RELIGION	STRING	Religion		V-4.0
112	CLIENT_PHYORDERD ATE	DATETIME	Physician Order Date		V-4.0
113	CLIENT_TELEPHONYI D	STRING	TelephonyID		V-4.0
114	CLIENT_LIVINGSITUA TION	STRING	Living Situation	Live With Family	V-4.0
115	CLIENT_ACUITYLEVE L	STRING	Acuity Level	1 - RED,	V-4.0
116	CLIENT_MARITALSTAT US	STRING	Marital Status		V-4.0
117	CLIENT_INTAKENOTE S	STRING	Intake Notes		V-4.0
118	CLIENT_PHARMACYN AME	STRING	Pharmacy Name		V-4.0
119	CLIENT_HOSPITAL	STRING	Hospital		V-4.0
120	CLIENT_ADMISSIONS OURCE	STRING	Admission source		V-4.0
121	CLIENT_PLACEOFSER VICE	STRING	Place of Service		V-4.0
122	CLIENT_REFERRALSO URCE	STRING	Referral Source		V-4.0
123	CLIENT_PHYCONTACT	STRING	Physician Contact		V-4.0
124	CLIENT_ELIGIBILITY_ STATUS	STRING	Eligibility status	Eligible Not Verified Not Verified	V-4.0
125	CLIENT_PRIMARYCLI NICIAN_TELNUMBER	STRING	Primary Clinician Telephone#		V-4.0
126	CLIENT_CLINICIAN_N AME	STRING	Primary Clinician Name		V-4.0
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105	CLIENT_ATTENPHY_O	GED D LG	L. P. D. C. COT N	11.40
127	FFICENAME	STRING	Attending Physician Office Name	V-4.0
128	CLIENT_REFERPHY_O FFICENAME	STRING	Referring Physician Office Name	V-4.0
129	CLIENT_PCPHY_OFFIC ENAME	STRING	Primary Care Physician Office Name	V-4.0
130	CLIENT_LASTCOMPAP PROVED_VISITDATE	DATETIME	Last Completed/Approved Visit Date	V-4.0
131	CLIENT_LASTAPPROV ED_VISITDATE	DATETIME	Last Approved Visit Date	V-4.0
132	CLIENT_LICENSECATE GORY	STRING	License Category	V-4.0
133	CLIENT_PAYERCODE	STRING	Payer Code	V-4.0
134	CLIENT_CODERNAME	STRING	Code Name	V-4.0
135	CLIENT_CODERGROUP NAME	STRING	Code Group Name	V-4.0
136	CLIENT_INTAKE_DIAG NOSISCODE	STRING	Intake Diagnosis Code	V-4.0
137	CLIENT_INTAKE_ACCE PTEDDATE	STRING	Intake Accepted Date	V-4.0
138	CLIENT_PREFERENCE_ LIST	STRING	Preference List	V-4.0
139	CLIENT_PREFERRED_ CLINICIANS	STRING	Preferred Clinicians	V-4.0
140	CLIENT_NONPREFERR ED_CLINICIANS	STRING	Non Preferred Clinicians	V-4.0
141	CLIENT_ATTPHYOFFIC E_ADDRESS_LINE1	STRING	Attending Physician Office Address Line 1	V-4.0
142	CLIENT_ATTPHYOFFIC E_ADDRESS_LINE2	STRING	Attending Physician Office Address Line 2	V-4.0
143	CLIENT_ATTPHYOFFIC E_CITY	STRING	Attending Physician Office City	V-4.0
144	CLIENT_ATTPHYOFFIC E_STATE	STRING	Attending Physician Office State	V-4.0
145	CLIENT_ATTPHYOFFIC E_ZIP	STRING	Attending Physician Office Zip	V-4.0
146	CLIENT_REFPHYOFFIC E_ADDRESS_LINE1	STRING	Referring Physician Office Address Line 1	V-4.0
147	CLIENT_REFPHYOFFIC E_ADDRESS_LINE2	STRING	Referring Physician Office Address Line 2	V-4.0



148	CLIENT_REFPHYOFFIC E_CITY	STRING	Referring Physician Office City	V-4.0
149	CLIENT_REFPHYOFFIC E_STATE	STRING	Referring Physician Office State	V-4.0
150	CLIENT_REFPHYOFFIC E_ZIP	STRING	Referring Physician Office Zip	V-4.0
151	CLIENT_PCPHYOFFICE _ADDRESS_LINE1	STRING	Primary Care Physician Office Address Line 1	V-4.0
152	CLIENT_PCPHYOFFICE _ADDRESS_LINE2	STRING	Primary Care Physician Office Address Line 2	V-4.0
153	CLIENT_PCPHYOFFICE _CITY	STRING	Primary CarePhysician Office City	V-4.0
154	CLIENT_PCPHYOFFICE _STATE	STRING	Primary Care Physician Office State	V-4.0
155	CLIENT_PCPHYOFFICE _ZIP	STRING	Primary CarePhysician Office Zip	V-4.0
156	CLIENT_CPRCODE	STRING	CPR Code	V-4.0
157	CLIENT_INTAKE_DIAG NOSIS	STRING	Intake Diagnosis	V-4.0
158	CLIENT_PRIMARYLVN _FIRSTNAME	STRING	Primary LVN First Name	V-4.0
159	CLIENT_PRIMARYLVN _LASTNAME	STRING	Primary LVN Last Name	V-4.0
160	CLIENT_PRIMARYLVN _TELNUMBER	STRING	Primary LVN Telephone#	V-4.0
161	CLIENT_ETHNICITY	STRING	Ethnicity	V-4.0
162	CLIENT_QA_FIRSTNA ME	STRING	QA First Name	V-4.0
163	CLIENT_QA_LASTNAM E	STRING	QA Last Name	V-4.0
164	CLIENT_AIDE_FIRSTN AME	STRING	Aide First Name	V-4.0
165	CLIENT_AIDE_LASTN AME	STRING	Aide Last Name	V-4.0
166	CLIENT_AIDE_TELNU MBER	STRING	Aide Telephone#	V-4.0
167	CLIENT_PCPHY_LAST NAME	STRING	Primary Care Physician Last Name	V-4.0
168	CLIENT_PCPHY_FIRST NAME	STRING	Primary Care Physician First Name	V-4.0



169	CLIENT_PCPHY_TELN UMBER	STRING	Primary Care Physician Telephone#		V-4.0
170	CLIENT GEOLATCODE	STRING	Latitude (GeoCode)		V-4.0
171	CLIENT_GEOLONCOD E	STRING	Longitude (GeoCode)		V-4.0
172	CLIENT_MEDICARENO	STRING	Medicare No		V-4.0
173	CLIENT_MSWCLINICIA N_NAME	STRING	MSW Clinician Name		V-4.0
174	CLIENT_PRIMARYST_ NAME	STRING	Primary ST Name		V-4.0
175	CLIENT_PRIMARYOT_ NAME	STRING	Primary OT Name		V-4.0
176	CLIENT_PRIMARYPT_ NAME	STRING	Primary PT Name		V-4.0
177	CLIENT_IS_FOBALLOC ATED	STRING	whether Fob Allocated	True, False	V-4.0
178	CLIENT_ATTPHY_FUL LADDRESS	STRING	Attending Physician Full Address		V-4.0
179	CLIENT_ATTPHY_ORD ERDELIVERYMETHOD	STRING	Attending Physician Order Delivery Method		V-4.0
180	CLIENT_REFPHY_FUL LADDRESS	STRING	Referring Physician Full Address		V-4.0
181	CLIENT_REFPHY_ORD ERDELIVERTMETHOD	STRING	Referring Physician Order Delivery Method		V-4.0
182	CLIENT_PCPHY_FULL ADDRESS	STRING	Primary Care Physician Full Address		V-4.0
183	CLIENT_PCPHY_ORDE RDELIVERYMETHOD	STRING	Primary Care Physician Order delivery Method		V-4.0
184	CLIENT_MIDDLE_NAM E	STRING	Middle Name		V-4.0
185	CLIENT_ADDRESS_LIN E1	STRING	Client Address Line 1		V-4.0
186	CLIENT_ADDRESS_LIN E2	STRING	Client Address Line 2		V-4.0
187	CLIENT_ZIP	STRING	Zip Code		V-4.0
188	CLIENT_PHONE	STRING	Phone#		V-4.0
189	CLIENT_MOBILE	STRING	Mobile		V-4.0
190	CLIENT_DOB	STRING	Date of Birth		V-4.0



191	CLIENT_MEDICAID_N O	STRING	Medicaid Number		V-4.0
192	CLIENT_LOB_NAME	STRING	Line of Business	Adult, Palliative	V-4.2
193	CLIENT_INTAKE_ACCE PTEDBY	NUMERIC	Employee Who Accepted this Intake The Corresponding ID will refer to CG_EMPLOYEEID		V-4.2
194	CLIENT_NONADMIT_R EASON	STRING	Non Admit Reason		V-4.2
195	CLIENT_LATEST_ROC_ DATE	DATETIME	Latest ROC Date		V-5.0

## **\( \rightarrow\)** Home Health Agencies Branch List

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0
2	AGENCY_BRANCH_ID	NUMERIC	Unique ID of Branch	1001	V-2.0
3	AGENCY_BRANCH_N AME	STRING	Agency Branch Name	Texas	V-2.0
4	BRANCH_ADDRESS_1	STRING	Branch Address Line 1	2303 West Morehead ST, Suite 200	V-2.0
5	BRANCH_ADDRESS_2	STRING	Branch Address Line 2	Ste 2200	V-2.0
6	BRANCH_CITY	STRING	Branch City	Denver	V-2.0
7	BRANCH_STATE	STRING	Branch State	СО	V-2.0
8	DAAS_LAST_MODIFIE D_TIMESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

### **\( \)** Home Health Agency Master

	Field Name	Field Type	Description	Example	Version	
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1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0
2	AGENCY_NAME	STRING	Agency Name	KanTime Home Health and Hospice	V-2.0
3	AGENCY_ADDRESS_1	STRING	Agency Address Line 1	po - box 172	V-2.0
4	AGENCY_ADDRESS_2	STRING	Agency Address Line 2	New york	V-2.0
5	AGENCY_CITY	STRING	City	Austin	V-2.0
6	AGENCY_STATE	STRING	State	TX	V-2.0
7	AGENCY_ZIP	STRING	Zip Code	75216	V-2.0
8	AGENCY_STATUS	STRING	Agency Status (Active, Inactive)	Active	V-2.0
9	AGENCY_STATRT_DA TE	DATETIME	Agency Start Date	1/1/2021	V-2.0
10	AGENCY_CARETYPE_ PEDIATRIC_LONGTER M	BOOLEAN	Agency id of Pediatric Long Term Type or not	TRUE FALSE	V-2.0
11	AGENCY_CARETYPE_ ADULT_INTERMITTE NCE	BOOLEAN	Agency is of Adult Intermit Type or not	TRUE FALSE	V-2.0
12	AGENCY_CARETYPE_ ADULT_LONGTERM	BOOLEAN	Agency is of Adult Long Term Type or not	TRUE FALSE	V-2.0
13	AGENCY_CARETYPE_ PEDIATRIC_INTERMIT TENCE	BOOLEAN	Agency is of Pediatric Intermit Type or not	TRUE FALSE	V-2.0
14	DAAS_LAST_MODIFIE D_TIMESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

## **\( \)** Caregiver Master

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0
2	CG_EMPLOYEEID	NUMERIC	Unique ID of Employee/Caregiver	40759	V-2.0



3	CG_PAYROLL_BRANC H_ID	NUMERIC	Payroll Branch ID of the Employee. The value will refer to Branch ID of Branch Details	1007	V-2.0
4	CG_CLINICIAN_ID	NUMERIC	Clinician ID of the Employee	6001,486512	V-2.0
5	CG_SALUTATION	STRING	Employee Salutation		V-2.0
6	CG_FIRSTNAME	STRING	Employee First Name	John	V-2.0
7	CG_MIDDLENAME	STRING	Employee Middle Name	Alfonso	V-2.0
8	CG_LASTNAME	STRING	Employee Last Name	Doe	V-2.0
9	CG_GENDER	STRING	Employee Gender	Male, Female	V-2.0
10	CG_ADDRESS1	STRING	Employee Address Line 1	6633 John Hickman Pkwy	V-2.0
11	CG_ADDRESS2	STRING	Employee Address Line 2	Apt 903	V-2.0
12	CG_CITY	STRING	Employee City	Spring Hill, Hudson	V-2.0
13	CG_STATE	STRING	Employee State Code	TX, CA	V-2.0
14	CG_ZIP	STRING	Employee ZIP Code	34669	V-2.0
15	CG_PHONE	STRING	Employee Phone Number	(XXX) XXX-XXXX	V-2.0
16	CG_MOBILE	STRING	Employee Mobile Number	(XXX) XXX-XXXX	V-2.0
17	CG_STATUS	STRING	Employee Current Status	Active, Terminated	V-2.0
18	CG_DOB	STRING	Employee Date	1970-10-06	V-2.0
19	CG_PAYROLL_ID	NUMERIC	Payroll ID of the Employee	E32022	V-2.0
20	CG_HIREDDATE	DATETIME	Employee Hiring Date	2021-01-04 00:00:00.000	V-2.0
21	CG_TERMINATION_D ATE	DATETIME	Employee Termination Date	2021-11-21 00:00:00.000	V-2.0
22	CG_SUPERVISING_CLI NICIAN_ID	NUMERIC	Supervising Clinician ID of the Clinician	39675	V-2.0
23	CG_PAYTYPE	STRING	Pay Type of Employee	Salaried, Hourly	V-2.0
24	CG_EMPLOYEENAME	STRING	Employee Full Name	Doe, John	V-2.0
25	CG_DISCIPLINENAME	STRING	Employee Discipline	Aide, RN, MSW	V-2.0
26	CG_IS_CLINICIAN	BOOLEAN	This Boolean Field will identify whether the Employee is a Clinician or not	True False	V-2.0



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27	CG_IS_OFFICESTAFF	BOOLEAN	This Boolean Field will identify whether the Employee is a Clinician or not	True False	V-2.0
28	CG_EMPLOYMENT_T YPE	STRING	Employment Type	Part Time, Full Time	V-2.0
29	CG_PROD_POINTSPER WEEK	NUMERIC	Employee Productivity Point Per Week	0,44	V-2.0
30	CG_LANGUAGE	STRING	Employee Language	English	V-2.0
31	DAAS_LAST_MODIFIE D_TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0
32	CG_OFFICIAL_MAILID	STRING	Official Mail Address		V-4.1
33	CG_MAILID	STRING	Personal Mail Address		V-4.1
34	CG_USERID	NUMERIC	Employees User ID	1	V-4.1
35	CG_DESIGNATION	STRING	Designation	MD	V-4.1
36	CG_LOB	STRING	Line of Business - comma Separated Values	Adult, Palliative	V-4.1
37	CG_COUNTY	STRING	County		V-4.1
38	CG_IS_HOSPICE_SERV ICE	STRING	This Boolean Field will identify whether Hospice Service is Enabled	True, False	V-4.1
39	CG_LOGIN_NAME	STRING	Employee Login ID	joe@kantime.com	V-4.1
40	CG_REHIERED_DATE	DATETIME	Rehired Date		V-4.2
41	CG_LOCATIONS	STRING	Employee Locations in Comma Separated Format	Denver, South Carolina	V-4.2

## **\rightarrow** Payment Source Master

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0



2	PS_PAYERSOURCEID	NUMERIC	Unique Payer ID of the Payer Source	1747	V-2.0
3	PS_NAME	STRING	Payer Source Name	Medicare	V-2.0
4	PS_IS_CHILDCARE	BOOLEAN	This Boolean Field will identify whether the Payer Source Belongs to child care	True False	V-2.0
5	PS_IS_EPISODICAL	BOOLEAN	This Boolean Field will identify whether the Payer Source Belongs to Episodic Billing	True False	V-2.0
6	PS_PROGRAM_ID	NUMERIC	Program ID of the Payer Source	16	V-2.0
7	S_PROGRAM_TYPE	STRING	Program Type Identifier for Payer Source	Medicare, Private Pay	V-2.0
8	PS_PAYERGROUP_ID	NUMERIC	Payer Group ID of the Payer Source	123	V-2.0
9	PS_PAYERGROUP_NA ME	STRING	Payer Group Name	Medicare, United Healthcare	V-2.0
10	PS_CARETYPE	STRING	Payer Source Care Type	Adult,	V-2.0
11	DAAS_LAST_MODIFI ED_TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0

#### **Service Codes Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-3.0
2	SERVICE_ID	NUMERIC	Unique Service ID of the Service	78333	V-2.0
3	SERVICE_PARENT_SE RVICEID	NUMERIC	Parent Service ID of the Service	1631	V-2.0
4	SERVICE_PAYERID	NUMERIC	Payer ID for the Service	1504	V-2.0
5	SERVICE_TYPE	STRING	Service Type	SN, PT, OT	V-2.0
6	SERVICE_NAME	STRING	Service Name	Adult RN Routine Visit	V-2.0
7	SEVICE_CODE	NUMERIC	Unique Code ID of the Service	LVN/LPN DUO	V-2.0
8	SERVICE_PAYCODE	STRING	Service Pay Code	REG	V-2.0



9	SERVICE GROUP ID	NUMERIC	Service Group ID	7	V-2.0
10	SERVICE_FORM_ID	NUMERIC	Service Form ID	259	V-2.0
11	SERVICE_CREATED_B Y	NUMERIC	User ID of Employee who Added this Service		V-2.0
12	SERVICE_ACTIVE	BOOLEAN	This Boolean will identify whether the Service is Active or Not	True, False, Null	V-2.0
13	DAAS_LAST_MODIFIE D_TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0
14	SERVICE_CONT_BILL RATE	NUMERIC	Contractual Bill Rate	250.00	V-4.1
15	SERVICE_CONT_BILL MODE	STRING	Contractual Bill Mode	Hourly, Unit Rate Flxed	V-4.1
16	SERVICE_UNITTYPE	STRING	Unit Type	FIXED HOURLY	V-4.1
17	SERVICE_UNIT	NUMERIC	Unit		V-4.1
18	SERVICE_MINUTEINU NIT	NUMERIC	Minutes in Unit	0,0,15	V-4.1
19	SERVICE_CATEGORY	NUMERIC	Service Category		V-4.1
20	SERVICE_HCPCS	STRING	HCPCS Code	G2099	V-4.4
21	SERVICE_IDENTIFIER	STRING	To Identify Type Of Service from Kantime Service Setup	Misc Base Service, Payer Service, Base Service	V-4.4
22	SERVICE_IS_TERMIN ATED	BOOLEAN	This Flag will Determine whether Service is Terminated Or Not When you Terminate a Service. This Flag is set to True. Same can be Verified through "Terminated Service" filter in Service Report inside Kantime	True, False	V-5.1
23	SERVICE_IS_BILLABL E	BOOLEAN	This Flag will Determine whether Service is Billable or Not.  This fields is Populated from Billable Checkbox under Billing Setting in Service Setup	True, False	V-5.1



24	SERVICE_IS_PAYABL E	BOOLEAN	This Flag will Determine whether Service is Payable or Not.  This fields is Populated from Payable Checkbox under Payroll Setting in Service Setup	True, False	V-5.1	
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#### **Team Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	TEAM_ID	NUMERIC	Unique Team ID of the Caregiver	1001	V-2.0
3	TEAM_NAME	STRING	Team Name of the Caregiver	Team-A	V-2.0
4	DAAS_LAST_MODIFIED_ TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0

## **Claims Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	AGENCY_BRANCH_ID	NUMERIC	Refers to the Branch Name	12	V-2.0
3	CLAIM_ID	NUMERIC	Unique ID of the Claim	248864	V-2.0
4	CLIENT_ID	NUMERIC	Client ID of the Client for this Claim	2222	V-2.0
5	PAYERSOURCE_ID	NUMERIC	Payer Source ID of the claim	73	V-2.0
6	EPISODE_ID	NUMERIC	Episode ID of the Claim	2683	V-2.0
7	CLAIM_TYPE	STRING	Claim Type	RAP EOE	V-2.0
8	INVOICE_DATE	DATETIME	Invoice Date	2019-04-30 00:00:00.000	V-2.0



			I		
9	INVOICE_NUMBER	NUMERIC	Invoice Unique Identifier	1012-00	V-2.0
10	CLAIM_START_DATE	DATETIME	Claim Effective Start Date	12/1/2021	V-2.0
11	CLAIM_END_DATE	DATETIME	Claim Effective End Date	12/312021	V-2.0
12	CLAIM_TOTALAMOUNT	NUMERIC	Claim Total Amount	5000.00	V-2.0
13	CLAIM_CONTRACTUAL_ AMOUNT	NUMERIC	Claim Contractual Amount	4500.00	V-2.0
14	CLAIM_BALANCE	NUMERIC	Claim Balance Amount	5000.00	V-2.0
15	CLAIM_BALANCE_CONT RACTUAL	NUMERIC	Claim Contractual Balance Amount	4500.00	V-2.0
16	CLAIM_IS_CANCELLED	BOOLEAN	This Boolean will identify whether the claim is Cancelled or not	True False	V-2.0
17	CLAIM_IS_FULLY_PAID	BOOLEAN	This Boolean will identify whether the claim is Completely Paid or not	True False	V-2.0
18	CLAIM_IS_PARTIALLY_P AID	BOOLEAN	This Boolean will identify whether the claim is Partially Paid or not	True False	V-2.0
19	CLAIM_IS_APPEALED	BOOLEAN	This Boolean will identify if the Cancelled/Denied Claim is appealed or not	True False	V-2.0
20	CLAIM_IS_DENIED	BOOLEAN	This Boolean will identify if the Claim is denied or not	True False	V-2.0
21	CLAIM_CONTRACTUAL_ ADJUSTMENTS	NUMERIC	Contractual Adjustment Amount of the Claim	50.00	V-2.0
22	CLAIM_OTHER_ADJUST MENTS	NUMERIC	Non Contractual Adjustment Amount of the Claim	90.00	V-2.0
23	CLAIM_PAIDAMOUNT	NUMERIC	Claim Paid Amount	4500.00	V-2.0
24	CLAIM_IS_SECONDARY	BOOLEAN	This Boolean will identify if the Claim is Secondary Invoice	True → Secondary False → Not Secondary	V-2.0
25	CLAIM_IS_TERTIARY	BOOLEAN	This Boolean will identify if the Claim is Tertiary Invoice	True → Tertiary False → Non Tertiary	V-2.0
26	CLAIM_IS_LUPA	BOOLEAN	This Boolean will identify if the Claim is LUPA	True False	V-2.0
27	CLAIM_ISOUTLIER	BOOLEAN	This Boolean will identify if the Claim is Outlier	True False	V-2.0
28	CLAIM_IS_PEP	BOOLEAN	This Boolean will identify if the Claim is PEP	True False	V-2.0



29	CLAIM_IS_TRANSFERRE D_COPAY	BOOLEAN	This Boolean will identify if the Claim is Copay Invoice. Such Claims will have Parent Claim	True False	V-2.0
30	CLAIM_IS_SERVICE_COP AY	BOOLEAN		True False	V-2.0
31	CLAIM_IS_MANUAL	BOOLEAN	Boolean Flag To Show if the Claim is Manual Claim	True False	V-2.0
32	CLAIM_INITIAL_HHRG	NUMERIC	Initial HHRG value of the Claim	0	V-2.0
33	CLAIM_FINAL_HHRG	NUMERIC	Final HHRG value of the Claim	1272.78,0	V-2.0
34	CLAIM_HHRG_GOAL	NUMERIC	HHRG Goal Value for the claim	2500	V-2.0
35	CLAIM_STATUS	STRING	Current Status of Claim	Created, Deleted, Cancelled	V-2.0
36	CLAIM_PAID_DATE	DATETIME	Claim Payment Date	2019-05-06 00:00:00.000	V-2.0
37	CLAIM_IS_EDICREATED	BOOLEAN	Boolean flag to show whether EDI was created for the claim or not	True False	V-2.0
38	CLAIM_EDI_CREATEDD ATE	DATETIME	Claim EDI Created Date	2019-04-30 05:26:54.700	V-2.0
39	CLAIM_EDI_CREATEDBY _USER_ID	STRING	User ID of Employee Who Created EDI for the Claim	support@kt.com	V-2.0
40	CLAIM_EDI_FILE_ID	NUMERIC	EDI File ID of Claim	12345	V-2.0
41	CLAIM_CREATEDBY_US ER_ID	STRING	User ID of Employee who created the Claim	support@kt.com	V-2.0
42	DAAS_LAST_MODIFIED_ TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0
43	CLAIM_CANCELLATION _REASON	STRING	Cancellation Reason		V-4.1
44	CLAIM_IS_BILLED	BOOLEAN	This Flag will Identify whether Claim is billed or Not	True, False	V-4.4.1
45	CLAIM_INVOICE_STATU S	STRING	Claim Invoice Status	Cancelled, Receivable, Paid	V-4.4.1
46	CLAIM_PARENT_CLAIMI D	NUMERIC	ClaimID for the Parent Claims. this can be Primary ClaimID for Secondary claims and Secondary Claim ID for Primary Claims	1001	V-4.4.1
47	CLAIM_PRIMARY_CLAI MID	NUMERIC	Primary ClaimID for Secondary and Tertiary Claims	1002	V-4.4.1
48	CLAIM_ADDEDON	DATETIME	Claim System Date	2017-09-29 05:15:09.000	V-5.0



49	CLAIM_TRANSACTION_ DATE	DATETIME	Claim Transaction Date	2017-09-29 00:00:00.000	V-5.0	
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## **Claim Details**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	CD_CLAIM_ID	NUMERIC	Unique ID of Claim	101	V-2.0
3	CD_TOTAL_HOURS	NUMERIC	Total Hours of Claim Line Items	1 (1 Hour)	V-2.0
4	CD_CLAIM_DETAIL_ID	NUMERIC	Unique Line Item ID of Claim. this will uniquely identify a Line Item	1759758	V-2.0
5	CD_SCHEDULE_DATE	DATETIME	Line Item Service Date	2017-09-29 00:00:00.000	V-2.0
6	CD_UNITS	NUMERIC	Line Item Units	50.36,1	V-2.0
7	CD_BILLED_AMOUNT	NUMERIC	Line Item Billed Amount	37.74	V-2.0
8	CD_SCHEDULE_ID	NUMERIC	Schedule ID of Line Item	2219894	V-2.0
9	CD_ITEM_TYPE	STRING	Line Item Type	$S \rightarrow Schedule$	V-2.0
10	CD_SERVICE_CODE_ID	NUMERIC	Line Item Service Code ID	2219894	V-2.0
11	CD_BILLRATE	NUMERIC	Line Item Bill Rate	37.74	V-2.0
12	CD_IS_BILLRATE_HOURL Y	BOOLEAN	Boolean flag to show whether Hourly Bill Rate is applicable for this Line Item	True False	V-2.0
13	CD_IS_UNITBASED_BILLI NG	BOOLEAN	Boolean flag to show whether Unit Based Bill Rate is applicable for this Line Item	True False	V-2.0
14	CD_CONTRACTUAL_AM OUNT	NUMERIC	Line Item Contractual Amount	37.74	V-2.0
15	CD_CONTRACTUAL_RAT E	NUMERIC	Line Item Contractual Rate	37.74	V-2.0
16	CD_CHILD_SCHEDULE_I D	NUMERIC	Child Schedule ID of Line Item if the line item belongs to child schedule	2219894	V-2.0



17	CD_BILLRATE_HOURLY_ CONTRACTUAL	BOOLEAN	Boolean flag to show whether Contractual Hourly Bill Rate is applicable for this Line Item	True False	V-2.0
18	CD_IS_CONTRACTUAL_U NITBASED_BILLING	BOOLEAN	Boolean flag to show whether Contractual Unit Based Bill Rate is applicable for this Line Item	True False	V-2.0
19	CD_IS_DENIED	BOOLEAN	Boolean flag to show whether this Line Item is Denied	True False	V-2.0
20	CD_START_TIME	DATETIME	Effective Start Date for the Line Item	2017-09-29 00:00:00.000	V-2.0
21	CD_END_TIME	DATETIME	Effective End Date for the Line Item	2017-09-29 00:00:00.000	V-2.0
22	CD_MISC_VISIT_ID	NUMERIC	Misc. Visit ID of Line Item if the line item belongs to child schedule	2219894	V-2.0
23	CD_PAIDAMOUNT	NUMERIC	Line Item Paid Amount	37.74	V-2.0
24	CD_REQUIFEE_AMOUNT	NUMERIC	Line Item Requisition Fee Amount	37.74	V-2.0
25	CD_IS_MERGED	BOOLEAN	Boolean flag to show whether this Line Item is Merged	True False	V-2.0
26	CD_MERGEDCLAIM_DET AIL_ID	NUMERIC	New Line Item ID to which this claim is Merged. For Example if Line Item ID 1001 and 1002 are merged to a new Line Item ID 1003 then this field will show 1003	2219894	V-2.0
27	DAAS_LAST_MODIFIED_ TIMESTAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0
28	CD_HCPCS	STRING	HCPCS Code	G099	V-4.4
29	CD_IS_ADDITIONAL_LIN EITEM	BOOLEAN	This FLag will identify whether it's an Additional Line Item for the claim. these Items can be seen under "Additional Line Items" section of the claim	True, False	V-5.1

# **\rightarrow** LOB Master

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Ex: 101	V-2.0
2	LOBNAME	STRING	Line of business Name	Pedi PT	V-2.0
3	LOB_ID	NUMERIC	Unique ID for an Line of Business (LOB)		V-3.0



4	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0	
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## **Sales Person**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	SP_SALUTATION	STRING	Gesture or Utterance	Ms	V-2.0
3	SP_FIRST_NAME	STRING	Sales Person First Name	Justin	V-2.0
4	SP_LAST_NAME	STRING	Sales Person Last Name	Gutierrez	V-2.0
5	SP_MIDDLE_NAME	STRING	Sales Person Middle Name	L	V-2.0
6	SP_GENDER	STRING	Gender of Sales Person	Male Female	V-2.0
7	SP_CITY	STRING	City Name	PUEBLO	V-2.0
8	SP_STATE	STRING	Sate Name	СО	V-2.0
9	SP_STATUS	STRING	Status of Sales Person(Active, Deleted, Inactive)	Active	V-2.0
10	SP_JOINED_DATE	DATETIME	Sales Person Joined Date	2021-03-22 00:00:00.000	V-2.0
11	SP_TERMINATION_DATE	DATETIME	Sales Person Resigned Date	2021-03-22 00:00:00.000	V-2.0
12	SP_DOB	DATETIME	Date of Birth of Sales Person	2021-03-22 00:00:00.000	V-2.0
13	SP_RATING	STRING	Salesperson Rating		V-2.0
14	SP_EMPLOYEE_ID	NUMERIC	Refers to the Clinician	32588	V-2.0
15	SP_SALESPERSON_ID	NUMERIC	Internal Sales Person ID	32588	V-2.0
16	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0





	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	AS_ADMISSIONSOURCE_ID	NUMERIC	Internal ID	222	V-2.0
3	AS_NAME	STRING	Description of Admission Source	Transfer from Another HHA	V-2.0
4	AS_ASCODE	STRING	Admission Source Code	A,6	V-2.0
5	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

## **\rightarrow** Client Census By Date

	Field Name	Field Type	Description	Example	Version
1	CLIENT_CENSUS_DATE	DATETIM E	Patient Census Date	2020-12-01	V-2.0
2	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
3	CLIENT_ID	NUMERIC	Unique ID of Client	1001	V-2.0
4	CLIENT_GROUP_NO	NUMERIC	Client Group Number	1002	V-2.0
5	AGENCY_BRANCH_ID	NUMERIC	Unique ID of Branch	1	V-2.0
6	DAAS_LAST_MODIFIED_TIME STAMP	DATETIM E	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

#### **\rightarrow** Client Discharge Reason

	Field Name	Field Type	Description	Example	Version
1	CLIENT_ID	NUMERIC			V-2.0



2	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
3	AGENCY_BRANCH_ID	NUMERIC	Unique ID of Branch	10	V-2.0
4	REASON_FOR_DISCHARGE	STRING	Discharge Reason	MAXPOTENTI AL	V-2.0
5	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

## **\( \rightarrow\) Home Health Branch Goals**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	AGENCY_BRANCH_ID	NUMERIC	Unique ID of Branch	10	V-2.0
3	DS_BRANCH_GOALDATE	DATETIME	Goal/Target Date	2015-03-13	V-2.0
4	DS_BRANCH_ADMISSION_TAR GET	NUMERIC	Agency Can set the Goal/Target for various Data Science Report, Admission Goal Refers to the Goal for the Admission Report	0.00	V-2.0
5	DS_BRANCH_DUPLICATDECEN SUS_TARGET	NUMERIC	Agency Can set the Goal/Target for various Data Science Report, Duplicated Census Goal Refers to the Goal for the Duplicated Census Report	0.00	V-2.0
6	DS_BRANCH_UNDUPLICATEDC ENSUS_TARGET	NUMERIC	Agency Can set the Goal/Target for various Data Science Report, Un-Duplicated Census Goal Refers to the Goal for the Un-Duplicated Census Report	0.00	V-2.0
7	DAAS_LAST_MODIFIED_TIMES TAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0



## **Authorization Master**

	Field Name	Field Type	Description	Example	Version
1	AUTH_ID	NUMERIC	Authorization Unique ID	274078	V-2.0
2	AUTH_PAYER_ID	NUMERIC	Auth Payment Source ID (Refers PaymentSourcemaster)	274078	V-2.0
3	AUTH_NUMBER	STRING	Authorization Number	OP2427943752	V-2.0
4	AUTH_START_DATE	DATETIME	Authorization from date	2021-03-03 00:00:00.000	V-2.0
5	AUTH_END_DATE	DATETIME	Authorization To Date	2021-03-03 00:00:00.000	V-2.0
6	AUTH_IS_VISITBASED	BOOLEAN	Is Authorization Visit based	True False	V-2.0
7	AUTH_TOTALUNITS	NUMERIC	Total Auth Unit if Authorization is Unit Based	400,0	V-2.0
8	AUTH_VISIT_COUNT	NUMERIC	Number of Visit if Auth is Visit Based	49	V-2.0
9	AUTH_SERVICE_CODE_ID	NUMERIC	Auth ServiceCode ID (Refers ServiceCodeMaster)	0	V-2.0
10	AUTH_DISCIPLINE_NAME	STRING	Auth Discipline name	PRE-VOC	V-2.0
11	AUTH_UNUSEDUNITS	NUMERIC	Total Unused Units	400,0	V-2.0
12	AUTH_WEEKLY_LIMIT	NUMERIC	Authorization Weekly Limit	0	V-2.0
13	AUTH_MONTHLY_LIMIT	NUMERIC	Authorization Monthly Limit	0	V-2.0
14	AUTH_DAILY_LIMIT	NUMERIC	Authorization Daily Limit	0	V-2.0
15	AUTH_IS_AUTO	BOOLEAN	Is Auto Authorization	True False	V-2.0
16	AUTH_CREATED_DATE	DATETIME	Date on Which Authorization was Add	2021-03-03 09:06:09.137	V-2.0
17	AUTH_PAYER_ALLOCATIONOR DER	STRING	Authorization Sequence/Order Number	0,1	V-2.0
18	AUTH_IS_HOURLYBASED	BOOLEAN	Boolean flag to show whether this Authorization record is Hourly Based	True False	V-2.0
19	CLIENT_ID	NUMERIC	Authorization Client ID (Refers to Client_ID column in Client Master)		V-2.0
20	AGENCY_BRANCH_ID	NUMERIC	Branch ID		V-2.0



21	DAAS_LAST_MODIFIED_TIMES TAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0
22	AUTH_PRIORITY_TYPE	STRING	Authorization Type	$P \rightarrow Primary$ $S \rightarrow Secondary$ $T \rightarrow Tertiary$	V-4.1
23	AUTH_RECEIVED_DATE	DATETIME	Received Date	EX:2016-12-09 12:31:31.900	V-4.4
24	AUTH_ENTEREDBY_CGID	NUMERIC	CaregiverID/ EmployeeID of the Staff who Logged the Record	100	V-4.4
25	AUTH_REQUESTED_DATE	DATETIME	Requested Date	EX:2016-12-09 12:31:31.900	V-4.4
26	AUTH_REQUESTEDBY_CGID	NUMERIC	CaregiverID/ EmployeeID of the Staff who Requested the Record	101	V-4.4
27	AUTH_ACK_ON	DATETIME	Acknowledgment Date	EX:2016-12-09 12:31:31.900	V-4.4
28	AUTH_ACKBY_CGID	NUMERIC	CaregiverID/ EmployeeID of the Staff who Acknowledged the Record	101	V-4.4

# **Authorization Monthly Utilization**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of Agency	276	V-2.0
2	AMU_START_DATE	DATETIME	Authorization from date	2023-04-01	V-2.0
3	AMU_END_DATE	DATETIME	Authorization To Date	2023-03-31	V-2.0
4	AMU_MONTHLYLIMIT	NUMERIC	Authorization Monthly Limit	4	V-2.0
5	AMU_TOTALALLOCATED_INCL UDING_PLANNED	NUMERIC	Total Auth Allocated Including Planned Visit	4	V-2.0
6	AMU_TOTALALLOCATED_EXC LUDING_PLANNED	NUMERIC	Total Auth Allocated Excluding Planned Visit	1	V-2.0
7	AMU_UTILPERCENTAGE_INCL UDING_PLANNED	NUMERIC	Total Utilization Percentage Including Planned Visit	100	V-2.0
8	AMU_UTILPERCENTAGE_EXCL UDING_PLANNED	NUMERIC	Total Utilization Percentage Excluding Planned Visit	25	V-2.0
9	AUTHORIZATION_ID	NUMERIC	Authorization Unique ID		V-2.0



1 0	DAAS_LAST_MODIFIED_TIMES TAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0	
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### **OASIS Discharged Patients**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of Agency	276	V-2.0
2	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client	152755	V-2.0
3	OP_D_TOTAL_EPISODES	NUMERIC	Total Number of Episodes Present from Start of Care to Discharge		V-2.0
4	OP_D_TOTAL_DAYSINEPISOD ES	NUMERIC	Total Number of Days Present in a Episode	60	V-2.0
5	OP_D_AVG_NUMBEROFEPISO DES	NUMERIC	refers to the Average Number of Episodes from SOC to Discharge	0.216667	V-2.0
6	OP_D_AVG_CASEMIX	NUMERIC	Assessment Case Mix Value (average of days from Start of Care to Discharge)	0.7186	V-2.0
7	OP_D_EPISODESWITH5OR6VI SITS	NUMERIC	Number of Episodes having 5 or 6 Schedules in Episode	0	V-2.0
8	OP_D_NONLUPA_PAYMENT_P ERCENTAGE	NUMERIC	Percentage of Non LUPA Payments	1.000000	V-2.0
9	OP_D_HIGHTHERAPRY_UTILE PISODE_PERCENTAGE	NUMERIC	Refers to the Percentage of High Therapy Utilization Episodes (Total Higher Therapy Utilization Episodes / Total Episodes)	0.000000	V-2.0
10	OP_D_OUTLIER_PAYMENT_PE RCENTAGE	NUMERIC	Refers to the Outlier Patient Payment Percentage (Total Outlier Episodes / Total Number of Episodes)	0.000000	V-2.0
11	OP_D_DATASETID_INITIAL	NUMERIC	Oasis Data Set Internal ID	4973	V-2.0
12	OP_D_DATASETID_DISCHARG E	NUMERIC	Discharge Assessment Internal ID	35697	V-2.0
13	OP_D_IS_MEDICAREPATIENT	BOOLEAN	Discharge Patient is of Medicare Type or Not	TRUE	V-2.0



14	OP_D_TOTAL_LUPAEPISODES	NUMERIC	Total Number of LUPA Episodes Present from Start of Care to Discharge	1	V-2.0
15	OP_D_TOTAL_NONLUPAEPISO DES	NUMERIC	Total Number of Non LUPA Episodes Present from Start of Care to Discharge	0	V-2.0
16	OP_D_TOTAL_EOEPAIDEPISO DES	NUMERIC	Total Number of EOE Paid Episodes (Total EOE Paid Episodes / Total Number of Episodes)	1	V-2.0
17	OP_D_IS_DISCHASSESMENT_ COMPLETED	BOOLEAN	Discharge Assessment is Completed or Not	TRUE	V-2.0
18	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

#### **OASIS Patient Clinical Outcomes**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of Agency	276	V-2.0
2	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client	152755	V-2.0
3	OP_CLINICALOUTCOME_VALU E	STRING	which explain the Present Condition of Patient in Clinician Outcome / oasis Code (Stable, Improved, Declined)	Feeding or Eating	V-2.0
4	OP_CLINICALOUTCOME_GROUP	STRING	refers to the Oasis Code which has values like Grooming, Ability to Dress Upper Body, Bathing, Toilet etc.	Stable	V-2.0
5	DAAS_LAST_MODIFIED_TIMES TAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-0 9 12:31:31.900	V-3.0

#### **Episode Master**

	Field Name	Field Type	Description	Example	Version
]	AGENCY_ID	NUMERIC	Unique ID of Agency	276	V-2.0



2	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client	152755	V-2.0
3	E_EPISODE_ID	NUMERIC	Episode Internal ID	220982	V-2.0
4	E_POC_ID	NUMERIC	Plan of care internal ID	227212	V-2.0
5	E_IS_MEDICAREEPISODE	BOOLEAN	Is Medicare Episode	TRUE	V-2.0
6	E_EPISODE_NUMBER	NUMERIC	Episode Number	1	V-2.0
7	E_START_DATE	DATETIME	Episode Start Date	2022-01-19 00:00:00.000	V-2.0
8	E_PLANNED_END_DATE	DATETIME	Episode Planned End Date	2022-07-03 00:00:00.000	V-2.0
9	E_ACTUAL_END_DATE	DATETIME	Episode Actual End date	2022-07-03 00:00:00.000	V-2.0
10	E_DAYSIN_EPISODE	NUMERIC	Total Number of Days in Episode	60	V-2.0
11	E_CASEMIX	NUMERIC	Assessment casemix Value	1.3483	V-2.0
12	E_HIPPS	STRING	HIPPS Code	1EC21	V-2.0
13	C_CLAIMSKEY	STRING	Assessment ClaimKey Value		V-2.0
14	E_CFS	STRING	Assessment CFS Value		V-2.0
15	E_HHRG_AMOUNTWITHSUPPLI ES	NUMERIC	Total HHRG Amount including supplies	0	V-2.0
16	E_SNVISITS	NUMERIC	Total SN Visits in Episode	21	V-2.0
17	E_PTVISITS	NUMERIC	Total PT Visits in Episode	10	V-2.0
18	E_OTVISITS	NUMERIC	Total OT Visits in Episode	36	V-2.0
19	E_ST_VISITS	NUMERIC	Total ST Visits in Episode	9	V-2.0
20	E_AIDE_VISITS	NUMERIC	Total Aide visits in Episode	623	V-2.0
21	E_MSW_VISITS	NUMERIC	Total MSW Visits in Episode	0	V-2.0
22	E_TOTALTHERAPY_VISITS	NUMERIC	Total Therapy Visits in Episode (PT Visits + OT Visits + ST Visits)	10	V-2.0
23	E_TOTALNURSING_VISITS	NUMERIC	Total Nursing Visits in Episode(SN visits)	0	V-2.0
24	E_TOTAL_VISITS	NUMERIC	Total number of Visits in Episode	10	V-2.0
25	E_IS_LUPA	BOOLEAN	Is LUPA Episode	TRUE	V-2.0
26	E_IS_OUTLIER	BOOLEAN	Is Outlier Episode	FALSE	V-2.0
27	E_IS_EOE_PAID	BOOLEAN	Is EOE Created for the Episode	TRUE	V-2.0



28	E_IS_HIGHTHERAPY_UTILIZATI ONEPISODE	BOOLEAN	Is Episode is High Therapy Utilization Episode (If Total Therapy Visits > 20)	TRUE	V-2.0
29	E_POC_LOCKED_DATE	KED_DATE DATETIME Plan of care Locked Date		2022-05-13 15:03:23.963	V-2.0
30	E_POC_SENTTOPHY_DATE	DATETIME	Plan of care sent to Physician date	2022-06-27 00:00:00.000	V-2.0
31	E_POC_PREPARED_DATE	DATETIME	Plan of care Prepared date	2022-06-13 05:51:24.407	V-2.0
32	E_POC_DAYSTOPREPARE	NUMERIC	Total Number of Days to prepare POC	0	V-2.0
33	E_IS_RAPCREATED	BOOLEAN	Is RAP Created for the Episode	TRUE	V-2.0
34	E_RAP_DAYS	NUMERIC	Total Number of days took to create RAP (RAP Created Date-Episode Start Date)	72	V-2.0
35	E_IS_EOECREATED	BOOLEAN	Is EOE Created	TRUE	V-2.0
36	E_EOE_DAYS	NUMERIC	total Number of EOE days	198	V-2.0
37	E_DAYSWITHCLINICIAN	NUMERIC	Total Number of days with Clinician	5	V-2.0
38	E_OFFSETDAYSWITHCODER	NUMERIC	Total Days With Coder	0	V-2.0
39	E_OFFSETDAYSFORLOCK_ASSE SMENT	NUMERIC	Total Days For Lock Assessment	13	V-2.0
40	E_RAP_OFFSETDAYSAPPROVED FOR_BILLING	NUMERIC	Total Days RAP Approved For Billing	-738317	V-2.0
41	E_EOE_OFFSETDAYSAPPROVED FOR_BILLING	NUMERIC	Total Days EOE Approved For Billing	-738317	V-2.0
42	E_BILLER_DAYS	NUMERIC	total Biller Days for Medicare Episode (RAPDays-DaysWithClinician -OffsetDaysWithCoder-Offset DaysForLockAssessment-Day sToPreparePOC-OffsetDaysR APApprovedForBilling)	738347	V-2.0
43	DAAS_LAST_MODIFIED_TIMEST AMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.900	V-3.0
44	E_TIMEPOINT	STRING	Time Point	SOC RECERT	V-4.0



### **\( \)** Home Health Agency Branch DS Configurations

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of Agency	276	V-2.0
2	AGENCY_BRANCH_ID	NUMERIC	Unique ID of Branch	1	V-2.0
3	DSC_RAPDAYS_PLANNED	NUMERIC		10	V-2.0
4	DAAS_LAST_MODIFIED_TIMEST AMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.900	V-3.0

#### **OASIS** Assessments

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
2	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client	70567	V-2.0
3	OA_DATASET_ID	NUMERIC	Assessment Internal ID	150338	V-2.0
4	OA_POC_ID	NUMERIC	Plan of care Internal ID	108311	V-2.0
5	OA_ASSESSMENT_DATE	DATETIME	Assessment Date	2021-12-31 00:00:00.000	V-2.0
6	OA_TIMEPOINT	STRING	Assessment time point (SOC,ROC,RECERT)	RECERT	V-2.0
7	OA_CAREGIVER_ID	NUMERIC	Clinician Internal ID	11745	V-2.0
8	OA_HIPPS	STRING	Assessment HIPPS Code	1BC11	V-2.0
9	OA_CLAIMS_KEY	STRING	OASIS Claims Key	19GI19GI11GPGH CLHA	V-2.0
10	OA_CFS	STRING	OASIS CFS Value	C3F3S1	V-2.0
11	OA_HHRG_AMOUNT	NUMERIC	Assessment HHRG Amount	4504.27	V-2.0
12	OA_CASEMIX	STRING	OASIS Case-mix Value	1.4548	V-2.0



13	OA_LOCKED_DATE	DATETIME	Assessment Locked Date	2021-01-27 09:32:20.673	V-2.0
14	OA_DAYSWITHCLINICIAN	NUMERIC	Total Number of Days with Clinician	7	V-2.0
15	OA_OFFSETDAYSWITH_CODE R	NUMERIC	Total Number of days with Coder	29	V-2.0
16	OA_OFFSETDAYSFORLOCK	NUMERIC	Total Number of days to lock	11	V-2.0
17	OA_ASSESSMENT_STATUS	STRING	Assessment Status	Exported	V-2.0
18	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0
19	OA_SUBMISSION_DATE	DATETIME	Oasis Submission Date	2021-01-27 09:32:20.673	V-4.1
20	OA_EXPORT_DATE	DATETIME	Oasis Latest Export Date	2021-01-27 09:32:20.673	V-4.1

#### **OASIS ADL IADL**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
2	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client Master Table	128669	V-2.0
3	O_DATASET_ID	NUMERIC	Refers to the Internal ID of Oasis Assessments Table	32354	V-2.0
4	O_ADL_M1800_GROOMING	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Grooming Task	1	V-2.0
5	O_ADL_M1810_DRESS_UPPE RBODY	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Dress upper Body Task	-2	V-2.0
6	O_ADL_M1820-DRESS_LOWE RBODY	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Dress Lower body Task	-2	V-2.0
7	O_ADL_M1830_BATHING	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the bathing Task	-2	V-2.0



8	O_ADL_TOILER_TRANSFERR ING	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Toilet Transferring	-2	V-2.0
9	O_ADL_TOILET_HYGEINE	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Toilet Hygiene	2	V-2.0
10	O_ADL_M1850_TRANSFERRI NG	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Transferring	2	V-2.0
11	O_ADL_AMBULATION	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Transferring	3	V-2.0
12	O_ADL_EATING	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Eating	2	V-2.0
13	O_ADL_LIGHTMEALS	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Light Meals	-2	V-2.0
14	O_ADL_TELEPHONE	NUMERIC	Refers to the Patient Condition in 0 to 3 for Performing the Telephone	-2	V-2.0
15	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

### **\rightarroll Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
2	PAYROLL_ID	NUMERIC	Internal Payroll ID. unique for Each Payroll	1,2,3	V-2.0
3	PAYROLL_NO	STRING	Payroll Number (Payroll # ). Unique for Each Payroll	444103	V-2.0
4	CG_EMPLOYEEID	NUMERIC	Clinician ID for which this Payroll Belongs. The Corresponding ID will refer to CG_EMPLOYEEID	29788	V-2.0
5	PAYROLL_DATE	DATETIME	Payroll Date	2020-04-10 00:00:00.000	V-2.0
6	PAYROLL_START_DATE	DATETIME	Payroll Effective Start Date	2022-02-20 00:00:00.000	V-2.0
7	PAYROLL_END_DATE	DATETIME	Payroll Effective End Date	2022-03-05 00:00:00.000	V-2.0



8	PAYROLL_CREATED_DATE	DATETIME	Date on which Payroll was created	2022-03-11 00:00:00.000	V-2.0
9	PAYROLL_CREATOR_USERID	NUMERIC	User ID of the Employee who created the Payroll The Corresponding ID will refer to USER_ID in UserMaster_VW	1	V-4.1
10	PAYROLL_GRAND_TOTAL	NUMERIC	Payroll Grant Total Amount	3181.55	V-2.0
11	PAYROLL_STATUS	STRING	Payroll Status	Paid/ Processing	V-2.0
12	PAYROLL_BATCH_ID	STRING	Internal Payroll Batch ID.	19699	V-2.0
13	PAYROLL_IS_CLINICIAN	BOOLEAN	Boolean flag to show whether this Payroll Belongs to Clinician	TRUE	V-2.0
14	PAYROLL_IS_OFFICESTAFF	BOOLEAN	Boolean flag to show whether this Payroll Belongs to Office Staff	FALSE	V-2.0
15	PAYROLL_TOTAL_HOURS	NUMERIC	Total Payroll Hours	2400	V-2.0
16	PAYROLL_TOTALCOUNTED_ HOURS	NUMERIC	Total Hours counted/considered for Payroll	600	V-2.0
17	PAYROLL_TOTALREGULAR_ HOURS	NUMERIC	Total Regular Hours	2400	V-2.0
18	PAYROLL_TOTALOT_HOURS	NUMERIC	Total OT Hours	0	V-2.0
19	PAYROLL_TOTAL_VISITS	NUMERIC	Total Visits in this Payroll	5	V-2.0
20	PAYROLL_TOTALREGULAR_ AMOUNT	NUMERIC	Total Regular Amount	182.75	V-2.0
21	PAYROLL_TOTALOT_AMOUN T	NUMERIC	Total OT Amount	0	V-2.0
22	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

# **Payroll Details**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
2	PD_DETAIL_ID	NUMERIC	Internal Payroll Line Item ID. unique for Each Payroll line Item	99222	V-2.0



3	PAYROLL_ID	NUMERIC	Internal Payroll ID. unique for Each Payroll	1,2,3	V-2.0
4	PD_SCHEDULE_DATE	DATETIME	Payroll Line Item Visit Date	2021-01-20 00:00:00.000	V-2.0
5	PD_SCHEDULE_ID	NUMERIC	Schedule ID of this Visit if the Line Item belongs to Clinical Visit	6878941	V-2.0
6	PD_MISC_VISIT_ID	NUMERIC	Schedule ID of this Visit if the Line Item belongs to miscellaneous Visit	52959	V-2.0
7	PD_PAY_RATE	NUMERIC	Pay Rate for the Line Item	26.26,10	V-2.0
8	PD_IS_PAYRATE_HOURLY	BOOLEAN	Boolean flag to show whether this Payroll Line Item Pay Rate is Hourly	TRUE FALSE	V-2.0
9	PD_PAYABLE_MINUTES	NUMERIC	Total Payable Minutes of this Line Item	10	V-2.0
10	PD_TOTAL_AMOUNT	NUMERIC	Payroll Line Item Total Amount	32.68	V-2.0
11	PD_DESCRIPTION	STRING	Payroll Line Item Description	Attendant 2	V-2.0
12	PD_MILES	NUMERIC	Payroll Line Item Miles	0	V-2.0
13	PD_BONUS_AMOUNT	NUMERIC	Bonus Amount	0	V-2.0
14	PD_MILEAGE_AMOUNT	NUMERIC	Mileage Amount	0	V-2.0
15	PD_RATETYPE	STRING	Payroll Line Item Rate Type	OT, Shift	V-2.0
16	PD_SHIFTNAME	STRING	Payroll Line Item Shift Detail	111 Monday (Weekday)	V-2.0
17	PD_REGULARRATE	NUMERIC	Payroll Line Item Regular Rate	10	V-2.0
18	PD_START_TIME	DATETIME	Payroll Visit/Work Start Time	2021-01-20 09:00:00.000	V-2.0
19	PD_END_TIME	DATETIME	Payroll Visit/Work End Time	2021-01-20 09:00:00.000	V-2.0
20	PD_PAY_CODE	STRING	Line Item Pay Code	INDIRECT SV	V-2.0
21	PD_PROD_POINT	NUMERIC	Line Item Productivity Point	0	V-2.0
22	PD_IS_NONPAYABLE	BOOLEAN	Boolean flag to show whether this Payroll Line Item is Non Payable	TRUE FALSE	V-2.0
23	PD_IS_DOUBLEOT	BOOLEAN	Boolean flag to show whether this Payroll Line Item is double OT	TRUE FALSE	V-2.0



24	PD_IS_STAFFSALARY	BOOLEAN	Boolean flag to show whether this Payroll Line Item belongs to staff Salary	TRUE FALSE	V-2.0
25	PD_MILEAGE_RATE	NUMERIC	Payroll Line Item Mileage Rate	0,0.41	V-2.0
26	PD_UNITS	NUMERIC	Payroll Line Item total Units	12.5	V-2.0
27	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0

# **\rightarrow** Client Payment Sources

	Field Name	Field Type	Description	Example	Version
1	CLIENT_PS_IS_PRIMARY	BOOLEAN	Is Payer is Primary payer for patient	TRUE FALSE	V-2.0
2	CLIENT_PS_PAYERTYPE	NUMERIC	Payer Priority Type 1- Primary, 2 - Secondary, 3 - Tertiary		V-2.0
3	CLIENT_PS_START_DATE	DATETIME	Insurance Effective Start Date	2019-02-01 00:00:00.000	V-2.0
4	CLIENT_PS_END_DATE	DATETIME	Insurance Effective End Date	2019-02-01 00:00:00.000	V-2.0
5	CLIENT_PS_EFFECTIVEPERIO D	STRING	Effective Period Description	From Effective Start Date-No End Date	V-2.0
6	CLIENT_PS_PRIMARY_ID	STRING	If this Record belongs to Primary Payer then this value will empty/null. If this belongs to Secondary/Tertiary Payer then this will show CLIENT_PS_UNIQUE_ID of its Primary Payer	P-19769	V-2.0
7	CLIENT_PS_PARENT_ID	STRING	If this Record belongs to Primary Payer then this value will empty/null. If this belongs to Secondary/Tertiary Payer then this will show CLIENT_PS_UNIQUE_ID of its Parent Payer Tertiary → Secondary Secondary → Primary	P-19769,S-135 67	V-2.0



8	CLIENT_PS_PRIMARY_PAYER_ ID	NUMERIC	Primary Payer Source ID of this Payer even if the records belongs to Secondary/Tertiary Insurance	1	V-2.0
9	CLIENT_PS_ADDITIONAL_PAY ER_ID	NUMERIC	if the record belongs to Secondary/Tertiary Payer then this will show Secondary/Tertiary Payer Source ID	1	V-2.0
10	CLIENT_PS_UNIQUE_ID	STRING	Patient Patient Unique Identifier. this will be unique for Each Payer Effective Period	P-19787, S-243424, T-6533	V-2.0
11	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
12	CLIENT_ID	NUMERIC	Refers to the Internal ID of Client Master Table	128669	V-2.0
13	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-3.0
14	CLENT_PS_INSURANCE_NO	STRING	Insurance No	IN5245236	V-4.1

### **Order Master**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-3.0
2	ORDER_ID	NUMERIC	Order Internal ID	1005	V-3.0
3	CLIENT_ID	NUMERIC	Client Unique Internal ID	1001	V-3.0
4	INTAKE_ID	NUMERIC	Client Intake ID	1001	V-3.0
5	ORDER_ORDER_NO	STRING	Unique Order No (Order Identifier)	C-1005	V-3.0
6	ORDER_ORDERDATE	DATETIME	Order Date	EX:2016-12-0 9 12:31:31.900	V-3.0
7	ORDER_PHYSICIAN_NAME	STRING	Physician Full Name	Doe, John	V-3.0
8	ORDER_PHYSICIAN_ID	NUMERIC	Physician ID	1001	V-3.0
9	ORDER_PHYSICIAN_OFFICE	STRING	Physician Office name	XYZ Healthcare	V-3.0
10	ORDER_TYPE	STRING	Order Type	Face to Face	V-3.0



11	ORDER_STATUS	STRING	Order Status	Open, Clinician Signed	V-3.0
12	ORDER_AGING_DAYS	NUMERIC	Order Aging Day count	18	V-3.0
13	ORDER_EPISODESTART_DATE	DATETIME	Episode State Date for the order	EX:2016-12-0 9 12:31:31.900	V-3.0
14	ORDER_EPISODEEND_DATE	DATETIME	Episode State End for the order	EX:2016-12-0 9 12:31:31.900	V-3.0
15	ORDER_DELIVERYMETHOD	STRING	Physician Delivery Method	Ex - Mail, Fax	V-3.0
16	ORDER_SENTMETHOD	STRING	Sent Method	Ex - Mail	V-3.0
17	ORDER_PAYROLLCOORDINAT OR	STRING	Payroll Coordinator Name	Doe, John	V-3.0
18	ORDER_LASTFAXEDON	DATETIME	Last Faxed DateTim	EX:2016-12-0 9 12:31:31.900	V-3.0
19	ORDER_SENTDATE	DATETIME	Order Sent Date	EX:2016-12-0 9 12:31:31.900	V-3.0
20	ORDER_PHYSICIAN_SIGNDAT E	DATETIME	Physician Sign Date	EX:2016-12-0 9 12:31:31.900	V-3.0
21	ORDER_RECEIVEDFROMPHY_ DATE	DATETIME	Received From Physician Date	EX:2016-12-0 9 12:31:31.900	V-3.0
22	ORDER_NOTES	STRING	Notes	Free text	V-3.0
23	ORDER_FOLLOWUP_DATE	DATETIME	Order Follow Up Date	EX:2016-12-0 9 12:31:31.900	V-3.0
24	ORDER_PHYSICIAN_SIGNDOC _RECEIVED	STRING	Whether Physician Sign Received or not	Yes, No, Empty	V-3.0
25	ORDER_APPROVED_DATE	DATETIME	Order Approved Date	EX:2016-12-0 9 12:31:31.900	V-3.0
26	ORDER_APPROVER_NAME	STRING	Order Approver Name	Doe, John	V-3.0
27	ORDER_MISSEDVISIT_REASO N	STRING	Missed Visit Reason		V-3.0
28	ORDER_CREATEDON	DATETIME	Order Created Date	EX:2016-12-0 9 12:31:31.900	V-3.0



29	ORDER_CREATEDBY	NUMERIC	Employee ID of the User who created this Order	1	V-3.0
30	ORDER_REQUESTED_CLINICI AN	STRING	Requested Clinician Full Name	Doe, Jane	V-3.0
31	ORDER_PAYER_ID	NUMERIC	Payer ID	1	V-3.0
32	ORDER_CLIENT_STATUS	STRING	Client Status	Discharged, Pending SOC, Active	V-3.0
33	ORDER_EPISODE_NUMBER	NUMERIC	Episode Number	1	V-3.0
34	ORDER_POC_SEQNO	NUMERIC	POC Sequence Number	1	V-3.0
35	ORDER_POC_STARTDATE	DATETIME	POC Start Date	EX:2016-12-0 9 00:00:00.000	V-3.0
36	ORDER_POC_ENDDATE	DATETIME	POC End Date	EX:2016-12-0 9 00:00:00.000	V-3.0
37	ORDER_IS_APPROVED	BOOLEAN	This Flag will identify whether Order is approved	True False	V-3.0
38	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-0 9 12:31:31.900	V-3.0
39	ORDER_IS_PHYSIGNREQUIRE D	BOOLEAN	This Flag will identify whether Physician Signature is Required	True, False	V-4.0
*	Physician Master				
	Field Name	Field Type	Description	Evample	Version

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-2.0
2	PHYSICIAN_ID	NUMERIC	Physician Internal ID	1001	V-2.0
3	PHY_SALES_PERSON_ID	NUMERIC	Salesperson Internal ID	1002	V-2.0
4	PHY_FIRST_NAME	STRING	First Name	John	V-2.0
5	PHY_LAST_NAME	STRING	Last Name	Doe	V-2.0
6	PHY_MIDDLE_NAME	STRING	Middle Name	М	V-2.0



	I	I	I	I	
7	PHY_STATUS	STRING	Status	Active, Terminated, InActive	V-2.0
8	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.90 0	V-3.0
10	PHY_NPI	STRING	Physician NPI No#	1234567890	V-4.4
11	PHY_TITLE	STRING	Physician Title	MD	V-4.4.1
12	PHY_EXTERNAL_ID	STRING	Physician ID Assigned by Agency	P1245	V-4.4.1
13	PHY_LICENSENO	STRING	License Number	M2891	V-4.4.1
14	PHY_LICENSEEXPIRYDATE	DATETIME	License Expiry Date	2023-06-23 00:00:00.00 0	V-4.4.1
15	PHY_UPIN	STRING	Unique Physician Identification Number (UPIN)		V-4.4.1
16	PHY_TPI	STRING	TPI Number		V-4.4.1
17	PHY_TAXONOMYCODE	STRING	Taxonomy Code	207RI0200X	V-4.4.1
18	PHY_PECOSENROLLED	STRING	PECOS enrolled Status	Yes, No	V-4.4.1
19	PHY_ADDRESS_1	STRING	Address Line 1	101 E. Park Blvd.	V-4.4.1
20	PHY_ADDRESS_2	STRING	Address Line 2	Suite 821	V-4.4.1
21	PHY_ZIP	STRING	Zip Code	75074	V-4.4.1
22	PHY_CITY	STRING	City	Dallas	V-4.4.1
23	PHY_STATE	STRING	State Code	TX	V-4.4.1
24	PHY_MOBILE	STRING	Mobile No.	(408) 615-8880	V-4.4.1
25	PHY_PHONE	STRING	Phone No.	(408) 615-8880	V-4.4.1
26	PHY_EMAIL	STRING	Email	john@kanti me.com	V-4.4.1
27	PHY_FAX	STRING	Fax No.	(408) 615-8880	V-4.4.1
28	PHY_SPECIALIZATION	STRING	Physician Specialization	General Surgery	V-4.4.1
29	PHY_CATEGORY	STRING	Physician Category		V-4.4.1



### **\( \)** Caregiver Teams

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique ID of an HH Agency	Records belonging to a agency will have same ID, Ex: 101	V-2.0
2	TEAM_ID	NUMERIC	Unique Team ID of the Caregiver	1001	V-2.0
3	CAREGIVER_ID	NUMERIC	unique ID of the Caregiver	1	V-2.0
4	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Record Last Modified Time	2022-07-07 16:01:08.017	V-3.0

#### **PPS Pricer Master**

	Field Name	Field Type	Description	Example	Version
1	PPS_CLIENT_ID	NUMERIC	Client ID		V-4.0
2	PPS_EPISODE_ID	NUMERIC	Episode ID (Internal)		V-4.0
3	PPS_EPISODE_PERIOD	STRING	Episode Period	1/1/2020-6/30 /2020	V-4.0
4	PPS_PRIMARY_DIAGNOSIS	STRING	Primary Diagnosis		V-4.0
5	PPS_PRIMARY_PAYER	STRING	Primary Payer		V-4.0
6	PPS_OASIS_CLINICIAN_NAME	STRING	OASIS clinician Name		V-4.0
7	PPS_CFS	STRING	CFS		V-4.0
8	PPS_HIPPS_INITIAL	STRING	Initial HIPPS		V-4.0
9	PPS_HIPPS_AMT_INITIAL	NUMERIC	Initial HIPPS Amount		V-4.0
10	PPS_HIPPS_FINAL	NUMERIC	Final HIPPS		V-4.0
11	PPS_HIPPS_AMT_FINAL	NUMERIC	Final HIPPS Amount		V-4.0



12	PPS_RAP_CLAIMID	NUMERIC	RAP Claim ID		V-4.0
13	PPS_RAP_INVOICE_NUMBER	STRING	RAP Invoice Number		V-4.0
14	PPS RAP DATE	DATETIME	RAP Date		V-4.0
15	PPS_RAP_AMT	NUMERIC	RAP Amount		V-4.0
16	PPS_RAP_BALANCE_AMT	NUMERIC	RAP Balance Amount		V-4.0
17	PPS_RAP_PAID_AMT	NUMERIC	RAP Paid Amount		V-4.0
18	PPS_RAP_ADJUST_AMT	NUMERIC	RAP Adjustment Amount	(	V-4.0
19	PPS_EOE_CLAIMID	NUMERIC	EOE Claim ID		V-4.0
20	PPS_EOE_INVOICE_NUMBER	STRING	EOE Invoice Number		V-4.0
21	PPS_EOE_DATE	DATETIME	EOE Date	7	V-4.0
22	PPS_EOE_AMT	NUMERIC	EOE Amount		V-4.0
23	PPS_EOE_BALANCE_AMT	NUMERIC	EOE Balance Amount		V-4.0
24	PPS_EOE_PAID_AMT	NUMERIC	EOE Paid Date		V-4.0
25	PPS_EOE_ADJUST_AMT	DATETIME	EOE Adjustment Amount		V-4.0
26	PPS_REVENUE_AMT	NUMERIC	Revenue		V-4.0
27	PPS_PROFIT_AMT	NUMERIC	Profit Amount		V-4.0
28	PPS_EXPENSE_AMT	NUMERIC	Expense		V-4.0
29	PPS_GROSSMARGIN	NUMERIC	Gross Margin		V-4.0
30	PPS_ASSESSMENT_TYPE	STRING	Assessment Type	SOC, RECERT	V-4.0
31	PPS_ASSESSMENT_DATE	DATETIME	Assessment Date		V-4.0
32	PPS_EPISODE_TYPE	STRING	Episode Type	Regular	V-4.0
33	PPS_SOCVISIT_COMPLETED	NUMERIC	Total Completed SOC Visits		V-4.0
34	PPS_ROCVISIT_COMPLETED	NUMERIC	Total Completed ROC Visits		V-4.0
35	PPS_RECERTVISIT_COMPLETED	NUMERIC	Total Completed RECERT Visits		V-4.0
36	PPS_EVALVISIT_COMPLETED	NUMERIC	Total Completed Evaluation Visits		V-4.0
37	PPS_REGULARVISIT_COMPLETE D	NUMERIC	Total Completed Regular Visits		V-4.0
38	PPS_TRANSDISCHVISIT_COMPL ETED	NUMERIC	Total Completed Transfer/Discharged Visits		V-4.0



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39	PPS_M2200	NUMERIC	M2200	V-4.0
40	PPS_RAP_BALANCE	NUMERIC	RAP Balance Amount	V-4.0
41	PPS_EOE_BALANCE	NUMERIC	EOE Balance Amount	V-4.0
42	PPS_SN_PLANNED	NUMERIC	Total Planned SN Visits	V-4.0
43	PPS_PT_PLANNED	NUMERIC	Total Planned PT Visits	V-4.0
44	PPS_OT_PLANNED	NUMERIC	Total Planned OT Visits	V-4.0
45	PPS_ST_PLANNED	NUMERIC	Total Planned PT Visits	V-4.0
46	PPS_MSW_PLANNED	NUMERIC	Total Planned MSW Visits	V-4.0
47	PPS_AIDE_PLANNED	NUMERIC	Total Planned AIDE Visits	V-4.0
48	PPS_MHRN_PLANNED	NUMERIC	Total Planned MHRN Visits	V-4.0
49	PPS_TOTAL_PLANNED	NUMERIC	Total Planned Visits	V-4.0
50	PPS_SN_MISSED	NUMERIC	Total Missed SN Visits	V-4.0
51	PPS_PT_MISSED	NUMERIC	Total Missed PT Visits	V-4.0
52	PPS_OT_MISSED	NUMERIC	Total Missed OT Visits	V-4.0
53	PPS_ST_MISSED	NUMERIC	Total Missed ST Visits	V-4.0
54	PPS_MSW_MISSED	NUMERIC	Total Missed MSW Visits	V-4.0
55	PPS_AIDE_MISSED	NUMERIC	Total Missed Aide Visits	V-4.0
56	PPS_MHRN_MISSED	NUMERIC	Total Missed MHRN Visits	V-4.0
57	PPS_TOTAL_MISSED	NUMERIC	Total Missed Visits	V-4.0
58	PPS_SN_COMPLETED	NUMERIC	Total Completed SN Visits	V-4.0
59	PPS_PT_COMPLETED	NUMERIC	Total Completed PT Visits	V-4.0
60	PPS_OT_COMPLETED	NUMERIC	Total Completed OT Visits	V-4.0
61	PPS_ST_COMPLETED	NUMERIC	Total Completed ST Visits	V-4.0
62	PPS_MSW_COMPLETED	NUMERIC	Total Completed MSW Visits	 V-4.0
63	PPS_AIDE_COMPLETED	NUMERIC	Total Completed Aide Visits	V-4.0
64	PPS_MHRN_COMPLETED	NUMERIC	Total Completed MHRN Visits	V-4.0



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65	PPS_TOTAL_COMPLETED	NUMERIC	Total Completed Visits		V-4.0
66	PPS_OASSIS_DATASETID	NUMERIC	OASIS Dataset ID		V-4.0
67	PPS_SUPPLIES_INITIAL_COST	NUMERIC	Supplies Initial Cost		V-4.0
68	PPS_SUPPLIES_FINAL_COST	NUMERIC	Supplied Final Cost		V-4.0
69	PPS_IS_OASIS_DELETED	BOOLEAN	Flag to determine whether Oasis Deleted or Not	True, False	V-4.0
70	PPS_SUBEPISODE_ID	NUMERIC	SubEpisode ID		V-4.0
71	PPS_IS_PDGM	BOOLEAN	Flag to Determine if its a PDGM Episode	True, Episode	V-4.0
72	PPS_INITIAL_30DAY_REVENUE	NUMERIC	Initial 30 Day Revenue		V-4.0
73	PPS_INITIAL_CASEMIXWEIGHT	STRING	Initial Case Mix Weight	7 /	V-4.0
74	PPS_FINAL_30DAY_REVENUE	NUMERIC	Final 30 Day Revenue		V-4.0
75	PPS_FINAL_CASEMIXWEIGHT	STRING	Final Case Mix Weight		V-4.0
76	PPS_WAGEINDEX	NUMERIC	Wage Index		V-4.0
77	PPS_POCTYPE	STRING	Plan of Care Type		V-4.0
78	PPS_CLINICALGROUP	STRING	Clinical Group		V-4.0
79	PPS_COMORBIDITYLEVEL	STRING	Comorbidity Level		V-4.0
80	PPS_FUNCIMPAIRMENTLEVEL	STRING	Functional Impairment Level		V-4.0
81	PPS_EXCLUDEPOC_FINALCLAI M	STRING	Exclude this period of care from billing Final Claim	Yes, No	V-4.0
82	PPS_EXCLUDEPOC_RAPCLAIM	STRING	Exclude this period of care from billing RAP/NOA	Yes, No	V-4.0
83	PPS_ALLOW_NONBILLABLEVIS ITS	STRING	No Billable Visits - Allow to Bill RAP with no Visits	Yes, No	V-4.0
84	PPS_ALLOW_RAPFOR30DAYS	STRING	Allow billing RAPs for both periods of care together	Yes, No	V-4.0
85	PPS_RAP_DUEDATE	DATETIME	RAP Due Date		V-4.0
86	PPS_BILLINGNOTES	STRING	Billing Notes		V-4.0
87	PPS_SALESPERSON	STRING	Sales Person Name		V-4.0
88	PPS_PAYERCODE	STRING	Payer Code		V-4.0
89	PPS_EPISODE_NUMBER	NUMERIC	Episode Number		V-4.0
90	PPS_SUBEPISODE_START_DATE	DATETIME	Sub Episode Start Date		V-4.0
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91	PPS_SUBEPISODE_END_DATE	DATETIME	Sub Episode End Date		V-4.0
92	PPS_SUBEPISODE_SEQNO	NUMERIC	Sub Episode Sequence No		V-4.0
93	PPS_CLIENT_STATUS	STRING	Client Status		V-4.0
94	DAAS_LAST_MODIFIED_TIMES TAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-0 9 12:31:31.900	V-4.0
95	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.0

#### **\( \)** Client Emergency Contacts Master

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.0
2	EC_CLIENT_ID	NUMERIC	Client ID		V-4.0
3	EC_INTAKE_ID	NUMERIC	Intake ID		V-4.0
4	EC_FIRST_NAME	STRING	Contact First Name		V-4.0
5	EC_LAST_NAME	STRING	Contact Last Name		V-4.0
6	EC_RELATION	STRING	Contact Relation with Client		V-4.0
7	EC_PRIORITY	STRING	Contact Priority	Primary, Secondary	V-4.0
8	EC_TELEPHONE	STRING	Telephone#		V-4.0
9	EC_EMAIL	STRING	Email ID		V-4.0
10	DAAS_LAST_MODIFIED_ TIMESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-4.0
11	EC_IS_CLIENT_REPRSEN TATIVE	BOOLEAN	this flag will determine if the emergency contact record belongs to Patient Representative	True False	V-4.1

#### **&** Claim Adjustment Master

	Field Name	Field Type	Description	Example	Version
1	CA_ADJUSTMENT_ID	NUMERIC	Claim Adjustment Unique (Internal) ID	1001	V-4.0
2	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.0



3	CA_CLAIM_ID	NUMERIC	Claim Internal ID	10001	V-4.0
4	CA_CLAIM_DETAIL_ID	NUMERIC	Claim Detail Internal ID	10002	V-4.0
5	CA_AMOUNT	NUMERIC	Adjustment Amount		V-4.0
6	CA_NOTES	STRING	Claim Adjustment Notes		V-4.0
7	CA_TYPE	STRING	Claim Adjustment Type		V-4.0
8	CA_LOCKEDMONTH_DATE	DATETIME	Locked Month (End Date of the Month)		V-4.0
9	CA_TRANSACTION_DATE	DATETIME	Transaction Date		V-4.0
10	CA_ADJUSTMENT_DATE	DATETIME	Adjustment Date	A	V-4.0
11	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-4.0
12	CA_ACCOUNT_TYPE	STRING	Adjustment Account Type	Bad Debt, Sequestration	V-4.1
13	CA_CREATEDON	DATETIME	System Date	EX:2016-12-09 12:31:31.900	V-5.0

#### **\User Master**

	Field Name	Field Type	Description	Example	Version
1	CG_USER_ID	NUMERIC	Unique User ID of the Employee	1	V-4.0
2	AGENCY_ID	NUMERIC	Unique HHA ID	1	V-4.0
3	CAREGIVER_ID	NUMERIC	Employee Internal ID. this will map to CG_EmployeeID from Caregiver Master	1001	V-4.0
4	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-09 12:31:31.900	V-4.0
5	CG_LOGIN_ID	STRING	Employee Login ID	johndoe@kanrad. com	V-4.0

#### **Claim Denials**

	Field Name	Field Type	Description	Example	Version	ı
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1	AGENCY ID	NUMERIC	Unique HHA ID		V-4.1
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2	DENIAL_ID	NUMERIC	Internal ID (Unique)		V-4.1
3	CLIENT_ID	NUMERIC	Client Unique ID (Unique for an Admit)		V-4.1
4	DENIAL_CLAIM_ID	NUMERIC	Denied Claim ID		V-4.1
5	DENIAL_DATE	DATETIME	Denial Date		V-4.1
6	DENIAL_NOTES	STRING	Denial Notes		V-4.1
7	DENIAL_REASON	STRING	Denial Reason		V-4.1
8	DENIAL_STATUS	STRING	Denial Status		V-4.1
9	DENIAL_PAID_DATE	DATETIME	Denial Claim Paid Date		V-4.1
10	DENIAL_PAIDBY_USER_ID	NUMERIC	User ID of the Employee Who Logged Payment		V-4.1
11	DENIAL_CREATEDBY_USER _ID	NUMERIC	User ID of the Employee Who Logged Denial		V-4.1
12	DENIAL_REJECTION_DATE	DATETIME	Denial Rejection Date		V-4.1
13	DENIAL_EOB_DATE	DATETIME	EOB Date		V-4.1
14	DENIAL_LOCKEDMONTH_D ATE	DATETIME	Locked Month End Date		V-4.1
15	DENIAL_BADDEBT_NOTES	STRING	Bad Debt Notes		V-4.1
16	DENIAL_TRANSACTION_DA TE	DATETIME	Transaction Date		V-4.1
17	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-1 2-09 12:31:31.9 00	V-4.1

# **\rightarrow** Payment Master

	Field Name	Field Type	Description	Example	Version
1	PAYMENT_ID	NUMERIC	Internal ID (Unique)		V-4.1
2	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
3	PAYMENT_AMOUNT	NUMERIC	Payment Amount		V-4.1
4	PAYMENT_DATE	DATETIME	Payment Date		V-4.1
5	PAYMENT_METHOD	STRING	Payment Method		V-4.1



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6	PAYMENT_REF_NO	STRING	Payment Reference Number		V-4.1
7	PAYMENT_DEPOSIT_DATE	DATETIME	Deposit Date		V-4.1
8	PAYMENT_PAYMENT_SOUR CE_ID	NUMERIC	Payer Source ID		V-4.1
9	PAYMENT_NUMBER	STRING	Payment Number		V-4.1
10	PAYMENT_BAL_AMT	NUMERIC	Balance Amount		V-4.1
11	PAYMENT_COMMENTS	STRING	Comments		V-4.1
12	CLIENT_ID	NUMERIC	Client ID → when Payment done Client Invoices		V-4.1
13	PAYMENT_CHECK_DATE	DATETIME	Check Date	A	V-4.1
14	PAYMENT_PAYER_GROUP	STRING	Payer Group Name	7 /	V-4.1
15	PAYMENT_REC_LOCATION	NUMERIC	Branch ID		V-4.1
16	PAYMENT_UNAPPLIED_CRE DIT_BAL	NUMERIC	Unapplied Credit Balance		V-4.1
17	PAYMENT_PROVIDER_ADJU STMENT	NUMERIC	Provider Adjustment Amount		V-4.1
18	PAYMENT_LEGACY_ACC_A MT	NUMERIC	Legacy Account Amount		V-4.1
19	PAYMENT_ACCOUNT_ID	NUMERIC	Payment Account ID		V-4.1
20	PAYMENT_TRANSACTION_D ATE	DATETIME	Payment Transaction Date		V-4.1
21	PAYMENT_ROUNDED_AMT	NUMERIC	Rounded amount		V-4.1
22	PAYMENT_ADDEDBY_EMP_ NAME	STRING	Employee Name who logged the payment		V-4.1
23	PAYMENT_ADDEDBY_USER _ID	NUMERIC	User ID of the Employee who logged the Payment		V-4.1
24	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-1 2-09 12:31:31.9 00	V-4.1

### **Employee Timesheet**

		Field Name	Field Type	Description	Example	Version
1	l	ETS_SERVICE_UNIQUE_ID	NUMERIC	Employee Time Sheet Internal ID		V-4.1



2	ETS_TIMESHEET_ID	NUMERIC	Employee TimeSheet ID		V-4.1
3	ETS_SERVICE_ID	NUMERIC	Employee Time Sheet Service ID		V-4.1
4	ETS_EMPLOYEE_ID	NUMERIC	Employee ID		V-4.1
5	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
6	ETS_TIMESHEET_DATE	DATETIME	TimeSheet Date		V-4.1
7	ETS_CHECKIN_TIME	DATETIME	Check In Time		V-4.1
8	ETS_CHECKOUT_TIME	NUMERIC	Checkout Time		V-4.1
9	ETS_EDITED_HRS	NUMERIC	Edited Hours		V-4.1
10	ETS_CREATEDBY_USER_ID	NUMERIC	User ID of the Employee who Created the Timesheet		V-4.1
11	ETS_CREATED_DATE	DATETIME	TimeSheet Created Date		V-4.1
12	ETS_STATUS	STRING	Status		V-4.1
13	ETS_IS_PAID	STRING	This Flag will Determine whether Timesheet is Paid or not		V-4.1
14	ETS_MILES	NUMERIC	Miles		V-4.1
15	ETS_NOTES	STRING	Notes		V-4.1
16	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.900	V-4.1
17	ETS_SERVICE_CREATEDBY_ USER_ID	NUMERIC	User ID of the Employee who created TimeSheet Service		V-4.1
18	ETS_SERVICE_CREATED_DA TE	DATETIME	Timesheet Service Created Date		V-4.1

# **Authorization Services**

	Field Name	Field Type	Description	Example	Version
1	AUTH_SERVICE_INTERNAL_I D	NUMERIC	Authorization Service ID		V-4.1
2	AUTH_PAYMENT_SERVICE_ID	NUMERIC	Payment Service ID		V-4.1
3	AUTH_CREATED_DATE	DATETIME	Authorization Created Date		V-4.1
4	AUTH_AUTHORIZATION_ID	NUMERIC	Authorization ID ()		V-4.1
5	AUTH_SERVICE_ID	NUMERIC	Authorization Service ID		V-4.1



6	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
7	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-0 9 12:31:31.900	V-4.1

#### **Referral Source**

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
2	RS_SOURCE_ID	NUMERIC	Referral Source Unique (internal) ID	1	V-4.1
3	AGENCY_BRANCH_ID	NUMERIC	Branch ID	1	V-4.1
4	RS_NAME	STRING	Source Name		V-4.1
5	RS_ADMISSION_SOURCE	NUMERIC	Admission Source ID		V-4.1
6	RS_ADDRESS_LINE1	STRING	Address Line 1		V-4.1
7	RS_ADDRESS_LINE2	STRING	Address Line 2		V-4.1
9	RS_STATE	STRING	State		V-4.1
10	RS_ZIP	STRING	Zip Code		V-4.1
11	RS_PHONE_NO	STRING	Phone Number		V-4.1
12	RS_MOBILE_NO	STRING	Mobile Number		V-4.1
13	RS_CONTACT_NAME	STRING	Contact Person Name		V-4.1
14	RS_CONTAXT_PHONE	STRING	Contact Person Phone#		V-4.1
15	RS_SALESPERSON_ID	NUMERIC	Sales Person ID		V-4.1
16	RS_CATEGORY	STRING	Category	Facility	V-4.1
17	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-1 2-09 12:31:31.9 00	V-4.1

### **\rightarrow** Claim Denied Visits

	Field Name	Field Type	Description	Example	Version
1	CDV_VISIT_ID	NUMERIC	Denied Visit (Internal) Unique ID		V-4.1



2	ACENCY ID	NUMERIC	Unique IIIIA ID	276	V-4.1
2	AGENCY_ID		Unique HHA ID	270	
3	CDV_CLIENT_ID	NUMERIC	Client ID		V-4.1
4	CDV_CLAIM_ID	NUMERIC	Claim ID		V-4.1
5	CDV_PAYER_ID	NUMERIC	PayerSource ID		V-4.1
6	CDV_CLAIMDETAIL_ID	NUMERIC	Claim Line Item ID		V-4.1
7	CDV_NOTES	STRING	Denial Notes		V-4.1
8	CDV_CODE	STRING	Denial Code		V-4.1
9	CDV_IS_MARKEDFOR_REBILL	BOOLEAN	this flag will determine whether VIsits Marked For Rebill	True False	V-4.1
10	CDV_IS_READYFOR_REBIL L	BOOLEAN	This Flag will Determine whether Denied Visit is Ready for Rebill		V-4.1
11	CDV_REV_CODE	STRING	Revenue Code		V-4.1
12	CDV_GCODE	STRING	G Code		V-4.1
13	CDV_MODIFIER1	STRING	Modifier 1		V-4.1
14	CDV_MODIFIER2	STRING	Modifier 2		V-4.1
15	CDV_MODIFIER3	STRING	Modified 3		V-4.1
16	CDV_MODIFIER4	STRING	Modifier 4		V-4.1
17	CDV_SERVICEUNITS	NUMERIC	Units		V-4.1
18	CDV_IS_BILLRATEHOURLY	BOOLEAN	This Flag will Determine whether the Bill Rate is Hourly		V-4.1
19	CDV_IS_UNITBASEDBILLIN G	BOOLEAN	This Flag will Determine whether its Unit Based Billing		V-4.1
20	CDV_BILLRATE	NUMERIC	Bill Rate	250.00	V-4.1
21	CDV_TOTALAMOUNT	NUMERIC	Total Amount	500.00	V-4.1
22	CDV_IS_CONT_BILLRATEH OURLY	BOOLEAN	This Flag will Determine whether the Contractual Bill Rate is Hourly		V-4.1
23	CDV_IS_CONT_UNITBASED BILLING	BOOLEAN	This Flag will Determine whether contractual billing is Unit Based		V-4.1
24	CDV_CONT_RATE	NUMERIC	Contractual Rate	250.00	V-4.1
25	CDV_CONT_AMT	NUMERIC	Contractual Amount	500.00	V-4.1
26	CDV_BASERATE	NUMERIC	Base Rate		V-4.1
27	CDV_STATUS	STRING	Status	Open Rebilled	V-4.1
28	CDV_REBILLED_CLAIM_ID	NUMERIC	Rebilled Claim ID	1001	V-4.1



29	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12 -09 12:31:31.90 0	V-4.1	
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# **\rightarrow** PaymentDepositReceiptdetails

	Field Name	Field Type	Description	Example	Version
1	RECPDETAIL_ID	NUMERIC	Deposit Receipt Detail (internal) ID	1	V-4.1
2	RECPDETAIL_REC_ID	NUMERIC	Deposit Receipt ID	1	V-4.1
3	RECPDETAIL_PAYMENT_MA STER_ID	NUMERIC	Deposit Receipt Payment ID	1	V-4.1
4	RECPDETAIL_IS_RECONCIL ED	BOOLEAN	This Flag will determine whether the Deposit Receipt Item is Reconciled or not	True False	V-4.1
5	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
6	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12 -09 12:31:31.90 0	V-4.1

# **DepositReceipts**

	Field Name	Field Type	Description	Example	Version
1	RECEIPT_ID	NUMERIC	Deposit Receipt (Internal) ID		V-4.1
2	RECEIPT_NO	STRING	Receipt No		V-4.1
3	RECEIPT_TOTALAMOUNT	NUMERIC	Total Amount		V-4.1
4	RECEIPT_BANKNAME	STRING	Bank Name		V-4.1
5	RECEIPT_DEPOSITDATE	DATETIME	Depositt Date		V-4.1
6	RECEIPT_IS_RECONCILED	BOOLEAN	This Flag will determine whether the Deposit Receipt is Reconciled or not		V-4.1
7	RECEIPT_NOTES	STRING	Receipt Nots		V-4.1
8	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1



9	RECEIPT_CREATOR_USER_ ID	NUMERIC	User ID of the Employee who Created the Receipt		V-4.1
10	RECEIPT_MODIFIEDBY_US ER_ID	NUMERIC	User ID of the Employee who Modified the Receipt		V-4.1
11	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-1 2-09 12:31:31.9 00	V-4.1

#### **AuthorizationWeeklyUtilization**

	Field Name	Field Type	Description	Example	Version
1	AWU_MASTER_ID	NUMERIC	Internal ID		V-4.1
2	AWU_AUTHORIZATION_ID	NUMERIC	Authorization ID		V-4.1
3	AWU_START_DATE	DATETIME	Authorization Utilization Week Start Date	2023-04-01	V-4.1
4	AWU_END_DATE	DATETIME	Authorization Utilization week End Date	2023-03-31	V-4.1
5	AWU_WEEKLYLIMIT	NUMERIC	Authorization Weekly Limit	4	V-4.1
6	AWU_TOTALALLOCATED_I NCLUDING_PLANNED	NUMERIC	Total Auth Allocated Including Planned Visit	4	V-4.1
7	AWU_TOTALALLOCATED_E XCLUDING_PLANNED	NUMERIC	Total Auth Allocated Excluding Planned Visit	1	V-4.1
8	AWU_UTILPERCENTAGE_IN CLUDING_PLANNED	NUMERIC	Total Utilization Percentage Including Planned Visit	100	V-4.1
9	AWU_UTILPERCENTAGE_E XCLUDING_PLANNED	NUMERIC	Total Utilization Percentage Excluding Planned Visit	25	V-4.1
10	AGENCY_ID	NUMERIC	Agency Unique ID	276	V-4.1
11	DAAS_LAST_MODIFIED_TI MESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12-0 9 12:31:31.900	V-4.1





	Field Name	Field Type	Description	Example	Version
1	CDP_PAYMENT_ID	NUMERIC	Claim Line Item Payment (Internal) ID	1	V-4.1
2	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
3	CDP_CLAIM_DETAIL_ID	NUMERIC	Claim Line Item ID	1	V-4.1
4	CDP_PAYMENT_AMT	NUMERIC	Payment Amount	5000.00	V-4.1
5	CDP_CLAIM_ID	NUMERIC	Claim ID	1	V-4.1
6	CDP_TRANSACTION_DATE	DATETIME	Transaction Date	2016-12-09 12:31:31.900	V-4.1
7	CDP_PAYMENT_MASTER_ID	NUMERIC	Payment Master ID	1	V-4.1
8	CDP_RECEIVED_DATE	DATETIME	Payment Received Date	2016-12-09 12:31:31.900	V-4.1
9	DAAS_LAST_MODIFIED_TIM ESTAMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.900	V-4.1
10	CDP_POSTING_PAYMENT_ID	NUMERIC	Claim Posting ID. it will match to CP_CLAIMPAYMENT_ID column of CLAIMPAYMENTS_SVW	EX 101	V-5.1

# **♦** ServiceRateHistoryMaster

	Field Name	Field Type	Description	Example	Version
1	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
2	SERVICERATE_ID	NUMERIC	Service Rate (Internal) ID		V-4.1
3	SERVICERATE_SERVICECODE _ID	NUMERIC	Service ID		V-4.1
4	SERVICERATE_START_DATE	DATETIME	Service Rate Start Date	2016-12-09 00:00:00.000	V-4.1
5	SERVICERATE_END_DATE	DATETIME	Service Rate End Date	2016-12-20 00:00:00.000	V-4.1
6	SERVICERATE_CONTRACTUA L_BILLRATE	NUMERIC	Contractual Bill Rate	100.00	V-4.1



7	SERVICERATE_CONTRACTUA L_BILLMODE	STRING	Contractual Bill Mode	Hourly, Unit Rate FIxed	V-4.1
8	SERVICERATE_UNITTYPE	STRING	Unit Type	FIXED HOURLY	V-4.1
9	SERVICERATE_UNIT	NUMERIC	Unit		V-4.1
10	SERVICERATE_MINUTEINUNI T	NUMERIC	Minutes in Unit		V-4.1
11	DAAS_LAST_MODIFIED_TIME STAMP	DATETIME	Last Modified Time Stamp	EX:2016-12- 09 12:31:31.900	V-4.1

### **ClaimPayments**

	Field Name	Field Type	Description	Example	Version
1	CP_CLAIMPAYMENT_ID	NUMERIC	Claim Payment (Internal) ID		V-4.1
2	DP_CLAIM_ID	NUMERIC	Claim ID		V-4.1
3	AGENCY_ID	NUMERIC	Unique HHA ID	276	V-4.1
4	CP_PAYMENT_ID	NUMERIC	Payment ID		V-4.1
5	CP_PAID_AMOUNT	NUMERIC	Payment Amount		V-4.1
6	CP_NOTES	STRING	Notes		V-4.1
7	CP_TRANSACTION_DATE	DATETIME	Transaction Date		V-4.1
8	CP_CREATOR_ID	NUMERIC	User ID of the Employee who logged the Payment		V-4.1
11	DAAS_LAST_MODIFIED_TIMESTA MP	DATETIME	Last Modified Time Stamp	EX:2016-1 2-09 12:31:31.9 00	V-4.1
12	CP_POSTING_DATE	DATETIME	Payment Posted Date for the Invoice	EX:2016-1 2-09 12:31:31.9 00	V-4.4.1

