Electronic Visit Verification (EVV) Data Submission
Data Field and Error Code Reference Sheet

This reference sheet can be used by provider agencies, fiscal intermediaries, and vendors as well as any staff or administrators before and after submitting EVV data to the NYS EVV Data Aggregator. While this sheet does not include every data field listed in the Interface Control Document (ICD), it does include the data fields that have associated error codes.

Data Validation

Data Field	Data Field Description	Related Error Code(s)	Error Code Description
Transaction ID	The Transaction ID is generated by the EVV system and is unique to an EVV record. This ID cannot be generated outside of the EVV system.	4000	Transaction ID is missing.
		4001	Transaction ID length is invalid.
		4002	URL transaction ID does not match payload transaction ID.
Member ID	The Member ID is a unique identifier assigned to each Medicaid member by either the Welfare Management System (WMS) or by New York State of Health (NYSoH).	4003	Member ID is missing.
		4004	Member ID not found on eMedNY.
		4005	Member ID failed validation check.
Date of Birth	The date of birth of the member who received the service.	4006	Date of birth missing.
		4007	Date of birth format is invalid.
		4008	Date of birth cannot be greater than the current date.
		4045	Date of birth does not match the date of birth found on eMedNY.
NPI	The National Provider Identifier (NPI) is a unique ID assigned to each provider by the Center for Medicare & Medicaid Services (CMS).	4009	NPI or MMIS ID is missing.
		4010	NPI format is invalid.
		4011	NPI failed validation check.
		4046	NPI and MMIS ID combination not found on eMedNY.
MMIS ID	The Medicaid Management Information System (MMIS) ID is a unique number generated by eMedNY for each provider who has enrolled to provide services to Medicaid program members.	4009	NPI or MMIS ID is missing.
		4012	MMIS ID format is invalid.
		4013	MMIS ID failed validation check.
		4014	MMIS ID is inactive.
		4046	NPI and MMIS ID combination not found on eMedNY.
Tax Payer ID	The Tax Payer ID is the Federal Employer Identification Number (FEIN).	4015	Taxpayer ID is missing.
		4016	Taxpayer ID format is invalid.
Rate Code	The Rate Code specifies the medical service provided and its rate reimbursement. The Rate Code is required if a Procedure Code is not included.	4017	Rate code format is invalid.
		4018	Rate code is invalid.
		4019	Both rate code and procedure code are missing; at least one is required.
Procedure Code	The Procedure Code specifies the medical service provided and is required if a Rate Code is not included.	4019	Both rate code and procedure code are missing; at least one is required.
		4020	Procedure code is an invalid length.
		4021	Procedure code is invalid.
Modifier	The Modifier further specifies the medical service provided by modifying a Procedure Code.	4022	Modifier code is an invalid length.
		4023	Modifier code is invalid.
Service Start Date/Time	This is the date and time the member's service began.	4024	Service start date/time is missing.
		4025	Service start date/time format is invalid.
		4026	Service start date/time cannot be greater than the current date.
Service End Date/Time	This is the date and time the member's service ended.	4027	Service end date/time is missing.
		4028	Service end date/time format is invalid.
		4029	Service end date/time must be greater than service start date/time.
		4030	Service end date/time cannot be greater than the current date.
Service Start Location	This is the location where the member's service began. Allowed values are "Home" and "Community."	4031	Service start location code is missing.
		4047	Service start location code is invalid.
Service End Location	This is the location where the member's service ended. Allowed values are "Home" and "Community."	4048	Service end location code is missing.
		4049	Service end location code is invalid.
Service Provider First Name	This is the caregiver's first name and should match all employment records.	4032	Service provider's first name is missing.
Service Provider Last Name	This is the caregiver's last name and should match all employment records.	4033	Service provider's last name is missing.
Service Provider Phone Number	This is the caregiver's phone number.	4034	Service provider's phone number format is invalid.
Caregiver ID	The Caregiver ID is unique to each caregiver.	4035	Caregiver ID is missing.
		4036	Caregiver ID length is invalid.
Provider Address	This must include the provider's most current street address, city, state, and zip code.	4039	Address is missing.
		4040	City is missing.
		4041	State is missing.
		4042	State format is invalid.
		4043	Zip code is missing.
		4044	Zip code format is invalid.