



Technical Specifications Document

OMAP PH MCO EVV Authorization Process V1.4

Version # : 1.4
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Summary of PH MCO Auth File Process Document Changes Detail:

Document Version	Date	Detailed Description of Change
1.0	05/15/2020	Original Document
1.1	06/08/2020	Updated ProviderQualifier and ProviderIdentifier throughout the specifications to use 10-digit NPI.
1.2	08/26/2020	Incorporated timing information regarding Auth Error and Control Files and expectations for fields marked "Omit" in the technical specs. Reflected expected value for AuthorizationLimitType is "N". Updated valid procedure codes for personal care services are only S9122 and G0156. Added additional errors and page numbers. Updated vendor name from DXC to Gainwell Technologies.
1.3	06/09/2021	Corrected "G0159" to G0156 in Appendix A in the AuthorizationServiceID (Index 9) Description.
1.4	03/23/2022	Update accepted PCS service codes to add T1019. Updated payer name from Gateway Health Plan to Highmark WholeCare.

- **Data Elements Being Sent:** Attached is the DHS Authorization Technical Specifications and addendum documentation identifying all required data elements (see Appendices A and B)
- **File Format:** DSV (Delimiter-Separated Values) with pipe (|) delimiter character.
- **Type of Files to be sent to SeGOV by the MCO:**
 - Full Service Authorization File (see Appendices A and E)
 - Outbound Control File (see Appendix F)
- **Type of Files to be received from SeGOV by the MCO:**
 - Full Service Error Authorization File (if any) (see Appendices C, D and G)
 - Inbound Control File (see Appendix F)
- **Method of MCO Auth File and Error File Transmission:**
 - MCO will continue to place the Auth File in the current folder that is used for their 837 claims batch submission.
 - SeGOV will be used to send and receive Auth and Error files along with their control files.
 - For testing purpose only, may send/receive files via email if SeGOV is not setup on time to process inbound/outbound files.
- **File Transmission Frequency:**
 - Full Service Authorization File and Outbound Control File: Daily full file, 7 days a week.
*Note: If a daily file is not received, the most recent daily file will be maintained.
 - Error Authorization File and Inbound Control Files: Sent daily, as appropriate. Transfer the files to SeGOV will be before 10 AM daily.
- **File Submission Deadline:**
 - SeGOV must have the MCO Auth files available by 1AM.
- **Auth File Selection and Generation Criteria:**
 - Include Authorizations from the run date, a year prior and a year in future. For ex: if the extract is run for 05/14/2020, the look up dates are 05/14/2019 to 05/14/2021.
 - The Authorization must be in an approved status and the effective start date must be within the two (2) year timeframe (05/14/2019 to 05/14/2021) **OR** the effective end date must be within the two (2) year timeframe (05/14/2019 to 05/14/2021).
 - Duplicate records must be removed prior to the submission of the Auth File.
 - The file will contain appropriate authorizations for all plan codes associated with the MCO in one file.

Assumptions

- MCOs are not to submit auth files with procedure/service codes beyond those required by CURES Act for PCS (See Appendix A).
- All required data elements must be present in the file.

Appendix A: PA-DHS EVV Authorization File Tech Spec Addendum

Pennsylvania DHS Specific Requirements for Authorization API

The following tables reflect all required fields in the Authorization Specification to be sent to Gainwell Technologies.

Index	Element	Description	Max Length	Type	Required	Expected Value
1	PayerID	Sandata EVV assigned ID for the payer. Payer ID is determined during the implementation process.	64	String	Yes	See Appendix B PayerID column
2	PayerProgram	If applicable, the program to which this client belongs. Potential use and list of values to be determined during implementation.	9	String	Yes	See Appendix B Payer Program column
4	ClientQualifier	Value being sent to unique identify the client. Values: ClientSSN; ClientOtherID, ClientCustomID.	30	String	Yes	ClientCustomID
5	ClientIdentifier	ID used to uniquely identify the client. ID type identified by ClientQualifier.	64	String	Yes	9-digit Medicaid ID without Check Digit Format: #####
6	ProviderQualifier	Identifier being sent as the unique identifier for the provider. Values: SandataID, NPI, API, MedicaidID, TaxID, Taxonomy, Legacy, Other.	30	String	Yes	NPI
7	ProviderID	ID to uniquely identify the provider. ID type identified by ProviderQualifier.	64	String	Yes	10-digit NPI Format: ##### Note: MedicaidID, TaxID, Taxonomy, and Other Provider IDs are <u>not</u> accepted.
8	AuthorizationReferenceNumber	Unique identifier for the authorization generated by the payer's source system.	30	String	Yes	
9	AuthorizationServiceID	The procedure or service to be performed. This will correspond to a HCPCS code to be used in billing. These values will be established as part of the implementation process. Only valid Procedure Codes for personal care services (S9122, G0156, and T1019) will be accepted.	5	String	Yes	HCPCS Code

Index	Element	Description	Max Length	Type	Required	Expected Value
10	Modifier1	First modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Optional	Provide when required; otherwise pass NULL (i.e., report as empty field: only a single pipe ()) If sending a modifier, must be 2 characters
11	Modifier2	Second modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Optional	Provide when required; otherwise pass NULL (i.e., report as empty field: only a single pipe ()) If sending a modifier, must be 2 characters
12	Modifier3	Third modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Optional	Provide when required; otherwise pass NULL (i.e., report as empty field: only a single pipe ()) If sending a modifier, must be 2 characters
13	Modifier4	Forth modifier if applicable. Authorizations may include modifier information to be used for service provision and billing.	2	String	Optional	Provide when required; otherwise pass NULL (i.e.,

						report as empty field: only a single pipe ()
						If sending a modifier, must be 2 characters
Index	Element	Description	Max Length	Type	Required	Expected Value
14	AuthorizationAmountType	The type of authorized amounts being supplied. Values: H = Hourly, V = Visit, U = Unit, M = Monetary.	1	String	Yes	U
15	AuthorizationLimit	The limit value for the sublimit being specified. Required if this segment is provided. Client may send this attribute, but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	5	String	Yes	Maximum number of units
16	AuthorizationStartDate	Start date for the authorization.	10	Date	Yes	Format: MM/DD/YYYY
17	AuthorizationEndDate	End Date for the authorization.	10	Date	Yes	Format: MM/DD/YYYY
18	AuthorizationLimitType	If the authorization has sub limits, the type of sub limits being detailed. Values: N = None, S = Specified Schedule, D = Day, W = Week, M = Month, Y = Year. Default = N.	1	String	Yes	N
19	AuthorizationStatus	The status of the authorization. Values: A = Active, I = Inactive, V = Voided, 4 = Suspended. Default = A.	1	String	Yes	A Note: Only send active authorizations.
20	ClientDiagnosisCodeIsPrimary	Indicates that the diagnosis code is the primary code for the client. If more than one code is primary, first value designated as primary will be assumed to be primary. If no value is provided as primary, first value provided will be assumed to be primary. Required if segment is provided. Values: Y, N. Default = N. Client may send this attribute, but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	1	String	Omit Data	Note: Report as empty field: two pipe () characters with nothing between them. Ex. See page 11.
21	ClientDiagnosisCode	The client's diagnosis code in ICD-10 format. Client may send this attribute, but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	10	String	Omit Data	Note: Report as empty field: two pipe () characters with nothing between them. The header values

						should still be provided in the header record. Ex. See page 11.
22	ClientDiagnosisCodeBeginDate	The beginning date associated with the specified diagnosis code. Format YYYY-MM-DD. Client may send this attribute, but it will not be validated or stored in Sandata's DB. This field will not be included in the DW Export as well.	10	Date	Omit Data	Note: Report as empty field: only a single pipe () would be appropriate. The header values should still be provided in the header record. Ex. See page 11.

Appendix B: Physical HealthChoices Managed Care Organization Payers and Programs

MCO	Payer ID	Payer Program
Aetna Better Health	PAABH	43, 50, 53, 56, 59
AmeriHealth	PAAHPH	37, 41, 57
Keystone First	PAKPH	47
Highmark WholeCare	PAGHP	31, 36, 51
Geisinger Health Plan	PAGEIS	44
Health Partners	PAHPP	45
United Healthcare	PAUHC	32, 42, 52
UPMC	PAUPPH	34, 35, 54

Appendix C: Data Element for Auth Error Codes

Element	Error Description
PayerID	PayerID cannot be null nor empty.
PayerID	PayerID length or data type is invalid.
PayerID	PayerID is invalid.
PayerProgram	PayerProgram cannot be null nor empty.
PayerProgram	PayerProgram length or data type is invalid.
PayerProgram	PayerProgram is invalid.
ClientQualifier	ClientQualifier cannot be null nor empty.
ClientQualifier	ClientQualifier length or data type is invalid.
ClientQualifier	ClientQualifier is invalid.
ClientIdentifier	ClientIdentifier cannot be null nor empty.
ClientIdentifier	ClientIdentifier length or data type is invalid.
ClientIdentifier	ClientIdentifier is invalid.
ProviderQualifier	ProviderQualifier cannot be null nor empty.
ProviderQualifier	ProviderQualifier length or data type is invalid.
ProviderQualifier	ProviderQualifier is invalid.
ProviderID	ProviderID cannot be null nor empty.
ProviderID	ProviderID length or data type is invalid.
ProviderID	ProviderID is invalid.
AuthorizationReferenceNumber	AuthorizationReferenceNumber cannot be null nor empty.
AuthorizationReferenceNumber	AuthorizationReferenceNumber length or data type is invalid.
AuthorizationServiceID	AuthorizationServiceID cannot be null nor empty.
AuthorizationServiceID	AuthorizationServiceID length or data type is invalid.
AuthorizationServiceID	AuthorizationServiceID is invalid.
Modifier1	Modifier1 length or data type is invalid.
Modifier2	Modifier2 length or data type is invalid.
Modifier3	Modifier3 length or data type is invalid.
Modifier4	Modifier4 length or data type is invalid.
AuthorizationAmountType	AuthorizationAmountType cannot be null nor empty.
AuthorizationAmountType	AuthorizationAmountType length or data type is invalid.
AuthorizationAmountType	AuthorizationAmountType is invalid.
AuthorizationStartDate	AuthorizationStartDate cannot be null nor empty.
AuthorizationStartDate	AuthorizationStartDate length or data type is invalid.
AuthorizationStartDate	AuthorizationStartDate format is invalid.
AuthorizationStartDate	AuthorizationStartDate out of range.
AuthorizationEndDate	AuthorizationEndDate cannot be null nor empty.
AuthorizationEndDate	AuthorizationEndDate length or data type is invalid.
AuthorizationEndDate	AuthorizationStartDate format is invalid.
AuthorizationEndDate	AuthorizationEndDate out of range.
AuthorizationLimitType	AuthorizationLimitType cannot be null nor empty.

AuthorizationLimitType	AuthorizationLimitType length or data type is invalid.
AuthorizationLimitType	AuthorizationLimitType is invalid.
AuthorizationStatus	AuthorizationStatus cannot be null nor empty.
AuthorizationStatus	AuthorizationStatus length or data type is invalid.
AuthorizationStatus	AuthorizationStatus is invalid.

Appendix D: File Level Auth Error Codes

Error Description
File name is invalid.
Record count mismatch.

Appendix E: Full Auth File

Note: Please do not submit with <> as part of the file name.

Full Auth file is used to submit auth data/records for consumption by PROMISE. It is a zipped DSV file containing pipe (|) delimiter character.

- **File Naming Convention** for a Full Auth **TEST** file:

- **Full Auth File** for **TEST** environment – MCO to SeGOV
MCO_EVV_PriorAuth_<YYYYMMDD>_Full.T.<PP>.DSV.zip

- **Full Auth File** nomenclature for a **TEST** file

MCO_EVV_PriorAuth_<YYYYMMDD>_Full.T.<PP>.DSV.zip

- YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
- T – Test file
- PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 – Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
- FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
 - [.zip] signifies the compression method

- **File Naming Convention** for a Full Auth **PROD** file:

- **Full Auth File** for **PROD** environment – MCO to SeGOV
MCO_EVV_PriorAuth_<YYYYMMDD>_Full.P.<PP>.DSV.zip

- **Full Auth File** nomenclature for a **PROD** file

MCO_EVV_PriorAuth_<YYYYMMDD>_Full.P.<PP>.DSV.zip

- YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
- P – PROD file
- PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health

- Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
- FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
 - [.zip] signifies the compression method
- **Full Auth File** will contain the column names (See Appendix A) for the header row with pipe (|) delimiter value. **Below example is only a template and not to be used as is.** Please make sure that the column names and the data confirms to the current requirement standards.
- Example of a **Full Auth file**

PayerID|PayerProgram|ClientQualifier|ClientIdentifier|ProviderQualifier|ProviderID|AuthorizationReferenceNumber|AuthorizationServiceID|Modifier1|Modifier2|Modifier3|Modifier4|AuthorizationAmountType|AuthorizationLimit|AuthorizationStartDate|AuthorizationEndDate|AuthorizationLimitType|AuthorizationStatus|ClientDiagnosisCodePrimary|ClientDiagnosisCode|ClientDiagnosisCodeBeginDate

PAABH|43|ClientCustomID|160372932|NPI|1234567890|40188|S9122||||U|100|07/01/2018|06/30/2019|N|A|||

Appendix F: Control Auth Files

Note: <> will not be submitted as part of the file name.

Control file is used as a quality control mechanism to ensure file integrity following transmission. They are DSV files using the pipe (|) delimiter character.

- **File Naming Convention for an Outbound Control TEST Auth file:**
 - **Outbound Control Auth File for TEST environment – MCO to SeGOV**
MCO_EVV_Outbound_ControlFile_<YYYYMMDD>.T.<PP>.DSV
- **Outbound Control Auth File nomenclature for a TEST file**
MCO_EVV_Outbound_ControlFile_<YYYYMMDD>.T.<PP>.DSV
 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - T – TEST file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
 - FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
- **File Naming Convention for an Outbound Control PROD Auth file:**
 - **Outbound Control Auth File for PROD environment – MCO to SeGOV**
MCO_EVV_Outbound_ControlFile_<YYYYMMDD>.P.<PP>.DSV
- **Outbound Control Auth File nomenclature for a PROD file**
MCO_EVV_Outbound_ControlFile_<YYYYMMDD>.P.<PP>.DSV
 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - P – PROD file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan

- Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
- FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
- **Outbound Control Auth file** will contain the following column names for the header row with pipe (|) delimiter value.

"FileName"|"RecordCount"

 - FileName: (See File Naming Convention)
 - RecordCount: Total number of records found in the DSV (not including the header row)
- Example of an **Outbound Control Auth file** containing **TEST** data for plan code 31

"FileName"|"RecordCount"

"MCO_EVV_PriorAuth_20200501_Full.T.31.DSV.zip"|"266"

"MCO_EVV_Outbound_ControlFile_20200501.T.31.DSV"|"2"

(Count 2 represents the number of files that are sent)
- Example of an **Outbound Control Auth file** containing **PROD** data for plan code 31

"FileName"|"RecordCount"

"MCO_EVV_PriorAuth_20200501_Full.P.31.DSV.zip"|"266"

"MCO_EVV_Outbound_ControlFile_20200501.P.31.DSV"|"2"

(Count 2 represents the number of files that are sent)
- **File Naming Convention** for an Inbound Control **TEST** Auth file:
 - **Inbound Control Auth File** for **TEST** environment – SeGOV to MCO
MCO_EVV_Inbound_ControlFile_<YYYYMMDD>.T.<PP>.DSV
- **Inbound Control Auth File** nomenclature for a **TEST** file

MCO_EVV_Inbound_ControlFile_<YYYYMMDD>.T.<PP>.DSV

 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - T – TEST file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan

- Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
- FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
- **File Naming Convention for an Inbound Control PROD Auth file:**
 - **Inbound Control Auth File** for **PROD** environment – SeGOV to MCO
MCO_EVV_Inbound_ControlFile_<YYYYMMDD>.P.<PP>.DSV
- **Inbound Control Auth File** nomenclature for a **PROD** file
MCO_EVV_Inbound_ControlFile_<YYYYMMDD>.P.<PP>.DSV
 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - P – PROD file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
 - FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
- **Inbound Control Auth file** will contain the following column names for the header row with pipe (|) delimiter value.


```
"FileName"|"RecordCount"|"StartDateTime"|"EndDateTime"|"Hash"|"Success
Count"|"Failed Count"
```

 - FileName: (See File Naming Convention)
 - RecordCount: Total number of records found in the DSV (not including the header row)
 - StartDateTime: The start date and military time (GMT time) when the records in the DSV were queried from. (See format in examples below)
 - EndDateTime: The end date and military time (GMT time) when the records in the DSV were queried from. (See format in examples below)
 - Hash: Optional. Will always be empty.
 - Success Count: Total records that were processed successfully
 - Failed Count: Total records that were not processed successfully

- Example of an **Inbound Control Auth file** containing **TEST** data for plan code 31

```
"FileName"|"RecordCount"|"StartDateTime"|"EndDateTime"|"Hash"|"Success
Count"|"Failed Count"
```

```
"MCO_EVV_PriorAuth_20200501_Full.T.31.DSV.zip"|"79334"|"2020-05-
05T09:22:00Z"|"2020-05-05T10:43:50Z"|"75933"|"3401"
```

- Example of an **Inbound Control Auth file** containing **PROD** data for plan code 31

```
"FileName"|"RecordCount"|"StartDateTime"|"EndDateTime"|"Hash"|"Success
Count"|"Failed Count"
```

```
"MCO_EVV_PriorAuth_20200501_Full.P.31.DSV.zip"|"79334"|"2020-05-
05T09:22:00Z"|"2020-05-05T10:43:50Z"|"75933"|"3401"
```


Appendix G: Error Auth File

Note: <> will not be submitted as part of the file name.

- If there are error(s) processing record(s) within the Auth File, PROMISe will create an Auth Error File with error record(s) with the description of the error. The Auth Error File is then pushed to SeGOV along with the Inbound control file for that plan code.
- In case of no errors, only the Inbound control file will be pushed to SeGOV for that plan code.
- **File Naming Convention for an Error Auth TEST file:**
 - **Error Auth File for TEST environment – SeGOV to MCO**
MCO_EVV_PriorAuth_Error_<YYYYMMDD>_Full.T.<PP>.DSV.zip
- **Error Auth File nomenclature for a TEST file**
MCO_EVV_PriorAuth_Error_<YYYYMMDD>_Full.T.<PP>.DSV.zip
 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - T – TEST file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.
 - Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
 - FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
 - [.zip] signifies the compression method
- **File Naming Convention for an Error Auth PROD file:**
 - **Error Auth File for PROD environment – SeGOV to MCO**
MCO_EVV_PriorAuth_Error_<YYYYMMDD>_Full.P.<PP>.DSV.zip
- **Error Auth File nomenclature for a PROD file**
MCO_EVV_PriorAuth_Error_<YYYYMMDD>_Full.P.<PP>.DSV.zip
 - YYYYMMDD - four-digit year, two-digit month and two-digit day that the file was created
 - P – PROD file
 - PP – Plan Code – Use the appropriate plan code assigned for your plan.

- Plan Code 31 - Highmark WholeCare
 - Plan Code 32 - United HealthCare
 - Plan Code 34 - UPMC
 - Plan Code 43 - Aetna Better Health
 - Plan Code 44 - Geisinger Health Plan
 - Plan Code 45 - Health Partners
 - Plan Code 47 - Keystone
 - Plan Code 57 - AmeriHealth Caritas
- FileExtensions
 - [.DSV] signifies a Delimiter-Separated Values
 - [.zip] signifies the compression method
- **Error Auth File** will contain the column names (See Appendix A) for the header row with pipe (|) delimiter value. **Below example is only a template and not to be used as is.** The column names and the data will confirm to the current requirement standards.

- Example of an **Error Auth File when there is an invalid record (See Appendix C)** containing **TEST** data for plan code 31

```
"PayerID"|"PayerProgram"|"ClientQualifier"|"ClientIdentifier"|"ProviderQualifier"|"ProviderID"|"AuthorizationReferenceNumber"|"AuthorizationServiceID"|"Modifier1"|"Modifier2"|"Modifier3"|"Modifier4"|"AuthorizationAmountType"|"AuthorizationLimit"|"AuthorizationStartDate"|"AuthorizationEndDate"|"AuthorizationLimitType"|"AuthorizationStatus"|"ClientDiagnosisCodePrimary"|"ClientDiagnosisCode"|"ClientDiagnosisCodeBeginDate"|"Error Description"
```

```
"PAGHP"|"31"|"ClientCustomID"|"300379045"|"NPI"|"1234567890"|"39888"|"S9122"|"U"|"100"|"07/01/2018"|"6/30/2019"|"N"|"A"|"Y"|"F3011"|"10/20/2017"|"ERROR: AuthorizationEndDate format is incorrect."
```

- Example of an **Inbound Control Auth file when there is an invalid record** containing **TEST** data for plan code 31

```
"FileName"|"RecordCount"|"StartDateTime"|"EndDateTime"|"Hash"|"Success Count"|"Failed Count"
```

```
"MCO_EVV_PriorAuth_20200501_Full.T.31.DSV.zip"|"2"|"2020-05-05T09:22:00Z"|"2020-05-05T10:43:50Z"|"1"|"1"
```

- Example of an **Error Auth File when there is an invalid record (See Appendix C)** containing **PROD** data for plan code 31

```
"PayerID"|"PayerProgram"|"ClientQualifier"|"ClientIdentifier"|"ProviderQualifier"|"ProviderID"|"AuthorizationReferenceNumber"|"AuthorizationServiceID"|"Modifier1"|"Modifier2"|"Modifier3"|"Modifier4"|"AuthorizationAmountType"|"AuthorizationLimit"|"AuthorizationStartDate"|"AuthorizationEndDate"|"AuthorizationLimitType"|"AuthorizationStatus"
```


