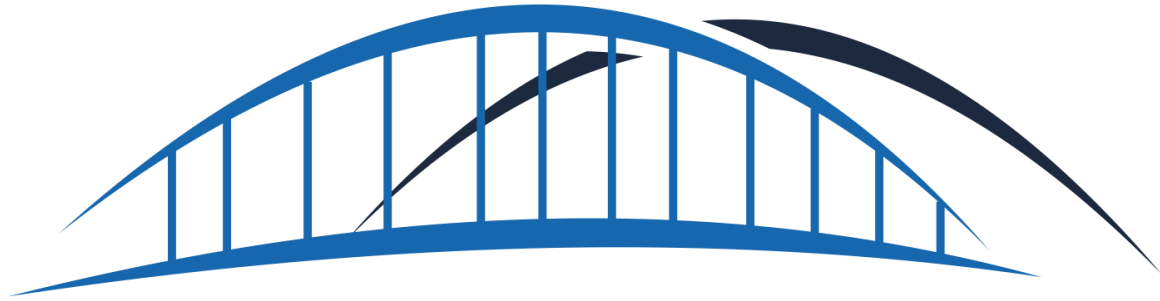




CAREBRIDGE

New Jersey Third-Party EVV Vendor Integration Testing Process Guide



TABLE OF CONTENTS

INTRODUCTION TO CAREBRIDGE INTEGRATION	3
<i>OVERVIEW</i>	<i>3</i>
<i>BEFORE YOU GET STARTED</i>	<i>3</i>
<i>GENERAL TESTING INFORMATION</i>	<i>4</i>
<i>SUMMARY OF CHANGES</i>	<i>5</i>
<i>TEST CASE 1 – CONNECTION TESTING (DEV)</i>	<i>6</i>
<i>TEST CASE 2 – CONNECTION TESTING (PRODUCTION)</i>	<i>7</i>
<i>TEST CASE 3 – SCHEDULED APPOINTMENT</i>	<i>8</i>
<i>TEST CASE 4A AND 4B – SUBMIT COMPLETED VISIT (EVV, IVR)</i>	<i>9</i>
<i>TEST CASE 5 – UPDATE COMPLETED VISIT TO MANUALLY COMPLETE VISIT</i>	<i>11</i>
<i>TEST CASE 6 – SUBMIT LATE COMPLETED VISIT</i>	<i>12</i>
<i>TEST CASE 7 – SUBMIT MISSED COMPLETED VISIT</i>	<i>13</i>
<i>TEST CASE 9 – CANCEL A VISIT</i>	<i>14</i>
<i>TEST CASE 10 – OVERLAPPING VISITS</i>	<i>15</i>
<i>TEST CASE 11 – SUBMIT A CLAIM</i>	<i>17</i>
<i>TEST CASE 12 – CORRECT A CLAIM</i>	<i>19</i>
<i>TEST CASE 13 – VOID A CLAIM</i>	<i>20</i>
<i>TEST CASE 14 – SUBMIT AN EXTERNALLY BILLED CLAIM</i>	<i>21</i>
Appendix A – Testing Checklist	23
Appendix B – Alternative Testing Process	24



INTRODUCTION TO CAREBRIDGE INTEGRATION

OVERVIEW

The purpose of this document is to assist Third Party EVV Vendors in becoming acclimated with and successfully submitting data to CareBridge for purposes of claim generation. In order for a vendor to begin sending production data, they must successfully complete the required tests cases. Once a test case is submitted, a response file should be generated between thirty minutes and one hour indicating all file or data level errors. This document is intended for Technical teams within Third Party EVV Vendors who will be implementing the file exchange process.

BEFORE YOU GET STARTED

In order to initiate the testing process, you will need to complete the following steps:

1. Complete the Third-Party EVV Vendor Intake Form:
<http://evvintegrationform.carebridgehealth.com>
2. Review the CareBridge EVV Integration Guide and Technical Specifications for New Jersey:
<http://evvintegration.carebridgehealth.com/>
3. Send a public key in OpenSSH format (follow instructions below)

Public SSH Key Generation Process

- i. Open Command Prompt in Windows or terminal for Mac/Linux
- ii. Type (or copy) the following:

```
ssh-keygen -t rsa -b 4096
```

- iii. Enter a file name (e.g. public-ssh-key-[organization name])
- iv. (Optional) Enter a password
- v. (Optional) Re-enter password
- vi. Go to the file location where the key was saved and copy the public key. (This will generally be a .pub) file. Send the public key via email to evvintegration@carebridgehealth.com.

DO NOT send the private key.

4. Receive SFTP credentials and connectivity instructions when the mailbox has been configured. This usually occurs within 5 business days.

Note: if you have previously completed the integration process in another state, you will not need to re-send a public key or receive new credentials, but you will still need to complete the vendor intake form and successfully complete test cases below (see Appendix B).



GENERAL TESTING INFORMATION

- CareBridge will provide you test data to use for test cases. If you have credentials, but have not received test data, please reach out to evvintegration@carebridgehealth.com to request test data.
- Unless specified in the specific test case, it is not required to use the same member, provider, and authorization information for all test cases, however it is recommended.
- Vendors should complete the Integration Testing Checklist throughout the course of testing.
 - Checklist can be found in Appendix A. It is also available for download in Excel/PDF at [New Jersey: Third-Party EVV Vendor Integration Testing Process Guide](#)
- Once testing has been completed, please email the completed testing checklist (in Appendix A) to CareBridge for validation.
evvintegration@carebridgehealth.com
- Once CareBridge has reviewed testing results/checklist and has determined that the requirements of the Technical Specifications have been met CareBridge will enable the vendor and associated agencies to submit EVV visit data to the production environment.
- **Note:** specific times provided in test case are given in **Local** time; however, as stated in the technical specification, DateTimes in the inbound data files must be converted to **UTC**. The time difference will be 5-6 hours depending on daylight savings time.
- **For vendors that have previously completed this testing guide in another state, see Appendix B Alternative Testing Process.**
- **For vendors that are testing Home Health related Procedure Codes, you will need to utilize Home Health Procedure Codes for Test Cases.**
- **For Vendors that are testing Personal Care Services related Procedure Codes, you will need to utilize Personal Care Service Procedure Codes for Test Cases.**



SUMMARY OF CHANGES

- Separated Test Cases 5/6 into separate Test Cases (V2)
- **Test Case 11** – When submitting a new ApptID, CheckinMethod and CheckOutMethod were changed to always be M. (V2.1)
- Updated testing dates **(V3)**
- Updated testing dates; Updated Test Case 10; added Test Case 14 **(V4)**



TEST CASE 1 – CONNECTION TESTING (DEV)

Purpose

- To ensure the vendor has the ability to upload files to the dev SFTP site

Test Prerequisites

Vendor credentials provided for the dev SFTP site

Test Data Requirements

None

Action Taken

1. Vendor connects to dev SFTP site
2. Vendor uploads a file including headers only to the dev SFTP site

Expected Outcome

A response file containing headers only is uploaded to the /output folder of dev SFTP site

*Note: This should occur generally within 1 hour of uploading the file.
Reach out to CareBridge if time delay greater than 3 hours.*



TEST CASE 2 – CONNECTION TESTING (PRODUCTION)

Purpose

- To ensure the vendor has the ability to upload files to the prd SFTP site

Test Prerequisites

Vendor credentials provided for prd SFTP sites

Test Data Requirements

None

Action Taken

1. Vendor connects to prd SFTP site
2. Vendor uploads a file including headers only to the prd SFTP site

Expected Outcome

A response file containing headers only is uploaded to the /output folder of prd SFTP site.

*Note: This should occur generally within 1 hour of uploading the file.
Reach out to CareBridge if time delay greater than 3 hours.*



TEST CASE 3 – SCHEDULED APPOINTMENT

Purpose

Horizon and Wellpoint have requested that appointments be sent prior to scheduled visits. If a vendor is able to do so, they must complete this test case. If a vendor cannot send appointments prior to visits, this test case can be omitted.

Test Prerequisites

- Test 1 Complete

Test Data Requirements

- ApptStartDateTime must be 9:00 am local time on July 18, 2026.
- ApptEndDateTime must be 11:00 am local time on July 18, 2026.
- All required fields indicated in the Scheduled Appointment column of the Appointments / Visits Data File Format table must be included.
- Since the required scheduled DateTime is in the past, missed visit reasons and actions should be included.

Action Taken

1. Upload a file with a scheduled appointment to the dev SFTP site
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. Correct and re-submit file(s) using the same ApptID until all prebilling validation errors are resolved.

Expected Outcome

Vendor receives a response file with no prebilling validation errors corresponding to the ApptID used for the scheduled appointment.

(If response file includes VCR2012, VCR2013, or VCR2023 errors, see note in the section for Test Case 4).



TEST CASE 4A AND 4B – SUBMIT COMPLETED VISIT (EVV, IVR)

Purpose

To ensure that vendors can successfully send completed visits with at least one of the two compliant methods. If the vendor intends to send data using multiple methods, they must complete a test case for each method. Note: if not using all CheckInMethod/CheckOutMethods, you do not need to complete both test cases below.

Test Prerequisites

- Test 1 Complete

Test Data Requirements

4a

- If Test Case 3 was completed, vendor must use the same ApptID as was used in Test Case 3 (for the first CheckInMethod sent).
- ApptStartDateTime must be 9:00 am local time on July 18, 2026.
- ApptEndDateTime must be 11:00 am local time on July 18, 2026.
- CheckInDateTime must be 9:00 am local time on July 18, 2026.
- CheckOutDateTime must be 11:00 am local time on July 18, 2026.
- If vendor system is unable to submit visits in the past for E or I visit types, vendor may use the date that the visit is submitted to CareBridge as the check-in date, but they still must ensure that CheckInDateTime is 9:00 am local time and CheckOutDateTime is 11:00 am local time.
- CheckInMethod should be E or I.
- CheckOutMethod must match CheckInMethod.
- ClaimAction must be null
- All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

4b

- ApptID must be different from Test Case 4a
- ApptStartDateTime must be 9:00 am local time on July 19, 2026.
- ApptEndDateTime must be 11:00 am local time on July 19, 2026.
- CheckInDateTime must be 9:00 am local time on July 19, 2026.
- CheckOutDateTime must be 11:00 am local time on July 19, 2026.
- CheckInMethod should be E or I but different from the method used in 4a.
- If vendor system is unable to submit visits in the past for E or I visit types, vendor may do one of the following:
 - Use the date that the visit is submitted to CareBridge as the check-in date and submit test 4b on a different day than test 4a or
 - Use the date that the visit is submitted to CareBridge as the check-in date and submit the visit for a different member/authorization than test 4a (to avoid potential overlapping visits)
 - In either case they should ensure the CheckInDateTime is 9:00 am local time and CheckOutDateTime is 11:00 am local time.



- CheckOutMethod must match CheckInMethod.
- ClaimAction must be null
- All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

Action Taken

1. Submit a completed visit for each compliant CheckInMethod/CheckOutMethod you intend to use in production (E, I, F)
 - a. The CheckInMethod/CheckOutMethod for the two test sub-cases can be completed in any order.
 - b. One file can be used to complete all three sub-tests.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. Correct and re-send ApptID until all prebilling validation errors are resolved.

Expected Outcome (Vendor)

Vendor receives a response file with no prebilling validation errors corresponding to the ApptID used for each test case.

There are a few common errors that may occur both during the testing process and once data is sent in production. Please see the guidance below for correcting these errors:

Error Code	Long Description	Matching Criteria	Solution
VCR2023	Provider is not associated to the visit	1. ProviderEIN field matches a Tax ID we have received from the MCO 2. ProviderNPI or ProviderAtypicalID field matches an NPI/API we have received from the MCO	1. Confirm the Tax ID and NPI or API have been correctly input into the appropriate fields. 2. If using production data, Providers can also utilize the CareBridge Provider Portal to view the data that has been received from the MCO and ensure accuracy.
VCR2013	Member is not associated to the visit	1. Provider matches 2. MemberMedicaidID matches the Medicaid ID received by the MCO	1. Confirm the member Medicaid ID was input into the MemberMedicaidID field. This should be the actual medicaid ID rather than the MCO member ID. 2. If using production data, Providers can also utilize the CareBridge Provider Portal to view the data that has been received from the MCO and ensure accuracy.
VCR2012	Visit is not associated to an authorization	1. Provider Matches 2. Member Matches 3. AuthRefNumber matches authorization number received from the MCO 4. ServiceCode matches the authorization received from the MCO 5. Modifier 1 and Modifier 2 match authorization received from the MCO (if applicable)	1. Confirm that the appointment does not have an unresolved VCR2013 or VCR2023 error. 2. Confirm AuthRefNumber, ServiceCode, Modifier 1, and Modifier 2 values have been correctly input into the appropriate fields. 3. If using production data, Providers can also utilize the CareBridge Provider Portal to view the data that has been received from the MCO and ensure accuracy.

If the steps above have been attempted without success, please reach out the CareBridge integration team for additional assistance.



TEST CASE 5 – UPDATE COMPLETED VISIT TO MANUALLY COMPLETE VISIT

Purpose

To ensure that vendors can successfully:

- Update a previously sent visit (Test Case 5).
- Send a manually completed visit (Test Case 5).

Test Prerequisites

- Test 4 completed

Test Data Requirements

- Vendor must use the same ApptID as was used in test 4a.
- ApptStartDateTime must be 9:00 am local time on July 18, 2026.
- ApptEndDateTime must be 11:00 am local time on July 18, 2026.
- CheckInDateTime must be 9:15 am local time on July 18, 2026.
- CheckOutDateTime must be 11:15am local time on July 18, 2026.
- CheckinMethod must be M.
- CheckOutMethod must be M.
- ManualReason must contain a valid Manual Reason Code as defined in our technical specifications.
- If completing test case with a Wellpoint Member, ClaimAction must be null. If completing test case with a Horizon Member, ClaimAction must be E. (See additional notes below in Expected Outcomes section)
- All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

Action Taken

1. Submit a completed visit using a previously used ApptID that has a manual check in method and a checkin time that would be considered late.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. Correct and re-send ApptID until all prebilling validation errors are resolved.

Expected Outcome

Vendor receives a response file with no prebilling validation errors corresponding to the ApptID

Note: Externally Billed visits should be sent in the ClaimAction field once a visit has been billed to the Payer outsider of the CareBridge system. For Horizon, all visits will be Billed Externally.



TEST CASE 6 – SUBMIT LATE COMPLETED VISIT

Purpose

To ensure that vendors can successfully:

- Indicate a late reason if a visit occurs outside of the allowable time frame

Note: If a visit is initially submitted with CheckinMethod/CheckoutMethod E or I as a late visit, and is subsequently updated via manual entry to be within the allowable timeframe, it would still be considered a late visit.

Test Prerequisites

- Test 5 completed

Test Data Requirements

- ApptID must not match any previously sent ApptIDs.
- ApptStartDateTime must be 9:00 am local time on July 8, 2026.
- ApptEndDateTime must be 11:00 am local time on July 8, 2026.
- CheckInDateTime must be 10:30 am local time on July 8, 2026.
- CheckOutDateTime must be 12:30 pm local time on July 8, 2026.
- CheckinMethod must be E or I.
- CheckoutMethod must be E or I.
- LateReason and LateAction must contain valid Late Reason and Late Action Codes.
- If completing test case with a Wellpoint Member, ClaimAction must be null. If completing test case with a Horizon Member, ClaimAction must be E. (See additional notes below in Expected Outcomes section)
- All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

Action Taken

1. Submit a completed visit using a previously used ApptID that has a manual check in method and a checkin time that would be considered late.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. Correct and re-send ApptID until all prebilling validation errors are resolved.

Expected Outcome

Vendor receives a response file with no prebilling validation errors corresponding to the ApptID (warnings are allowable).



TEST CASE 7 – SUBMIT MISSED COMPLETED VISIT

Purpose

To ensure that vendors can successfully send:

- A missed completed visit.
- Indicate a missed reason/action if a visit occurs outside of the allowable time frame.
If vendor system does not allow for missed visits to occur, this test can be omitted.

A missed visit can occur even if that visit has been completed, if the CheckInDateTime is greater than three hours after the ApptStartDateTime.

Test Prerequisites

- Test 1 Complete

Test Data Requirements

- ApptID must not match any previously sent ApptIDs.
- ApptStartDateTime must be 9:00 am local time on July 21, 2026.
- ApptEndDateTime must be 11:00 am local time on July 21, 2026.
- CheckInDateTime must be 1:00 pm local time on July 21, 2026.
- CheckOutDateTime must be 3:00 pm local time on July 21, 2026.
- ClaimAction must be null.
- MissedReason and MissedAction must contain valid Missed Reason and Missed Action Codes as defined in our technical specifications.

Action Taken

1. Submit a completed visit with a new ApptID with a visit start time that would be considered missed.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. Correct and re-send ApptID until all prebilling validation errors are resolved.

Expected Outcome

Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent. The following day, Vendor should see that visit in the Appointment Status Report with a status of "missed_completed".



TEST CASE 9 – CANCEL A VISIT

Purpose

To ensure that vendors can successfully:

- Cancel a visit.
For all intents and purposes, cancelling a visit serves the function of deleting that visit.
- This test case is required for all vendors.

Test Prerequisites

- Test Case 7 Complete (if Test Case 7 was omitted, vendor should send a visit utilizing all of the test data requirements except the CheckInDateTime and CheckOutDateTime can match the ApptStartDateTime and ApptEndDateTime prior to completing Test Case 9)

Test Data Requirements

- The visit data and ApptID must match Test Case 7, but must also include the following:
 - ApptCancelled must be “C”.

Action Taken

1. Update a previously sent ApptID to cancel that appointment.

Expected Outcome

- Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent.
- The following day, Vendor should see that ApptID in the Appointment Status Report with a status of “cancelled”.



TEST CASE 10 – OVERLAPPING VISITS

Purpose

Wellpoint does not allow some Home Health services to be rendered by different caregivers to the same member at the same time.

This test case will serve the following purposes:

- Ensure the vendor understands what causes overlapping visits.

Note: This test case is only required if any provider agencies for Vendor will be submitting Wellpoint Home Health claims.

Test Prerequisites

- Test 1 Complete.

Test Data Requirements

Two ApptIDs are necessary for this test case:

ApptID 1

- ApptStartDateTime must be 9:00 am local time on July 24, 2026.
- ApptEndDateTime must be 11:00 am local time on July 24, 2026.
- CheckInDateTime must be 9:00 am local time on July 24, 2026.
- CheckOutDateTime must be 11:07 am local time on July 24, 2026.
- ApptID must not match any previously sent ApptIDs.
- CheckinMethod and CheckOutMethod must be E, I, or M.
- ServiceCode must be G0299.
- ClaimAction should be null.

ApptID 2

- ApptStartDateTime must be 11:00 am local time on July 24, 2026.
- ApptEndDateTime must be 1:00 pm local time on July 24, 2026.
- CheckInDateTime must be 10:55 am local time on July 24, 2026.
- CheckOutDateTime must be 1:00 pm local time on July 24, 2026.
- CheckinMethod and CheckOutMethod must be E, I, or M.
- ServiceCode must be G0151.
- ApptID must not match any previously sent ApptIDs including ApptID 1 above.
- The member and provider information must match ApptID 1.
- The caregiver name and CaregiverID must not match the caregiver name and CaregiverID used in ApptID 1
- ClaimAction should be null.

Action Taken

1. Submit two completed visits with overlapping timeframes.
2. Retrieve response file from output folder and confirm that there is a VCR2025 error present.



Expected Outcome

- Vendor receives a response file with a VCR2025 alert



TEST CASE 11 – SUBMIT A CLAIM

Purpose

837 files for Wellpoint members must be generated via CareBridge. CareBridge will use EVV visit Check-In/Check-Out data to generate claims and pass them to Availity. This test case will serve the following purposes:

- Ensure that the vendor is able to successfully generate a claim via CareBridge.
- Ensure that the vendor understands where they can view claimed amount, claim status, and claim numbers to surface that information to providers.

Once in production, it is recommended that visits are submitted without the ClaimAction field initially so that errors are resolved and then re-submitted with ClaimAction N to create claims.

Claims in New Jersey are submitted by CareBridge on a daily basis.

Note: If all provider agencies for Vendor have only Horizon members and no Wellpoint members, Test Cases 11, 12, and 13 cannot be completed, please proceed to Test Case 14.

Test Prerequisites

- Test Case 5 Complete.

Test Data Requirements

- The visit data and ApptID from Test Case 5 can be used to complete this test case, but must also include the following:
 - ClaimAction must be “N” (New).
 - Rate must be included
- Alternatively, a new ApptID can be used to complete this test case. If using a new ApptID it should meet the following criteria:
 - ApptID must not match any previously used ApptID.
 - The member and authorization information should be distinct from previously sent test cases.
 - ApptStartDateTime must be 9:00 am local time on July 18, 2026.
 - ApptEndDateTime must be 11:00 am local time on July 18, 2026.
 - CheckInDateTime must be 9:00 am local time on July 18, 2026.
 - CheckOutDateTime must be 11:00 am local time on July 18, 2026.
 - CheckinMethod must be E, I, or M.
 - CheckOutMethod must be E, I, or M.
 - ManualReason must contain a valid Manual Reason Code.
 - ClaimAction should be “N”
 - Rate must be included.
 - All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

Action Taken

1. Send a visit with ClaimAction “N” to generate a claim.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.



3. (If needed) Correct and re-send ApptID until all prebilling validation errors are resolved.
4. The following day, vendor should review the Appointment Status Report for that ApptID.

Expected Outcome

- Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent.
- The following day, Vendor should see that visit in the Appointment Status Report with the following information:
 - HasErrors should be false.
 - BilledUnits should equal the visit duration in minutes divided by the units for the ServiceCode/Modifiers listed in the Integration Specification.
 - BilledAmount should equal the Rate (as provided in the visit file by the vendor) times the billed units.
- Vendor should confirm that the billed amount aligns with what they expected to be billed for that visit. If it does not, vendor should ensure that they are sending the unit rate in the Rate field, instead of the hourly rate.
- Vendor should confirm that they understand the other claim related fields in the Appointment Status Report (fields 51-64).



TEST CASE 12 – CORRECT A CLAIM

Purpose

- Ensure that the vendor is able to successfully correct a claim via CareBridge. This is necessary any time the billed amount or billed units changes for a claim.

Note: If all provider agencies for Vendor have only Horizon members and no Wellpoint members, Test Cases 11, 12, and 13 cannot be completed, please proceed to Test Case 14.

Test Prerequisites

- Test Case 11 Complete
- The claim generated in Test Case 11 must be in a terminal status (paid or denied) – this can be determined using the Appointment Status Report. If a vendor attempts to submit a corrected claim prior to the initial claim reaching a terminal status, that visit will generate a prebilling_rejection.
- Vendor will need to wait one day between completing Test Case 11 and Test Case 12

Test Data Requirements

- The visit data and ApptID must match Test Case 11 except for the following:
 - CheckOutDateTime must be 1:30 pm local time on July 18, 2026.
 - CheckInMethod and CheckOutMethod must be M
 - ManualReason must contain a valid Manual Reason Code.

Action Taken

1. Update a previously sent visit with a new CheckOutDateTime to generate a corrected claim.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. (If needed) Correct and re-send ApptID until all prebilling validation errors are resolved.
4. The following day, vendor should review the Appointment Status Report for that ApptID.

Expected Outcome

- Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent.
- The following day, Vendor should see that visit in the Appointment Status Report with the following information:
 - HasErrors should be false.
 - BilledUnits should equal the visit duration in minutes divided by the units for the ServiceCode/Modifiers listed in the Integration Specification.
 - BilledAmount should equal the Rate (as provided in the visit file by the vendor) times the billed units.
- Vendor should confirm that the billed amount aligns with what they expected to be billed for that visit. If it does not, vendor should ensure that they are sending the unit rate in the Rate field, instead of the hourly rate.
- Vendor should confirm that they understand the other claim related fields in the appointment status report (fields 51-64).



TEST CASE 13 – VOID A CLAIM

Purpose

- Ensure that the vendor is able to successfully void a claim via CareBridge.

Note: If all provider agencies for Vendor have only Horizon members and no Wellpoint members, Test Cases 11, 12, and 13 cannot be completed, please proceed to Test Case 14.

Test Prerequisites

- Test Case 12 Complete
- The claim generated in Test Case 12 must be in a terminal status (paid or denied) – this can be determined using the Appointment Status Report. If a vendor attempts to submit a voided claim prior to the initial claim reaching a terminal status, that visit will generate a prebilling_rejection.
- Vendor will need to wait one day between completing Test Case 12 and Test Case 13

Test Data Requirements

- The visit data and ApptID must match Test Case 12 except for the following:
 - ClaimAction must be "V".

Action Taken

1. Update a previously sent visit to void the claim corresponding to that visit.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. (If needed) correct and re-send visit until all prebilling validation errors are resolved.
4. The following day, vendor should review the Appointment Status Report for that ApptID.

Expected Outcome

- Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent.
- The following day, Vendor should see that visit in the Appointment Status Report with the following information:
 - Claim1_status should be voided.



TEST CASE 14 – SUBMIT AN EXTERNALLY BILLED CLAIM

Purpose

For New Jersey Horizon Claims, providers bill claims directly to the health plan and send CareBridge the aggregate data for externally billed claims. CareBridge will transmit visits without any alerts to Horizon, and this visit data will be matched to claims received prior to adjudication by Horizon. This test case will serve the following purposes:

- Ensure that the vendor is able to successfully send externally billed visit data to CareBridge.

Note: If all provider agencies for Vendor have only Wellpoint members and no Horizon members, Test Case 14 cannot be completed.

Test Prerequisites

- None.

Test Data Requirements

- ApptID must not match any previously used ApptID.
- The member and authorization information should be distinct from previously sent test cases.
- ApptStartDateTime must be 9:00 am local time on July 12, 2026.
- ApptEndDateTime must be 11:00 am local time on July 12, 2026.
- CheckInDateTime must be 9:00 am local time on July 12, 2026.
- CheckOutDateTime must be 11:00 am local time on July 12, 2026.
- CheckinMethod must be E, I, or M.
- CheckOutMethod must be E, I, or M.
- If CheckinMethod M, ManualReason must contain a valid Manual Reason Code.
- ClaimAction must be “E” (Claims Billed Externally-Not Via CareBridge).
- Rate must be included.

All required fields indicated in the Completed Visit column of the Appointments / Visits Data File Format table must be included.

Action Taken

1. Send a visit with ClaimAction “E” to mark the claim as Billed Externally-Not Via CareBridge.
2. Retrieve response file from output folder and confirm that there are no prebilling validation errors that need to be corrected.
3. (If needed) Correct and re-send ApptID until all prebilling validation errors are resolved.
4. The following day, vendor should review the Appointment Status Report for that ApptID.

Expected Outcome

- Vendor receives a response file with no prebilling validation errors corresponding to the ApptID sent.
- The following day, Vendor should see that visit in the Appointment Status Report with the following information:
 - HasErrors should be false.
 - BilledUnits should equal the visit duration in minutes divided by the units for the ServiceCode/Modifiers listed in the Integration Specification (8 units).



- BilledAmount should equal the Rate (as provided in the visit file by the vendor) times the billed units.
 - Claim1_Status should return 'billed_externally'.
- Vendor should confirm that the billed amount aligns with what they expected to be billed for that visit. If it does not, vendor should ensure that they are sending the unit rate in the Rate field, instead of the hourly rate.
- Vendor should confirm that they understand the other claim related fields in the Appointment Status Report (fields 51-64).



APPENDIX A – TESTING CHECKLIST

ONCE TESTING IS COMPLETE

Vendors should complete the Integration Testing Checklist throughout the course of testing. Once testing has been completed, please email the completed testing checklist to CareBridge for validation evvintegration@carebridgehealth.com. CareBridge will verify that all test cases were successfully MCOd and provide confirmation that the vendor is able to begin submitting production data. If any test cases had to be omitted due to vendor capabilities, they should provide a rationale for why that test case cannot be complete and (if necessary) a mitigation plan for provider agencies to ensure claims will not be impacted.

INTEGRATION TESTING CHECKLIST

Vendor Information		CareBridge Review	
Field	Value	Field	Value
Vendor Name		Date of Final Review	Click or tap to enter a date.
Development Environment Username		Production Enabled?	Yes ☐ No ☐ Comments:
Production Environment Username		Date Enabled	Click or tap to enter a date.
		Configuration changes?	Yes ☐ No ☐ Comments:

TC#	TC File Name	Tested?		ApptID Used for Test Case	Vendor Tester Initials	CareBridge Reviewer Initials	Date Reviewed	Pass?	
		Y	N					Y	N
1		☐	☐					☐	☐
2		☐	☐					☐	☐
3		☐	☐					☐	☐
4a		☐	☐					☐	☐
4b		☐	☐					☐	☐
4c		☐	☐					☐	☐
5		☐	☐					☐	☐
6		☐	☐					☐	☐
7		☐	☐					☐	☐
8		☐	☐					☐	☐
9		☐	☐					☐	☐
10		☐	☐					☐	☐
11		☐	☐					☐	☐
12		☐	☐					☐	☐
13		☐	☐					☐	☐
14		☐	☐					☐	☐



APPENDIX B – ALTERNATIVE TESTING PROCESS

- Vendors that have previously completed the test cases outlined above in another state may request an abbreviated testing process. This request can be made via email to evvintegration@carebridgehealth.com. If approved, only the following test cases will be required:
 - Test Case 1 – Connection Testing (Dev)
 - Test Case 2 – Connection Testing (Production)
 - Test Case 4a – Submit a Completed Visit
 - Any test cases that were previously omitted from prior testing must be completed.