



New Hampshire Department of Health and Human Services  
 Services under consideration for Electronic Visit Verification (EVV)\*

Program/ Waiver	Service Description	MMIS Procedure Code	MMIS Mod1	MMIS Mod2	MMIS Mod3
ABD	ABD PCS Level 1 – Level 8	T1020	SE	UB	U1–U8
ABD	ABD Community Support Svcs (CSS)	H2015	SE	UB	U1
ABD	ABD Community Support Svcs CSS/Level 2	H2015	SE	UB	U2
ABD	ABD Consumer Directed Svcs – Day/Res	T2025	SE	UB	U1
ABD	ABD CDS – Res only	T2025	SE	UB	U2
ABD	ABD Respite**	T1005	SE	UB	U1
ABD	ABD Respite Medical/Behavioral**	T1005	SE	UB	U2
ABD	ABD CDS – Family Support/Respite**	T2025	SE	UB	U5
ABD	ABD CDS – CSS	T2025	SE	UB	U6
CFI	Skilled Nurse Per Visit	T1030	HC		
CFI	Home Health Aide Per Visit	T1021	HC		
CFI	Home Health Aide 8+ Units	G0156	HC	U1	
CFI	Personal Care Agency Directed	T1019	HC	U1	
CFI	Personal Care Consumer Directed	T1019	HC	U2	
CFI	Participant Directed Services Personal Care	T1019	HC	U3	
CFI	Personal Care Special Rate	T1019	HC	U4	
CFI	Respite Care Services**	T1005	HC		
CFI	Respite Care Special Rates**	T1005	HC	U1	
CFI	Supported Housing Level 2	H0043	HC	U6	
DD	RPCLEV1 – Residential Personal Care Level 1 – Level 7	T1020	SE	UA	U1–U7
DD	Community Support (CSS)	H2015	SE	UA	U1
DD	Community Support CSS/Level 2	H2015	SE	UA	U2
DD	CDS – CSS	T2025	SE	UA	U6
DD	CDS – Day/Res – Consumer Directed Services	T2025	SE	UA	U1
DD	CDS – Res only	T2025	SE	UA	U2
DD	CDS – Family Support/Respite**	T2025	SE	UA	U5
DD	Respite**	T1005	SE	UA	U1
DD	Respite Behavioral/Medical**	T1005	SE	UA	U2
IHS	PDM Personal Care	T2025	SE	UC	U1
IHS	PDM Respite**	T2025	SE	UC	U4
State Plan	Skilled Nurse Per Visit	T1030			
State Plan	Private Duty RN (State Plan)	S9123			
State Plan	Private Duty LPN (State Plan)	S9124			
State Plan	Home Health Aide Per Visit	T1021			
State Plan	Home Health Aide 8+ Units	G0156			
State Plan	Personal Care Attendant Services	T1019			

\*This list is subject to change

\*\*When provided in home