



5.24 Releases

Last updated on 6/24/2025

Versioning

Posted Date	Comments
5/5/2025	Initial posting
5/10/2025	5.24.1 initial posting
5/13/2025	Removed from 5.24.1: EVV: TMHP (TX) - Remove Manual Time Requirement on Overrides
5/15/2025	Added to 5.24.1: Held Billing Report: Updates for Secondary Claims Removed from 5.24.1: Invoice PDF: Pre-Payment Balances - Column Values Corrected
5/16/2025	Updated verbiage on M0102NA 5.24.1.1 initial posting
5/23/2025	5.24.2 initial posting
6/2/2025	5.24.2.1 initial posting
6/5/2025	5.24.2.2 initial posting
6/6/2025	5.24.3 initial posting
6/12/2025	Added to 5.24.3 EVV: HHAX v5 (FL) - Missed Visit Reason Code Options Added
6/13/2025	5.24.3.1 initial posting
6/24/2025	Updated: 49168 - Removed references to Deleted Interventions Added: 5.24.3.2 initial posting

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5.24 Feature Release

Release Date: May 8, 2025

OASIS: M0102NA - No specific SOC/ROC date ordered by MD

A new form question for M0102NA has been added to OASIS E-1 assessments and will be available for all in progress and future OASIS E-1 assessments. #48073

M0102NA - NA - No specific SOC/ROC Date Ordered by MD Select Yes

If 'M0102 - Date of Physician-ordered Start of Care' has a valid date entered, then 'M0102NA - NA - No specific SOC/ROC Date Ordered by MD Select Yes' should be toggled to No.

M0102 - Date of Physician-ordered Start of Care 05/14/2025		M0102NA - NA - No specific SOC/ROC Date Ordered by MD Select Yes No ☐ Yes ☐
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If the ordered SOC is unknown, 'M0102NA - NA - No specific SOC/ROC Date Ordered by MD Select Yes' should be toggled to Yes with 'M0102 - Date of Physician-ordered Start of Care' blank.

M0102 - Date of Physician-ordered Start of Care		M0102NA - NA - No specific SOC/ROC Date Ordered by MD Select Yes No ☐ Yes ☒
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Inline validations have been added to the existing M0102 field to notify users of any invalid responses between M0102 and M0102NA.

- Inline validation when M0102 has a valid date **and** M0102NA is toggled to Yes.

M0102 - Date of Physician-ordered Start of Care 04/07/2025		If field M0102_PHYSN_ORDRD_SOCROC_DT contains a valid date, M0102_PHYSN_ORDRD_SOCROC_DT_NA must NOT equal [1]
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- Inline validation when M0102 does not have a valid date **and** M0102NA is toggled to No.

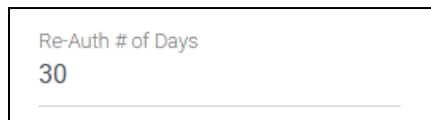
M0090 - Date Assessment Completed		If field M0102_PHYSN_ORDRD_SOCROC_DT does NOT contain a valid date, M0102_PHYSN_ORDRD_SOCROC_DT_NA must equal [1]; If field M0102_PHYSN_ORDRD_SOCROC_DT contains a valid date, M0104_PHYSN_RFRL_DT must equal [^]; [^]: Skipped
M0102 - Date of Physician-ordered Start of Care		

Payer: Re-Auth Number of Days

The number of days before an authorization ends, when the system automatically creates a new authorization for a client, is now customizable at the Payer level to allow for more or less time for the re-authorization period, based on the client's payer. #47567

Note: No changes are needed if the 30 day re-authorization period is the desired window for your payers.

A new setting, 'Re-Auth # of Days' has been added to *Billing > Payer > Info tab*.



Re-Auth # of Days
30

The new setting is defaulted to 30 days and can be updated to be any integer greater than or less than 30 days.

To utilize this functionality, the existing setting with *Admin > Teams > Automation > Use Re-Auth Date* must be enabled. If 'Use Re-Auth Date' at the Team level is not enabled, modifications to the Payer level setting will have no downstream functionality.

When both settings are enabled, the existing 'Re-Auth Date' field within *Client Profile > Financial > Authorization* will pre-populate with the appropriate date based on the Payer level setting.

Re-Auth # of Days has been added to the API, Payer endpoint.

"reAuthNumberOfDays is now available for:

- GET: /api/v1/payer/{payerId}
- PUT: /api/v1/payer/{payerId}
- GET: /api/v1/payer/external/{payerExtId}
- GET: /api/v1/payer/extended/{payerId}
- GET: /api/v1/payer/external/extended/{payerExtId}
- GET: /api/v1/payer
- POST: /api/v1/payer
- GET: /api/v1/payer/extended

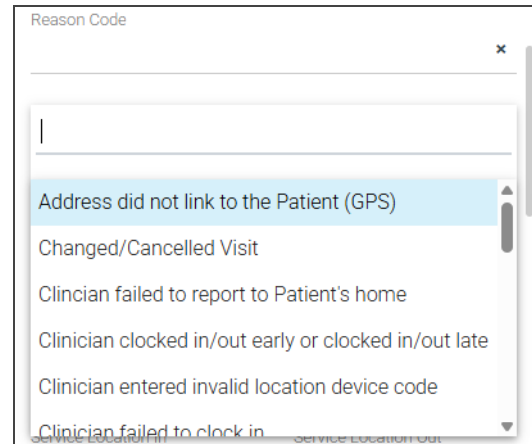
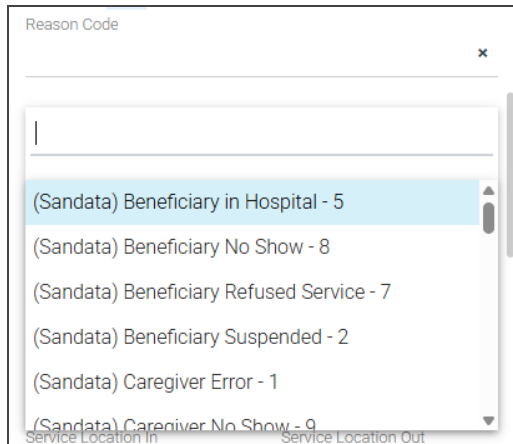
Changes to 'Re-Auth # of Days' Payer setting will trigger a SQS event.

EVV Reason Codes: Removal of Generic Options

To prevent the selection of unsupported Reason Codes, users will no longer see generic reason codes (not aggregator specific) in the Reason Code dropdown if the client has at least one active EVV payer. #48013

Example of aggregator Reason Codes

Example of generic Reason Codes



Previously, when a generic Reason Code was selected for an EVV visit, users would receive an error message within the EVV Dashboard and have to correct the Reason Code selection via *Admin Calendar > Assignment > EVV* or within the *EVV Dashboard > Visit Maintenance*. Generic Reason Codes are now only available when the client does not have any active EVV payers in the *Client Profile > Financial*.

API: Assignment Endpoint: Missed Visit Reason and Notes Added

Missed Visit Reason Code and Missed Visit Note have been added to the Assignment endpoint. #47501

“missedVisitReason” and “missedVisitNote” are now available for:

- POST: /api/v1/assignment/filter/extended
- GET: /api/v1/assignment/extended/{id}
- GET: /api/v1/assignment/{id}
- GET: /api/v1/assignment/extended

Changes to Missed Visit Reason and Missed Visit Note will trigger a SQS event.

Client Social Determinants of Health (SDoH) Report: New Columns Added

To better support the ability to determine where SDoH responses originated, three new columns have been added to the report available within *Client Reports*. #47680

- Assessment:
 - Form name of the assessment
 - Data is displayed in column G of the report
- Date:
 - Date of the assessment
 - Data is displayed in column H of the report
- Employee:
 - Name of the assessing clinician

- Data is displayed in column I of the report

5.24.1 Maintenance Release

Release Date: May 15, 2025

PDF Error: Visit PDF for Vent Clients

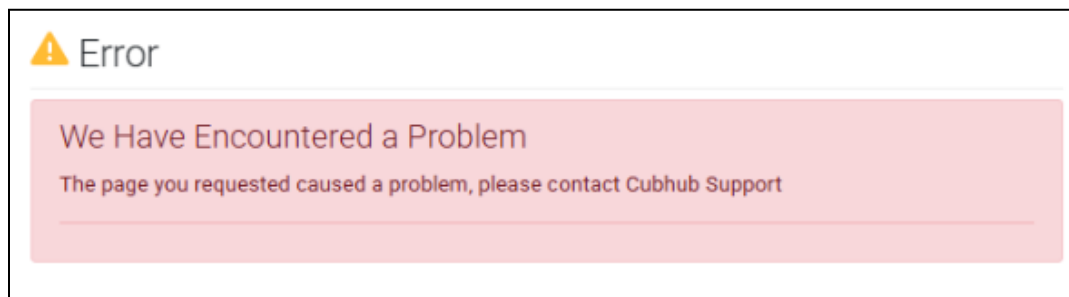
An update has been made to address errors viewing PDFs for clients that have Vent Skills and Interventions but do not have any Vent Settings saved. #48936

When accessing individual PDFs from:

- *Client > Chart > Visit > ellipses > View PDF*
- *Admin Calendar > select the visit > Assignment Pane > ellipses > View PDF*

Users will no longer receive the error

We Have Encountered a Problem. The page you requested caused a problem, please contact Cubhub Support.

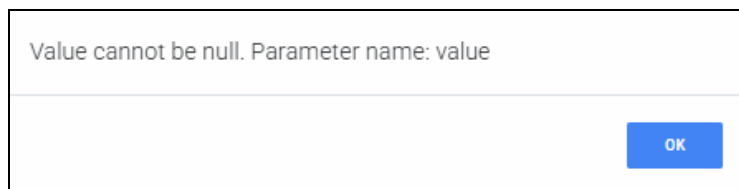


When accessing multiple PDFs from:

- *Client > Chart > Visits > Print Multiple*

Users will no longer receive the error

Value cannot be null. Parameter name value.



Pending Invoices / Claims: Payer Hyperlink

An update has been made to better handle variations in URLs entered in *Billing > Payers > Info > Web Link*. #48652

When clicking on the Payer hyperlink within *Pending Claims / Invoices* users will be correctly redirected to the URL entered in Payer setup and should no longer be taken to a browser page with “This site can’t be reached”.

Clarification Order PDF: Discontinue Date for Original Medication Details

An update has been made to ensure the 'Discontinue Date' for the Original Medication Details section of a Clarification Order is no longer incorrectly updated. #48593

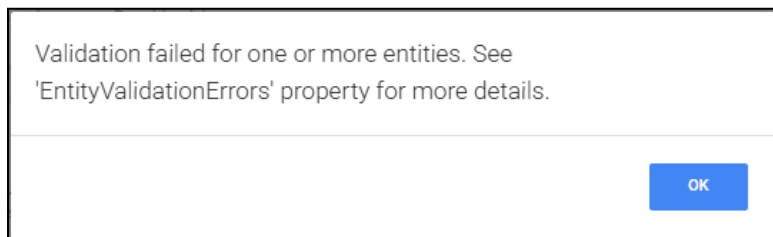
When a Clarification Order is added for a discontinued medication, the *Original Medication Details > Discontinue Date* will now retain the previously entered DC Date. When multiple Clarification Orders are entered for the same medication, the Original Medication Details will come from the latest medication details being modified by the clarification order.

Client Profile: 'EntityValidationErrors'

An update has been made to trim leading and trailing spaces from 'First Name', 'Middle Name', and 'Last Name' fields within *Client > Profile > Demographics*. #48582

When leading and/or trailing spaces existed in one or more of the client name fields, a validation failure prevented saving changes.

Validation failed for one or more entities. See 'EntityValidationErrors' property for more details.



Leading and trailing spaces will now be trimmed on save of the Client Profile and the validation should no longer be received.

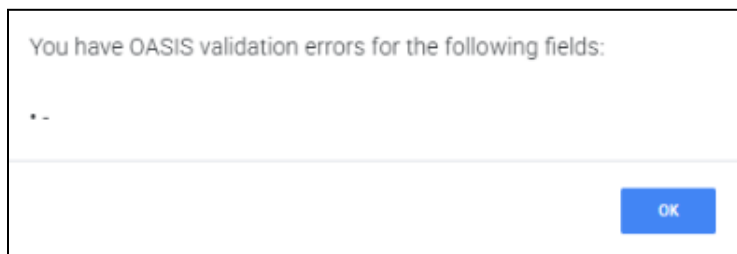
CNA Assignment: Error Scheduling One Minute Segment

An update has been made to the manual verification process for CNA visits to include extended segments that are less than 15 minutes as an additional scenario to re-distribute segments. #49284

OASIS: - Validation Error

An update has been made to OASIS validations to ignore OASIS questions that are not addressed due to skip pattern. #49283

Users should no longer receive the validation error for '-'.



Employees: Name Column Updated

The *Employee List > Name column* has been updated from 'Lastname, Firstname' to 'Firstname Lastname'. #48728

Previously when searching by Name, users were only able to search by Firstname OR Lastname.

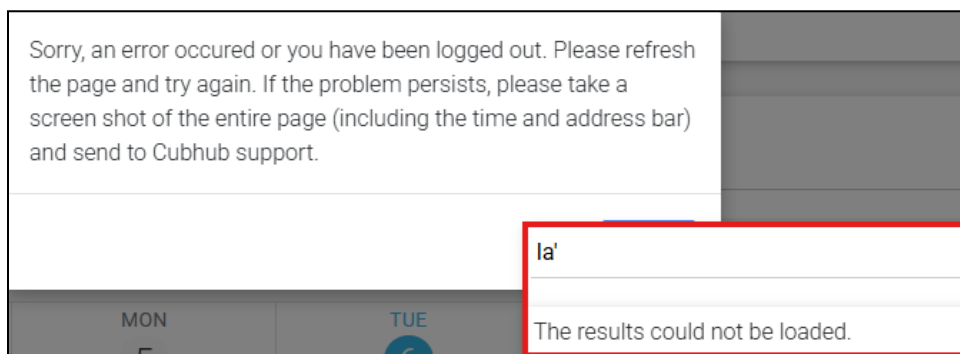
Users are now able to search by:

- Firstname
- Lastname
- Firstname Lastname

Calendar: Employee Search Error

An update has been made to ensure users will no longer receive a logout error when an apostrophe is entered in the *Calendar > Employee* search. #48961

Sorry, an error occurred or you have been logged out. Please refresh the page and try again. If the problem persists, please take a screen shot of the entire page (including the time and address bar) and send to Cubhub support.



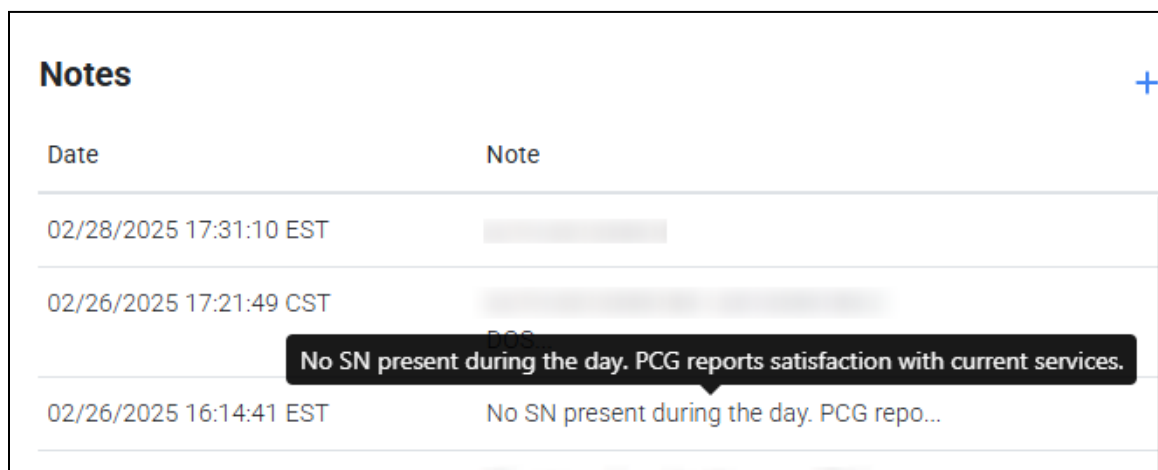
Forward Claim: Invalid Visit Edit Reason Code

An update has been made to address an "invalid visit edit reason code - verify evv provider" error being received when forwarding a claim to a different EVV provider. #48925

Not yet billed visits will verify against the current EVV provider for the segment. Updating EVV on previously billed or verified visits will check Reason Codes and Action Codes against all client payer EVV providers for a match.

Client Landing Page: Hover Text Added for Notes

Hover functionality has been added to the *Client > Notes section* to allow users to review note text without additional steps of navigating to the Notes section of the Chart. #49053



Date	Note
02/28/2025 17:31:10 EST	
02/26/2025 17:21:49 CST	
	No SN present during the day. PCG reports satisfaction with current services.
02/26/2025 16:14:41 EST	No SN present during the day. PCG repo...

MAR: Incorrect Year in PDF Header

An update has been made to the header details of *Client > Live Patient Record > ellipses > Print MAR* to show the correct year. #49113

When viewing the MAR PDF, the year included in the header was previously based on the current year and will now be based off of the year entered into the 'Start Date' filter.



Print MAR

Start Date

End Date

PRINT

EVV Detail Report: Overnight Shifts

An update has been made to the EVV Detail Report to not split overnight shifts into two separate assignments. #49274

Eligibility Report: Column Headers Added

An update has been made to restore the column headers on the Eligibility Report. #48761

Column headers:

- Client First Name
- Client Last Name
- Coverage Start Date
- Insurance ID
- Payer

Held Billing Report: Updates for Secondary Claims

An update has been made to the Held Billing Report to provide more visibility into secondary claims. #49409

A new column, 'Claim Number (for Secondary)' has been added as column AA to provide the claim number for each secondary claim on the report. For secondary claims, Shift Start, Shift End, and Employee columns will be blank since a service line row can be a combination of multiple assignments/segments/etc. as opposed to a single segment as seen for all non-secondary lines. For service line rows with multiple assignments, the 'Assignment ID' column will include all related assignments semicolon separated.

The total expected amount for the secondary claim can be seen by calculating the sum total of the 'Expected' column amounts for associated service line row.

5.24.1.1 Hot Fix

Release Date: May 16, 2025

Monthly Billing: Incorrect Units for 'Per Visit' Service Codes

An issue has been corrected in which the units for 'Per Visit' service codes for monthly, non-invoice claim types were being sent incorrectly. #49456

The units on the claim will now correctly reflect one unit per service instead of each line being the sum of all the services on the claim.

5.24.2 Maintenance Release

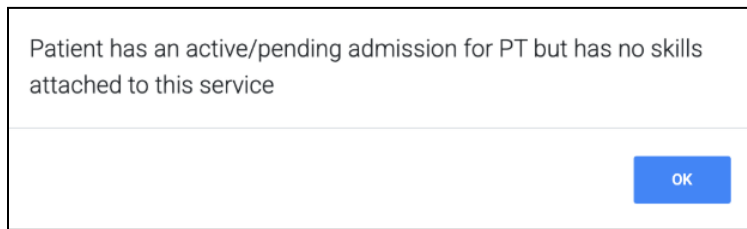
Release Date: May 29, 2025

Client Skills: Validation on Removal of Skills Associated with Active Admissions

A validation has been added when saving the Client Profile to ensure users do not remove required Skills for an Active Admission. #48487

Users will now receive a hard-stop validation when a Skill is removed from *Client > Patient Data* when there is an associated active Admission.

Patient has an active/pending admission for <discipline> but has no skills attached to this service



Patient has an active/pending admission for PT but has no skills attached to this service

OK

The appropriate Skill will be required to be added back to the profile in order to save the changes.

Within the API, the admission array will no longer be returned as empty for active admissions
GET: /api/v1/assignment/extended/{id}.

EVV: TMHP (TX) - Remove Manual Time Requirement on Overrides

Manual times are no longer required for TMHP (TX) visits when utilizing 'Override Bill Hours' or 'Exclude Billing' from both the EVV Dashboard and Admin Calendar. #48574

Validations to ensure the user cannot adjust bill hours to be over the current bill hours for original and forwarded claims are still in place.

Colorado Payers with "EVV Exact Times": Prevent Verification of Visits When Actual and Billed Units Do Not Match

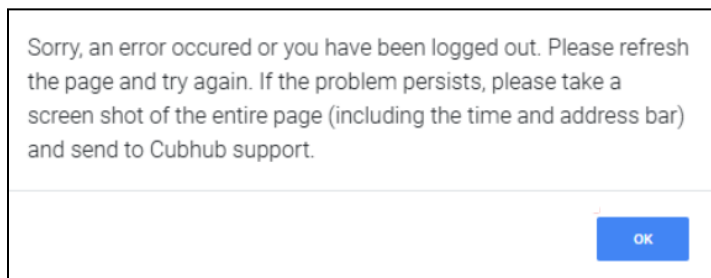
An update has been made to ensure that for Colorado payers, when "EVV Exact Times" is enabled, the system will no longer allow visits to be verified within the Calendar unless the actual and billed units match. #48647

Care Team: Prevent Edits to Care Team Member Field

An update has been made to prevent users from editing the Care Team Member field once the team member has been saved to the client's care team. #46267

When edits were made to the Care Team Member field for existing Care Team members, users would receive an error and be logged out of the system.

Sorry, an error occurred or you have been logged out. Please refresh the page and try again. If the problem persists, please take a screen shot of the entire page (including the time and address bar) and send to Cubhub support.



The Care Team Member field is now read only (grayed out) when clicking to Edit a Care Team members. No changes were made to the functionality of any other fields. If the wrong Care Team Member was added to a profile, users will need to enter an End Date or click the trashcan to remove the team member.

A screenshot of a web form titled "Care Team" with a close button (X) in the top right corner. The form has two sections. The first section is labeled "Role" and contains a single text input field with the value "Care Manager". The second section is labeled "Care Team Member" and contains a text input field with the value "Pedi Nurse (LPN, HHA, CNA)". This second section is highlighted with a red rectangular border.

Forward Claim: Units Not Recalculating Based on Rate Type

An update has been made to recalculate units, into hours or units, for a forward claim when manually selecting a service code that does not have the same rate type as the original. #48716

Episode Summary PDF: Updates for Discontinued Medications and Interventions

The Episode Summary PDF has been updated to account for medications and interventions that have been discontinued. #49168

Discontinued medications and interventions will remain on the PDF with “ - Discontinued on XX/XX/XXXX” appended to the end of the text.

Discontinued Interventions:

Patient Diet: Regular diet (small bites) Time Frame to be Met: End of Cert Period -
Discontinued on 5/23/2025

Discontinued Medications:

albuterol (0.108 mg) - take 2 puffs by Inhale, PRN every 4 hours - Discontinued on 5/20/2025

OASIS: M0150 Validations for Self-Pay

An update has been made to ensure users no longer receive validation errors for M0150 that Medicare and/or Medicaid options must also be selected when 'Self-Pay' is the only funding source. #49322

API: Employee & Client Endpoints: Validation for Duplicate SSN Added

Validation check for duplicate/existing Social Security Number (SSN) has been added to both the Employee and Client endpoint. #49347

"The value of {ssn} already exists within the systems" validation will now be received when the entered SSN already exists for:

- POST: /api/v1/employee
- PUT: /api/v1/employee/{clinicianId}
- POST: /api/v1/client
- PUT: /api/v1/client/{id}

API: Payer Endpoint: Internal Server Error

An issue has been corrected in which an "Internal server error" was received due to the inclusion of Patient Balance Bill payer types for:

- GET: /api/v1/payer
- GET: /api/v1/payer/extended

Patient Balance Bill payer types are now filtered out from the results. #49394

5.24.2.1 Hot Fix

Release Date: June 2, 2025

Medication List: Previous Medication Not Removed by Completed Clarification Order

An update has been made to resolve an issue with Clarification Orders that was introduced in the 5.24.1 Maintenance Release on 5/15/25. #49621

When a Clarification Order for a discontinued medication is marked as Completed, the 'old' medication record will once again be removed from the Medication List.

Care Team: Incorrect Validations Preventing Save on Edit

An update has been made to resolve an issue with editing Care Team Members that was introduced in the 5.24.2 Maintenance Release on 5/29/25. #49700

When edits are made to details for an existing Care Team Member, those changes can once again be successfully saved. The 'Care Team Member' field will continue to be grayed out and un-editable.

5.24.2.2 Hot Fix

Release Date: June 9, 2025

Held Billing Report: Status (Column Y) Details Split to Second Row

An update has been made to limit the characters in the Status (column Y) of the Held Billing Report to the max number of characters allowed in an Excel cell. #49655

When the max number of characters for an Excel cell was exceeded, the details would be split with the extra characters being placed in column A on a separate row. When this occurred, the Assignment ID (column Z) was also moved to the separate row and populated in column B. The Status details will now remain in the single cell.

Payroll History Report: Performance Optimization

Performance improvements have been made to payroll processing to reduce instances of 'Hours/Visits' calculating as 0 resulting in \$0.00 'Paid Amt.'. #49134

5.24.3 Maintenance Release

Release Date: June 12, 2025

Daylight Savings Time: EVV Dashboard Errors - Invalid Time

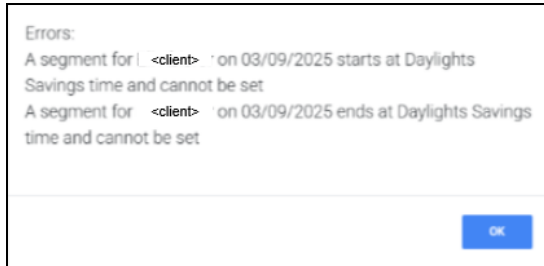
An update has been made to address EVV Dashboard errors for invalid times related to Daylight Savings Time (DST) changes. #48596

An existing validation related to DST has been updated to account for the entire hour from 2:00AM-3:00AM, when the time change occurs, rather than solely validating at the hour mark. When a segment start and/or end time is set on or between 2:00AM-3:00AM for the morning of a time change, users will now receive a hard-stop validation that the time is not valid.

Errors:

A segment for <client name> on <visit date> starts at Daylights Savings time and cannot be set.
AND/OR

A segment for <client name> on <visit date> ends at Daylights Savings time and cannot be set.



A/R Details: Un-snoozed Claims Showing 'Snoozed Until' Date

An update has been made to correctly clear the 'Snoozed Until' date from the Claim Details page when the claim is unsnoozed. #48616

EVV: Sandata - 'A visit row exists in stx.visits table' Dashboard Error

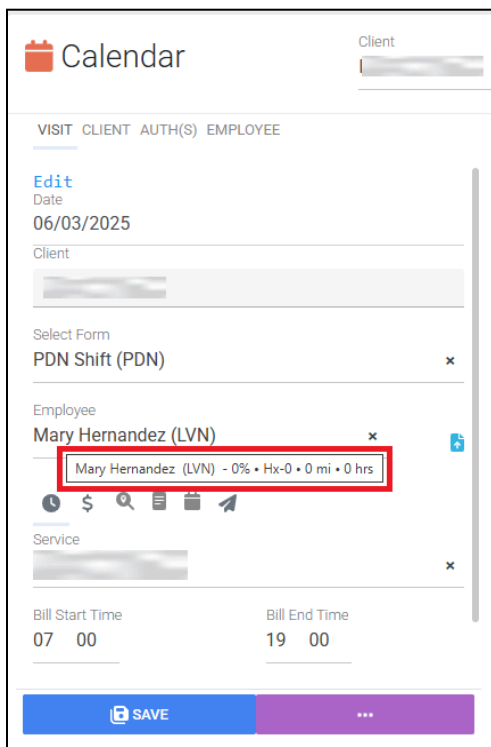
An update has been made for Sandata visits to recognize modifiers as changes when sending secondary claims. #48683

Dashboard Error:

A visit row exists in stx.visits table (by account/visit_id) and no changes are specified in current import of account/visit_id(Agg)

Assignment Pane: Employee Details Hover Shows All Zeros

An update has been made to the Employee field within the *Calendar > Assignment Pane* to ensure the appropriate percentage, HX, mileage, and hour values are shown on hover. #49059



LPR > Pain: Discontinued Meds in Medication Dropdown

The Medication field within the LPR > Pain > Medications Patient Takes for Pain section has been updated to append “(Discontinued)” to the name of each discontinued medication for the client. #49172

Faxes: User Advanced Filter

The User advanced filter within the Faxes console will now include whomever created the fax if the fax has not yet been sent. #49330

EVV: HHAX v5 (PA) - False Cut for Overnight Visits at 00:00

To align with Pennsylvania EVV requirements for HHAX v5, the false cut for overnight visits will now be at 00:00 instead of 23:59. #49464

Billing Reports: Bill Rates and Discounts - Payers Filter

The Bill Rates and Discounts Report has been updated to consider the Filter By: Payers selection. #49499

EVV: TMHP (TX) - Performance Improvements

Processing improvements have been made to reduce the instances of records for TMHP getting stuck with the status of “Processing”. #49501

Calendar: Find Assignment by Segment or Assignment ID

To better support troubleshooting EVV errors, the *Calendar > ellipses > Find Assignment By ID* menu option has been updated to ‘Search by ID’ and results will include both segments and assignments with the searched ID. #49618

EVV: HHAX v5 (FL) - Missed Visit Reason Code Options Added

Reason Codes 28-40 are now available when marking a visit for Florida HHAX v5 as Missed. #49829

Code	Description
28	PDN Hours Refused by parent/guardian (Sunshine, Children's Med)
29	PDN Hours Not Delivered Due to Hospitalization (or Inpatient) (Sunshine, Children's Med)
30	PDN Hours Not Delivered Due to PPEC (Prescribed Pediatric Extended Care) (Sunshine, Children's Med)
31	PDN Hours Not Delivered as Child's Condition Improved (Sunshine, Children's Med)
32	PDN Hours Not Delivered as Child Moved Out of State (Sunshine, Children's Med)
33	PDN Hours Not Delivered due to Duplicate Authorizations (Sunshine, Children's Med)

34	PDN Hours Not Delivered as Child Lives in Rural or Remote Location (Sunshine, Children's Med)
35	PDN Hours Not Delivered as Nurses Feel Mistreated (Sunshine, Children's Med)
36	PDN Hours Not Delivered as Nurses Have Safety Concerns (Sunshine, Children's Med)
37	PDN Hours not Delivered as Nurse Did Not Appear as Scheduled (Sunshine, Children's Med)
38	PDN Hours Not Delivered as Preferred Provider was Not Available and Parent Declined Alternate Provider (Sunshine, Children's Med)
39	PDN Hours Not Delivered as Child Passed Away (Sunshine, Children's Med)
40	PDN Hours Not Delivered - Other (Sunshine, Children's Med)

“(Sunshine, Children’s Med)” has been appended to the end of the description text for each code as these options will only be valid for payers Sunshine Health and Children’s Medical Services.

5.24.3.1 Hot Fix

Release Date: June 13, 2025

Payroll Preview: Overnight Hours at the Beginning of the Week

An update has been made to ensure overtime is correctly calculated when there are overnight visits (visits crossing midnight) at the beginning of the payroll week. #49895

5.24.3.2 Hot Fix

Release Date: June 24, 2025

EVV: TMHP (TX) - Override Options Available for Secondary Claims

‘Override Bill Hours’ and ‘Exclude Billing’ options now remain available in the EVV Dashboard and Calendar for visits that have been forwarded to a TMHP payer or from a TMHP payer. #49769