

# EDI Code Table Guide (Molina NY)



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# **Document Revision History**

Date	Description of Revision	
10/18/2022	Initial version of the document	
08/04/2023	Update to EDI Support contact information.	
09/21/2023 Visit Edit Codes; <b>Timesheet Received</b> and <b>Other</b> removed. Codes are no longer support		



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## Introduction

The **EDI Code Table Guide** defines specific codes used in the import interface process, particularly the following fields:

- MCO/Payer ID Code
- Visit Edit Reason Code
- Visit Edit Action Taken Code
- Missed Visit Reason Code
- Missed Visit Edit Action Taken Code
- Procedure Codes

Refer to the applicable Homecare EDI Import Interface Process Guide for full details and interface instructions.

This guide is updated on an ongoing basis as system capacities are implemented and additional functionality becomes available.

### **EDI Assistance**

If additional assistance is needed, please submit a ticket to <u>3rd Party Integration Support Desk</u>. Cases are escalated to the EDI Production Support queue. An available Support Team Members will contact you directly to assist.



# MCO/Payer ID

The PAYER ID is the unique identifier for each MCO, sent as a required field in the EDI Import file. The following table provides the MCO/Payer ID Code for each Payer.

	MCO/Payer ID Codes		
Code		MCO/Payer	
56755	Molina Health New York		



# **Visit Edit Code Tables**

The following tables provide the codes and descriptions for the **Visit Edit Reason Code** and the **Visit Edit Action Taken** fields (as well as the **Cancel Missed Visit Reason** and **Cancel Missed Visit Action Taken**) for the following EDI Import Interface files: *Confirmed Visits* and *Billed Visits*.

### **Visit Edit Reason Codes**

Visit Edit Reason Codes			
Code	Description		
100	Phone number did not link to the Member.		
101	Member will not let attendant use phone.		
102	Member does not have a phone in home.		
103	Phone in use by member or individual in member 's home.		
104	Member received services outside of the home.		
105	Member's phone line not working (technical issue or natural disaster).		
106	Member requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the member 's services being suspended.		
107	Address did not link to the member (GPS).		
108	Attendant failed to call in.		
109	Attendant failed to call out.		
110	Attendant failed to call in and out.		
111	Attendant called in to or out of the EVV system early or late.		
112	Attendant's identification number (s) does not match the scheduled shift or task discrepancy/task does not match plan of care		
113	Attendant entered invalid fixed location device code(s).		
114	Attendant failed to report to member's home.		
115	Fixed location device on order or pending placement in the home.		
116	Fixed location device malfunctioned.		
117	Attendant unable to use mobile device.		
118	Attendant unable to connect to internet or EVV system down.		
119	Data Entry Error		
120	Agency unable to provide replacement coverage (no show, no replacement).		



# **Visit Edit Action Taken Codes**

Visit Edit Action Taken		
Code	Description	
10	Confirmed visit with the member or the member's family member/representative and documented	
11	Supervisor approved change	
12	Updated member's phone number and documented	
13	Changed verification collection method and documented	
14	Timesheet received and signed by supervisor	
15	Confirmed visit with outside entity and documented	
16	Visit rescheduled	
17	Updated member's address and documented	
18	New attendant assigned to member	
19	Unverified visit; this service cannot be billed	
20	Service(s) cancelled or suspended until further notice	
21	Timesheet Verified	
22	Mutual Case/ or Cluster Case/ or Live-in Case	
23	Change in schedule	
24	Other	



### **Missed Visit Code Tables**

The following tables provide the codes and descriptions for the **Missed Visit Reason Code** and the **Missed Visit Action Taken** fields for the *Additional Visits Info* EDI Import Interface file.

**Note:** If a Missed Visit is cancelled (unchecked), the codes revert to the Visit Edit Code Tables (Reason and Action Taken) in the previous section.

### **Missed Visit Reason Codes**

Missed Visit Reason Codes		
Code	Description	
500	Agency unable to provide replacement coverage (no show, no replacement)	
501	Attendant failed to report to member's home	
502	Member requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the member's services being suspended.	
510	Member Refused Service	
511	Member Refused Service - original aide on vacation	
512	Hospitalization unplanned	
513	COVID-19: All other cases where the agency could not staff due to COVID-19	
514	COVID-19: Member refused, self-isolating, not receiving service	
515	COVID-19: Member refused, receiving service through informal supports	
516	Other	

### **Missed Visit Action Taken**

Missed Visit Action Taken		
Code	Description	
50	Confirmed with the member or the member's family member/representative and documented	
51	New attendant assigned to member (this service cannot be billed)	
52	Service(s) cancelled or suspended until further notice (this service cannot be billed)	
53	Unverified visit (this service cannot be billed)	
54	Visit rescheduled (this service cannot be billed)	
55	Other (this service cannot be billed)	



# **Procedure Code Table**

The following table provides Procedure Codes (Service Codes) and descriptions.

Procedure Code Table		
Code	Description	
S5130:U3	PCS LEVEL I MULTIPLE CLIENT	
S5130:U1	PCS LEVEL I – 15 MINUTES	
S5130:U2	PCS LEVEL I TWO CLIENT	
S5130:TV	PCS LEVEL I WEEKEND/HOLIDAY	
T1019:TV	PCS LEVEL II WEEKEND/HOLIDAY	
T1019:U3	PCS LEVEL II MULTIPLE CLIENT	
T1019:U1	PCS LEVEL II BASIC – 15 MINUTES	
T1019:U2	PCS LEVEL II BASIC TWO CLIENT	
T1019:U4	PCS LEVEL II HARD TO SERVE	
T1019:U5	PCS LEVEL II TWO CLIENT HARD TO SERVE	
T1020	PCS LEVEL II LIVE-IN	
T1020:U2	PCS LEVEL II LIVE-IN TWO CLIENT	
T1020:TV	PCS LEVEL II LIVE-IN WEEKEND/HOLIDAY	
T1020:U5	PCS LEVEL II LIVE IN TWO CLIENT HARD TO SERVE	
T1019:U6	CDPA BASIC – 15 MINUTES	
T1019:U8	CDPA ENHANCED	
T1019:U7	CDPA TWO CONSUMER	
T1019:U9	CDPA TWO CONSUMER ENHANCED	
T1020:U6	CDPA LIVE IN	
T1020:U8	CDPA LIVE IN ENHANCED	
T1020:U7	CDPA LIVE IN TWO CONSUMER	
T1020:U9	CDPA LIVE IN TWO CONSUMER ENHANCED	
S5125	HHA - 15 MINUTES	
S9122	HHA – PER HOUR	
S5125:U2	HHA TWO CLIENT – PER 15 MINUTES	
S5126	HHA LIVE-IN - PER DIEM (13 HOURS)	
S5126:U2	HHA LIVE-IN TWO CLIENT - PER DIEM (13 HOURS)	
S9122:U1	ADVANCED HOME HEALTH AIDE PER HOUR	
T1030	NURSING CARE IN HOME (RN) PER DIEM (13 HOURS)	
S9123	RN – PER HOUR	



T1002	RN – 15 MINUTES
T1031	NURSING CARE IN HOME (LPN) – PER DIEM (13 HOURS)
S9124	LPN – PER HOUR
T1003	LPN – 15 MINUTES
S9129	OCCUPATIONAL THERAPY – PER VISIT
S9131	PHYSICAL THERAPY – PER VISIT
S9128	SPEECH THERAPY – PER VISIT
G0237	RESPITORY THERAPY— PER 15 MINUTES
G0238	RESPITORY THERAPY – PER 15 MINUTES
00200	
S9470	NUTRITIONAL COUNSELING – PER VISIT
S9127	MEDICAL SOCIAL SERVICES – PER VISIT
T1013	SIGN LANGUAGE/ORAL INTERPRETER – PER 15 MINUTES



# **Required Fields by Import File Type**

There are required fields per file document which must be in specific format. The following table provides the applicable required fields per **EDI Import** File Type. This EDI Import Interface supports the following import operations into HHAX.

If record needs to be imported as a	Then, the following fields must be provided:	
Schedule	<ul> <li>Agency Tax ID</li> <li>Payer ID</li> <li>Medicaid Number</li> <li>Caregiver Code</li> <li>Schedule ID</li> <li>Procedure Code</li> <li>Schedule Start Time</li> <li>Schedule End Time</li> </ul>	
Confirmed Visit	<ul> <li>Agency Tax ID</li> <li>Payer ID</li> <li>Medicaid Number</li> <li>Caregiver Code</li> <li>Caregiver First Name</li> <li>Caregiver Last Name</li> <li>Caregiver SSN</li> <li>Schedule ID</li> <li>Procedure Code</li> <li>Schedule Start Time</li> <li>Visit Start Time</li> <li>Visit End Time</li> <li>Clock-In Service Location Type</li> <li>Clock-Out Service Location Type</li> <li>*The <i>EVV</i> fields are required if visit was confirmed via EVV or IVR. Visit Edit and Action Taken codes are required if visit was manually edited.</li> </ul>	
Billed Visit	<ul> <li>Agency Tax ID</li> <li>Payer ID</li> <li>Medicaid Number</li> <li>Caregiver Code</li> <li>Caregiver First Name</li> <li>Caregiver Last Name</li> <li>Caregiver SSN</li> <li>Schedule ID</li> <li>Procedure Code</li> <li>Schedule Start Time</li> <li>Visit Start Time</li> <li>Clock-In Service Location Type</li> <li>Clock-Out Service Location Type</li> <li>Invoice Number</li> <li>*The EVV fields are required if visit was confirmed via EVV or IVR. Visit Edit and Action Taken codes are required if visit was manually edited.</li> <li>Schedule End Time</li> </ul>	
Rebilled Visit	<ul> <li>Agency Tax ID</li> <li>Payer ID</li> <li>Medicaid Number</li> <li>Caregiver Code</li> <li>Caregiver First Name</li> <li>Caregiver Last Name</li> <li>Caregiver SSN</li> <li>Schedule ID</li> <li>Procedure Code</li> <li>Schedule Start Time</li> <li>Visit End Time</li> <li>Clock-Out Service Location Type</li> <li>Invoice Number</li> <li>Submission Type</li> <li>TRN Number</li> <li>*The EVV fields are required if visit was confirmed via EVV or IVR. Visit Edit and Action Taken codes are required if visit was manually edited.</li> <li>Visit End Time</li> <li>Clock-In Service Location Type</li> <li>Invoice Number</li> <li>Submission Type</li> <li>TRN Number</li> <li>*The EVV fields are required if visit and Action Taken codes are required if visit was manually edited.</li> </ul>	
Missed Visit	<ul> <li>Agency Tax ID</li> <li>Payer ID</li> <li>Medicaid Number</li> <li>Caregiver Code</li> <li>Schedule ID</li> <li>Procedure Code</li> <li>Missed Visit Reason Code</li> <li>Missed Visit Action Taken Code</li> </ul>	



If record needs to be imported as a	Then, the following fields must be provided:		
	<ul> <li>Agency Tax ID</li> </ul>	Caregiver SSN	
	Payer ID	Schedule ID	
Delete a Schedule	<ul> <li>Medicaid Number</li> </ul>	Procedure Code	
Delete a Schedule	<ul> <li>Caregiver Code</li> </ul>	Schedule Start Time	
	<ul> <li>Caregiver First Name</li> </ul>	Schedule End Time	
	<ul> <li>Caregiver Last Name</li> </ul>	<ul> <li>Is Deletion (Value should be "Y")</li> </ul>	