



EDI Code Table Guide (UHC NY)

August 2023

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Document Revision History

Date	Description of Revision
02/13/2023	Initial version of the document.
06/08/2023	Update to Missed Visit Action Taken Code table.
08/04/2023	Update to EDI Support contact information.

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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 [3rd Party Integration Support Desk](#). 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
56952	UnitedHealthcare Community Plan of NY

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 won't 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.
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).
121	Timesheet Received
122	Other

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 Cas
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
600	Agency unable to provide replacement coverage (no show, no replacement)
601	Attendant failed to report to client's home
602	Member requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the client's services being suspended
610	Member Refused Service
611	Member Refused Service - original aide on vacation
612	Hospitalization unplanned
613	COVID-19: All other cases where the agency could not staff due to COVID-19
614	COVID-19: Member refused, self-isolating, not receiving service
615	COVID-19: Member refused, receiving service through informal supports
616	Other

Missed Visit Action Taken

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

Procedure Code Table

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

Procedure Code Table	
Service Code	Description
G0237	RESPIRATORY THERAPY– PER 15 MINUTES
G0238	RESPIRATORY THERAPY – PER 15 MINUTES
S5125	HHA - 15 MINUTES
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)
S5130:TV	PCS LEVEL I WEEKEND/HOLIDAY
S5130:U1	PCS LEVEL I – 15 MINUTES
S5130:U2	PCS LEVEL I TWO CLIENT
S5130:U3	PCS LEVEL I MULTIPLE CLIENT
S9122	HHA – PER HOUR
S9122:U1	ADVANCED HOME HEALTH AIDE PER HOUR
S9123	RN – PER HOUR
S9124	LPN – PER HOUR
S9127	MEDICAL SOCIAL SERVICES – PER VISIT
S9128	SPEECH THERAPY – PER VISIT
S9129	OCCUPATIONAL THERAPY – PER VISIT
S9131	PHYSICAL THERAPY – PER VISIT
S9470	NUTRITIONAL COUNSELING – PER VISIT
T1002	RN – 15 MINUTES
T1003	LPN – 15 MINUTES
T1013	SIGN LANGUAGE/ORAL INTERPRETER – PER 15 MINUTES
T1019:TV	PCS LEVEL II WEEKEND/HOLIDAY
T1019:U1	PCS LEVEL II BASIC – 15 MINUTES
T1019:U2	PCS LEVEL II BASIC TWO CLIENT
T1019:U3	PCS LEVEL II MULTIPLE CLIENT
T1019:U4	PCS LEVEL II HARD TO SERVE
T1019:U5	PCS LEVEL II TWO CLIENT HARD TO SERVE
T1019:U6	CDPA BASIC – 15 MINUTES
T1019:U7	CDPA TWO CONSUMER
T1019:U8	CDPA ENHANCED
T1019:U9	CDPA TWO CONSUMER ENHANCED
T1020	PCS LEVEL II LIVE-IN
T1020:TV	LPN – 15 MINUTES
T1020:U2	OCCUPATIONAL THERAPY – PER VISIT
T1020:U5	PHYSICAL THERAPY – PER VISIT

Procedure Code Table	
Service Code	Description
T1020:U6	CDPA LIVE IN
T1020:U7	CDPA LIVE IN TWO CONSUMER
T1020:U8	CDPA LIVE IN ENHANCED
T1020:U9	CDPA LIVE IN TWO CONSUMER ENHANCED
T1030	NURSING CARE IN HOME (RN) PER DIEM (13 HOURS)
T1031	NURSING CARE IN HOME (LPN) – PER DIEM (13 HOURS)

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 style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code 	<ul style="list-style-type: none"> • Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time
Confirmed Visit	<ul style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Schedule Start Time 	<ul style="list-style-type: none"> • Schedule End Time • Visit Start Time • Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type <p>*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.</p>
Billed Visit	<ul style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time 	<ul style="list-style-type: none"> • Visit Start Time • Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type • Invoice Number <p>*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.</p>
Rebilled Visit	<ul style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time • Visit Start Time 	<ul style="list-style-type: none"> • Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type • Invoice Number • Submission Type • TRN Number <p>*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.</p>
Missed Visit	<ul style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code 	<ul style="list-style-type: none"> • Schedule ID • Procedure Code • Missed Visit Reason Code • Missed Visit Action Taken Code

If record needs to be imported as a...	Then, the following fields must be provided:	
Delete a Schedule	<ul style="list-style-type: none"> • Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name 	<ul style="list-style-type: none"> • Caregiver SSN • Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time • Is Deletion (Value should be "Y")