EDI Code Table Guide (Fidelis)

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Document Revision History

Date	Description of Revision
03/06/2023	Removed 'Other' and 'Timesheet Received' from Visit Edit Code Table.
10/11/2021	Initial version of the document
11/3/2021	Update to Procedure Code Table
01/25/2022	Update to Required Fields by Import Type table
02/23/2022	Updated Required Fields by Import File Type Table.
03/07/2022	Updated Required Fields by Import File Type Table.
08/04/2023	Update to EDI Support contact information.
09/19/2024	• Update to the Visit Edit Reason table with new PMPM edit code. • Added new codes to the Procedure Code table for PMPM billing.
09/24/2024	Update to Require Fields by Import Type Table for PMPM Billing.

Table of Contents

Introduction **1**

EDI Assistance 1

MCO/Payer ID **2**

Visit Edit Code Tables **3**

Visit Edit Reason Codes 3

Visit Edit Action Taken Codes 4

Missed Visit Code Tables **5**

Missed Visit Reason Codes 5

Missed Visit Action Taken 5

Required Fields by Import File Type **7**

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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**
47933	Fidelis Care

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 client.
101	Client will not let attendant use phone.
102	Client does not have a phone in home.
103	Phone in use by client or individual in client's home.
104	Client received services outside of the home.
105	Client's phone line not working (technical issue or natural disaster).
106	Client requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the client's services being suspended.
107	Address did not link to the client (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 client'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).
130	Consumer Directed Personal Assistance visit.

Visit Edit Action Taken Codes

Visit Edit Action Taken	
Code	**Description**
10	Confirmed visit with the client or the client's family member/representative and documented.
11	Supervisor approved change
12	Updated client'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 client's address and documented
18	New attendant assigned to client
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
26	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 client's home
502	Client requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to the client's services being suspended.
510	COVID-19: Participant refused, receiving service through informal supports
511	COVID-19: Participant refused, self-isolating, not receiving service
512	COVID-19: Participant is in hospital or Nursing Facility
513	COVID-19: Worker unable to staff because they are sick
514	COVID-19: Worker unable to staff because of childcare issues
515	COVID-19: Worker switched to cover another case
516	COVID-19: Other (Note: If selecting COVID-19: Other, please provide additional details in the Note section)
517	Other

Missed Visit Action Taken

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

Procedure Code Table

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

Procedure Code Table	
Code	**Description**
S5130:U1	PCS Level I - 15 Minutes
S5130:U2	PCS Level I Two Client
S5130:U3	PCS Level I Multiple Client
S5125	HHA - 15 minutes
S5125:U2	HHA Two Client
S5126	HHA - Live in
S5126:U2	HHA Live in Two Client
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:U2	PCS Level II Live in Two Client
T1020:U5	PCS Level II Live in Two Client Hard to Serve
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
S9122	Home Health Adie
S9122:U1	Advanced Home Health Adie
2443	PMPM Billing (1-159 hours)
2444	PMPM Billing (160-479 hours)
2445	PMPM Billing (480+ 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	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code	• Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time
Confirmed Visit	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Diagnosis Code • Schedule Start Time • Schedule End Time	• Visit Start Time • Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type *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.
Billed Visit	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Diagnosis Code • Schedule Start Time • Schedule End Time • Visit Start Time	• Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type • Invoice Number *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.
PMPM Billing	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code (*Default to TEMP*) • Schedule ID • Procedure Code • Schedule Start Time • Schedule End Time	• Visit Start Time • Visit End Time • Invoice Number • Visit Edit Reason (*Default to 130*) • Visit Edit Action Taken (*Default to 11*)

If record needs to be imported as a…	Then, the following fields must be provided:	
Rebilled Visit	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Schedule ID • Procedure Code • Diagnosis Code • Schedule Start Time • Schedule End Time • Visit Start Time	• Visit End Time • Clock-In Service Location Type • Clock-Out Service Location Type • Invoice Number • Submission Type • TRN Number *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.
Missed Visit	• Agency Tax ID • Payer ID • Medicaid Number • Caregiver Code	• Schedule ID • Procedure Code • Missed Visit Reason Code • Missed Visit Action Taken Code
Delete a Schedule	• 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 • Is Deletion (Value should be “Y”)