

NY State EVV Aggregation Job Aid

This job aid applies to Providers operating on the HHAeXchange (HHAX) system who have enrolled with HHAX specifically for EVV Aggregation services. These Providers are subject to EVV Submission, as per the state guidelines. Refer to the <u>eMedNY EVV</u> page to view the guidelines.

The following are the New York State Department of Health visit aggregation requirements:

- Personal Care Services (PCS) visits must be recorded via eMedNY Aggregator (effective 01/01/2021).
- Home Health Care Services (HHCS) visits recorded must be recorded via eMedNY Aggregator (effective 01/01/2023).

Required Steps to Configure Aggregation

Providers must complete the following steps in HHAX. Failure to comply results in no data sent to the aggregator.

Step	A	ction		
1	Data is aggregated for all contracts regardless of whether they are linked or internal based on the export code. With that said, providers should create contracts as necessary for Step #2 under <i>Admin > Contract Setup > New Contract</i> .			
	Providers are identified by their 9-digit Tax ID and either their 8-digit Medicaid Provider ID			
	(MPI) OR 10-digit National Provider ID (NPI) in the State aggregator. Enter the appropriate Tax			
	ID and MPI/NPI for each contract in their respective fields in Admin > Contract Setup > Search			
	Contract , as illustrated in the image.			
	Contract Seture (Aetras Better Health CDPAP)			
•	Contract Details Contract Name: Actins Better Health CDPAP	Active: No V		
2	Contract Type: Select V	Office(s):		
	Effective Date: I III C	Expiration Date:		
	NPI No.: Provider ID (33b): 0	Tax ID No.:		
	Wage Parity: 3 VNS Contract: 3	ICD Code Requirement: ICD-10 Effective Date V (i) 10/01/2015		
	Hedical Contract:			
	Contract Setup General Tab: NPI No/Provider ID/Tax ID Fields			
	Note: Please ensure to enter either the MPI or NPI but not both values as doing so will cause rejections.			
	Navigate to Admin > Reference Table Manage	ement > Contract Service Code and enter the		
	valid service code in the Export Code field. Repeat this step for each applicable contract. Refer			
	to the <u>Service Code Job Aid</u> on how to add and	l edit Contract Service Codes.		
	Applicab	le Export Codes		
3	Type of Service/Program	Rate Codes/Procedure Codes		
		2401, 2402, 2403, 2404, 2405, 2406, 2422, 2423,		
		2424, 2425, 2501, 2502, 2507, 2508, 2593, 2594,		
	Personal Care Services (PCS)	2595, 2596, 2597, 2598, 2601, 2602, 2622, 2623,		
	Fee-For-Services (FFS)	2626, 2627, 2632, 2633, 2742, 2787, 4722, 4723,		
		4724, 4725, 4741, 4742, 4743, 4755, 4756, 4757.		
		4758, 4764, 4765, 4766, 4767, 4768, 4796, 4797,		
		4724, 4725, 4741, 4742, 4743, 4755, 4756, 4757, 4758, 4764, 4765, 4766, 4767, 4768, 4796, 4797,		



Step	A	ction	
		4798, 4799, 7421, 7425, 7426, 7427, 7428, 7430, 8012, 8013, 8014, 8023, 8024, 8025, 8026, 8027, 8028, 8029, 8030, 9768, 9795, 9875, 9879, 9880, 9881, 9882	
	Personal Care Services (PCS) Managed Care (MC)	H2014:HA, H2014:HA:UN, H2014:HA:UP, S5130:TV, S5130:U1, S5130:U2, S5130:U3, S5150:HA, S5150:HA:ET, S5150:HA:HQ, S5151:HA, S5151:HA:ET, S5151:HA:ET:HK, T1019:TV, T1019:U1, T1019:U2, T1019:U3, T1019:U4, T1019:U5, T1019:U6, T1019:U7, T1019:U8, T1019:U9, T1020, T1020:TV, T1020:U2, T1020:U5, T1020:U6, T1020:U7, T1020:U8, T1020:U9	
	Home Health Care Services (HHCS) Fee-For-Services (FFS)	1606, 1607, 2610, 2620, 2640, 2650, 2662, 2841, 2842, 2844, 2845, 2847, 2878, 4810, 4811, 4812, 4813, 4814, 4815, 4816, 4817, 4818, 4819, 4820, 4821, 4822, 4823, 4824, 4825, 4826, 4827, 4828, 4829, 4830, 4831, 4832, 4833, 4834, 4835, 4836, 4837, 4838, 4839, 4840, 4841, 4842, 4843, 4844, 4845, 4846, 4847, 4848, 4849, 4850, 4851, 4852, 4853, 4854, 4855, 4856, 4857, 4858, 4859, 4860, 4861, 4862, 4863, 4864, 4865, 4866, 4867, 4868, 4869, 4870, 4871, 4872, 4873, 4874, 4875, 4876, 4877, 4878, 4879, 4880, 4881, 4882, 4883, 4884, 4885, 4886, 4887, 4888, 4889, 4890, 4891, 4892, 4893, 4894, 4895, 4896, 4897, 4898, 4899, 4900, 4901, 4902, 4903, 4904, 4905, 4906, 4907, 4908, 4909, 4910, 4911, 4912, 4913, 4914, 4915, 4916, 4917	
	Home Health Care Services (HHCS) Managed Care (MC)	G0237, G0238, S5125, S5125:U2, S5126, S5126:U2, S9122, S9122:U1, S9123, S9124, S9127, S9128, S9129, S9131, S9470, T1002, T1003, T1013, T1030, T1031	
	Note: Only the confirmed visits associated to the al	bove in-scope Export Codes are aggregated.	
4	Review all Member Profiles and ensure the Member details are entered correctly. Members must be identified by <i>Medicaid ID</i> and <i>Date of Birth.</i> Member Medicaid IDs must be entered in the Member's <i>Profile > Medicaid Number</i> field. Medicaid ID must be alphanumeric		
	Review all Caregiver Profiles and ensure the C	aregiver details are entered correctly.	
5			
	Caregivers must be identified by First Name and Last Name.		

HHAX Process for EVV Aggregation to eMedNY

The following steps outline the HHAX process to submit EVV visits to eMedNY.

Step	Action		
1	HHAX aggregates EVV data to eMedNY for the Medicaid Service Codes. Refer to the <u>NY DOH EVV</u> page for the codes.		
2	HHAX sends an API message to eMedNY according to the state's <u>Interface Control Document</u> (click to access). Refer to the <u>HHAX Field Chart</u> below for a condensed version.		
3	HHAX sends EVV confirmed shifts only; meaning, there is a VALID EVV transaction on the IN and OUT. If there is no EVV at all, or no EVV on the IN or OUT, then this is considered a <u>manually</u> confirmed shift, and is not sent to the state. Refer to the image below for further details.		
	Scheduled Time: 1400-1800 Add Pre-Shift Add Post-Shift Imanually adjusted. The Adjusted times will be sent. Visit Start/End are manually adjusted. The Visit Start/End are manually adjusted. The Adjusted times will be sent.		
	Confirmed Visit		
4	HHAX sends data for each enrolled Provider on a daily basis. Information sent consists of newly confirmed shifts (directly linked from EVV to the calendar or from the Call Dashboard), updated shifts, or deleted shifts.		
5	Provider runs the State Aggregation Report to review rejections. Refer to the <u>State Aggregation</u> <u>Report section</u> below for guidance.		



HHAX Field Chart

The table below is a condensed version of the fields sent by HHAX to eMedNY via the API message. Refer to the eMedNY according to the state's <u>MMIS Interface Control Document EVV Data API</u> (click to access for full details regarding eMedNY interface requirements).

HHAX Field Chart (Condensed Version)					
Property	Required	HHAX System Logic			
Transaction ID	Y	HHAX Visit ID.			
Member ID	Y	Patient Profile > Medicaid ID			
Date of Birth	Y	Patient Profile > DOB			
Provider Name	N	N/A (Only required fields are sent)			
NPI	Situational	Admin > Contract Setup > Contract General Page > NPI Number			
Provider ID	Situational	Admin > Contract Setup > Contract General Page > Provider ID			
Tax Payer ID	Y	Admin > Contract Setup > Contract General Page > Tax ID			
Provider Address	N	N/A (Only required fields are sent)			
Provider Rate Code	Situational	Admin > Reference Table Management > Contract Service Codes >			
		Export Code			
Procedure Code	Situational	Admin > Reference Table Management > Contract Service Codes >			
		Export Code			
Procedure Mod Code	N	Admin > Reference Table Management > Contract Service Codes >			
		Export Code			
Service Start Date and Time	Y	Calendar > Visit > EVV Call In Timestamp or Visit Start Time			
		Refer to the image in Step 3 above			
Service End Date and Time	Y	Calendar > Visit > EVV Call Out Timestamp or Visit End Time			
		Refer to the image in Step 3 above			
Service Start Location	Y	Patient > Profile > Address Type (as associated to Address, Phone			
		Or FUB)			
Service End Location	Y	Patient > Profile > Address Type (as associated to Address, Phone			
Convice Drewider First Name		OFFOB			
Service Provider Last Name	ř V	Calendar > Visit > Caregiver First Name			
Service Provider Last Name	Ť	Calenual > visit > Calegiver Last Name			
Service Provider Phone	N	N/A (Only sending required fields)			
	v	HHAX Caragiyar Unique Database ID			
	I V	HILAY Unique a MadNIV Submitter ID: 02422401			
Submitter ID	ř	THAT UTIQUE ENTEDINY SUBMITTER ID: U3432491			



State Aggregation Report

This report contains all transactions sent to the aggregator.

HHAX sends EVV data when a visit is confirmed. The visit must have a confirmed Clock In and confirmed Clock Out time to be sent to the aggregator. Information sent consists of newly confirmed visits and all updates made to confirmed visits. Data is sent daily during the overnight process.

It is recommended to bill in correspondence with the state's system after a 'Success' response is received for the visit on the State Aggregation Report.

Step	Action		
1	Navigate to Report > Exception Reports > State Aggregation Report to run the report.		
2	The State Aggregation Report window opens. Select the required filter fields (denoted with a red asterisk) to include State (select NY), Last Export From Date, and Last Export To Date. The Record Status field defaults to 'Failed' for each report. Select 'All" to view all statuses. Click View Report to generate the report. vert report vert report vert report report to generate the report.		
3	Providers must run the State Aggregation Report to review and address all rejections associated to the EVV aggregation.		

Common Failed Responses

To view a list of common failed responses found in the NY EVV Aggregator interface, along with the recommended actions to resolve each issue, please refer to the <u>NY State EVV Aggregation - Most</u> <u>Common Failed Responses Job Aid</u>.