

# 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.	



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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		
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).	
Client requested to change/cancel scheduled visit; or the scheduled visit has been cancelled due to t		
108	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	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 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	



# **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>Diagnosis Code</li> <li>Visit Start Time</li> <li>Visit Start 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>Schedule End Time</li> <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>Diagnosis Code</li> <li>Schedule End Time</li> <li>Visit End Time</li> <li>Clock-In 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>Procedure Code</li> <li>Schedule Start Time</li> <li>Visit Start 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>Diagnosis Code</li> <li>Schedule End 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 <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> <li>Visit Start Time</li> </ul>



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