

Emerest GUIDE EDI Codes

Payer / MCO:	Emerest GUIDE
State / Program:	New York
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The EDI Codes topic defines specific codes used in the import interface process.

Refer to [Homecare EDI Import](#) for import details and interface instructions.

If additional assistance is needed, submit a ticket to the [3rd Party Integration Support Desk](#). Cases are escalated to the EDI Production Support queue.

MCO/Payer ID

The Payer ID is the unique identifier for the MCO, sent as a required field in the V5 Flat File. The following table provides the MCO/Payer ID Code for the Payer.

Code	MCO/Payer
73385	Emerest GUIDE

Procedure Codes

The following table provides the procedure/service codes, their descriptions, and the corresponding HHAeXchange Service Type. Where a code is only offered under specific plans, the Payer column identifies which plan(s) it applies to; enter "All" where a code applies uniformly across every plan under this payer.

Where specific codes carry additional requirements (for example, authorization exceptions or an NPI requirement), record those details in the State/Program-Specific Requirements section below.

Service Code	Description	HHAeXchange Service Type
G0529	In Home Respite Care, 4-hour unit	RESP
G0530	Adult day center, 8-hour unit	RESP
G0531	Facility-based respite, 24-hour unit	RESP

Visit Edit Reason Codes

The following table provides the codes and descriptions for the Visit Edit Reason field for the following EDI Import Interface files: Confirmed Visits and Billed Visits.

Where a code's meaning or availability differs by plan, the Payer column identifies which plan(s) it applies to. Enter "All" where a code applies uniformly across every plan under this payer.

Code	Description
100	Phone number did not link to the client.
101	Client does 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 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 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).

Visit Edit Action Taken Codes

The following table provides the codes and descriptions for the Visit Edit Action Taken field for the following EDI Import Interface files: Confirmed Visits and Billed Visits.

Where a code's meaning or availability differs by plan, the Payer column identifies which plan(s) it applies to. Enter "All" where a code applies uniformly across every plan under this payer.

Code	Description
10	Confirmed 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 Reason Codes

The following table provides the codes and descriptions for the Missed Visit Reason Code field for the Additional Visits Info EDI Import Interface file.

If a Missed Visit is canceled (unchecked), the codes revert to the Visit Edit Code Tables (Reason and Action Taken).

Some payers require additional detail (for example, a mandatory note) for specific reason codes. Flag any such codes here and record the underlying requirement in the State/Program-Specific Requirements section below.

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.
610	Member Refused Service
611	Member Refused Service - original aide on vacation
612	Hospitalization unplanned
616	Other

Missed Visit Action Taken

The following table provides the codes and descriptions for the Missed Visit Action Taken field for the Additional Visits Info EDI Import Interface file.

If a Missed Visit is canceled (unchecked), the codes revert to the Visit Edit Code Tables (Reason and Action Taken).

Where a code's meaning or availability differs by plan, the Payer column identifies which plan(s) it applies to. Enter "All" where a code applies uniformly across every plan under this payer.

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)
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)

Duties Code

The table below provides the assigned codes for services/tasks completed during a Patient's Visit according to their Plan of Care (Duties).

Code	Task Name	HH AeXchange Category
115	Meal Preparation	Personal Care
116	Housework/Chore	Personal Care
117	Managing Finances	Personal Care
118	Managing Medications	Personal Care
119	Shopping	Personal Care
120	Transportation	Personal Care
122	Hygiene	Personal Care
123	Dressing Upper	Personal Care
124	Dressing Lower	Personal Care
125	Locomotion	Personal Care
126	Transfer	Personal Care
127	Toilet Use	Personal Care
128	Bed Mobility	Personal Care
129	Eating	Personal Care
130	Bladder Incontinence	Personal Care
131	Bowel Incontinence	Personal Care
132	Personal Care T1019	Personal Care
134	Bathing	Personal Care
201	In Person	Patient Support Activities
202	Via Telephone	Patient Support Activities
203	Other	Patient Support Activities
401	Shopping (Grocery, Supplies, Personal Items, Etc.)	Home Management
402	Travel Accompaniment of Appointments	Home Management
403	Housekeeping/Cleaning	Home Management
405	Take Blood Pressure	Treatment / Special Needs
406	Weigh Patient	Treatment / Special Needs
407	Record Output (Urine/BM)	Treatment / Special Needs
408	Assist with catheter care	Treatment / Special Needs

Code	Task Name	HHaExchange Category
409	Empty foley bag Daily or when ½ Full	Treatment / Special Needs
410	Assist with ostomy care	Treatment / Special Needs
411	Remind to take medication	Treatment / Special Needs
412	Assist with Treatment	Treatment / Special Needs
499	Other	Home Management
500	Change bed linen	Patient Support Activities
501	PDN-LPN Monitoring Vitals	Nursing Care
502	PDN-LPN Nursing Care	Nursing Care
503	PDN-LPN Managing Medications	Nursing Care
505	Clean Patient Care Equipment	Patient Support Activities
506	Do Patient shopping and errands	Patient Support Activities
508	Accompany Patient to medical appointment	Patient Support Activities
509	Diversional Activities-Speak/Read	Patient Support Activities
511	Monitor Patient Safety	Patient Support Activities
512	Patient Laundry	Patient Support Activities
513	Light Housekeeping	Patient Support Activities
599	PDN-LPN Other	Nursing Care
601	PDN-RN Monitoring Vitals	Nursing Care
602	PDN-RN Nursing Care	Nursing Care
603	PDN-RN Managing Medications	Nursing Care
699	PDN-RN Other	Nursing Care
799	Other	Respite Care

Required Fields by Import File Type

There are required fields per file document which must be in a 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 HHAExchange.

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

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

If record needs to be imported as a...	Then, the following fields must be provided:
	• Schedule Start Time
TPL Billing	• Agency Tax ID • Caregiver Code • Caregiver First Name • Caregiver Last Name • Caregiver SSN • Clock-In Service Location Address • Clock-Out Service Location Address • Enable Secondary Billing • Invoice Number • Medicaid Number • Other Subscriber ID • Paid Date • Payer ID • Primary Payer ID • Primary Payer Name • Primary Payer Policy or Group Number • Plan Type • Procedure Code • Relationship to Insured • Total Paid Amount • Total Paid Units • Schedule ID • Schedule End Time • Schedule Start Time • Visit Start Time • Visit End Time <i>Totals for the paid-amount columns must add up to the total field amount provided. The EVV fields are required if the visit was confirmed via EVV or IVR. Visit Edit and Action Taken codes are required if the visit was manually edited.</i>

