


eMedNYHIPAASupport Announcement Archive

2013-2020


Important Announcements

*January 13, 2020

MCE 834 Test Scenarios and Samples are published on the eMedNYHIPAASupport page to aid in Managed Care Plans' internal testing of the MCE 834 transactions. All MC Plans are encouraged to review the instructions in the  [MCE 834 Test Scenarios & Sample Files](#), then use the sample files contained within this PDF for further internal testing. Of the four files included in this PDF, one is a verification/audit file, which should be processed first. The remaining three sample files are intended to simulate files received on three different days during that same month. Plans should ensure that these files are only processed within their Test Regions.

*October 1, 2019

In Summer 2020, DOH will be eliminating monthly rosters from WMS and implementing a daily transmission of all enrollment information via a standard X12 834. As such, DOH is publishing a Companion Guide which provides the technical details for electronic communications and for creating electronic transactions for DOH. This guide is intended to be used along with X12 Implementation Guides, Version 005010.

 [Managed Care Enrollment - eMedNY Companion Guide](#)

*July 18, 2019

Providers who are creating their own software and submitting via ASC X12 270/271 shall be aware of the new codes values returned on the 271 eligibility response when the Medicaid Client has Exception Codes "A1", "A2", "I5" through "I9". Refer to the [eMedNY Transaction Information Standard Companion Guide CAQH - CORE CG X12](#)

*April 30, 2018

Updates to ASC X12 834 and Supporting Documents and Managed Care Enrollment Information:

Effective immediately, the eMedNY 834 Managed Care Enrollment Companion Guide, the 834 Enrollment Information document and the 834 FAQs have been removed from the eMedNY website. New documentation will be published as they become available.

*October 24, 2016


The [eMedNY Transaction Information Standard Companion Guide CAQH - CORE CG X12](#) has been updated. This is a major revision with all information added pertinent to the X12 HIPAA transactions that

was previously published in the eMedNY Transaction Information Standard Companion Guide X12 or in the eMedNY Trading Partner Information Standard Companion Guide. These two documents will be scheduled for retirement in the near future.

***July 9, 2014**

[eMedNY ICD-10 TESTING OPENS JULY 28, 2014](#)


On July 28, 2014 eMedNY will open the Provider Testing Environment (PTE) for submitters to begin testing Medicaid claims with ICD-10 diagnosis codes. In addition inpatient hospital claims that utilize ICD-10 procedure codes may be tested beginning on this date.

 [Click Here to read more](#)

***March 21, 2014**

Medicaid Required by Federal Law to Change Electronic Remittance Delivery Date


Effective **April 7, 2014** (Cycle 1911) eMedNY will no longer be permitted to make the X12 835 and the X12 820 electronic remittances available two weeks prior to release of payment. Electronic remittances will be available two days prior to the release of funds. The change is necessitated by requirements of Section 1104 of the Affordable Care Act (ACA) and the CAQH Committee on Operating Rules for Information Exchange (CORE), the authoring entity for operating rules for Electronic Fund Transfer (EFT) and Electronic

Remittance Advice (ERA) transactions.  [Click here to read more.](#)

***December 26, 2013**

Remittance Advice will be changing: In accordance with the requirements of the Affordable Care Act's Electronic Funds Transfer provisions and mandated CAQH-CORE Operating Rule 360, NYS Medicaid will report claims adjudication system edits using a revised set of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC). Revisions to the Edit Mapping for 835 crosswalks will be posted before the first Financial Cycle of 2014, Cycle #1898.

***October 31, 2013**

Attention Submitters: Provide Proper EDI Contact Information to ensure that there is minimal delay if a problem is identified by eMedNY and an outbound call is necessary.  [Click here](#) for details.