



TO: Licensed Home Care Service Agency (LHCSA) and Certified Home Health Agency (CHHA)

RE: Updated Guidance: Electronic Billing Requirements for Direct Care Workers

Impacted LOBs: Medicaid, HIV-SNP, HARP, MLTC, and MAP (UltraCare)

Dear Valued MetroPlusHealth Provider,

The New York State Department of Health (NYS DOH) has updated its electronic billing guidance for Direct Care Workers. MetroPlusHealth plans to implement these requirements for all applicable encounters with dates of service beginning **October 1, 2026**.

Direct Care Workers must be identified using a **Home Care Registry ID** or, when available, a **Type 1 National Provider Identifier (NPI)** for all Home Health Aide (HHA) and Personal Care service encounters.

Required Direct Care Worker Identifier Reporting

The Department of Health, Office of Health Insurance Programs (DOH/OHIP), requires the reporting of the following worker identifiers for applicable home care services:

- ✓ Home Care Registry ID for Licensed Home Care Services Agency (LHCSA) and Certified Home Health Agency (CHHA) direct care workers.
- ✓ A Type 1 NPI may be submitted when available.
- ✓ When submitting a Home Care Registry ID, **REF01 must be populated with G2**.

Providers must submit the Direct Care Worker identifier on all Home Health Aide and Personal Care encounters as outlined below:

Description	Institutional Encounters (837I)	Professional Encounters (837P)
Direct Care Worker ID (Home Care Registry ID)	2310A REF02 (when all services are provided by the same Direct Care Worker) <i>attending provider loop</i> 2420A REF02 (when multiple Direct Care Workers provide services within a 24-hour period) REF01 = G2 (required when NPI is not available)	2310B REF02 (when all services are provided by the same Direct Care Worker) 2420A REF02 (when multiple Direct Care Workers provide services) REF01 = G2 (required when NPI is not available)

Example

837I / 837P

*REF*G2*Home Care ID~*

Reporting Multiple Direct Care Workers

- When all services on an encounter are provided by the same Direct Care Worker, providers may report the identifier in the applicable **2310A (837I)** or **2310B (837P)** loop.
- For encounters involving **multiple Direct Care Workers**, the Direct Care Worker ID should be reported at the line level in the applicable **2420A loop**.
- For Institutional (837I) encounters, NYS DOH has updated its guidance to require use of the **2420A Operating Provider Loop** for services rendered by multiple Direct Care Workers within a 24-hour period.

Additional Billing Guidance

When the same procedure code is submitted for services performed by different Direct Care Workers, providers should append **Modifier 77** as appropriate to distinguish the services and support accurate encounter processing.

To support testing and implementation activities, providers are encouraged to work with their billing vendors and EDI teams to ensure all necessary system updates are completed as soon as possible to support compliance with these reporting requirements.

We appreciate your continued cooperation and commitment to our members. If you have any questions regarding this notice, please contact MetroPlusHealth Provider Relations at providerrelationsops@metroplus.org.

Thank you,

MetroPlusHealth