Direct Care Worker Identifier Reporting Requirements

Provider Billing Guidelines | September 2026

Requirement and Effective Date

The New York State Department of Health (OHIP) requires submission of Direct Care Worker identifiers on applicable Home Health Aide (HHA), Licensed Home Care Services Agency (LHCSA), Certified Home Health Agency (CHHA) and Consumer Directed Personal Assistance Services (CDPAS) claims/encounters. The purpose of this requirement is to improve identification and tracking of services provided by individual caregivers.

Providers should begin implementing the required changes immediately.

Encounter data is expected to be complete for dates of service beginning **October 1, 2026**. Following updated New York State guidance issued September 17, 2026, VNS Health is temporarily suspending denials related to Direct Care Worker identifier reporting requirements impacted by these guidance changes while system enhancements are being implemented. Providers should continue planning for and implementing the required changes as soon as possible.

Applicable Products

This requirement applies to:

- SelectHealth from VNS Health (HIV SNP)
- VNS Health Total (MAP)
- VNS Health Managed Long-Term Care (MLTC)

What to Submit:

- **LHCSA and CHHA Providers:** Submit the caregiver's **Home Care Registry ID**.
- **CDPAS Providers through the Statewide Fiscal Intermediary:** Submit the caregiver's **SFI Personal Assistant ID**.

Claim Reporting Requirements

When a Direct Care Worker does not have an NPI:

REF01 = G2
REF02 = Home Care Registry ID or SFI Personal Assistant ID

Encounter Type	Direct Care Worker ID Reporting
Institutional Encounters (837I)	2310A REF02 when all services are provided by the same Direct Care Worker; 2420A REF02 (conditional) when services are provided by multiple Direct Care Workers
Professional Encounters (837P)	2310B REF02 **or** 2420A REF02 (conditional)

Example: REF*G2*SFI ID/Home Care ID~

For services provided by the same Direct Care Worker, continue using the 2310A/2310B loops. This reporting scenario is unchanged under the September 2026 State guidance.

For institutional (837I) claims involving multiple Direct Care Workers, report Direct Care Worker identifiers at the line level in Loop 2420A (Operating Provider). When multiple Direct Care Workers provide services on the same date of service, each worker should be reported on a separate service line using the applicable State billing methodology, including modifier 77 when required.

NPI Requirements

Direct Care Workers are **not required to obtain a National Provider Identifier (NPI).** Billing provider NPI reporting requirements remain unchanged.

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Provider Readiness Checklist

To prepare for implementation:

- Identify where Home Care Registry IDs or SFI Personal Assistant IDs are maintained and ensure they are linked to each applicable service.
- Review billing system, vendor, and clearinghouse capabilities.
- Confirm that caregiver identifiers can be transmitted on claims.
- Coordinate with billing, clearinghouse and EVV vendors and test claim submissions before implementation.
- Review the September 2026 New York State Home Care Worker ID guidance and begin updating billing processes to support revised institutional claim reporting requirements.

Implementation Notice

Following updated New York State guidance issued September 17, 2026, VNS Health is evaluating and implementing system changes needed to support revised Direct Care Worker identifier reporting requirements. During this implementation period, claim denials related to these specific reporting changes will be temporarily suspended. Additional communications will be issued regarding testing opportunities, implementation timelines, and future enforcement dates.

Additional Information

Providers should monitor future communications regarding implementation timelines, testing opportunities, updated claims processing guidance, and future enforcement dates related to Direct Care Worker ID reporting requirements.