2026 EmblemHealth Provider Webinar Series

Supplemental Data Review

EmblemHealth®

Supplemental Data Review

Supplemental Data is information used to support HEDIS measure calculations that comes from sources other than administrative claims data.

Supplemental Data Overview

Supplemental data is additional clinical data about a member.

Allows providers to supplement additional information beyond administrative claims based on the care provided.

Simple data feeds from your electronic health record (EHR)/electronic medical record (EMR) can help improve quality scores.

All supplemental data is subject to the review and approval of the plan's certified Healthcare Effectiveness Data and Information Set (HEDIS®) auditor.

Types of Supplemental Data

Standard

Aggregated member data from a provider's electronic health record (EHR)/electronic medical record (EMR) system in a required format.

Non-standard

All other data which requires physical inspection. For example, member charts, clinical summaries.

May be submitted as proof of historical services, or services rendered by partnering or specialty providers only, to supplement compliance outside of claims and the standard supplemental file.

* We are no longer accepting Non-Standard supplemental data (medical charts) for A1c and Blood pressure data, please submit via Standard supplemental data.

MY2026 Standard Supplemental Data Specification

2026 EmblemHealth Standard Supplemental Data Specification

Column Name	Example	Required/Optional
Source_Name	ACPNY	Required
Member_ID	K0987654321	Required
Medicaid_ID	AB12345C	Recommend
Medicare_ID	1G23FH4QQ56	Recommend
Member_First_Name	Mary	Required
Member_Last_Name	Red	Required
DOB	11/23/2005	Required
Servicing_Provider_NPI	1234567891	Required
Servicing_Provider_Name	Rolf Mamadou	Required
TIN	123456789	Required
Referring_Provider_NPI	1234567891	Optional
Date_of_Service	12/3/2026	Required
Dx_Code	B36.0	Optional
CPT_Code	99201	At least one of CPT Code, CPT II, LOINC, SNOMED or RadLex code is Required
CPTII_Code	3074F	At least one of CPT Code, CPT II, LOINC, SNOMED or RadLex code is Required
LOINC_Code	4548-4	At least one of CPT Code, CPT II, LOINC, SNOMED or RadLex code is Required
SNOMED_Code	43697006	At least one of CPT Code, CPT II, LOINC, SNOMED or RadLex code is Required
RadLex_Code	RID36028	At least one of CPT Code, CPT II, LOINC, SNOMED or RadLex code is Required
POS_Code	20	Recommend
HEDIS_Measure_ID	EED, GSD, COL-E, DSF-E, SNS-E, etc. See full Measure List below.	Required if Test Screening Name not populated
Numerator_Flag	Y/N	Recommend
Exclusion_Flag	Y/N	Recommend
Test_Screening_Name	A1c, Food screening/house screening/transportation screening/Food intervention/house intervention/transportation intervention, Depression screening, etc.	Required if HEDIS Measure ID not populated.
Result_Flag	Positive/Negative/LA33-6	Required for SNS-E (LA codes Preferred for EED (Negative/Positive)
Lab_Value	12	Required for DSF-E PHQ2/PHQ9, ASF-E AUDIT. Required for A1c and Blood Pressure if CPTII Code not populated.
Measuring_Unit	%	Required if Lab Value is populated
Taxonomy	122300000X	Required
PCP_Flag		Optional
Prescribing_Flag		Optional
Dental_Flag		Optional
EyeCare_Flag		Optional
Mental_Health_Provider_Flag		Optional
Data_Type	VISIT/LAB/SNS-E/Screening	Optional
Data_Source	Vitals flowsheet; lab result table; immunization history; scanned mammogram report, etc.	Recommend
Extract_Date	3/31/2026	Required

Key Takeaways for Standard Supplemental Data

Lab Data Type:

- Requires LOINC code **or** CPTII code **or** (CPT_Code+Lab_Value) to be populated.

Visit Data Type:

- Requires **at least one** of Dx code, CPT code, CPT II code, SNOMED **or** RadLex code to be populated.

Social Need Screening and Intervention (SNS-E) Data Type:

- Requires **both** LOINC Code (populated in LOINC Code column) **and** LA- code (populated in Result Flag column).

PHQ2/PHQ9/Alcohol Screening Data Type:

- Requires **both** LOINC Code (populated in LOINC Code column) **and** scores (populated in Lab Value column).

Date of Service:

- Must be in this format **MM/DD/YYYY**, example 06/18/2026.

Valid EmblemHealth Member ID:

- Must be 11 digits/characters in length.

Timelines of 2026 Supplemental Data Submission

We require providers to share supplemental data to ensure we capture all needed information regarding their eligible patients.

- Providers must agree to authorize EmblemHealth to view (at no charge) medical records for quality reviews related to the incentive program.
- 2026 Supplemental data files will be accepted as follows:

Supplemental* Data Type	Due Date	Submission
Standard – 4 quarterly files	Dec. 24, 2026	**quality_data@emblemhealth.com** and copy your Quality Engagement Strategist.
Standard – Other files (as long as first file received by Dec. 24, 2026)	Feb. 26, 2027	
Non-Standard (only to supplement claims and the standard file)	Dec. 24, 2026	**HEDISGroup@emblemhealth.com** and copy your Quality Engagement Strategist. <---Medical Chart goes here

*Records only accepted starting March 31, 2026, for measurement year 2026.

Questions?

Questions *after* the webinar:

Contact our Quality Provider Engagement Team

quality_providerengagement@emblemhealth.com

Thank You for Your Partnership

Together we can:

- Improve quality and HEDIS performance
- Reduce care gaps and disparities
- Support patients with coordinated, preventive care and …

Put our members on a better path for 2026!