

*** **PLEASE NOTE:** Provider/ancillary codes 835-839 and 854-862 are not active at this time. Coding for these new services will be added to the Core Listing of Required Provider by Program/Service Type tables, starting on page 373 of the data dictionary, and an updated change log and data dictionary will be sent out when they go live ***

Change Log as of December 5, 2016

Current Page #	Data Element	Change
348	Provider Specialty/Service Description	Remove reference to HCBS from the following provider specialty codes: Provider Travel - 835 Psycho Social Rehab - 836 Peer Support - 837 Community Psychiatric Supportive Treatment - 839
357	Provider Specialty/Service Description	Updated code 824 to "MOBILE MENTAL HEALTH TREATMENT PROVIDER/CRISIS INTERVENTION"
354	Provider Specialty/Service Description	Removed HCBS from code 839 "COMMUNITY PSYCHIATRIC SUPPORTS AND TREATMENT"
355	Provider Specialty/Service Description	Removed "HOME & COMMUNITY BASED SERVICE PEER SUPPORT" and moved it to page 360, alphabetized as "PEER SUPPORT"
361	Provider Specialty/Service Description	Removed HCBS from code 836 "PSYCHOSOCIAL REHAB"

Change Log as of August 26, 2016

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 7.5
All	Data Dictionary Version Number and Date	Version number changed to 7.5 (August 2016)
All	HCS updated throughout to reflect new PNDS portal, when necessary	Most references to the HCS have been updated to reflect the new PNDS portal, unless it is a historical reference to the system or in the case that plans might still need to access the HCS for a specific reason (MEDS ID)
4	About the Provider Network Data System	Added Health and Recovery Plan(s) (HARP); New York State of Health (NYSOH) Qualified Health Plan(s) (QHP's); Basic Health Plan(s) (BHP's); and Commercial networks outside of the NYSOH.
5	Connection to the Provider Network Data System (PNDS)	Added updated URL, access information and notification.
5	Data Submission Schedule	Added Basic Health Plan(s) (BHPs), and updated submission quarters.

Current Page #	Data Element	Change
10	Physician and Other Providers Detailed Record Format	Added indicator data elements for Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental.
31	Ancillary/Service Centers Detailed Record Format	Added indicator data elements for Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental.
47	Physician and Other Providers Edit Application	Deleted Edit Application #2: "There is an edit check between FIPS code and zip code; records may be rejected if a zip code does not fall in the appropriate FIPS county code. This may mean you have either entered a wrong zip code or FIPS county code."
82	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Medical line of business.
83	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Vision line of business.
84	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Dental line of business.
107	Physician and Other Providers Edit Applications Description	Updated to reflect the OPCERT for all hospitals are posted on the PNDS portal.
108	Physician and Other Providers Edit Applications Description	Updated to reflect the PFI numbers for all hospitals are posted on the PNDS portal.
110	Physician and Other Providers Definition	Updated to reflect if a primary care provider works in a clinic, the clinic must be identified by OPCERT and PFI (see page 107-108 for description of OPCERT and PFI). The two data elements are needed to identify the facility location for each primary care provider. The full list of OPCERTs and PFIs is posted on the PNDS portal.
109	Physician and Other Providers Edit Applications Description	Updated to reflect the data element must be a valid operating certificate number as listed on the PNDS portal (originally from HFIS).
110	Physician and Other Providers Definition	Updated to reflect the full list of OPCERTs and PFIs is posted on the PNDS portal.
259	Physician and Other Providers Definition	Updated to reflect that FIPS codes are listed on the PNDS page.
260	Physician and Other Providers Definition	Updated to reflect that zip codes are listed on the PNDS page.
261	Physician and Other Providers Edit Application	Deleted Edit Application: "There will be an edit check between FIPS code and zip code; records may be rejected if a zip code does not fall in the

Current Page #	Data Element	Change
		appropriate FIPS County code. This may mean you have entered either a wrong zip or a wrong FIPS County code.”
282	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Medical line of business.
283	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Vision line of business.
284	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Dental line of business.
336	Language Codes	Added Bosnian (BS) language name in Indo-European language family.
337	Language Codes	Added Karen (KR) language name in Asian/Pacific Islander language family.
348	Provider Specialty/Service Description	Added code 835 (HCBS Provider Travel), code 836 (HCBS Psychosocial Rehab), code 837 (HCBS Peer Support), code 838 (OMH Other Licensed Practitioners), and code 839 (HCBS Community Psychiatric Supports and Treatment).
357	Provider Specialty/Service Description	Added code 839 (Home & Community Based Service (HCBS) Community Psychiatric Supports and Treatment), code 837 (Home & Community Based Service (HCBS) Peer Support), code 835 (Home & Community Based Service (HCBS) Provider Travel), and code 836 (Home & Community Based Service (HCBS) Psychosocial Rehab).
369	Physician and Other Provider Error Listing	Added Message Number 38 (Commercial Non-MCO Medical Indicator), and Message Number 39 (Commercial Non-MCO Vision Indicator).
368	Physician and Other Provider Error Listing	Added Message Number 40 (Commercial Non-MCO Dental Indicator).
377	Ancillary/Service Center Error Listing	Added Message Number 24 (Commercial Non-MCO Medical Indicator), Message Number 25 (Commercial Non-MCO Dental Indicator) and Message Number 26 (Commercial Non-MCO Vision Indicator).
381-384	Table 1 – Core Listing of Required Providers by Program Type	Added three new columns (Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental)
385-391	Table 2 – Core Listing of Required Services by Program Type	Added three new columns (Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental)

Change Log as of February 26, 2016

Current Page #	Data Element	Change
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Current Page #	Data Element	Change
342	Provider and Ancillary/Service Specialty Codes	Added provider/ancillary codes: 835 HCBS PROVIDER TRAVEL 836 HCBS PSYCHOSOCIAL REHAB 837 HCBS PEER SUPPORT 838 OMH OTHER LICENSED PRACTITIONERS 839 HCBS COMMUNITY PSYCHIATRIC SUPPORTS AND TREATMENT

Change Log as of February 3, 2016

Current Page #	Data Element	Change
378	Table 2 – Core Listing of Required Services by Program Type	Added Urgent Care Center category of service.

Change Log as of September 29, 2015

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 7.0
All	Data Dictionary Version Number and Date	Version number changed to 7.0 (September 2015)
4-5	General Information	Added HARP
9	Physician and Other Providers Detailed Record Format	Added indicator for the HARP line of business.
30	Ancillary/Service Centers Detailed Record Format	Added indicator for the HARP line of business.
74	Physician and Other Providers Element Description	Added indicator data element descriptions for the HARP line of business.
271	Ancillary/Service Centers Element Descriptions	Added indicator data element descriptions for the HARP line of business.
334	Provider and Ancillary/Service Specialty Codes	Added behavioral health provider specialty codes 854-862
370, 373	Provider and Ancillary File Error Codes	Added ancillary and provider error codes for HARP.
375-377	Table 1 – Core Listing of Required Providers by Program Type	Added HARP as a program type.

Change Log as of September 29, 2015

Current Page #	Data Element	Change
378-382	Table 2 – Core Listing of Required Services by Program Type	Added HARP as a program type.

Change Log as of May 13, 2015

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 6.9
All	Data Dictionary Version Number and Date	Version number changed to 6.9 (May 2015)
2	Table of Contents	Updated table of contents to take into account fields added with insertion of BHP indicators, panel status and panel size fields
4	About the Provider Network Data System	Added in Basic Health Plan (BHP)
9-12	Physician and Other Providers Detailed Record Format	Added indicators, panel status and panel size fields for Standard BHP and BHP plus Adult Vision and Dental lines of business.
32	Ancillary/Service Centers Detailed Record Format	Added indicators for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
80-81	Physician and Other Providers Element Description	Added indicator data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
91-92	Physician and Other Providers Element Description	Added panel status data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
102-103	Physician and Other Providers Element Description	Added panel size data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
277-278	Ancillary/Service Centers Element Description	Added indicator data element descriptions for Standard BHP and BHP plus Adult Vision and Dental lines of business.
330	County Codes	Added in the code to be used when submitting out of state providers (088).
371, 374	Provider and Ancillary File Error Codes	Added Error Codes for Standard BHP and BHP plus Adult Vision and Dental indicators, panel status and panel size fields.
376-382	Core Listing of Required Providers by Program Type	Added BHP to the NYSOH QHP program type

Change Log as of March 2, 2015

Current Page #	Data Element	Change
All	Family Health Plus	Family Health Plus is no longer an active product and has been replaced with filler fields that should be space-filled.
1	Data Dictionary Version Number	Version number changed to 6.8
5	Connection to the Health Commerce System (HCS) and Provider Network Data System (PNDS)	Updated email address for the New York Health Exchange. Added email address for PNDS.
5	Data Submission Schedule	Health providers with multiple products will now submit all lines of business in a single file.
9-12	Physician and Other Providers Detailed Record Format	Added indicators, panel status and panel size fields for the FIDA line of business.
32	Ancillary/Service Centers Detailed Record Format	Added indicators for the FIDA line of business.
79	Physician and Other Providers Element Description	Added indicator data element descriptions for the FIDA line of business.
88	Physician and Other Providers Element Description	Added panel status data element descriptions for the FIDA line of business.
97	Physician and Other Providers Element Description	Added panel size data element descriptions for the FIDA line of business.
258, 333, 343 & 371	License/Facility Operating Certificate	Added code 663 - Institutional Short Term Care renamed code 660 - Nursing Homes to Institutional Long Term Care
270	Ancillary/Service Centers Element Description	Added indicator data element descriptions for FIDA.
333-335 338-350	Provider and Ancillary/Service Specialty Codes	Added nursing home provider specialty codes 655-659. Added FIDA specialty codes 816-834
353	Provider Network / Medicaid Encounter Data Attestation	Attestations are to be addressed to the new director of the Bureau of Managed Care Certification and Surveillance, Susan Bentley.
367-369	Table 1 – Core Listing of Required Providers by Program Type	Added FIDA as a program type.
368	Table 1 - Core Listing of Required Providers by Program Type	Added new Categories of Service: Family Planning, Nutrition and Palliative Care.

Change Log as of March 2, 2015

Current Page #	Data Element	Change
370-374	Table 2 – Core Listing of Required Services by Program Type	Added FIDA as a program type.
370-374	Table 2 - Core Listing of Required Services by Program Type	Added new Categories of Service: Institutional Short Term Care (NH/SNF), Hemodialysis, Oncology – Therapy, General Vascular Surgery, Transplant Surgery, Hospital Based/Freestanding Surgery, Assisted Living, Assertive Community Treatment, Assistive Technology Agency, Community Integration Counseling, Community Transitional Service, Environmental Modifications, Freestanding Birth Center, Independent Living Skills, Mobile Mental Health Treatment, Moving Assistance, Peer Delivered Services, Peer Mentoring, Personalized Recovery, Oriented Services, Positive Behavioral Interventions & Support, Social Day Care Transportation, Structured Day Programs, Tele-health, Home & Community Support Services, Continuing Day Treatment, Intensive Psychiatric Rehabilitation Treatment Programs, Partial Hospitalization and NYS OMH Licensed CRs.

Change Log as of January 17, 2014

Current Page #	Data Element	Change
1	Data Dictionary Version Number	Version number changed to 6.7
5	Connection to the Health Commerce System (HCS) and Provider Network Data System	Contact phone number added for the New York State Health Benefit Exchange.
5	Data Submission Schedule	Added New York State Health Benefit Exchange submission schedule. Health insurers with multiple products are now instructed to report MLTC; Mainstream; and HIV SNP programs separately.
45, 46 & 262	Data Element Allowable Thresholds	Removed percentages of the allowable thresholds required for a file submission to be considered accepted due to differences between managed care and managed long term care requirements, these thresholds are available during the review process on HCS in the Plan Error Reports From Latest Data Submission.

Change Log as of January 17, 2014

Current Page #	Data Element	Change
354-363	Provider & Ancillary File Error Codes	This section has been updated to reflect the established New York State Health Benefit Exchange error codes. Error codes now cover pages 354-363, previously 354-358.
364-373	Coding Scheme Summary Reports	Coding Scheme Summary Reports now cover pages 364-372, previously 359-367.
365	Table 1 – Primary Care Providers	Added footnote that states Primary Care Providers are required for both Medicaid and HIV Special Needs.
365	Table 1 – Primary Care Providers – Nurse Practitioners	Nurse Practitioners may no longer use Primary designation code 3 (PCP and Specialist)
366	Table 1 – Specialty Care Providers – Chiropractic	Primary Designation code 3 has been removed and specialty code 280 has been removed.
366	Table 1 – Specialty Care Providers – Nurse Practitioners	Nurse Practitioners removed from Specialist Care Providers to prevent being represented twice.
367	Table 1 – Dental Care Providers	Primary Designation code 3 has been removed. Dental care providers cannot be primary care providers.
368	Table 1 – Crossover Specialties	Primary Designations for Crossover Specialties>Therapy changed, additional provider type added for Therapy: Respiratory.
369-370	Table 2 – Ancillary/Tertiary Care Services	Updated Core Listing of Required Services By Program Type, additional Category of Services coded in the Ancillary/Tertiary Care Services section. Home Based Occupational Therapy, Physical Therapy, Speech Therapy and Medical Social Services have been added to Certified Home Health (CHHA) categories of service with additional service codes 300, 301 and 302. Home Based Physical Therapy, Occupational Therapy, Speech Therapy and Medical Social Services have been added to Licensed Home Health Care (HHA) categories of service with additional service codes 300, 301 and 302.
370	Table 2 – Ancillary/Tertiary Care Services - Dentistry	Now required to provide HIV Special needs services.
371	Table 2 – Traditional Medicaid Providers - Federal Qualified Health Center (FQHC)	Federal Qualified health Centers (FQHC) are now required to provide HIV Special needs services.